COVID-19 VACCINE BULLETIN 25B

Welcome to Bulletin 25B* from the HSE National Immunisation Office which highlights changes in clinical guidance for the COVID-19 vaccination programme.

Bulletins will now be published FORTNIGHTLY or more frequently, if required.

***Please note Bulletin 25 has been withdrawn and updated with revised NIAC recommendations on 28th June 2021.**

Updates and Reminders for Vaccinators

NIAC Chapter 5a Updated

The National Immunisation Advisory Committee (NIAC) immunisation guidelines chapter 5a (on COVID-19 vaccines) was significantly updated on 28th June. They key changes are:

1 Summary of contraindications and precautions for individuals with specific allergy history

Please review the two tables (one for mRNA vaccines and another for viral vector vaccines) for actions to take for individuals with specific allergy history with regards to contraindications and precautions. The tables were developed by NIAC in consultation with allergy and immunology specialists.

mRNA vaccines

Table 5a.3: Vaccination of those due an mRNA COVID-19 vaccine

	History	Action
Contraindication	· Anaphylaxis (**serious systemic** allergic reaction) after a previous dose of Comirnaty® or COVID-19 vaccine Moderna®	Vaccinate with Vaxzevria® or COVID-19 vaccine Janssen® in a specialist facility
	· Anaphylaxis after polyethylene glycol (PEG, e.g., some bowel preparations for endoscopy, certain laxatives such as Movicol®)	
	· Anaphylaxis after Trometamol® COVID-19 vaccine Moderna® is contraindicated	Vaccinate with alternate vaccine
Special precautions	· Anaphylaxis after multiple, different drug classes, with no identified allergen (may indicate PEG allergy)	Vaccinate with Vaxzevria® or COVID-19 vaccine Janssen®
	· Anaphylaxis after a vaccine, or a medicine which contained PEG	Observe for 30 minutes
	· Idiopathic anaphylaxis (may indicate PEG allergy)	
	· Mastocytosis	Vaccinate as scheduled
	· Anaphylaxis after food, venom or medication	Observe for 30 minutes
Not a contraindication or a precaution	· Non-anaphylactic food allergy · Family history of allergy, including anaphylaxis · Previous local reaction to any vaccine · Hereditary angioedema · Contact dermatitis to PEG containing cosmetic product · Stable asthma on biologic therapy · NSAID allergy	Vaccinate as scheduled Observe for 15 minutes
Neither a contraindication nor a precaution	· Food allergy · Family history of allergy, including anaphylaxis · Previous mild allergic reaction to an unknown medication · Previous local reaction to any vaccine · Contact dermatitis to PEG containing cosmetic product · Stable asthma on biologic therapy ·NSAID allergy	Vaccinate, observe for 15 minutes

Viral vector vaccines

Table 5a.4: Vaccination of those due a COVID-19 viral vector vaccine

	History	Action
Contraindication	· Anaphylaxis (**serious systemic** allergic reaction) after a previous dose of Vaxzevria® · Anaphylaxis after Polysorbate 80	Vaccinate with Comirnaty® or COVID-19 vaccine Moderna® in a specialist facility
Special precautions	Concern re possible PEG allergy and risk of concomitant Polysorbate 80 allergy: · Anaphylaxis after multiple, different drug classes with no identified allergen (may indicate PEG allergy) · Anaphylaxis after a vaccine, injected antibody preparation, or a medicine known to contain Polysorbate 80 · Idiopathic anaphylaxis (may indicate PEG/ polysorbate 80 allergy)	Specialist review May administer Vaxzevria® or COVID-19 Vaccine Janssen® if prior tolerance of polysorbate 80 containing medications Observe for 30 minutes
	· Mastocytosis · Anaphylaxis after food, venom or medication	Vaccinate as scheduled Observe for 30 minutes
Not a contraindication or a precaution	· Non-anaphylactic food allergy · Family history of allergy, including anaphylaxis · Previous local reaction to any vaccine · Hereditary angioedema · Contact dermatitis to PEG containing cosmetic product · Stable asthma on biologic therapy · NSAID allergy	Vaccinate as scheduled Observe for 15 minutes
Neither a contraindication nor a precaution	· Food allergy · Family history of allergy, including anaphylaxis · Previous mild allergic reaction to an unknown medication · Previous local reaction to any vaccine · Hereditary angioedema · Contact dermatitis to PEG containing cosmetic product · Patients with stable asthma on biologic therapy · NSAID allergy	Vaccinate, observe for 15 minutes

Read NIAC Chapter 5a

Changes are continued on page 2

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NIAC Chapter 5a Updated

(continued from page 1)

2 Interchangeability:

- There is insufficient data on the interchangeability of COVID-19 vaccines. The same vaccine should be used for both doses.
- Consideration may be given to viral vector vaccination after anaphylaxis to a dose of mRNA vaccine. The viral vector vaccine should be given after an interval of at least 28 days.
- Consideration may be given to mRNA vaccination after anaphylaxis to a dose of Vaxzevria vaccine. The mRNA vaccine should be given after an interval of at least 28 days.

3 New contraindications:

- Anaphylaxis after another COVID-19 vaccine using the same platform e.g. mRNA or viral vector
- For Vaxzevria: Those with a contraindication to one viral vector COVID-19 vaccine should not receive another authorised viral vector vaccine. Consideration may be given to mRNA vaccination which should be given after an interval of at least 28 days.
- For Comirnaty and SpikeVax: Those with a contraindication to one mRNA COVID-19 vaccine should not receive another authorised mRNA vaccine. Consideration may be given to viral vector vaccination which should be given after an interval of at least 28 days.

4 Dose Intervals

- If a second dose of vaccine is given before the following intervals this is not considered a valid vaccine:
  - Comirnaty: before 17 days
  - COVID-19 Vaccine Moderna: before 24 days
  - Vaxzevria: before 24 days
- In such cases a third dose should be given 28 days after the second (invalid) vaccine.

Read more here

Allergy and COVID-19 Vaccines FAQs updated by NIAC

To support vaccinators and other front-line healthcare professionals NIAC and Irish Association of Allergy and Immunology have produced an FAQ document that provides information on how to advise allergic individuals according to their specific allergy history. This has now been updated on 29th June 2021.

Read more here

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COVID-19 Vaccine Moderna to be called Spikevax

Moderna's COVID-19 vaccine product information has been further updated by the manufacturer on 23/06/21- the vaccine is now called Spikevax. HSE clinical guidance, supporting materials and training will be updated to reflect this shortly.

Read more here

Intramuscular (IM) injection techniques

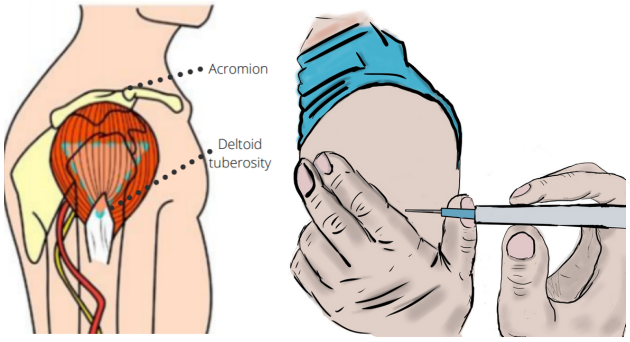
We have highlighted in several bulletins the importance of correct intramuscular injection technique.

It is essential that all COVID-19 vaccines are given in the correct site of the deltoid muscle. If the vaccine is injected in the incorrect site, for example too high, it can result in the vaccine being administered in a tendon or in the shoulder joint. This can cause an injury to the vaccine recipient with persisting pain and impaired function.

In addition if the vaccine is not administered in the muscle, it may be ineffective, as intramuscular injection is required for the immune response.

All vaccinators must be competent in IM injection technique which includes correct landmarking of the injection site to ensure the vaccine is given in the correct area of the Deltoid muscle.

Various training and supportive material is available to support vaccinators on this issue including:



Summary sheet outlining the IM injection technique

Click here

Training video

Click here

Training is also included in HSELand modules.

Click here

If a vaccinator needs support or additional training or supervision in IM injection technique, please contact your clinical lead or manager.

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Operational updates from the HSE

The HSE National Immunisation Office is not involved in operational issues and cannot provide guidance on such matters.

GPs encouraged to support COVID-19 vaccination for people experiencing homelessness, members of the Roma and Traveller communities

On 17th June the office of the Chief Clinical Officer wrote to GPs on this matter:

- As GPs continue to vaccine Groups 4 and 7 they can also offer mRNA vaccines to individuals aged 16 and over from the following groups: people experiencing homelessness, members of the Roma and Traveller communities.
- GPs who are not currently offering COVID-19 vaccines can refer individuals within these groups for an mRNA vaccine via healthlink.

In addition, HSE social inclusion and local public health teams are supporting members of the Traveller and Roma communities to access the right information on COVID-19 vaccines and where needed register on the national portal for an appointment as part of Group 9. Specialist clinics for people experiencing homelessness (without access to GPs) are also being organised through CHO leads with Public Health and Social Inclusion team support.

Pregnant women that cannot receive their second dose during pregnancy should contact HSELive

For pregnant women who received the first dose of COVID-19 vaccine but did not receive the second dose during pregnancy (by 36 completed weeks) should be advised that they should receive their second dose postpartum. They can arrange their appointment for the second dose by contacting **HSELive**

Contact HSELive

Vaccinators who are providing first doses of COVID-19 vaccines in hospitals should advise pregnant women to contact HSELive if this situation applies to them.

Read more here

Read more here

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Latest in Research

ECDC threat assessment brief - Delta variant of concern

This report from the European Centre for Disease Prevention and Control (ECDC) highlights the latest evidence on the Delta variant of concern including:

- The Delta variant is likely 40-60% more transmissible than the Alpha variant (and is likely associated with an increased risk of hospitalisation)
- Based on modelling data they expect 90% of COVID-19 cases in Europe to be due to the Delta variant by the end of August. They also model the impact of relaxing non-pharmaceutical interventions (such as social distancing , face masks and respiratory/ hand hygiene measures) on case rates, hospitalisations and deaths.

The report also highlights the importance (for both the general population and those at high risk of severe-COVID-19) of completing the full vaccination schedule (for a two dose COVID-19 vaccine regime) to get the best protection against COVID-19 in particular for the Delta variant.

Read more here

Although there may be recommendations made in external reports- they are for information only.
Please note that the **HSE clinical guidance on COVID-19 vaccines** should be referred to for up to date guidance for vaccinators in Ireland.

NOVAVAX trial results

Novavax's COVID-19 vaccine (NVX-CoV2373) is currently under a rolling review by the European Medicines Agency (EMA). It is currently not authorised for use in Ireland. It is an adjuvanted protein based (similar to the SARS-CoV-2 spike protein) vaccine. The company has shared pre-published data from its PREVENT-19 phase 3 trial. The study involved nearly 30,000 people from the United States and Mexico. The key results reported include:

- 90.4% overall efficacy against symptomatic disease
- 100% protection against moderate and severe disease

Read more here

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Website

Visit our website www.immunisation.ie regularly for the most up to date information to support vaccinators and health professionals responding to queries.

Our dedicated COVID-19 Vaccination section contains

- Information from the National Immunisation Advisory Committee
- Clinical guidelines
- COVID-19 vaccine studies
- IM Injection technique reminders
- Dedicated pages for the licensed COVID-19 vaccines

Visit here

COVID-19 Vaccination Training Programme

While HSeLand is unavailable you can access the National Immunisation Office COVID-19 vaccinator training by registering through the interim HSeLand solution:

Register here

You must register on this platform to complete training if you previously registered on HSeLand. HSeLand recommend downloading your certificates of completion from the interim HSeLand platform so you can load them to your learning record when HSeLand is available again.

Do you have queries?

Due to a recent cyberattack against the HSE we are unable to access our HSE Emails at this time. We apologise for any inconvenience this may cause.

A new email address for **healthcare professionals only** to direct any urgent clinical or technical queries to. Please **do not send any patient identifiable information to this email address** as the email will be deleted and you will be asked to resend without this information.

Send your query

Should vaccines be exposed to temperatures outside of parameters please contact the National Immunisation Office immediately. Contacts include:

- Achal Gupta: 087 4064810
- Mariangela Toma: mobile 087 7575679
- Cliona Kiersey: mobile 087 9915452

Queries that are not clinical or technical cannot be answered by the National Immunisation Office.

The National Immunisation Office is not involved in the allocation or delivery of COVID-19 Vaccines.

Read about the role of the National Immunisation Office in supporting the COVID-19 vaccination programme on our **website**.

Recommendations about COVID-19 vaccine are changing as more information becomes available so please visit our **website** for the most up to date information.