

Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health

Clinical guidance on COVID-19 vaccination for people who are clinically extremely vulnerable (CEV)

This guidance is intended for healthcare providers and is based on known evidence as of September 20, 2024. These guidelines have been created to inform and guide clinical decision making for these patient populations.

To find specific information about vaccine efficacy, timing considerations, any contraindications or exceptions for people with the following medical conditions can be found on the BCCDC website (linked below):

Autoimmune diseases

- [Clinical Guidance on COVID-19 Vaccines for Persons with Autoimmune Rheumatic Diseases](#)
- [Clinical Guidance on COVID- 19 Vaccines for People with Autoimmune Neuromuscular Disorders Receiving Immunosuppressive/ Immunomodulating Therapy](#)

Cancers

- [Clinical Guidance on COVID-19 Vaccines for People with Solid Cancers](#)
- [Clinical Guidance on COVID-19 Vaccines for People with Hematological Malignancy](#)

Cystic Fibrosis

- [Clinical Guidance on COVID-19 Vaccines for People with Cystic Fibrosis](#)

Hematologic

- [Clinical Guidance on COVID- 19 Vaccines for People with Paroxysmal Nocturnal Hemoglobinuria \(PNH\) and Atypical Hemolytic Uremic Syndrome \(aHUS\)](#)
- [Clinical Guidance on COVID-19 Vaccines for People with Sickle Cell Disease](#)
- [Clinical Guidance on COVID-19 Vaccines for People with Thalassemia](#)
- [Clinical Guidance on COVID-19 Vaccines for People with Hematological Malignancy](#)

Inborn Errors of Metabolism

- [Clinical Guidance on COVID- 19 Vaccines for People with Metabolically Unstable Inborn Errors of Metabolism \(IEM\)](#)

Inflammatory Bowel Disease

- [Clinical Guidance on COVID- 19 Vaccines for Persons with Inflammatory Bowel Disease](#)

Kidney/Renal

- [Clinical Guidance on COVID-19 Vaccines for People with Kidney Disease](#)

Neuromuscular

- [COVID-19 Vaccines for People with Significant Neuromuscular Conditions Who Require Respiratory Support](#)
- [Clinical Guidance on COVID-19 Vaccines for People with Autoimmune Neuromuscular Disorders Receiving Immunosuppressive/ Immunomodulating Therapy](#)

Pregnant people with heart disease

- [COVID-19 Vaccines for Pregnant People with Heart Disease](#)

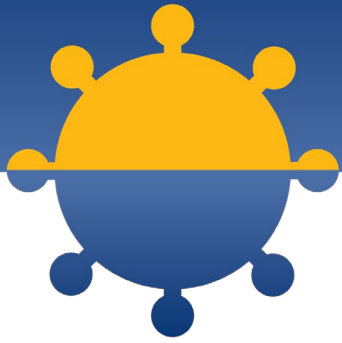
Splenectomy

- [Clinical Guidance on COVID-19 Vaccines for People with Splenectomy or Functional Asplenia](#)

Transplant

- [Clinical Guidance on COVID-19 Vaccines for Solid Organ Transplant Recipients](#)





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Background and Context

This guidance is based on a review of the vaccines approved by Health Canada, and available in B.C., for the prevention of COVID-19 disease caused by the SARS-CoV-2 virus:

- **mRNA vaccines:** SPIKEVAX® (Moderna)¹ and COMIRNATY® (Pfizer-BioNTech)²

Currently, anyone in British Columbia who is 6 months and older is eligible for COVID-19 immunization. The mRNA vaccine SPIKEVAX (Moderna) and COMIRNATY (Pfizer-BioNTech) have been approved for individuals 6 months of years of age and older, with young children getting a smaller dose of the same vaccine for youth and adults.³ For Fall 2024 both mRNA vaccines have been updated to target the Omicron KP.2 variant.

NUVAXOVID (Novavax) vaccine may be available as an alternative for individuals 12 years of age and older.⁴ NUVAXOVID is a different class of vaccination, a protein subunit vaccine, that provides another option for protection against COVID-19 for people aged 12 years and older.⁵ For Fall 2024 the NUVAXOVID vaccine has been updated to target the Omicron JN.1 variant. For the upcoming fall immunizations, BC is exploring all available avenues to secure a supply of the updated NUVAXOVID vaccine. If product does become available in BC, more information can be found in the [BC Immunization Manual](#).

Vaccination of individuals at higher risk for severe COVID-19 will help to reduce their risk of severe disease that could potentially result in hospitalization and death.⁶

Although the seasonality of SARS-CoV-2 has not been established, other respiratory viruses, such as influenza and respiratory syncytial virus (RSV), typically increase in the fall and winter months. COVID-19 vaccines may be given concurrently (i.e., same day) or at any time before or after non-COVID-19 vaccines (including live and non-live vaccines).⁶

Additional doses for immunocompromised individuals:

Research studies demonstrate that some people who are immunocompromised develop an improved antibody response after additional doses of vaccine.⁷ For unvaccinated individuals 5 years of age and older who are moderately to severely immunocompromised, NACI recommends one additional dose beyond the authorized 1-dose schedule for this age group (i.e., a total of 2 doses should be given). Additional doses above the authorized schedule are intended to improve the immune response.⁸ For individuals 5 years of age and older, although two doses can provide good protection, not all individuals with immunocompromising conditions will respond to vaccination in the same way and not all will have a previous SARS-CoV-2 infection in order to benefit from the immunological advantage of hybrid immunity. In some cases, an additional dose (i.e., a total of 3 doses for those 5 years of age and older) may be needed to develop adequate protection, while some others will not be able to mount a sufficient response even with additional doses. Healthcare providers can use clinical discretion to determine the potential benefit of a third dose on a case-by-case basis.⁸ New



recipients of haematopoietic stem cell transplantation (HSCT) or chimeric antigen receptor (CAR) T-cell therapy are considered immunologically naïve and should be vaccinated with 3 doses beginning at 3 to 6 months post-HSCT/CAR T-cell therapy, regardless of vaccination or infection history prior to transplant/therapy. NACI recommends the SPIKEVAX (Moderna) vaccine for children 6 months to 4 years of age.^{9,10} For individuals 6 months to 4 years of age who are moderately to severely immunocompromised, NACI recommends one additional dose beyond the authorized 2-dose schedule for SPIKEVAX (Moderna) vaccine for this age group (i.e., a total of 3 doses should be given). This additional dose is necessary because these young children are less likely to have developed hybrid immunity compared to those aged 5 years and older.⁸

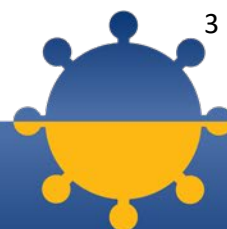
For BC recommendations for dose and schedule from the previous COVID-19 vaccine dose or known SARS-CoV-2 infection, please visit the COVID-19 vaccine product pages found in the BC Immunization Manual, [Part 4: Biological Products \(Vaccines & Immune Globulins\)](#).¹¹

Fall 2024 vaccine recommendations:

NACI recommends a dose of the most recently updated COVID-19 vaccine during the Fall of 2024 for previously vaccinated and unvaccinated individuals at high risk of COVID-19 infection or severe illness.⁸ Aligned with those recommendations, BC recommends the following people consider receiving an additional dose, per the information found on in the BCCDC Immunization Manual, [Part 4: Biological Products \(Vaccines & Immune Globulins\)](#) - COVID-19 Vaccine Eligibility page:

- Adults 65 years of age and older,
- Those 6 months of age and older who are:
 - Residents of long-term care homes, assisted living facilities, or alternate level of care clients awaiting placement in long-term care
 - Individuals with underlying medical conditions that place them at higher risk of severe COVID-19, including children with complex health needs
 - There is limited evidence on clinical risk factors for severe COVID-19 disease in pediatric populations. Children at increased risk for severe outcomes may include children who are medically fragile/have medical complexities, children with more than one comorbidity, children with neurological disorders, children with chronic lung disease, and children with Down syndrome (Trisomy 21), and other immunocompromising conditions
 - Individuals who are pregnant
 - Indigenous peoples and individuals residing in Indigenous communities within BC. Note: Indigenous peoples (including First Nations, Métis and Inuit) may be disproportionately affected by COVID-19 because of longstanding inequities related to the social determinants of health due to the impacts of colonization. Individuals residing in communities experiencing inequities may be disproportionately affected due to intersecting equity factors.
 - People who provide essential community services i.e., healthcare workers and first responders

For previously vaccinated individuals, the recommended interval for the Fall 2024 dose is 6 months from the last dose, and the minimum interval is 3 months from the last dose.⁸



Patients who have tested positive for COVID-19:

Accumulating evidence shows that those with hybrid immunity (i.e., a history of at least two doses of COVID-19 AND a prior COVID-19 infection) are well-protected against severe outcomes of hospitalization and death. Additional doses may be deferred in those who have tested positive for COVID-19 until 3-6 months from symptom onset or, for asymptomatic cases, from the time of the positive test.¹² This suggested interval is based on immunological principles and expert opinion. When considering whether to administer vaccine doses following the suggested 6-month interval, biological and social risk factors for exposure (e.g., local epidemiology, circulation of VOCs, living settings) and severe disease should also be considered. Clinical discretion is advised as these intervals are to be used as a guide.

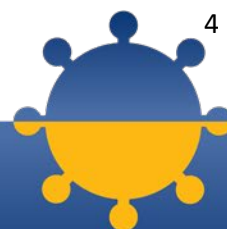
COVID-19 vaccine may be offered to individuals at any time following recovery from SARS-CoV-2 infection.

Intervals between doses in the primary series:

The recommended interval between doses for unvaccinated individuals who are moderately to severely immunocompromised is 8 weeks, with a minimum interval of 4 weeks.⁸

References

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3. B.C. Centre for Disease Control. Children and COVID-19 Vaccination. Information on COVID-19 vaccination for children and young people. September 16, 2022. Available at: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/covid-19-vaccine/vaccines-children> Accessed 11 October 2022.
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5. National Advisory Committee on Immunization (NACI): Updated guidance on the use of protein subunit COVID-19 vaccine (Novavax Nuvaxovid). March 8, 2024. <https://www.canada.ca/content/dam/phac-aspc/documents/services/publications/vaccines-immunization-national-advisory-committee-immunization-summary-updated-guidance-use-protein-subunit-covid-19-vaccine-novavax-nuvaxovid/naci-summary-2024-03-08.pdf> Accessed 11 March 2024.
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8. National Advisory Committee on Immunization (NACI): Guidance on the use of COVID-19 vaccines during the fall of 2024. May 3, 2024. <https://www.canada.ca/en/public-health/services/publications/vaccines->



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9. National Advisory Committee on Immunization. Recommendation on the use of the Pfizer-BioNTech COVID-19 vaccine (10 mcg) in children 5-11 years of age. 19 November 2021. Available at: <https://www.canada.ca/content/dam/phac-aspc/documents/services/immunization/national-advisory-committee-on-immunization-naci/recommendations-use-covid-19-vaccines/pfizer-biontech-10-mcg-children-5-11-years-age/pfizer-biontech-10-mcg-children-5-11-years-age.pdf> Accessed 24 November 2021.
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Authors

Clinically Extremely Vulnerable Populations Task Force

