

COVID-19 VACCINATION

Information for people affected by cancer

With Australia's COVID-19 vaccination program now underway, there are many questions being raised by patients, families and carers affected by cancer. This fact sheet addresses some of these questions about the COVID-19 vaccines.

Vaccine safety

There are currently two COVID-19 vaccines available in Australia – Pfizer and AstraZeneca. Both vaccines have passed Australia's Therapeutic Goods Administration's assessment and approval processes that assess vaccine safety, quality and effectiveness.

They do not contain the live virus that causes COVID-19 and therefore there is no risk of catching the infection from the vaccines.

All individuals should follow Australia-wide advice on which vaccines to take, based on their age and risk factors.

Australian recommendations

An extremely rare but serious side effect involving thrombosis (blood clots) along with thrombocytopenia (low blood platelet count) has been linked with the use of the AstraZeneca vaccine.

As a result, the [Australian Technical Advisory Group on Immunisation \(ATAGI\)](#) has advised Australian adults aged 59 and under to receive the Pfizer vaccine in preference to the AstraZeneca vaccine.

However, the ATAGI advice allows for the AstraZeneca vaccine to be used in people aged 59 and under following consideration and discussion of their personal risk for severe COVID-19 infection balanced against possible

side effects. People who have had their first dose of the AstraZeneca vaccine without any serious adverse events are advised to receive a second dose of the same vaccine.

ATAGI and the Thrombosis and Haemostasis Society of Australia and New Zealand recommend that people with a history of brain blood clots, in typical sites, increased clotting tendency (not immune related), family history of blood clots, current or past low platelet count, and those receiving blood thinners, can receive the AstraZeneca vaccine.

ATAGI also recommends that people with a history of brain blood clots, known as cerebral venous sinus thrombosis (CVST) or low platelets caused by heparin (heparin induced thrombocytopenia syndrome), those with clots in abdomen (splanchnic vein thrombosis) or antiphospholipid syndrome with clots should not receive the AstraZeneca vaccine - the Pfizer vaccine is preferred for people with these rare conditions.

Two doses are required for best immunity

Both Pfizer and AstraZeneca require two doses to provide the best immunity. Pfizer doses are given at least 21 days apart. AstraZeneca doses can be given 4 to 12 weeks apart, but the ATAGI recommend doses should be 12 weeks apart for optimal efficacy.

Recommendation for cancer patients

Some types of cancer and their treatment increase the risk of catching COVID-19 and having a more severe illness from COVID-19. Vaccination against COVID-19 is therefore highly recommended.

The COVID-19 vaccines have not been studied specifically in patients with cancer. How your immune system responds to the vaccine may be influenced by your own general health and your cancer treatment. We know from studies of other vaccines (such as the flu vaccine) in patients with cancer that the level of response or protection from vaccination may be lower compared to people without cancer.

Steps that you have taken to reduce your risk of infection, such as physical distancing, hand hygiene and use of masks, remain important even after vaccination. Such measures help prevent infection, while vaccination is designed to reduce the impact of COVID-19 should you become infected.

Vaccination and cancer treatment

Based on how the vaccines work, we do not anticipate that the vaccines will reduce the effectiveness of cancer treatments.

Your doctor will be able to discuss timing of vaccination with you, as with some therapies it may be preferable to avoid vaccination during certain treatment periods. This is to avoid confusion around possible side effects and whether they have been caused by the vaccine or your cancer treatment.

Patients with blood cancer

People with a blood cancer diagnosis (myeloma, lymphoma or leukaemia) are at increased risk of complications from COVID-19 infection.

Vaccination against COVID-19 is therefore highly recommended, as long as the person does not have a serious allergy to components of the COVID-19 vaccine.

Stem cell transplants

For patients who have had an autologous or allogeneic stem cell transplant, vaccination is recommended at least three months after your transplant.

Side effects

Common side effects from the vaccine have typically been mild and short-lived – like pain or redness at the injection site. Up to half of all vaccinated people will experience some general side effects such as tiredness, headache and muscle aches and pain or fever. You should seek medical advice if, for example, you develop a fever, accompanied by shivering and sweating or if unexpected symptoms such as severe headache appear or persist beyond the first three days following vaccination.

Severe reactions to vaccinations

If you have had a severe allergic reaction to a vaccine in the past, or to a particular type of COVID-19 vaccine, you should discuss with your doctor or specialist the type of reaction you had to the particular vaccine. You may be referred to specialised vaccination clinics for further assessment and, if suitable, for vaccination under close supervision.

COVID-19 and flu vaccines

The current recommended gap between a dose of seasonal flu vaccine and a dose of the COVID-19 vaccine is at least seven days.

Further information

- Australian Department of Health [COVID-19 vaccine webpage](#)
- Cancer Australia's [Frequently Asked Questions](#) about the COVID-19 vaccines
- Melbourne Vaccine Education Centre's [Frequently Asked Questions on COVID-19 vaccines](#)
- National Centre for Immunisation Research and Surveillance [Frequently Asked Questions on COVID-19 vaccines](#)
- [National Coronavirus Helpline](#): **1800 020 080**. Ask for an interpreter if needed.
- Anyone affected by cancer can contact [Cancer Council](#) on **13 11 20** for information and support. Available 9am to 5pm, Monday to Friday. If you need a translator to use this service, call **13 14 50**.
- Peter MacCallum Cancer Centre patients on active treatment can contact their [Peter Mac Patient Navigator](#) Monday to Friday, 8.00am - 4.30pm or call the main reception on **(03) 8559 5000**

Patients on active treatment at other health care facilities should contact their treating team.

*In the event of an emergency, please dial **000** for an ambulance.*

