

## **Summary guidance for Covid-19 vaccination for cancer patients. (English) Native speakers.**

Cancer patients should be vaccinated, regardless a) if they have an active cancer, b) the type of cancer therapy they receive, c) if they are in follow up after treatment management, d) if they are cancer survivors.

Nevertheless, some specific recommendations for Covid-19 vaccination timing and prioritization in cancer patients were suggested by different national and international institutions (ask your doctor for your vaccination timing and prioritization details).

1. If you have active cancer or a haematological malignancy requiring chemotherapy, or you were diagnosed with solid tumor in the last 5 years, you might have an increased risk for severe Covid-19 disease and you will be most probably prioritized for Covid-19 vaccination (ask you team for your particular risk group and need of prioritization).
2. Vaccination is indicated irrespectively of the specific cancer treatment you receive (radiotherapy, immunotherapy, chemotherapy, or other specific biological treatment), or if you have received stem cell transplant. Waiting for vaccination is not a reason to defer or delay your treatment.
  - Vaccination is recommended to be done before the initiation of chemotherapy, when feasible. If you are already receiving chemotherapy, it is suggested to have the vaccine when the white blood cells are within normal limits.
  - If you receive cytotoxic chemotherapy or immunotherapy, some authorities suggest the vaccination to be given 15 days after treatment and 7 days before next therapy, when it concerns three weekly regimens. Alternatively, vaccination is advised to be given between chemotherapy cycles and away from the nadir period (period of low blood counts, usually 7-14 days after treatment, but this can vary depending on the specific treatment). It is generally suggested the treatment to be avoided when vaccine side effects are expected.
  - For patients who are about to complete cytotoxic therapy, the first dose of the vaccine is recommended to be given after therapy completion and nadir period resolution. In either case, the decision is taken after discussion, with your physician or team group for your best option.
  - In case of planned surgery, vaccination is advised to be given at least 1 week before operation. Vaccination can be done at any time after the operation, with an

optimal white blood cell count. Please ask your doctor or medical team for further advise.

3. If you have had a) allogeneic stem cell transplantation in the absence of graft-versus-host disease (GvHD), or b) B-cell depletion therapy, you can receive the vaccine some months later, with policy and suggestions being different among providers (ESMO, HCS, BSMO, DGHO, ASCO, ASH, UK Chemotherapy Board). Ask your physician which best applies to you.

Some patients may experience reduced protection after vaccination because of their treatment. Trust your doctor, if you are in this patient subgroup, your physician will keep you informed.

4. Vaccination isn't prohibited to patients with past Covid-19 infection or infection after the first dose of a vaccine and it is not necessary to have a test for Covid-19 infection before vaccination, since even if you have experienced a Covid-19 infection in the past, vaccination strengthens your safety (by reinforcing immune system's memory). AIOM, COMU, CIPOMO, HESMO suggest to be done 15 days after full recovery from Covid-19 infection, or 1 month after initiation of the infection.

ASCO, CDC suggest to be done up to 6 weeks (42 days) after the first dose of a vaccine in case of infection after the first dose of vaccination.

If you have received passive antibody therapy (monoclonal antibodies or convalescent plasma) as part of Covid-19 treatment, you can be vaccinated after at least 90 days.

## **Contraindications to vaccination**

The contraindications to the vaccination are the same that apply to the general population.

- 1) Vaccination is NOT indicated to you if you have contraindications to the vaccine or any specific component of SARS - CoV 2 vaccines, such as severe allergic reaction .
- 2) If you have experienced in the past a severe allergic reaction to other vaccines or injectable drugs or you have specific types of allergy, discuss it with a doctor, since guidance may vary .

Additionally, it is generally accepted that if you have a history of allergic reaction/anaphylaxis to a vaccine, medicine or food, you are advised not to receive the Pfizer vaccine. Discuss it with a doctor, since guidance may vary among different national authorities and medical providers .

If you had a severe allergic reaction after the first vaccine administration, you will probably not be given the second dose. Even in this case, since vaccination policy may vary in different countries, discuss it with your doctor .

Regarding AstraZeneca vaccine, patients with a history of anaphylaxis or angioedema were excluded from clinical trials .

Since there are limited data on the effects of Covid-19 vaccination in patients with cancer concerning the efficacy and duration of immunity, as well as the interactions with cancer therapies, information and guidance on cancer patients' vaccination will result from the experience unearthed by each country's vaccination programs and real world data. All information is empiric and increases with time, since Covid-19 pandemic will be long lasting, comprising different phases in time .