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COVID-19 Vaccine Update for Clinicians

Additional dose for persons with significantly compromised immune systems

The U.S. Food and Drug Administration (FDA) amended its emergency use authorizations (EUAs) for [Pfizer](#) and [Moderna](#) COVID-19 vaccines to allow an additional (third) dose for certain immunocompromised people. Following the EUA amendment, the CDC Advisory Committee on Immunization Practices (ACIP) authorized an additional (third) dose of Pfizer and Moderna COVID-19 vaccines for this population only. As a result of these actions, we are sending this Health Advisory to practitioners to advise on definitions of those who qualify and requested actions.

Forty-four percent of hospitalized breakthrough cases met the definition for potential immunocompromise. Vaccine effectiveness studies among immunocompromised people show decreased antibody response when compared to the general population. Immunocompromised people have medical conditions or are receiving treatment associated with moderate to severe immune compromise, including:

- Active or recent treatment for solid tumor or hematologic malignancies.
- Receipt of solid-organ and taking immunosuppressive therapy.
- Receipt of CAR-T cell or hematopoietic stem cell transplant (within 2 years of transplantation or taking immunosuppression therapy).
- Moderate or severe primary immunodeficiency (e.g., DiGeorge, Wiskott-Aldrich syndromes).
- Advanced or untreated HIV infection.
- Active treatment with high-dose corticosteroids (i.e., greater than 19 mg prednisone or equivalent per day), alkylating agents, antimetabolites, transplant-related immunosuppressive drugs, cancer chemotherapeutic agents classified as severely immunosuppressive, tumor-necrosis (TNF) blockers or other biologic agents that are immunosuppressive or immunomodulatory.
- Chronic medical conditions such as asplenia and chronic renal disease may be associated with varying degrees of immune deficit.

Immunocompromised people are:

- More likely to get severely ill from COVID-19
- At higher risk of prolonged SARS-CoV-2 infection and shedding
- More likely to transmit SARS-COV-2 to household contacts
- More likely to have breakthrough infection

Requested action:

- Call and recall patients you determine are immunocompromised and received Pfizer or Moderna vaccine and offer an additional (third) dose of COVID-19 vaccine. Offer the same vaccine product (i.e., Pfizer or Moderna) the person originally received.
- If immunocompromised patients have not yet been vaccinated for COVID-19 and are appropriate candidates for vaccination, make a strong recommendation for vaccination and offer education if they are unsure.

Be aware, people who got Johnson & Johnson/Janssen (J&J) COVID-19 vaccine are not eligible for an additional dose as data is insufficient to support recommending booster doses for J&J recipients. The Centers for Disease Control and Prevention (CDC) and FDA are actively working to provide further guidance on this issue. Additionally, do not offer additional (third) doses to other fully vaccinated people.

Further considerations

- If the vaccine product a person originally received is unavailable, an alternate mRNA vaccine product may be used.
- The additional (third) dose should be administered at least 28 days after completion of the initial primary series.
- Serologic testing to assess immune response is not currently recommended.
- COVID-19 vaccination should occur at least 2 weeks before initiation of immunosuppressive therapies.
- Counsel immunocompromised people about their potential for reduced immune response to COVID-19 vaccine and the need to follow COVID-19 infection prevention measures, including:
 - Wear a mask.
 - Maintain physical distance.
 - Increase ventilation.
 - Avoid crowds.
 - Encourage close contacts to get fully vaccinated.

Resources

[How to Talk with Patients who are Immunocompromised – Discussing an Additional Dose of an mRNA COVID-19 Vaccine](#) - CDC

News Release: [Third doses of COVID-19 vaccine recommended for certain immunocompromised individuals](#) – WA Department of Health