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4 June 2025

s 9(2)(a)

Ref: H2025066526

Tēnā koe s 9(2)(a)

Response to your request for official information

Thank you for your request under the Official Information Act 1982 (the Act) received by the Ministry of Health – Manatū Hauora (the Ministry) on 6 May 2025 for:

“What is the cause of Pfizer Covid-19 vaccine cardiac injuries? In addition, what element of the vaccine is responsible for the harm eg. vaccine ingredients, mRNA technology element, or other?

Pertaining to the previous question, in 2022 Ministry of Health conducted a research study with Pfizer Covid-19 vaccine cardiac injured New Zealander's. What commonalities between those injured were found ie. causation impression (eg. batch numbers, administration of vaccine, individual health, vaccine environment, post vaccine down time, exercise/output post vaccine, etc.

It appears the residual symptoms and limitations amongst vaccine injured are very similar. Has ACC (and/or Ministry of Health, or other) identified any promising and sustainable treatments to address the persistent and residual symptoms following these cardiac injuries? If so, what are the treatments and who has success in providing them? What is the projected long-term outcome for individuals suffering from these injuries? Including, but not limited to, recovery percentage and percentage of rehabilitative success to pre injury capacity? Please include global data with references, and ACC's independent data with references.”

Evidence is still emerging regarding the specific causes, long-term impacts and optimal treatment of cardiac complications following COVID-19. The current state of the evidence is summarised in Guidance on Myocarditis and Pericarditis after mRNA COVID-19 vaccines which is endorsed by the Cardiac Society of Australia and New Zealand. This can be accessed here: www.csanz.edu.au/resource?resource=61

As the guidance notes, the risk of serious cardiac complications following COVID-19 vaccination is low, although the level of occurrence is somewhat higher in males under 40 years of age. The evidence does not point to specific components of the vaccine as giving risk to cardiac

complications, and the risk of myocarditis or pericarditis appears to be similar for mRNA and non-mRNA COVID-19 vaccines.

Additionally, the guidance notes that “long-term follow up studies on myocarditis in adolescents and young adults indicate that most patients recover quickly from symptoms and they are mostly mild” (page 10).

Follow-up studies show that some patients have persisting changes in the function of their heart muscle some months after the acute episode, but evidence is still limited in terms of what these changes mean for long-term people’s health and wellbeing. The guidance recommends that people with post-vaccine myocarditis / pericarditis should remain under the care of a heart specialist for at least 12 months. There are no specific treatments recommended for people with persisting symptoms; treatment is “determined on a case-by-case basis and often supportive treatment is all that is required” (p9).

Results from the 2022 study of people with myocarditis and pericarditis following the Pfizer/BioNTech COVID-19 vaccine are available here:

www.tewhatauora.govt.nz/assets/Publications/Immunisation/Report-Long-term-outcomes-of-myocarditis-and-pericarditis-following-vaccination-with-Comirnaty-PfizerBioNTech-COVID-19-vaccine.pdf

Among 100 people diagnosed with myocarditis and almost 200 diagnosed with pericarditis following the Pfizer/BioNTech COVID-19 vaccine, over half reported persisting symptoms (most commonly persisting chest pain and fatigue) some months following the diagnosis. The study found that many of these people felt unsupported and that a lack of clear pathways within government agencies led to unnecessary frustration and difficulty in accessing the support they needed.

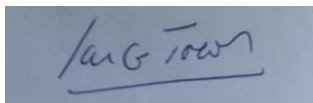
We are not aware of the ACC approach to injury claims.

I trust this information fulfils your request. If you wish to discuss any aspect of your request with us, including this decision, please feel free to contact the OIA Services Team on: oiagr@health.govt.nz.

Under section 28(3) of the Act, you have the right to ask the Ombudsman to review any decisions made under this request. The Ombudsman may be contacted by email at: info@ombudsman.parliament.nz or by calling 0800 802 602.

Please note that this response, with your personal details removed, may be published on the Ministry website at: www.health.govt.nz/about-ministry/information-releases/responses-official-information-act-requests.

Nāku noa, nā

A rectangular box containing a handwritten signature in blue ink that reads "Ian Town".

Dr Ian Town
Chief Science Advisor
Evidence Research and Innovation | Te Pou Whakamārama