

Third doses of COVID-19 vaccine for moderately to severely immunocompromised Nova Scotians

The National Advisory Committee on Immunization (NACI) strongly recommends that individuals who are moderately to severely immunocompromised and who have previously received a primary COVID-19 vaccine series (with a homologous or heterologous schedule using mRNA or viral vector vaccines) receive an additional dose of mRNA COVID-19 vaccine at least 28 days following completion of the primary series.

Moderately to severely immunocompromised includes individuals with the following conditions:

- Active systemic therapy for cancer (or have received systemic therapy in the past 12 months). This includes chemotherapy, immunotherapy and targeted agents¹. Excludes patients on hormonal agents² and those receiving only radiation therapy
- Receipt of solid-organ transplant and taking immunosuppressive medication
- Receipt of CAR-T therapy or stem cell transplant within 2 years or stem cell transplant and taking immunosuppressive medication
- Moderate to severe primary immunodeficiency* (e.g. Common Variable Immunodeficiency, Chronic Granulomatous Disease, X-linked Agammaglobulinemia) [More information regarding primary immunodeficiency may be found below*]
- HIV and a CD4 count less than 200
- Active treatment with the following categories of immunosuppressive therapies: anti-B cell therapies (i.e. rituximab/Rituxan®, ocrelizumab/Ocrevus®), high-dose steroids, alkylating agents (i.e. cyclophosphamide), high-dose antimetabolites (i.e. azathioprine, methotrexate), tumor-necrosis factor (TNF) inhibitors (i.e. infliximab/Remicade®, adalimumab/Humira®) and other biologic agents that are significantly immunosuppressive (i.e. ustekinumab/Stelara®, secukinumab/Cosentyx®)

A full list of eligible medications here is found here:

<https://novascotia.ca/dhw/cdpc/documents/immunosuppressive-medication-list.pdf>

Primary Immunodeficiency: Eligibility for a third dose of COVID-19 Vaccine in Nova Scotia

NACI recommends that patients with moderate to severe primary immunodeficiency receive a third dose of COVID-19 vaccine to optimize protection. Most primary immunodeficiency conditions are quite rare. A full list of primary immunodeficiencies can be found on the [Immunodeficiency Canada website](#).

¹ Patients may provide information to confirm active systemic therapy for cancer when possible, but therapies DO NOT need to be on the medication list for a patient to be eligible, as it is not an exhaustive list of systemic cancer therapies.

² Hormonal agents excluded are: antiestrogens (tamoxifen, fulvestrant), aromatase inhibitors (anastrozole, exemestane, letrozole), gonadotropin releasing hormone analogues (buserelin, goserelin, leuprolide), luteinizing hormone releasing hormone antagonists (degarelix), progestins (medroxyprogesterone, megestrol), antiandrogens (apalutamide, bicalutamide, darolutamide, enzalutamide, flutamide, nilutamide), androgen biosynthesis inhibitors (abiraterone), androgens (testosterone), somatostatin analogues (lanreotide, octreotide), thyrotropin stimulating hormone agonists (thyrotropin alpha), prolactin lowering agents (bromocriptine, cabergoline, quinagolide)

NOVEL CORONAVIRUS (COVID-19)

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Not all primary immunodeficiencies cause immunosuppression severe enough to predictably reduce vaccine effectiveness of a standard two dose series of COVID-19 vaccines.

Patients with the following primary immunodeficiencies are not eligible for a third dose:

- Glycogen Storage Disease
- Goodpasture Syndrome
- Hereditary angioedema
- Hyper-IgD Syndrome
- Immunodysregulation, Polyendocrinopathy and Enteropathy, X-linked
- Mannose Binding Lectin Deficiency
- Selective IgA deficiency
- Selective IgM deficiency
- Transient Hypogammaglobulinemia of Infancy
- Unspecified Hypogammaglobulinemia