

COVID-19 Vaccine:

Information for Individuals who are Immunosuppressed and/or have an Autoimmune Condition

Public Health Factsheet

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Immunization is one of the most important accomplishments in public health. Over the past 50 years, immunization has led to the elimination, containment and control of diseases that were once very common in Canada.¹ Vaccines help our immune system recognize and fight bacteria and viruses that cause diseases.

If a person has an immune system that is weakened by disease or medical treatment, this is referred to as being immunocompromised or immunosuppressed. Generally, people who have weakened immune systems are more prone to getting infections. Immunocompromised people may be able to get vaccinated on the advice of their health care provider, but this advice will depend on the state of the person's weakened immune system. In general, when immunization is recommended by a health care provider, it is thought to be safe and effective. However, disease or medical treatment may impact how well the vaccine works.

Early phases of COVID-19 vaccine clinical trials included small numbers of participants who were immunosuppressed or living with an autoimmune condition. However, clinical trials are ongoing. As more evidence becomes available, vaccine recommendations will be reviewed and updated accordingly.

Should people who have an autoimmune condition get the COVID-19 vaccine?

The National Advisory Committee on Immunization (NACI)² recommends that the COVID-19 vaccine may be offered to people who have an autoimmune condition, such as Rheumatoid Arthritis or Multiple Sclerosis (MS), after they have reviewed the risks and benefits with their immunizer or health care provider, and considering the following:

- There is limited evidence that having an autoimmune condition is an independent risk factor for severe COVID-19. However, there is good evidence that having an autoimmune condition is an independent risk factor for experiencing severe outcomes (e.g., hospitalization, death) from other infectious diseases, such as influenza.
- There is very limited data on the use of the COVID-19 vaccine in people who have an autoimmune condition. However, evidence is rapidly evolving, as clinical trials are ongoing.
- A person's response to the vaccine depends on their underlying autoimmune condition, their progression of disease and use of medications.
- People with autoimmune conditions are known to benefit from other immunizations (e.g., seasonal influenza vaccine).
- Fever is known to be a possible side effect following immunization. This may make an autoimmune condition temporarily worse.

¹ The Public Health Agency of Canada

² Canada's National Advisory Committee on Immunization (NACI) is an independent committee of recognized experts that provides informed advice on the use of vaccines in Canada. After Health Canada approves a vaccine, NACI critically evaluates all available evidence to make recommendations about its optimal use.

Should people who are immunosuppressed because of a disease or treatment get the COVID-19 vaccine?

NACI recommends that the COVID-19 vaccine may be offered to people who are immunosuppressed due to disease (e.g., organ transplant, leukemia, lymphoma, etc.) or treatment (e.g., chemotherapy, high-dose steroids, etc.) after they have reviewed the risks and benefits with their immunizer or health care provider, and considering the following:

- There is limited evidence that immunosuppression is an independent risk factor for severe COVID-19. However, there is good evidence that being immunosuppressed is an independent risk factor for experiencing severe outcomes (e.g., hospitalization, death) from other infectious diseases, such as influenza.
- There is very limited data on the use of the COVID-19 vaccine in people who are immunosuppressed. However, evidence is rapidly evolving, as clinical trials are ongoing.
- A person's response to the vaccine depends on their underlying immunocompromising condition, their progression of disease and use of medications.

People who are living with stable human immunodeficiency virus (HIV) are not considered to be immunosuppressed.

How are COVID-19 vaccine recommendations made in Manitoba?

Manitoba's Vaccine Implementation Task Force, comprised of vaccine experts from Manitoba Health and Seniors Care, critically conducts a review of:

- provincial epidemiology, to guide determination of priority populations
- clinical trial data on safety and effectiveness (*Note that for every COVID-19 vaccine, there are several clinical trials ongoing from various countries around the world.*)
- post-marketing studies, including reports of adverse events following immunization
- plans and practices of other jurisdictions in Canada and around the globe
- summaries and recommendations from national and international expert committees, including NACI

Experts from the medical community across the province are consulted in various stages of the review.

The COVID-19 landscape is constantly changing as we learn more about the disease and the vaccines that protect against it. Vaccine recommendations are subject to change as the evidence continues to evolve.

Talk to your immunizer or health care provider for the most up-to-date information.

For more information

Speak with your health care provider. If you do not have a health care provider, call Health Links – Info Santé in Winnipeg at 204-788-8200 or 1-888-315-9257 (toll-free in Manitoba).

Or, access the following websites:

The Manitoba government:

www.manitoba.ca/covid19/index.html

The National Advisory Committee on Immunization:

www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci.html

Please note that this factsheet was developed to accompany a COVID-19 Vaccine Public Health Factsheet and is not intended as a replacement document.
