

# COVID-19 vaccines for people with cancer

## Information for consumers

### People with cancer are high risk for severe Covid-19 infection

Research into COVID-19 and its effects indicates that people with active cancer or who are undergoing cancer treatment are at higher risk of severe COVID-19 infection and death when compared with the general population. People with active blood cancers are at especially high risk.

Research is also showing that people who have lowered immunity levels, such as cancer patients receiving chemotherapy treatment, may have an increased risk of severe infection or death from COVID-19 infection. Even if a person with low immunity does not become very unwell, we know that the virus takes longer to completely disappear from their body and can be spread to other people.

For these reasons, all people with a current cancer diagnosis, especially those who are receiving, or recently completed active treatment for cancer will be considered for early access for COVID-19 vaccination.

### Approved Covid-19 vaccines in Australia

Currently two vaccines are approved in Australia – Pfizer/BioNTech SARS-Cov-2 vaccine (COMIRNATY™ COVID-19 VACCINE) and Astra Zeneca ChAdox1 nCOV-19 vaccine. Both vaccines need two doses to be most effective. COVID-19 vaccines do not provide immediate protection, and none are 100% effective. therefore precautions are still needed after vaccination. It is important to follow the instructions of your health care team.

Only a small number of people with cancer took part of the clinical trials that tested these vaccines. It is therefore important to remember there is limited information on the safety and effectiveness of the vaccines in people with cancer or on active cancer treatment. However, it is still important for cancer patients to be vaccinated where possible. If you have any concerns, please speak to your health professional.

## **What we know about safety for people with cancer**

Common acute side effects associated with these vaccines include mild fever, muscle pain, headache, nausea, fatigue and soreness/redness at the injection site. Severe side effects are rare. After the second dose, side effects were reported as being slightly more severe in the trials. Long-term side effects have not been defined for any of the COVID-19 vaccines.

## **What we know about effectiveness for people with cancer**

The vaccines may have reduced protection for people with low immune systems. Everyone should continue to practice COVID-Safe measures including social distancing and, in some circumstances, wear masks. These measures are proven to be effective in reducing transmission of COVID -19

## **People with cancer are part of priority groups for COVID-19 vaccination**

The Australian government has released a COVID-19 vaccination policy and national roll-out strategy in January 2021. There are three priority population groups and all will be given free vaccines in a sequential manner –

- Those with increased risk of exposure,
- Those increased risk of severe disease or symptoms or
- Those working in services critical to societal functioning.

Residents of aged care or disability care are part of the first group of people who will receive vaccinations.

In the next phase, those who are 70 years and above, all other adults with an underlying medical condition such as diabetes, chronic lung or heart disease, severely obese, multiple health conditions, those who have a low immune system and the Aboriginal and Torres Strait Islander people above 55 year of age will be offered the vaccine.

Most people with active cancer or receiving chemotherapy will be offered COVID-19 vaccines as a priority group.

If you have been free of cancer for a while and not on any immune suppressing anticancer treatment you may receive your vaccination later. A person may not be scheduled for early vaccine based on their cancer or cancer treatment but may still receive the vaccine early due to age or other medical conditions. If you are not sure, check with your treating team about the group you may belong to for the vaccination.

## **Where can I get information about the vaccines?**

Please ask for a copy of the consumer medicine information (CMI) for the vaccine from your vaccination team prior to the vaccine being administered.

- CMI for the Pfizer vaccine can be obtained from here - <https://www.tga.gov.au/sites/default/files/cmi-comirnaty-bnt162b2-mrna.pdf>
- CMI for the AstraZeneca vaccine can be obtained from here - <https://www.tga.gov.au/sites/default/files/cmi-approved-COVID19-vaccine-az.pdf>

The following websites provide general information on the nature of vaccines, where to get the vaccines, and other details of Australian and South Australian governments:

- <https://www.health.gov.au/initiatives-and-programs/COVID-19-vaccines>
- <https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/conditions/infectious+diseases/COVID-19/vaccine/COVID-19+vaccinations>

If you still have additional questions, please discuss with your health care providers.

## Common questions from people with cancer on COVID-19 vaccination

### *Should I receive the vaccine?*

As someone with cancer diagnosis or on cancer treatment, it is recommended that you have the COVID-19 vaccine when it is offered to you. Receiving the vaccination is entirely your choice.

### *Which vaccine will I get?*

The vaccine you are given will be chosen and discussed with you by your health care professional at the time prior to administration.

### *I have cancer and am currently undergoing treatment. I have not been contacted about how to receive a vaccine. What do I do?*

You may have to reach out to the local vaccination clinics to book your appointment

### *Will I be able to use PATS reimbursement if I have to travel to get my vaccine?*

It is anticipated that you will receive your vaccines closer to where you live and unlikely that you will need to travel to the metro hospitals.

### *Where can I have my Vaccine?*

Several vaccination clinics are planned to be set up by the government, the government will release the location of these sites when they have been established.

### *I'm on active cancer treatment with chemotherapy. When should I have the vaccine?*

Everyone currently receiving chemotherapy, immunotherapy, CAR-T-cell therapies, hormonal therapies or stem cell transplants can still receive the vaccine. As a general principle, it is recommended that the vaccines should be administered around the period when you are least likely to be having low blood cell counts.

Vaccination is usually recommended at least 2-4 weeks prior to the planned start of chemotherapy.

If you are already on treatment with chemotherapy, avoid receiving the vaccine on the same day as the chemotherapy treatment; preferably, receive the vaccine towards the end of the cycle when your blood counts have recovered.

### *I'm on immunotherapy. When should I have the vaccine?*

If you are on immunotherapy alone without chemotherapy, you can receive the vaccine anytime without any specific timing issues.

### *I'm on hormonal therapy. When should I have the vaccine?*

If you are on hormone therapy alone without chemotherapy, you can receive the vaccine anytime without any specific timing issues.

### *I'm on oral cdk 4/6 inhibitors for breast cancer. When should I have the vaccine?*

If you are on cdk 4/6 inhibitors such as abemaciclib, palbociclib or ribociclib, it is preferable that you receive the vaccine towards the end of the cycle when the counts have recovered.

### *I'm on targeted therapy. When should I have the vaccine?*

If you are on targeted therapy alone without chemotherapy, you can receive the vaccine anytime without any specific timing issues.

### *I underwent stem cell transplant recently. When should I have the vaccine?*

Your doctor will be recommending vaccination 3-6 months after stem cell transplant.

***I'm planned to undergo cancer surgery or recently underwent cancer surgery. When should I have the vaccine?***

It is preferable that wait for at least 10-14 days after the surgery to receive the first dose of vaccine.

***I'm planned to undergo radiotherapy or recently underwent radiotherapy. When should I have the vaccine?***

There is no specific timing for the vaccination. However, talk to your treating team to find out if your treatment may cause immune suppression. If significant immune suppression is expected from radiotherapy, consider vaccination 2-4 weeks prior to the start of radiotherapy.

***Any precautions for the site of vaccination?***

COVID-19 vaccines are generally administered intramuscularly in the arm below the shoulder.

If you had undergone mastectomy or lymph node removal from your arm pit for breast cancer – request the vaccine to be administered to the opposite arm.

***I'm having scans to find out spread of cancer. Are there any considerations for imaging?***

Enlarged lymph nodes especially in the arm pit can be seen post vaccination.

Inform your treating team if you had vaccination within 6-10 weeks prior to having scans such as CT or ultrasound to avoid confusion arising from swollen lymph nodes from vaccination as opposed to cancer growth.

***Can I participate in clinical trial and still have the vaccine?***

Yes, most trials now have COVID-19 vaccine plans for the timing of the vaccination.

It is generally recommended that you avoid receiving the vaccine on the days you receive the novel trial drug.

***What about the cancer? Will it grow faster because of the vaccination?***

Based on the preliminary data it is unlikely that the vaccines will cause cancer to grow any faster. Additional studies are under way to confirm this.

***Will I have any side effects from the vaccination?***

It appears that the risk of reactions for people with cancer is similar to people without cancer. More information is needed, and we ask that you report any reactions. The immunisation registry will collect data on any side effects from the vaccination.

***Can I have flu vaccine and COVI-19 vaccine on the same day?***

The safety of multiple vaccines administered simultaneously has not been established. It would be safer to receive any other vaccine (including flu vaccines) at least 2 weeks before or after the COVID-19 vaccines.

***Do my caregivers require vaccination?***

It is recommended that your caregivers and household/close contacts be vaccinated as well. Many caregivers and household contacts will fall in one of the other priority groups in the national roll-out plan and may receive their vaccination at a different time to you.

## Additional resources

- <https://www.health.gov.au/initiatives-and-programs/COVID-19-vaccines>
- <https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/conditions/infectious+diseases/COVID-19/vaccine/COVID-19+vaccinations>
- <https://www.canceraustralia.gov.au/COVID-19-vaccine-and-cancer>
- <https://www.nytimes.com/interactive/2020/health/oxford-astrazeneca-COVID-19-vaccine.html>
- <https://www.nytimes.com/interactive/2020/health/pfizer-biontech-COVID-19-vaccine.html>
- <https://www.nytimes.com/2021/03/01/health/covid-vaccine-lymph-nodes.html>

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