

ATAGI Meeting: AstraZeneca and TTS

14 July 2021, 1:00 – 2:00pm

In attendance:

Members	NCIRS Technical Staff	Department of Health reps
Chris Blyth	s 47F	Elspeth Kay
Allen Cheng		s 22
Andrew Wilson		Hope Peisley
Bette Liu		Jane Cook
Cheryl Jones		s 22
Diane Walsh		Lisa Schofield
James Wood		Secretariat
Karen Bellamy		s 22
Katherine Gibney		
Kristine Macartney		
Kirsty Cooper		
Michelle Giles		
Nigel Crawford		
Robyn Gibbs		
Tom Snelling		
Tony Korman		
Nick Silberstein		

1. Welcome and apologies / general committee business

Members:

- NOTED acknowledgement to country
- Declared no conflicts of interest
- DISCUSSED ATAGI terms of reference and role of ATAGI, in light of recent media about ATAGI; ATAGI provides advice to Government and the Government makes decisions
- AGREED to not make ATAGI statement/response to media

2. TGA update

TTS

Members NOTED and DISCUSSED:

- 47 confirmed TTS cases
- 31 probable TTS cases
- Slight female dominance in confirmed cases
- May need work on gender difference in severity
- Tier 1 cases remain in minority
- Watching 50-59 and 70-79 age cohorts
- Reports of GPs dismissing headaches as potential sign of TTS
- Is there a delay in patient presentation due to lack of awareness of TTS signs and symptoms or clinicians not recognising this symptom?
- Reiterated importance of early presentation and recognition of TTS signs and symptoms
- Important messaging for patients and health care providers and providing this information at point of vaccination
- TTS is a challenging condition and inherent difficulties in diagnosis
- Fatality rates in Australia are much lower than Europe
- WHO clinical guidance out this week

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ATAGI co-chair summary:

- no change to AstraZeneca recommendations
- reinforce TTS primary care guide in weekly update
- ATAGI continue to review data

Meeting closed at approximately 2:10pm.