Updated recommendations regarding the Janssen (Johnson & Johnson) COVID-19 Vaccine from the Centers for Disease Control and Prevention (CDC)

On December 16, the U.S. Centers for Disease Control and Prevention endorsed the recommendation of their Advisory Committee on Immunization Practices to recommend vaccines manufactured by Pfizer/BioNTech and Moderna instead of the Janssen (Johnson & Johnson) COVID-19 vaccine.

The new CDC recommendation states, “mRNA vaccines are preferred over the Janssen COVID-19 vaccine for the prevention of COVID-19 for those 18 years of age and over.”

The CDC did not recommend removing the Janssen Covid-19 as an option in the U.S. for people who prefer the one-dose vaccination.

CDC’s recommendation was made after reviewing benefits and risks of the Janssen COVID-19 vaccine. New data indicates thrombosis with thrombocytopenia syndrome or TTS, a rare blood clotting syndrome, is more common among people who recently got a J&J vaccine than previously known. There have been 54 cases of thrombosis with thrombocytopenia syndrome in the U.S. since the vaccine became available. Nine people have died, seven women and two men.

In a statement, CDC Director, Dr. Rochelle Walensky said, “Today’s updated recommendation emphasizes CDC’s commitment to provide real-time scientific information to the American public. I continue to encourage all Americans to get vaccinated and boosted.”

Recommendations for Clinicians (updated from previous guidance issued April 21, 2021)

1. Recommend either of the mRNA vaccines for patients instead of the Janssen COVID-19 vaccine.
2. Maintain a high index of suspicion for symptoms that might represent serious thrombotic events or thrombocytopenia in patients who have recently received the Janssen COVID-19 vaccine, including severe headache, backache, new neurologic symptoms, severe abdominal pain, shortness of breath, chest pain, leg swelling, petechiae (tiny red spots on the skin), or new or easy bruising. Obtain platelet counts and screen for evidence of immune thrombotic thrombocytopenia.
3. In patients with a thrombotic event or thrombocytopenia after the Janssen COVID-19 vaccine, evaluate initially with a screening PF4 enzyme-linked immunosorbent (ELISA) assay as would be performed for autoimmune Heparin-induced thrombocytopenia, or HIT. Consultation with a hematologist is strongly recommended.
4. Do not treat patients with thrombotic events and thrombocytopenia following receipt of Janssen COVID-19 vaccine with heparin, unless HIT testing is negative.
As always, LDH reminds providers to report possible vaccine-related adverse events to the FDA/CDC Vaccine Adverse Event Reporting System (VAERS) at https://vaers.hhs.gov/reportevent.html or by calling 1-800-822-7967. Any possible severe adverse events (those resulting in hospitalization, death, or persistent disability) should be immediately reported to the Office Public Health (OPH) Infectious Disease/Epidemiology Hotline at 1-800-256-2748.

If you have vaccine related questions, please contact la.immunization@la.gov.