

Clinical Trial Protocol

Iranian Registry of Clinical Trials

27 Jul 2026

Comparison of immunogenicity and safety of Razi Cov Pars and Sinopharm booster doses in adults 18 years of age and older who have primarily vaccinated with Sinopharm: a parallel 2 arms, randomised, double blind clinical trial

Protocol summary

Study aim

Comparison of immunogenicity and safety of Razi Cov Pars and Sinopharm booster doses in adults 18 years of age and older who have primarily vaccinated with Sinopharm: a parallel 2 arms, randomised, double blind clinical trial

Design

A randomized, double blind, parallel groups, controlled trial on 500 participants.

Settings and conduct

Study setting: 1. Razi Vaccine and Serum Research Institute, Karaj 2. Rasoul hospital, Tehran

Participants/Inclusion and exclusion criteria

Inclusion criteria: having Iranian citizenship or in the case of foreign nationals with a legal residence permit, age 18 years and older, history of complete vaccination with Sinopharm vaccine at least 90 days and at most 195 days from the last vaccination. Main exclusion criteria: History of allergic diseases such as angioedema or anaphylactic reactions after receiving previous COVID vaccines (including urticaria and fever); Any current or new diagnosis of acute or chronic illness requiring continuous ongoing medical care; Pregnancy and lactation; Immunodeficiency diseases (Suspected and Definitive); History of uncontrolled serious psychiatric illnesses; History of blood disorders (dyscrasia, coagulopathy, platelet deficiency or disorder, or deficiency of blood clotting factors); History of chronic neurological diseases (including seizures and epilepsy); Acute febrile illness at the time of booster vaccine injection.

Intervention groups

One group will receive Razi Cov Pars, and the other Sinopharm vaccine (a single dose).

Main outcome variables

Neutralizing antibody activity 2wks, 3 and 6 month after

injection; Abnormal vital signs and anaphylactic reactions; Local and systemic reactions within the first week after booster dose; SAEs, SUSARs, MAAEs; IgG level for SARS-CoV-2, S1, RBD antigens; Cell-mediated immune response (lymphoproliferation, INF γ , TNF α , CD3/CD8 ratio) following stimulation by S antigen.

General information

Reason for update

Acronym

IRCT registration information

IRCT registration number: **IRCT20201214049709N4**

Registration date: **2021-11-29, 1400/09/08**

Registration timing: **prospective**

Last update: **2021-11-29, 1400/09/08**

Update count: **0**

Registration date

2021-11-29, 1400/09/08

Registrant information

Name

Ali Eshaghi

Name of organization / entity

Razi Vaccine and Serum Research Institute

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Recruitment status

Recruitment complete

Funding source

Expected recruitment start date

2021-11-30, 1400/09/09

Expected recruitment end date

2022-02-28, 1400/12/09

Actual recruitment start date

empty

Actual recruitment end date

empty

Trial completion date

empty

Scientific title

Comparison of immunogenicity and safety of Razi Cov Pars and Sinopharm booster doses in adults 18 years of age and older who have primarily vaccinated with Sinopharm: a parallel 2 arms, randomised, double blind clinical trial

Public title

Comparison of immunogenicity and safety of Razi Cov Pars and Sinopharm booster doses

Purpose

Prevention

Inclusion/Exclusion criteria**Inclusion criteria:**

Having Iranian citizenship; Age 18 years and older; Having history of full vaccination with Sinopharm vaccine (two doses) 75 to 195 days from the last vaccination; Signing an informed consent form; For females of childbearing age 18 to 49 years: use of at least one effective method of contraception (condom, oral contraceptive pills, intrauterine device, norplant capsule) and willing to continue up to two month after the booster dose.

Exclusion criteria:

History of allergy to drugs or vaccines (e.g urticaria and fever); Any current or new diagnosis of acute or chronic illness requiring continuous ongoing medical care; Severe cardiovascular disease; Breastfeeding; History of receiving any vaccine within 14 days before receiving the booster dose; History of diseases resulting in immunosuppression (suspected and definite); History of long-term use of immunosuppressive drugs, including history of long-term use of systemic corticosteroids (equivalent to 10 mg or more daily prednisolone) with the exception of topical steroids (more than 14 consecutive days) within the past 4 months; History of uncontrolled serious psychiatric illnesses; History of chronic neurological diseases (including seizures and epilepsy); Acute febrile illness at the time of booster vaccine injection; Splenectomy for any reason; Close contact with a confirmed COVID-19 case within two weeks before the booster dose; Continued use of anticoagulants such as coumarin and related anticoagulants (such as warfarin) or new oral anticoagulants / antiplatelet agents. Note: Less than 325 mg of aspirin per day is allowed as prophylaxis; Recent diagnosis or treatment of cancers except basal cell carcinoma and In-situ cervical cancer; Received blood and/or any blood products and/or immunoglobulins within three months preceding the booster dose; History of blood disorders (dyscrasia, coagulopathy, platelet deficiency or disorder, or deficiency of blood clotting

factors); Current substance or alcohol abuse; Pregnancy based on the participant's statement and the time of the first day of the last menstrual period and negative pregnancy test (baby check) on the day of vaccination; History of COVID -19 based on laboratory or clinical evidence after primary vaccination; Chronic unstable diseases in the last 4 weeks, including hospitalization due to surgery, deterioration of one organ function, the need to add new drugs or serious dose adjustments to existing drugs.

AgeFrom **18 years** old**Gender**

Both

Phase

N/A

Groups that have been masked

- Participant
- Care provider
- Investigator
- Outcome assessor
- Data and Safety Monitoring Board

Sample sizeTarget sample size: **500****Randomization (investigator's opinion)**

Randomized

Randomization description

In this study, stratified block randomization method with block size of 4 was used to assign each participant to the intervention groups. The rand() function of Excel software were used to generate random sequence within each block. After determining the allocated intervention, a non-repetitive five-digit random code was assigned to each participant.

Blinding (investigator's opinion)

Double blinded

Blinding description

In this study, the control group will receive the Sinopharm vaccine, which has different packaging and shape compared to Razi Cov Pars. Therefore, implementation of blinding will be done by a person who will be responsible for this. This is the only person who will not be blind to the intervention given. Once the participant becomes eligible to receive the vaccine, a concealment/randomization code will be assigned to the volunteer and the vaccine type will be displayed on the screen of the vaccinator until the inoculation is confirmed.

Placebo

Not used

Assignment

Parallel

Other design features

Alongside the main study, four additional groups of participants, 25 each, who have been primarily vaccinated by either of Astrazeneca, Sputnik V, Razi CoV Pars, and Pastocovac vaccines within the last 4 to 6 month, will receive one dose of Razi CoV Pars.

Secondary Ids

empty

Ethics committees

1

Ethics committee

Name of ethics committee

National Research Ethics Committee

Street address

Floor 13, Block A, Ministry of Health & Medical Education Headquarters, Between Zarafshan & South Falamak, Qods Town, Tehran, Iran.

City

Tehran

Province

Tehran

Postal code

7334144696

Approval date

2021-11-28, 1400/09/07

Ethics committee reference number

IR.NREC.1400.013

Health conditions studied

1

Description of health condition studied

SARS-CoV-2

ICD-10 code

U07.1

ICD-10 code description

COVID-19

Primary outcomes

1

Description

Neutralizing antibody activity

Timepoint

On day zero, two weeks, 3 and 6 months after the booster dose injection

Method of measurement

SARS-CoV-2 virus neutralizing antibody titer measured in bio-safety level III lab using conventional method

Secondary outcomes

1

Description

Serum levels of specific IgG antibodies against S1, RBD antigens

Timepoint

On day zero, two weeks, 3 and 6 months after the booster dose vaccine

Method of measurement

ELISA method

2

Description

The cell-mediated immunity will be evaluated by counting the number of CD3, CD4 and CD8 cells and joint calculation of CD3 and CD4 and CD3 and CD8 . IFN- γ , TNF- α , and interleukins 2, 4, 6, and 17 will also be measured. It will be assessed in 20 members of the selected group. Summary of the measures performed in this section are as follows: 1- Assessment of CD4 to CD8 cell proportions after stimulation of PBMC (Peripheral Blood Mononuclear Cells) by inactivated virus and recombinant spike protein using flow cytometry 2- Assessment of specific proliferation of PBMC cells stimulated by inactivated virus and recombinant spike protein using flow cytometry 3 - Assessment of TH1 and TH2 specific cellular immunity after PBMC stimulation in vaccinated individuals with recombinant spike protein to determine the levels of interferon-gamma, interleukin-4, tumor necrosis factor-alpha and interleukin 6 using ELISpot and ELISA kit.

Timepoint

On day zero, two weeks, 3 and 6 months after the booster dose vaccine

Method of measurement

Immunologic lab tests

3

Description

Abnormal vital signs and anaphylactic reactions before and immediately after vaccination: number and percentages of participants who develop abnormal vital signs within half an hour of receiving the vaccine will be recorded. Abnormal vital signs include temperature, respiratory rate, heart rate, systolic and diastolic blood pressure. Anaphylaxis is defined as an immediate systemic hypersensitivity simultaneously involving two systems. Anaphylactic reactions include: erythema, pruritus, urticaria and angioedema, bronchospasm, laryngeal edema, dizziness, hypotension, nausea, shortness of breath, wheezing, arrhythmia, cyanosis, vomiting, diarrhea, abdominal pain and will be checked up to half an hour after vaccine booster dose.

Timepoint

Before vaccination and half an hour after vaccination

Method of measurement

Clinical examination

4

Description

The number and percentage of local adverse reaction within the first week post-vaccination (including pain, tenderness, erythema / redness, swelling and stiffness, itching) that will be assessed based on the severity score, duration and peak intensity.

Timepoint

Daily, within the first week after booster dose

Method of measurement

Via mobile application, study staff will contact participants who fail to fill their application and complete a local adverse reaction form on their behalf.

5

Description

The number and percentage of systemic adverse reaction within the first week post-vaccination (including nausea and vomiting, diarrhea, headache, fatigue, muscle pain) that will be assessed based on the severity score, duration and peak intensity.

Timepoint

Seven days after booster dose (Days 0-7) daily assessment.

Method of measurement

Via mobile application, study staff will contact participants who fail to fill their application and complete a systemic adverse reaction form on their behalf.

6

Description

Number and percentage of Severe Adverse event (SAEs), Suspected Unexpected Serious Adverse Reaction (SUSAR) and Medically Attended Adverse Events (MAAEs) Up to one month after receiving the booster dose.

Timepoint

Up to one month after the booster dose

Method of measurement

Via mobile application. There will be a 24-7 follow up center with physicians available all the time.

Intervention groups

1

Description

Intervention group 1: Participants in this group will receive one doses (IM) of RAZI recombinant spike protein vaccine (day 0)

Category

Prevention

2

Description

Intervention group 2: Participants in this group will receive one doses (IM) of Sinopharm vaccine (day 0).

Category

Prevention

Recruitment centers

1

Recruitment center

Name of recruitment center

Rasoul Akram Hospital

Full name of responsible person

Ladan Mokhberossafa

Street address

Corner of Mansouri, Niayesh, Satarkhan Av, Tehran

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2

Recruitment center

Name of recruitment center

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Full name of responsible person

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Sponsors / Funding sources

1

Sponsor

Name of organization / entity

Razi Vaccine and Serum Research Institute

Full name of responsible person

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Grant name

Grant code / Reference number

Is the source of funding the same sponsor organization/entity?

Yes

Title of funding source

Razi Vaccine and Serum Research Institute

Proportion provided by this source

100

Public or private sector

Public

Domestic or foreign origin

Domestic

Category of foreign source of funding

empty
Country of origin
Type of organization providing the funding
Academic

Person responsible for general inquiries

Contact

Name of organization / entity
Razi Vaccine and Serum Research Institute
Full name of responsible person
Mohammad Hossein Fallah Mehrabadi
Position
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Latest degree
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Person responsible for updating data

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Sharing plan

Deidentified Individual Participant Data Set (IPD)

Yes - There is a plan to make this available

Study Protocol

Yes - There is a plan to make this available

Statistical Analysis Plan

Yes - There is a plan to make this available

Informed Consent Form

Yes - There is a plan to make this available

Clinical Study Report

Yes - There is a plan to make this available

Analytic Code

Yes - There is a plan to make this available

Data Dictionary

Yes - There is a plan to make this available

Title and more details about the data/document

Deidentified IPD related to outcome will be shared.

When the data will become available and for how long

The access period will begin once the study is complete and the main results have been published in peer reviewed journals.

To whom data/document is available

The data that have been published in peer reviewed journals, will be available just for academic researchers.

Under which criteria data/document could be used

The proposed study protocol should be submitted to RAZI vaccine and serum research institute and approved by its scientific and technical committee.

From where data/document is obtainable

After publishing the article researchers can submit their request to Dr. Mohammad Hossein Fallah at the following email address (mhf2480@yahoo.com).

What processes are involved for a request to access data/document

Data will be made available after consideration and approval by the relevant authorities from Razi Vaccine and Serum Research Institute.

Comments

