

NCCN COVID-19 Vaccination Guide for People With Cancer

People with cancer—even many of those undergoing treatment—are at high risk for COVID-19 complications. So, don't wait to get vaccinated. Now's the time to . . .



- Don't wait to get the COVID-19 vaccine. Get it as soon as you can.
- Most patients receiving chemotherapy, targeted therapy, immunotherapy, or radiation should get vaccinated whenever they can.
- **Except ...** people receiving stem cell transplant or CAR T-cell therapy should wait at least 3 months after treatment to get vaccinated.
- Ask caregivers, family, and close contacts to get vaccinated, too.
- Keep wearing a mask and avoid crowds, even after getting vaccinated. Your close contacts should, too.
- Side effects of vaccination (like arm soreness and fatigue) appear to be similar for people with or without cancer.

Vaccines currently available for COVID-19

Pfizer/BioNTech

95% effective at preventing COVID-19 illness and symptoms. Prevents most major COVID-19 complications in non-cancer patients. Requires two shots spaced about 3 weeks apart.

Moderna

About 94% effective at preventing COVID-19 illness and symptoms. Prevents most major COVID-19 complications in non-cancer patients. Requires two shots spaced about 4 weeks apart.

Janssen/ Johnson & Johnson

About 72% effective against COVID-19 illness and symptoms, but more effective (about 85%) at preventing serious illness in non-cancer patients. Requires only one shot.

NCCN experts currently recommend that people receive any of the vaccines as soon as possible, rather than waiting for a particular vaccine. All three vaccines are safe, although researchers are currently investigating how well these vaccines work in people with cancer. People concerned about the very rare possibility of blood clots from the Janssen/Johnson & Johnson vaccine should get vaccinated with one of the other two vaccines, NCCN experts say.

People with cancer have a higher risk of getting seriously ill, being hospitalized, and dying from COVID-19. This is why it's so important that people with cancer get vaccinated against the virus.

Many people with cancer have a higher risk of serious COVID-19 illness because they're immunocompromised. Being immunocompromised means that the body's immune system is less able to fight illness and infection—including the virus that causes COVID-19. Immunosuppression stems from the cancer itself or as a side effect of cancer treatment. Some cancer survivors remain immunosuppressed after completing therapy.

People who are vaccinated are less likely to become sick with COVID-19, according to researchers. Also, vaccinated people who do get COVID-19 are much less likely to become seriously ill. Early data suggest that the vaccines may help prevent infection in the first place. However, more studies are needed before we can know how well the vaccines prevent transmission of the virus.

Should I get vaccinated if I have cancer?

YES. All people with cancer should get the COVID-19 vaccine. An expert panel of doctors from the National Comprehensive Cancer Network[®] (NCCN[®]) recommends that people with cancer get the COVID-19 shot as soon as possible. People with active cancer who are undergoing treatment, those about to be treated for cancer, and those who have been treated for cancer in the past 6 months should have priority for receiving vaccinations.

Those living in the same household as a person with cancer should be vaccinated as soon as they can, too. Any caregiver or other close contact of a person with cancer should get vaccinated as well. Make sure to speak up and ask others to "take their shot," too.

Should people with cancer wait to get the COVID-19 vaccine?

Most people with cancer should get the vaccine as soon as they can—with a few exceptions, NCCN experts say.

People in the process of receiving the following therapies should wait at least 3 months after they finish therapy to get vaccinated:

Stem cell transplant, either allogeneic or autologous stem cell transplant. People getting a stem cell transplant should delay vaccination.

Cellular therapy, such as CAR T-cell therapy or NK cell therapy. People who receive cellular therapy will have a much less effective immune system for weeks or even months after this therapy.

People with cancer who undergo major surgery should wait up to a couple of weeks to get vaccinated. This short gap helps doctors know whether any symptoms that occur are due to the surgery or to the vaccine.

People with certain forms of acute leukemia should wait a few weeks after receiving initial cancer treatment. Their impaired immune system needs to recover so that the vaccine can be effective. Imaging, such as a PET scan or an MRI, is another consideration. Imaging specialists have learned that COVID-19 vaccines, like other vaccines, may cause swollen lymph nodes. This can affect mammogram results. Therefore, imaging should be delayed by 4 to 6 weeks after vaccination, as long as the delay won't cause any harm.

It's unknown how chemotherapy affects the response to COVID-19 vaccines, but early data suggest immune responses aren't as strong. Still, experts emphasize that people receiving chemotherapy should get vaccinated whenever possible. People receiving other treatments—like immunotherapy or radiation—should also get vaccinated whenever they can.

Can I stop wearing a mask after getting vaccinated?

Keep wearing your mask. Many people with cancer have a harder time fighting infections and may not respond as well to vaccines. Early data suggest that immunization may not work as strongly in people with cancer as it does in the general population. So, people with cancer and their close contacts should get vaccinated and continue to follow the recommendations to prevent COVID-19. These include wearing masks, maintaining social distance, washing your hands, avoiding crowds, minimizing travel, and taking any other preventive measures.

Can the vaccine give me COVID-19?

NO. None of the currently available vaccines is made with a live virus, so the vaccine itself can't give you COVID-19.

In fact, by getting vaccinated as soon as possible, people who are immunocompromised are helping society prevent the spread of the virus and the worsening of illness. Without vaccination, immunocompromised people who get COVID-19 may be more likely to infect others because they "shed" the virus for prolonged periods of time after infection. Additionally, variants of the COVID-19 virus may be more likely to develop in people who are immunocompromised.

Are the vaccines' side effects worse for people with cancer?

Probably not. Early reports are encouraging, suggesting no difference in the vaccines' side effects in people with or without cancer. These can include arm soreness, rash, chills, fatigue, fever, headache, and, in rare cases, allergic reaction.

Don't let the side effects prevent you from getting vaccinated. Remember, the symptoms of COVID-19 can be much worse, and even fatal, compared with the relatively minor side effects of getting a shot.



Visit <u>NCCN.org/patients</u> for more resources, including FREE NCCN Guidelines for Patients[®] that can help people with cancer talk to their doctors about the best treatment options.

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