

# Overview of Moderna's Investigational Next Generation COVID-19 Vaccine, mRNA-1283, in Individuals $\geq 12$ Years of Age

ACIP

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April 15, 2025

# COVID-19 Remains a Leading Cause of Hospitalization among Respiratory Viruses in the US

## Risk Factors for Severe COVID Infection in the US<sup>1</sup>

### Advancing Age

Adults  $\geq 65$  years account for:

- $>60\%$  of COVID-19 hospitalizations *(since 2023)*<sup>2</sup>
- $\sim 76\%$  of deaths *(since 2020)*<sup>3</sup>

### Pre-Existing Chronic Conditions<sup>4</sup>

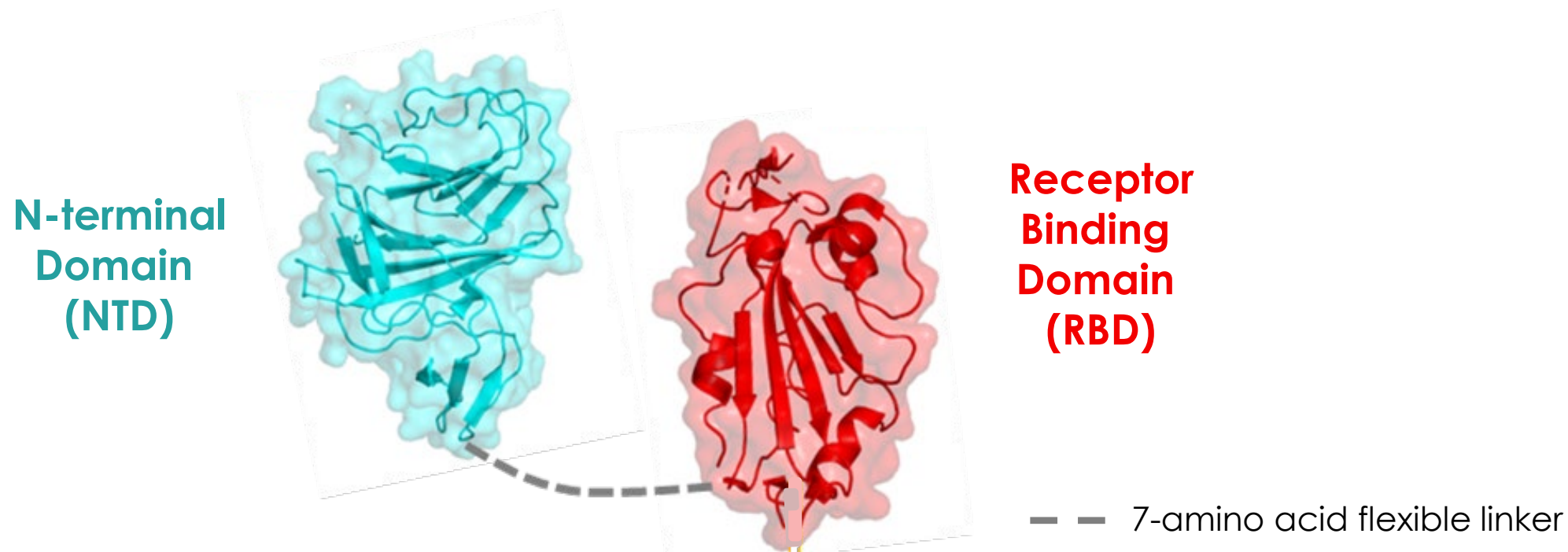
- 95% of adults hospitalized with COVID-19 have  $\geq 1$  underlying medical condition

**Effective prophylactic approaches to address the burden of disease in vulnerable populations remain a high priority**

1. <https://www.cdc.gov/covid/hcp/clinical-care/underlying-conditions.html>  
2. <https://covid.cdc.gov/covid-data-tracker/#covidnet-hospitalization-network>  
3. <https://covid.cdc.gov/covid-data-tracker/#demographics>  
4. [https://www.cdc.gov/pcd/issues/2021/21\\_0123.htm](https://www.cdc.gov/pcd/issues/2021/21_0123.htm)

# Design of mRNA-1283

## Investigational Next Generation COVID-19 Vaccine



**Lower mRNA dose** (10  $\mu\text{g}$ ; 1/5<sup>th</sup> of dose of Spikevax)

1. Piccoli et al, Cell 2020 doi: 10.1016/j.cell.2020.09.037
  2. Dejnirattisai et al, Cell 2021 doi: 10.1016/j.cell.2021.03.055
  3. Cerutti et al, Cell Host Microbe 2021 doi: 10.1016/j.chom.2021.03.005
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# Pivotal Safety, Immunogenicity and Relative Vaccine Efficacy Study

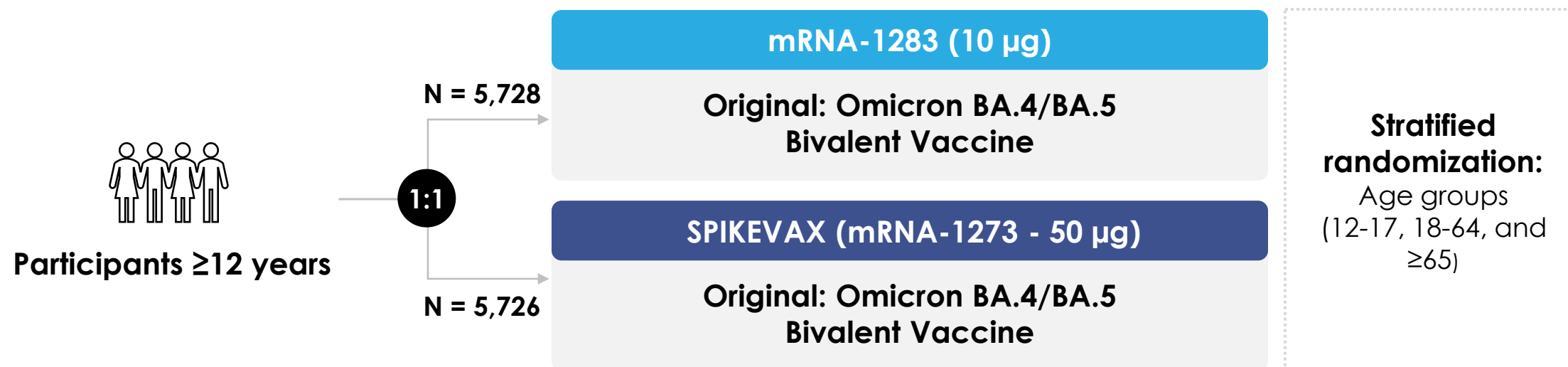
Study 301

Chalkias et al. *Lancet ID*, in press, 2025



# Study Design & Primary Objectives

Randomized, blinded, active-controlled phase 3 trial



## Primary Objectives

**Safety and Reactogenicity**  
mRNA-1283 & SPIKEVAX

**Non-Inferior Immunogenicity**  
mRNA-1283 vs SPIKEVAX

**Non-Inferior Relative Vaccine Efficacy (rVE)**  
mRNA-1283 vs SPIKEVAX  
(based on CDC COVID-19 definition)

# Demographics and Baseline Characteristics Balanced Between Groups

## Study 301 - Safety Set

	mRNA-1283 (10 µg) N = 5706	SPIKEVAX (50 µg) N = 5711
Mean age, years (range)	51.1 (12, 96)	51.2 (12, 90)
Median age, years	56	55
Age subgroup, % (n)		
12-17 years	8.7% (497)	8.7% (495)
18-64 years	62.7% (3575)	62.6% (3576)
≥65 years	28.6% (1634)	28.7% (1640)
Race/Ethnicity, % (n)		
White	81.8% (4670)	82.5% (4711)
Black or African American	11.2% (640)	11.1% (635)
Asian	3.9% (225)	3.2% (183)
Hispanic or Latino	13.5% (769)	13.0% (741)
≥1 pre-existing COVID-19 comorbidity (CDC definition)	46.0% (2626)	46.6% (2664)

Race/ethnicity generally representative of US population

# Prior SARS-CoV-2 Infection and Time Since Last COVID-19 Vaccination Balanced Between Groups

7

## Study 301 - Safety Set

- **Eligibility criteria:**
  - All study participants previously received primary series of COVID-19 vaccine
  - Adults  $\geq 18$  years received  $\geq 1$  dose beyond primary series

	mRNA-1283 (10 $\mu$ g) N = 5706	SPIKEVAX (50 $\mu$ g) N = 5711
<b>Prior SARS-CoV-2 Infection<sup>1</sup></b>	<b>73.8%</b>	<b>74.8%</b>
<b>Months since last COVID-19 vaccination, median (Q1, Q3)</b>	<b>9.8 (7.6, 16.9)</b>	<b>9.8 (7.7, 16.7)</b>

1. Evidence of SARS-CoV-2 infection pre-study vaccination (defined by a positive RT-PCR test, and/or a positive serology test based on binding antibody specific to SARS-CoV-2 nucleocapsid)

2. Q - quartile

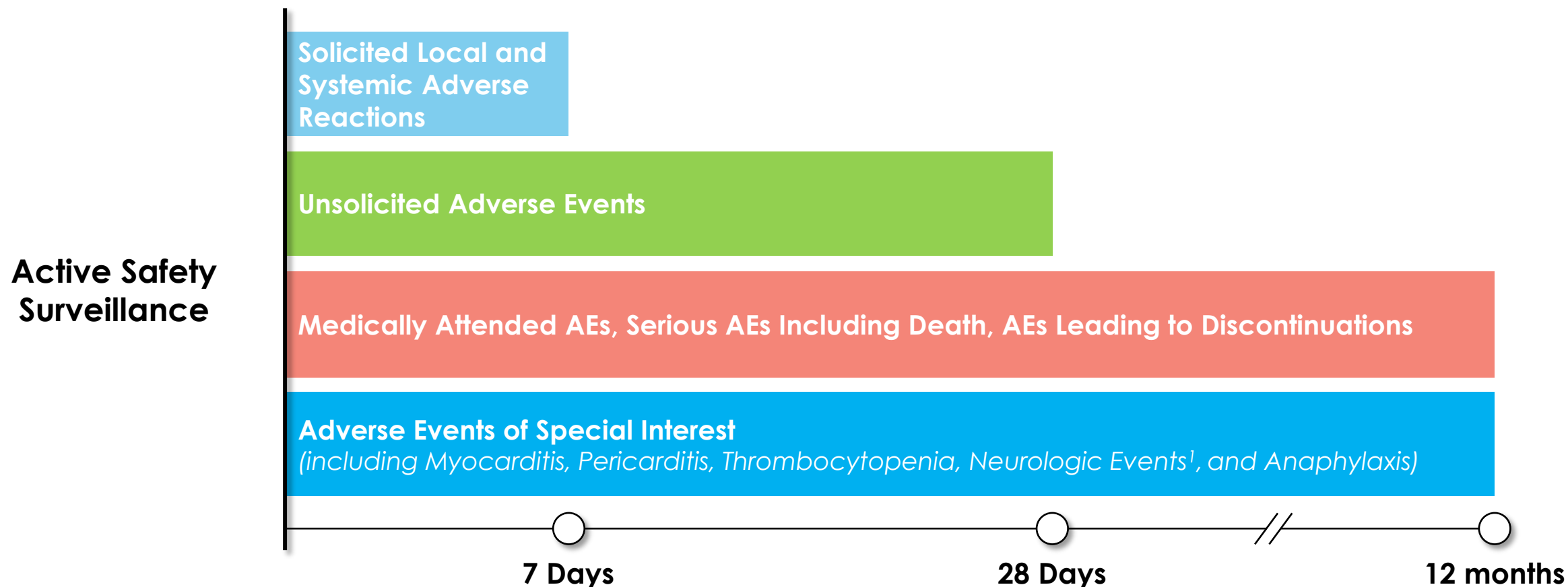
# Safety Results

Study 301



# Primary Safety Endpoints and Duration of Follow-up

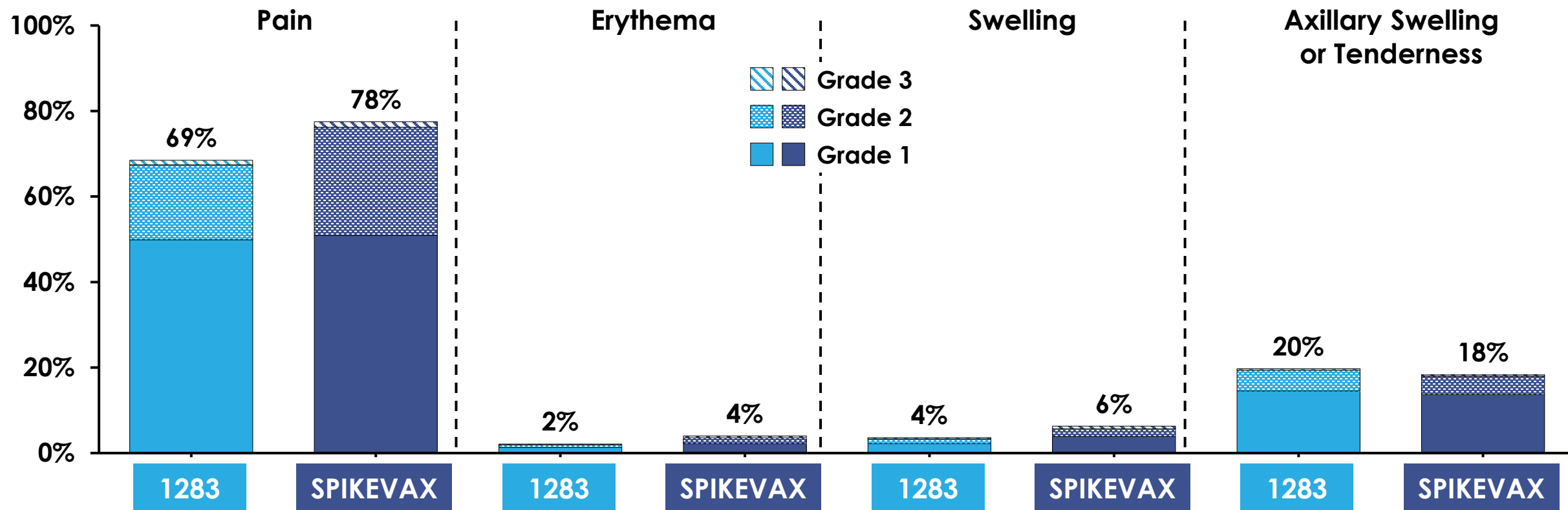
Study 301 Safety Set – Median 8.8 Months Follow-up



**Trial overseen by independent Data and Safety Monitoring Board (DSMB)**

# Solicited Local Adverse Reactions within 7 Days of Vaccination with mRNA-1283 and SPIKEVAX

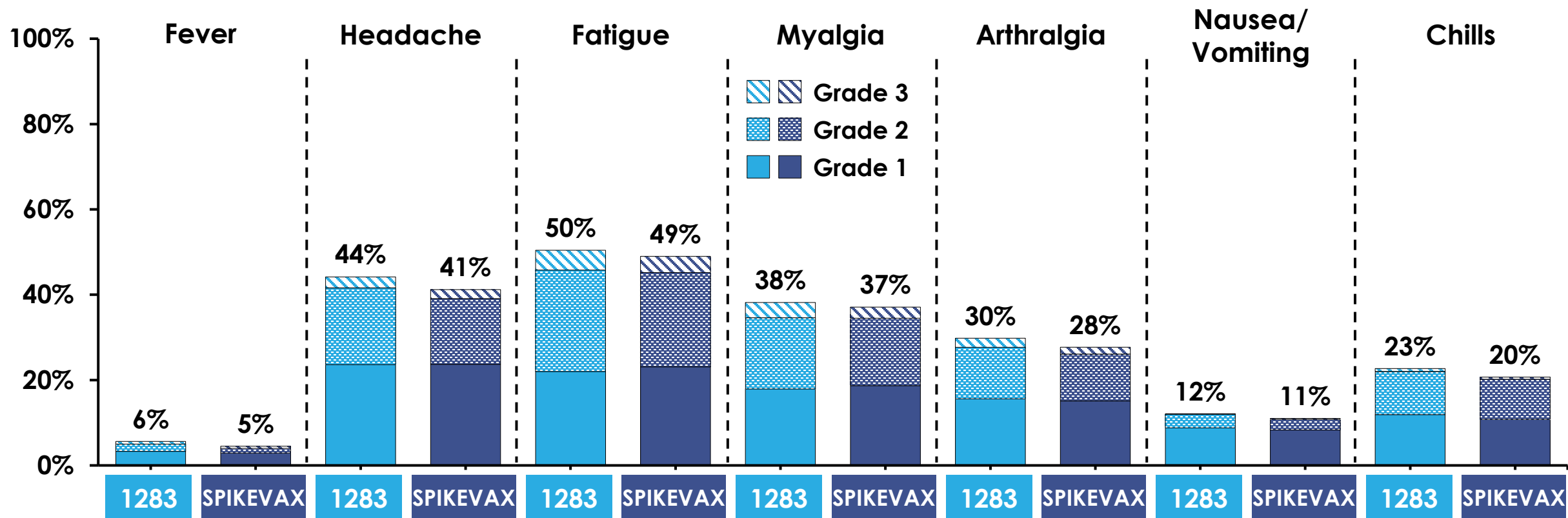
## Study 301 – Solicited Safety Set



- Pain at the injection site was most frequently observed solicited local adverse reaction for both groups
- 1 – 2 days median duration for local adverse reactions

# Solicited Systemic Adverse Reactions within 7 Days of Vaccination with mRNA-1283 and SPIKEVAX

## Study 301 – Solicited Safety Set



- Fatigue, headache, and myalgia most frequently observed solicited systemic adverse reactions for both groups
- 1-2 days median duration for systemic adverse reactions

Feb 23, 2024 data cutoff; mRNA-1283, N = 5702; mRNA-1273, N = 5706. One participant in the mRNA-1273 group had a grade 4 fever. No grade 4 reactions.

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# Similar Frequency of Unsolicited AEs Within 28 Days After Injection, Regardless of Relationship to Vaccine, Between mRNA-1283 and SPIKEVAX

## Study 301 – Safety Set

	mRNA-1283 (10 µg) N = 5706	SPIKEVAX (50 µg) N = 5711
<b>All, % (n)</b>	<b>12% (701)</b>	<b>12% (680)</b>
<b>Serious</b>	<b>0.2% (13)</b>	<b>0.3% (18)</b>
<b>Fatal</b>	<b>0% (0)</b>	<b>0.02% (1)</b>
<b>Medically-Attended</b>	<b>7% (425)</b>	<b>7% (422)</b>
<b>Leading to Study Discontinuation</b>	<b>0% (0)</b>	<b>0.02% (1)</b>
<b>Any Adverse Event of Special Interest (AESI)</b>	<b>0.05% (3)</b>	<b>0.1% (6)</b>
<b>Myocarditis/Pericarditis</b>	<b>0% (0)</b>	<b>0% (0)</b>

## Safety Summary through Median 8.8 Months of Follow-up

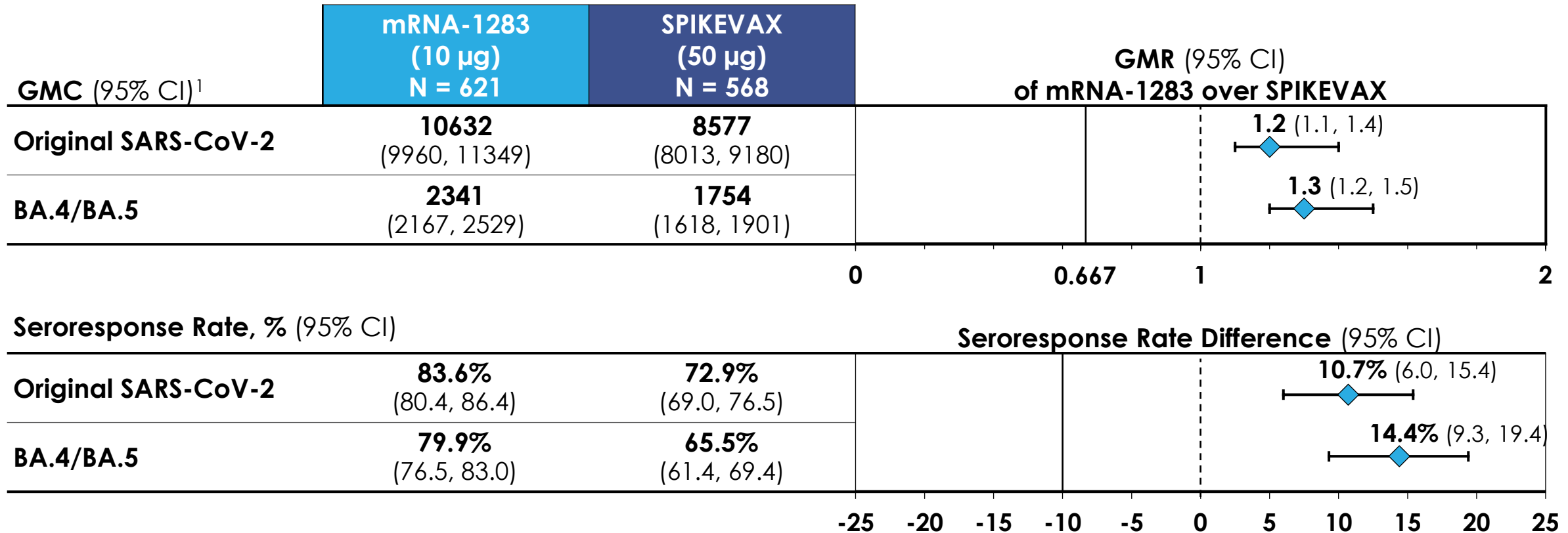
- No imbalances in any adverse events between the vaccine groups
- No myocarditis or pericarditis in recipients of mRNA-1283
- No safety concerns identified

# Immunogenicity

Study 301

# mRNA-1283 Elicited Higher Antibody Response at Day 29 Compared to SPIKEVAX

## Study 301 – Per-Protocol Immunogenicity Set (Randomly Selected Subset)



### Noninferiority Success Criteria Met

- **GMR:** Lower 95% CI of GMR was >0.667
- **Seroresponse rate difference:** Lower 95% CI of difference >-10%

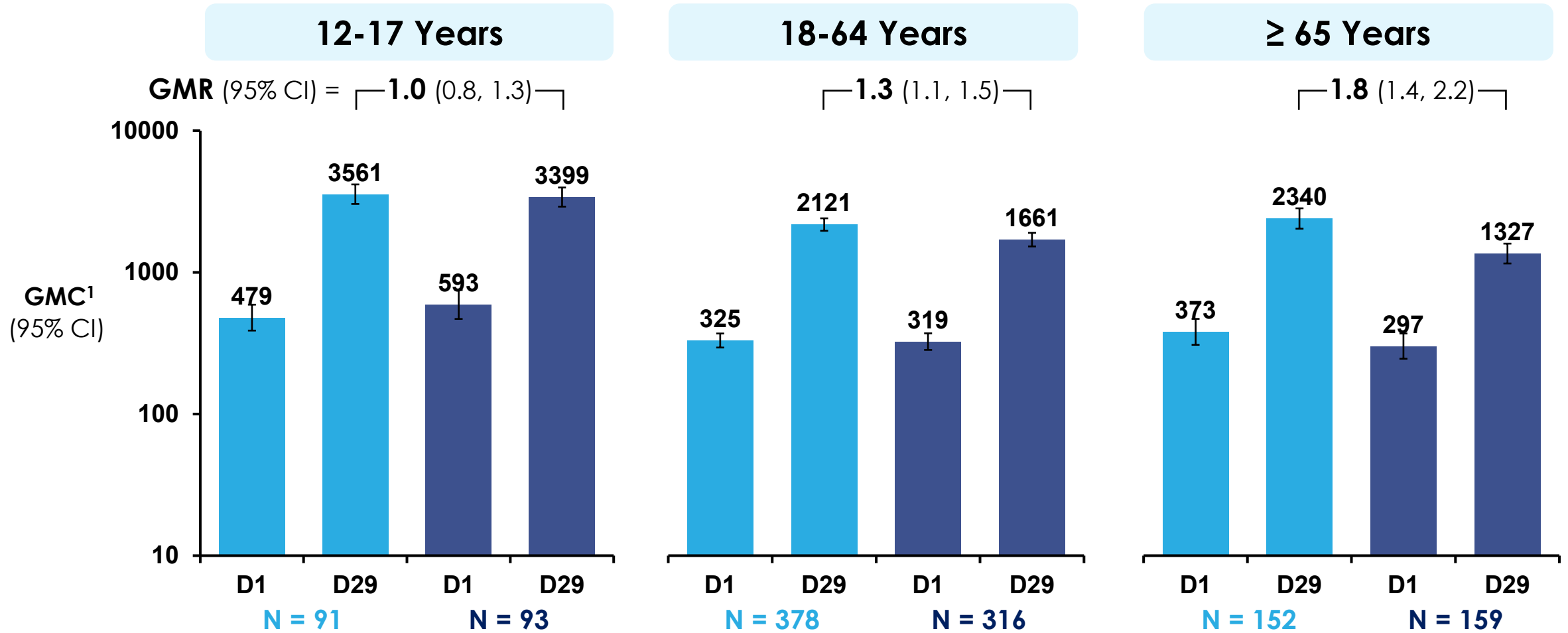
Seroresponse rate defined as antibody value change from baseline below lower limit of quantification (LLOQ) to  $\geq 4 \times$  LLOQ, or  $\geq 4$ -fold rise if baseline  $\geq$  LLOQ and  $< 4 \times$  LLOQ, or  $\geq 2$ -fold rise if baseline is  $\geq 4 \times$  LLOQ; GMC – geometric mean concentration; GMR – geometric mean ratio

1. GMC estimated based on ANCOVA model  
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# Highest BA.4/BA.5 Neutralizing Antibody Geometric Mean Ratio (GMR) at Day 29 in Adults $\geq 65$ Years Old

Study 301 – Per Protocol Immunogenicity (Randomly Selected Subset)

mRNA-1283 (10  $\mu$ g) SPIKEVAX (50  $\mu$ g)



1. GMC estimated based on ANCOVA model

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# mRNA-1283 Elicited Consistently Higher Antibody Responses Compared to SPIKEVAX Over Time - Adults ≥65 Years of Age

Study 301 – Per-Protocol Immunogenicity Set (Randomly Selected Subset)

Day 29

GMR (95% CI) = 1.8 (1.4, 2.2)

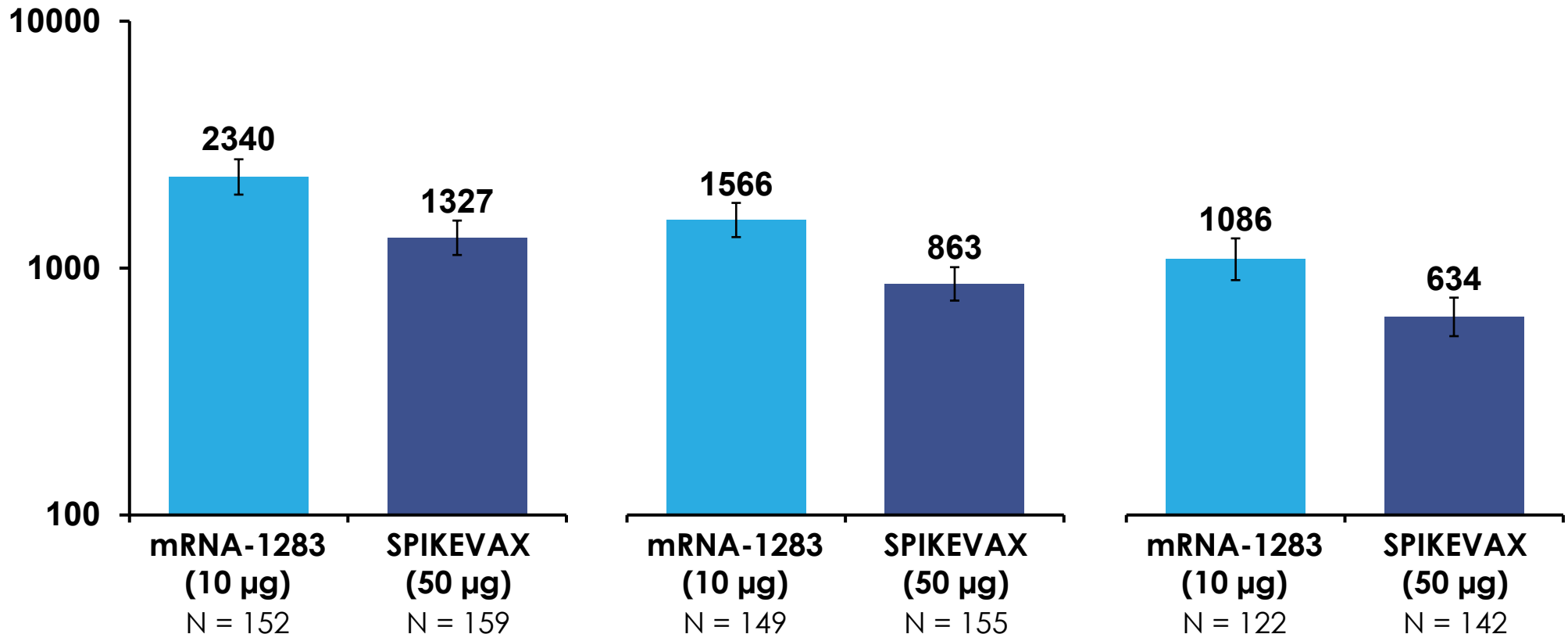
Day 91

1.8 (1.5, 2.3)

Day 181

1.7 (1.3, 2.2)

GMC<sup>1</sup>  
Against  
Omicron  
BA.4 / BA.5  
(95% CI)

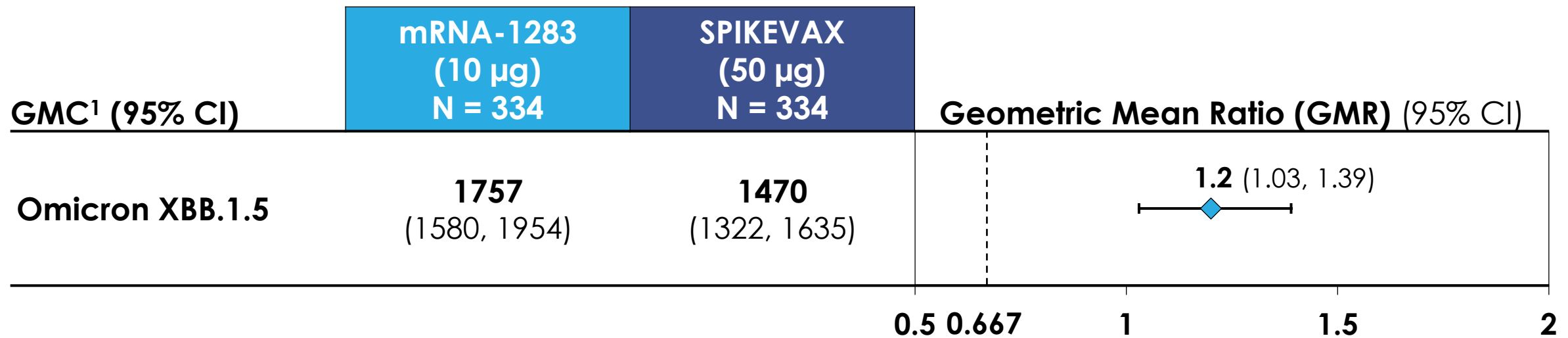


1. GMC estimated based on ANCOVA model

# Neutralizing Antibody Responses against Omicron XBB.1.5 with mRNA-1283 Similar to SPIKEVAX

## Study 301 – Per-Protocol Immunogenicity Set - Japan

- Study assessed safety & immunogenicity of monovalent XBB.1.5 COVID-19 vaccine



### Noninferiority Success Criteria Met

- Lower 95% CI of GMR was >0.667

# Relative Vaccine Efficacy of mRNA-1283 vs SPIKEVAX (mRNA-1273)

Study 301

# COVID-19 Case Definition and Surveillance

## CDC COVID-19 Definition<sup>1</sup>

- Virologic confirmation of SARS-CoV-2 infection via PCR
- Presence of  $\geq 1$  symptom consistent with COVID-19 within 14 days of positive PCR
  - Fever or chills
  - Cough
  - Shortness of breath or difficulty breathing
  - Fatigue
  - Muscle or body ache
  - Headache
  - Nausea or vomiting
  - Loss of taste or smell
  - Sore throat
  - Congestion or runny nose
  - Diarrhea

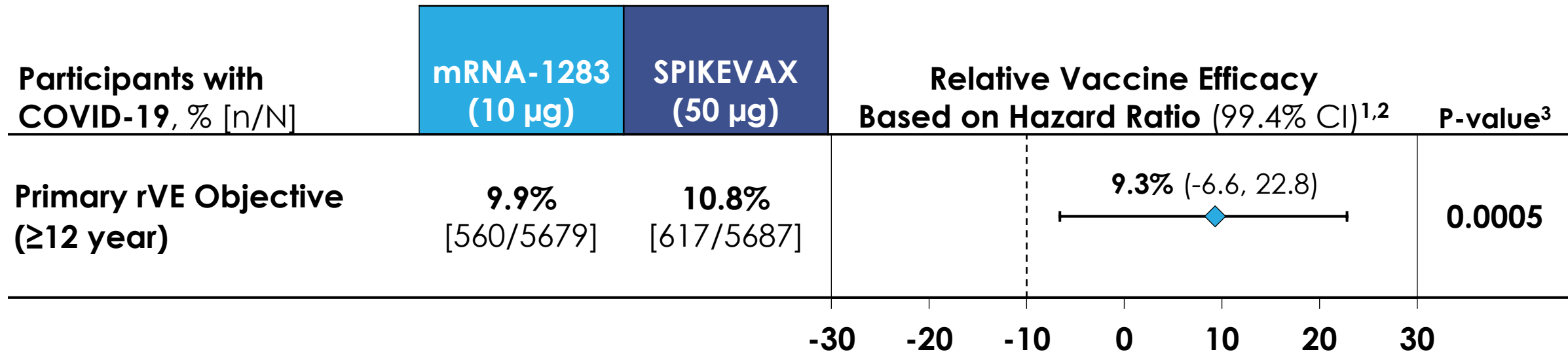
## COVID-19 Surveillance

- Biweekly symptom surveillance conducted using an electronic diary prompt
  - Participants with symptoms seen for clinical evaluation and collection of respiratory samples for SARS-CoV-2 PCR

1. <https://ndc.services.cdc.gov/case-definitions/coronavirus-disease-2019-covid-19/>

# Prespecified Success Criteria Met for Relative Vaccine Efficacy of mRNA-1283 vs SPIKEVAX

Per-Protocol Set for Efficacy (Median 8 Months)



## Noninferiority Success Criteria Met

- Lower bound of two-sided 99.4% (alpha-adjusted) CI of rVE > -10% (1-sided alpha spending: 0.0028)

Based on CDC COVID-19 definition

1 rVE = 1-hazard ratio, hazard ratio estimated using a stratified Cox proportional hazard model (stratified by age group at randomization) and with treatment group as a fixed effect.

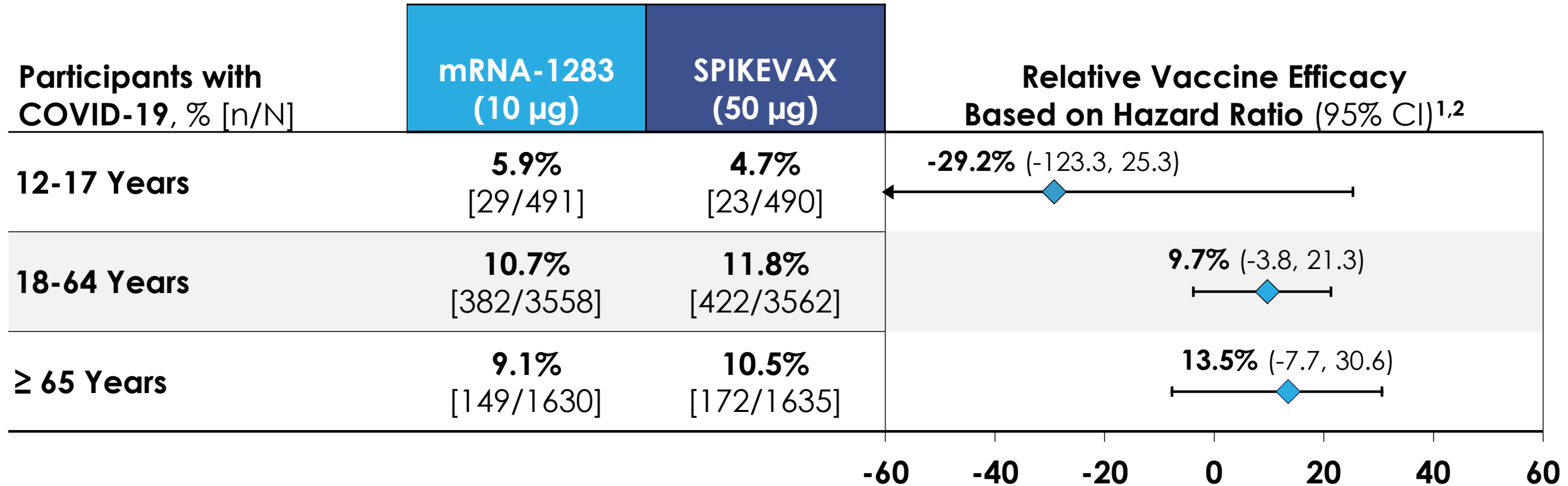
2 Alpha-adjusted 2-sided (99.4%) CI was calculated using the Lan-DeMets O'Brien-Fleming Spending function (nominal one-sided alpha of 0.0028)

3 P-value based on the stratified Cox proportional hazard model to test the null hypothesis  $\log(\text{hazard ratio}) \geq \log(1.1)$

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# Relative Vaccine Efficacy of mRNA-1283 vs SPIKEVAX in Participants by Age

COVID-19 Events<sup>1</sup> through 31 Jan 2024 – Per-Protocol Set for Efficacy

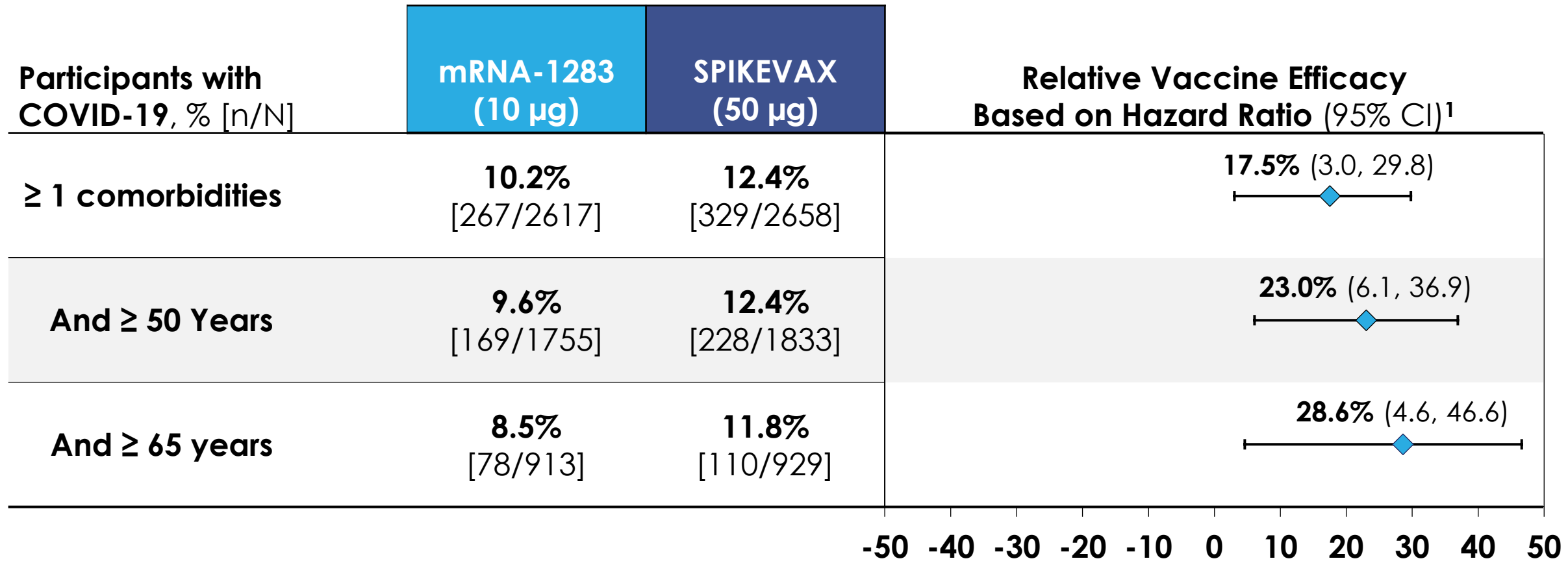


- Highest relative vaccine efficacy in adults ≥65 years
- Limited number of COVID-19 cases in 12-17-year-olds results in imprecise relative vaccine efficacy estimate

1. Based on CDC COVID-19 definition; 2. Posthoc analysis of RVE in ≥50-year-olds (3399 received mRNA-1283, 3431 received mRNA-1273);  
rVE – relative vaccine efficacy = 1-hazard ratio, hazard ratio was estimated using a Cox proportional hazard model and with treatment group as a fixed effect.

# Relative Vaccine Efficacy Favorable for mRNA-1283 for Individuals with Comorbidities

Post Hoc Analysis – Based on CDC Definition for COVID-19 Risk<sup>1</sup>

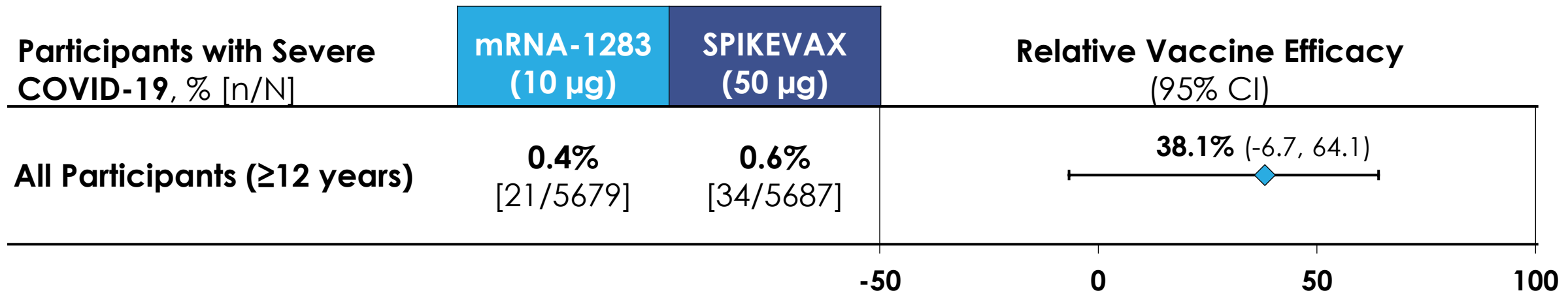


1. <https://www.cdc.gov/covid/risk-factors/index.html>

# Relative Vaccine Efficacy of mRNA-1283 vs SPIKEVAX Demonstrated in Prevention of Severe COVID-19

Post Hoc Analysis – Protocol Set for Efficacy, through 31 Jan 2024

- SPIKEVAX effective in prevention of severe COVID-19 in pivotal efficacy trial and real-world effectiveness studies<sup>1-3</sup>
- 55 cases of severe COVID-19 identified in this trial
  - Severe criteria per FDA guidance (originally used in mRNA-1273 efficacy trial)<sup>1</sup>
  - Majority (92.7%) of severe COVID-19 cases were due to blood pressure or oxygen saturation abnormalities



1. <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/development-and-licensure-vaccines-prevent-covid-19>; 2. Zheng et al *Intl J Inf Dis* 2022;

3. Link-Gelles ACIP 2024.

Severe defined as respiratory failure/ARDS, renal/hepatic/neurologic dysfunction, admission to ICU/death, or vital sign abnormalities indicative of severe systemic illness or BP abnormalities indicative of shock (respiratory rate ≥30 per minute, heart rate ≥125 beats per minute, or SpO<sub>2</sub> ≤93% on room air at sea level or PaO<sub>2</sub>/FiO<sub>2</sub> <300 mmHg, systolic BP <90 mmHg, diastolic BP <60 mmHg, or requiring vasopressors)

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# Summary

# Summary - Next Generation COVID-19 Vaccine mRNA-1283

## Safety

- mRNA-1283 generally well tolerated; no safety concerns identified

## Immunogenicity

- Pre-specified non-inferiority objectives met
- mRNA-1283 elicited higher immune responses than SPIKEVAX
- GMR highest in participants  $\geq 65$  years old (GMR 1.8; 95% CI: 1.4, 2.2)

## Relative Vaccine Efficacy (rVE)

- Prespecified rVE non-inferiority objective met  
**9.3%** mRNA-1283 vs mRNA-1273; 99.4% CI: -6.6, 22.8
- Trend for higher rVE point estimates with advancing age and comorbidity  
 $\geq 65$  years old:  
**13.5%** mRNA-1283 vs mRNA-1273; 95% CI: -7.7, 30.6  
 $\geq 65$  years old and  $\geq 1$  comorbidity\* (*Post hoc*):  
**28.6%** mRNA-1283 vs mRNA-1273; 95% CI: 4.6, 46.6

## Public Health Benefit

- mRNA-1283 has the potential to further reduce the burden of COVID-19, particularly among those most vulnerable to severe outcomes

# THANK YOU!

- Investigators
- Study site personnel
- Laboratory personnel
- **Most importantly, the individuals who participated in these trials**