

COVID-19 Vaccination Programme 2020/21

Information for staff undertaking vaccination

All staff administering the vaccine should have read the Patient Group Direction, the Green Book chapter 14a and attended or viewed the webinar. Staff should have undertaken the relevant immunisation modules via NES.

Contraindications and anaphylaxis

The JCVI have updated their position and the Green Book Chapter 14a now states, **that there are very few individuals who cannot receive the Pfizer-BioNTech or AstraZeneca COVID-19 vaccines.** Where there is doubt, rather than withholding vaccination, appropriate advice should be sought from the relevant specialist, or from the local immunisation or health protection team.

The key changes are:

Pregnancy and Breastfeeding

Vaccination in Pregnancy – there is insufficient evidence to recommend routine use of COVID Vaccination in pregnancy.

The JCVI advises that for women who are offered vaccination, that vaccination in pregnancy, with either vaccine, should be considered where:

- the risk of exposure to Covid infection is high and cannot be avoided,
- or where the woman has underlying conditions that put them at very high risk of serious complications of COVID-19.

Pregnant women should be advised to discuss any questions they have regarding pregnancy and vaccination with their appropriate antenatal service.

Those who are trying to become pregnant do not need to avoid pregnancy after vaccination However, if a woman finds out she is pregnant after she has started a course of vaccine, routine advice is to complete her pregnancy before finishing the recommended schedule.

Eligible women should be offered vaccine as soon as possible after pregnancy.

Breastfeeding

There is no known risk associated to giving non-live vaccines whilst breastfeeding. JCVI advises that breastfeeding woman may be offered vaccination with either vaccine.

- following consideration of clinical need for immunisation against COVID-19.
- there is no known risk associated with giving non-live vaccines whilst breastfeeding.
- the woman should be informed about the absence of safety data for the vaccine in breastfeeding women.

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Anaphylaxis and Allergies

The MHRA has now advised that individuals with a history of anaphylaxis:

- \Rightarrow to food
- \Rightarrow an identified drug or vaccine
- \Rightarrow or an insect sting

can receive any COVID-19 vaccine, as long as they are not known to be allergic to any component (excipient) of the vaccine.

The vaccine should not be given to those who have had a previous systemic allergic reaction (including immediate-onset anaphylaxis) to:

- \Rightarrow a previous dose of the same COVID-19 vaccine
- \Rightarrow any component (excipient) of the COVID-19 vaccine

The Pfizer BioNTech Vaccine contains polyethylene glycol (PEG)

Known allergy to PEG is extremely rare, but would contraindicate receipt of this vaccine. Patients with undiagnosed PEG allergy may have a history of unexplained anaphylaxis or of anaphylaxis to multiple classes of drugs

The AstraZeneca vaccine does not contain PEG and is a suitable alternative

The British Society for Allergy and Clinical Immunology (BSACI) has advised that individuals with:

 ⇒ a history of immediate onset-	should not be	The AstraZeneca vaccine can
anaphylaxis to multiple	vaccinated with	be used as an alternative
classes of drugs ⇒ or any unexplained	the Pfizer	(if not otherwise
anaphylaxis	BioNTech vaccine.	contraindicated)

Reaction to first dose and administration of second dose.

- individuals with a localised itchy skin reaction (without systemic symptoms) to the first dose of a COVID-19 vaccine should receive the second dose of vaccine with prolonged observation (30 minutes) in a setting with full resuscitation facilities (e.g. a hospital)
- individuals with non-allergic reactions (vasovagal episodes, non-urticarial skin reaction or non-specific symptoms) to the first dose of a COVID-19 vaccine can receive the second dose of vaccine in any vaccination setting



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Table 2: Summary of issues.

ISSUE/ALLERGY	ADVICE
Pregnancy	Should not routinely be offered COVID vaccination – could be considered following risk assessment by the obstetric team.
Breastfeeding	No known risk.
Allergy to penicillin or other medications	It is safe to give the vaccine
Latex allergy	The vaccines do not contain any latex.
Egg allergy	The vaccines have no egg proteins and is not contraindicated
Allergic reaction to bee/wasp stings	Venom allergy is not a contraindication
Polyethylene glycol (PEG) allergy	Polyethylene glycol (PEG) allergy is rare but can be severe. This is present in the Pfizer vaccine and should not be administered to those who are allergic.
Allergies to foods or drugs	Vaccine can be given
Currently on antibiotics	As this is a non-live vaccine, antibiotics do not interfere with the immune response. However, consider postponing vaccination until symptoms of acute infection resolves
Currently pyrexial or any symptoms of COVID or flu like illness	Postpone vaccination until recovered. If tested positive for COVID allow 4 weeks clear before vaccination.