





## **COVID-19 Vaccination Bulletin**

Children and adolescents with COVID-19 infection tend to have mild disease compared with adults. They may have respiratory symptoms, fever, cough, sore throat or sneeze, or have no symptoms at all. In younger children, symptoms can be very mild, or just gastrointestinal symptoms like diarrhoea or vomiting.

However, patients who are undergoing cancer therapy, or have other medical conditions as a result of cancer or cancer treatment, will be at increased risk of contracting COVID-19, and at greater risk of developing severe disease and complications from COVID-19. We therefore recommend that all the above patients who are aged 12 years and over have the Pfizer COVID-19 vaccine as priority Group 3. Patients who have completed treatment and their family should have the vaccine as soon as one becomes available to you. Comirnaty<sup>TM</sup> (COVID-19 mRNA vaccine) (Pfizer-BioNTech) is approved by Medsafe for use in all aged 12 and older to prevent against COVID-19. Patients who are very immunocompromised may not mount the same vaccine response as people with a healthy immune system, and hence may have reduced infection protection from the vaccine. The vaccine is given as two doses, 6 weeks apart.

- If feasible, for patients planned for, but not yet on cancer therapy, time the first dose of the vaccine to be at least 2 weeks prior to start of therapy, if that does not delay commencing therapy
- If feasible, for patients already on chemotherapy, time the first dose of vaccine in between chemotherapy cycles, and away from neutropenia
- If feasible, for patients completing chemotherapy, time the first dose of vaccine to be given after therapy is completed and neutropenia resolved
- Vaccination should be delayed for at least three months after stem cell transplantation or B cell depleting therapy such as Rituximab

## **PEG-Asparaginase allergy**

For patients with Acute Lymphoblastic Leukaemia (ALL) who are receiving treatment, or who have received treatment for ALL in the past, it should be noted that both the Pfizer and Moderna vaccines contain elements of a form of polyethylene glycol (PEG). In patients who have developed an allergic reaction to PEG-asparaginase during treatment, most are allergic to the asparaginase component of the chemotherapy. If the patient has a known PEG asparaginase anaphylaxis in the past the recommendation remains to vaccinate against COVID-19, but **must** proceed with caution. In this circumstance vaccines can only be given in larger vaccination centres or with close proximity to hospital. A **post-vaccination observation time of a minimum of 30 minutes** is needed.

For families: If you are unsure whether your child has an allergy to PEG-asparaginase, please speak to your Nurse Specialist or Oncologist. All of the patients that we have records of as having PEG allergy will be contacted directly shortly.

Please refer to the Ministry of Health website for information on the vaccine, or discuss with your Oncologist or Nurse Specialist if you have any questions.

Mark Winstanley
Paediatric Oncologist
Service Clinical Director,
Starship Blood and Cancer Centre

MALC

Amanda Lyver Paediatric Oncologist Clinical Director, CHOC Scott Macfarlane
Paediatric Oncologist
National Clinical Leader (Child Cancer),
National Child Cancer Network