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COVID-19 Vaccination Update #3: FAQs

Who is medically eligible?

- Nearly everyone aged 18 and over (for Moderna) and aged 16 and over (for Pfizer) is medically eligible, except for those with a history of anaphylaxis to a component of the vaccine.
- The main vaccine ingredient of concern for anaphylaxis is polyethylene glycol (PEG). Reactions to cosmetics that may contain PEG is not a contraindication. Clients with concerns of PEG anaphylaxis can be referred to immunology as per bit.ly/3dzLTPi
- Pregnancy, breastfeeding, immunocompromised states, and autoimmune disorders are **not** contraindications to vaccination, but instead 'special considerations' only as the current vaccines have not been specifically studied in these populations.
- For more information: see previous MHO newsletter at bit.ly/3jDwMW7

Why is the 2nd dose being delayed?

- Across BC, and in many other areas of Canada and the world, the 2nd dose of mRNA vaccines are being provided later than that recommended by the manufacturer.
- The rationale for this approach is to be able to provide additional 1st doses now in order to vaccinate more people while vaccine availability is limited, with the ultimate goal of decreasing morbidity and mortality.
- Both vaccines are highly effective after the 1st dose.
- For more information: see BCCDC resources bit.ly/2Z0Pa1y (document), bit.ly/3p26Btb (video)

What is 'COVID arm'?

- ~1% of Moderna vaccine recipients in trials reported a rash over the injection site appearing about a week after administration. The media has dubbed this as 'COVID arm'.
- From a review of Island Health clients experiencing this, the onset has been from 5-14 days, and may be associated with pain, redness, swelling, and pruritus. While it is self-limiting and usually lasts for a few days, it can last longer.
- As this is an expected reaction, it does not need to be reported as an adverse event following immunization (AEFI).
- This is more common after the first dose and is not a contraindication to a second dose.
- For more information on AEFIs: see previous MHO newsletter at bit.ly/3tDIPsd

Should other vaccines be deferred while receiving COVID-19 vaccines?

- In general, it is recommended to have a 6 week buffer around COVID-19 vaccination, where no other vaccines are provided 2 weeks before initiation, between doses, and 4 weeks after completion of the two-dose series.
- However, there is no evidence that this is necessary and both the COVID-19 and other vaccines are considered valid if provided within this buffer period.
- Vaccines provided as post-exposure prophylaxis (eg. tetanus, rabies) **should never be withheld** if clinically indicated.
- Tdap vaccination during pregnancy should continue to be provided between 27-32 weeks of gestation, even if it is within the buffer period.

Where can I find other resources?

- BC's COVID-19 Immunization Plan: bit.ly/365whhR
- Island Health COVID-19 Vaccine Page (for public): bit.ly/3rfNOFi
- Island Health COVID-19 Vaccination Resources for Medical Staff: bit.ly/2LbpKLq
- BCCDC COVID-19 Immunization Program Q+A for Health Care Professionals: bit.ly/3sQotKN