

COVID-19 AND CANCER

Covid-19 Booster Recommendations for Patients with Cancer

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TRANSCRIPT

Finally, discussing some data on boosters and the regimen with boosters, especially for patients with cancer. So, patients with cancer may be offered vaccination if the components of the vaccination are not contraindicated. As we discussed, patients undergoin g treatment may be offered vaccination, if, again, any components of the vaccine are not contraindicated. Strategies such as providing vaccines in between cycles of therapy and after appropriate waiting periods for patients, especially, as we discussed, again, in stem cell transplants and those with immunoglobulin treatments can be used to reduce the risk. Cancer survivors should be offered vaccination against COVID-19.

In terms of the recommendations for boosters, the CDC provided draft guidance, especially for patients who were labeled as immunocompromised which, most of the patients with cancer, would fall under that category; recommending an additional primary dose of vaccines for patients who are moderately or severely immunocompromised is recommended. And this additional primary dose is supplementary to and would precede the booster dose that is recommended for everyone who will receive primary vaccination regardless of their immune status.

Here, I just have a schematic discussing the same. So, patients who have received the Moderna dose one, dose two, and three, then essentially would get a booster dose, and then in at least four months get a second booster dose. Similarly, patients who received the Pfizer -BioNTech vaccine received the primary series, would be recommended to have a booster dose four, and then in at least four months have another booster dose five. For J&J, after the primary vaccine series, there would be an additional recommendation of two boosters. So, essentially every patient with cancer should have a primary series and most likely two boosters at this point.



Why are we recommending additional boosters? I think there is a good amount of data now coming out that it does increase the response, or serological response as we say, which is basically the number of antibodies in the blood against COVID-19 that can be found. So, here is a recent paper, actually, summarizing the responses and the efficacy. So, if we focus on the BNT162b2, which is a Pfizer BioNTech vaccine, after the primary series, the efficacy of primary series is only 62% to 72% in patients with cancer compared to, as we discussed before, 95% for most patients who are not immunocompromised.

And then when they receive boosters in two to four months or within six months, essentially, there is an increase in the serological response which has been demonstrated by numerous studies. And similarly, we can see for Maderna, the efficacy of the primary series was about 85% compared to 95% for most nonimmunocompromised individuals. And again when we are talking about giving boosters, we see that there is an increase in serological response.

So, I think at this time, it is pretty clear from the CDC guidance, as well as some of the data that's coming out in terms of the response from the boosters that every patient with cancer should receive a primary series as well as get one booster and then an additional booster, so a total of two boosters is recommended at this time.

Thank you so much for your attention. And if you have any questions, please feel free to reach out to me at my contact information here. Thank you, and I hope you enjoyed the talk.