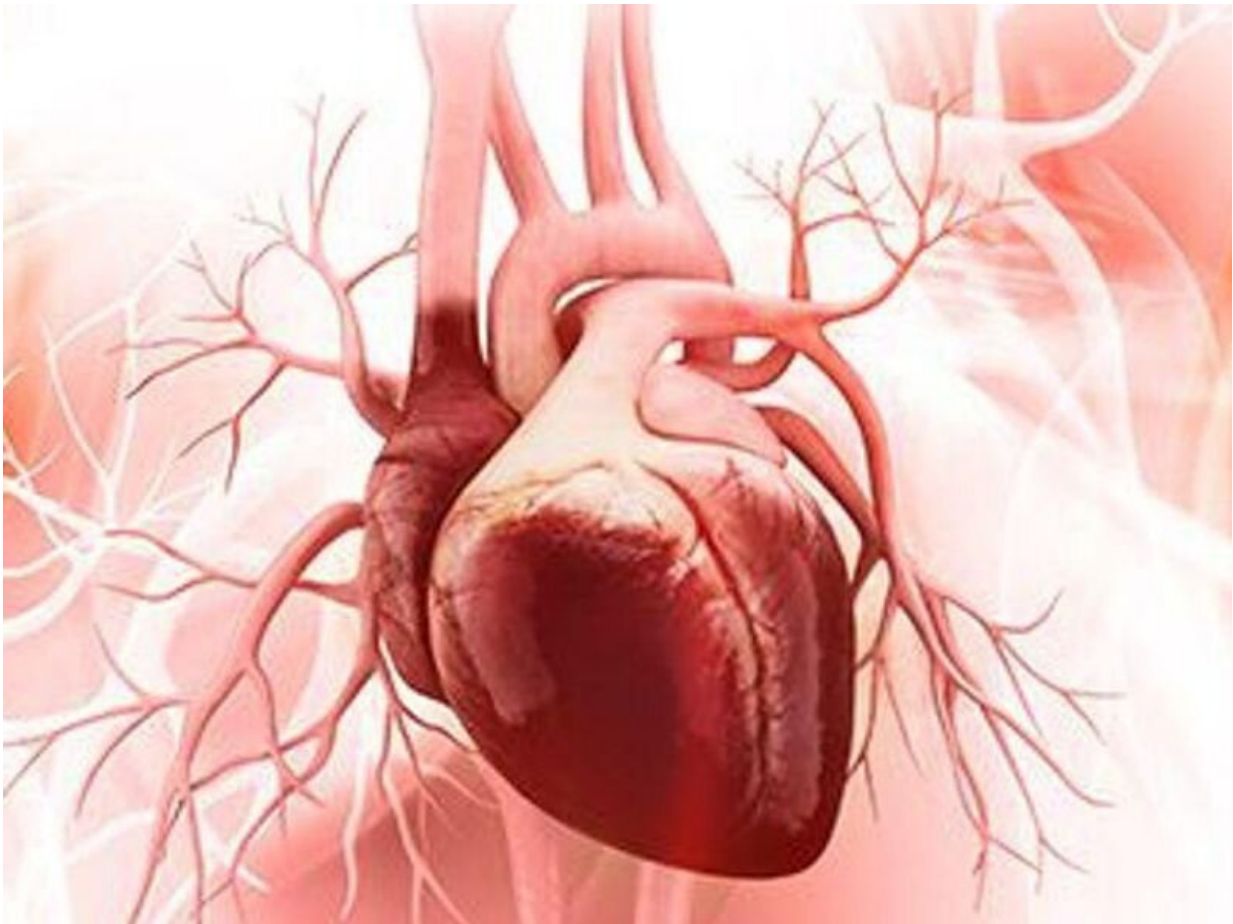


Cardiac complications up after SARS-CoV-2 infection versus vaccines

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For males and females in all age groups, the risks for cardiac

complications are higher after severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection than after mRNA COVID-19 vaccination, according to research published in the April 1 early-release issue of the U.S. Centers for Disease Control and Prevention *Morbidity and Mortality Weekly Report*.

Jason P. Block, M.D., from Harvard Medical School in Boston, and colleagues calculated the incidences of cardiac outcomes among persons aged 5 years and older who had SARS-CoV-2 infection and after first, second, unspecified, or any dose of mRNA COVID-19 vaccine using electronic health record data from 40 U.S. health care systems during Jan. 1, 2021, to Jan. 31, 2022.

The researchers found that the highest incidence of cardiac outcomes after mRNA COVID-19 vaccination was seen in males aged 12 to 17 years after the second dose; however, the risk for cardiac outcomes was 1.8 to 5.6 times as high after SARS-CoV-2 infection than after the second vaccine dose within this demographic group. For all other groups by sex and age, the risk for cardiac outcomes was likewise significantly higher after SARS-CoV-2 infection than after the first, second, or unspecified dose of mRNA COVID-19 vaccination (risk ratio, 2.2 to 115.2).

"Cardiac complications were rare after SARS-CoV-2 infection or mRNA COVID-19 vaccination. However, the risks for these complications were higher after infection than after vaccination among males and females in all [age groups](#)," the authors write. "These findings provide important context for balancing risks and benefits of mRNA COVID-19 vaccination among eligible persons ≥ 5 years."

More information: Jason P. Block et al, Cardiac Complications After SARS-CoV-2 Infection and mRNA COVID-19 Vaccination—PCORnet, United States, January 2021–January 2022, *MMWR. Morbidity and*

Mortality Weekly Report (2022). [DOI: 10.15585/mmwr.mm7114e1](https://doi.org/10.15585/mmwr.mm7114e1)

Two authors disclosed financial ties to the pharmaceutical industry.

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