Guidance Note for Health Care Professionals (HCP) on COVID-19 Vaccinations in persons with Autoimmune conditions and/or Immunosuppression

Introduction: There have been questions raised about the safety of COVID-19 vaccination in patients with autoimmune conditions and/or immunosuppression. Earlier federal guidance suggested against vaccinations in some of these populations. Such recommendations have evolved, and it is now suggested that patients eligible for the vaccine who have autoimmune and/or immunosuppressive conditions should receive the vaccine.

Autoimmune Conditions include many diagnoses across various systems, characterized by dysregulation of the immune system causing immune cell activation to attack autoantigens, which results in inflammation and tissue damage. Common conditions include Type 1 diabetes, multiple sclerosis, rheumatoid arthritis, psoriatic arthritis, inflammatory bowel disease, system lupus erythematosus and vasculitis.

Immunosuppression, in which the immune system has reduced ability to fight an infection, can be due to a disease or treatment. This can include those with autoimmune disorders on immunosuppressive therapy, persons undergoing cancer treatments (chemotherapy, radiotherapy), organ transplant recipients, HIV infection, and those on immunomodulating biologic therapies or long term systemic steroid therapy.

Recommendations for COVID-19 vaccination:

- Health care professionals should proactively address vaccine hesitancy and concerns with their patients. Based on current evidence and reporting, the COVID-19 vaccines may be administered to persons with underlying medical conditions and are safe and effective in preventing infections and reducing the severity of COVID-19 infections.
- There is no contraindication or precaution to receiving the current available vaccines in persons with autoimmune conditions and/or immunosuppression.
- Health care professionals should discuss vaccinations with their patient, as well as the potential benefits and risks in these clinically-vulnerable populations. The healthcare provider should address patient concerns, recognizing that the decision is the patient’s to make. Consultation with relevant specialists can be considered; a number of specialty-specific guidance documents have been produced (see references).
- There is no current recommendation to alter active treatments for these conditions during vaccination period.
- HCP are encouraged to refer to the NACI website and provincial public health bulletins for up to date information, including adverse events and effectiveness data.

Messaging for Patients:

- Persons with these conditions are considered more vulnerable, and some patients may have higher risk of severe illness from COVID-19.
• The two vaccines that are currently available in New Brunswick (Pfizer-BioNTech and Moderna) utilize a messenger RNA platform. They are not live vaccines, and persons immunized will not get infected with COVID-19 from the vaccination.

• Clinical trials have shown the vaccines to be effective and safe, and although there will always be a small risk for adverse events. Based on current evidence and experience, the benefits of vaccination are believed to outweigh risks and the vaccine should be offered to persons with autoimmune and/or immunosuppression.

• While persons with autoimmune conditions and with immunosuppression were not largely included in the research studies, persons with these conditions are encouraged to get vaccinated due to the expected benefit.

• In persons with immunosuppression, there may be a lowered response to the vaccine; however, recommendations are that patients should still experience some degree of protection.

• Being vaccinated does not reduce the need to continue with the safety and prevention practices of wearing masks, hand washing and social distancing. All public health measures must still be adhered to.

References and Resources:

Canadian Association of Gastroenterology Covid-19 vaccination in patients with inflammatory bowel disease: communiqué from the Canadian Association of Gastroenterology


New Brunswick’s Medical Society: https://www.nbms.nb.ca/