

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 28, 2023. 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](#)

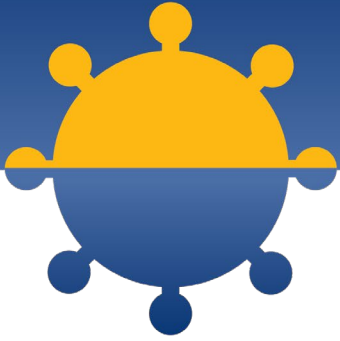
Splenectomy

- [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:** tozinameran (COMIRNATY, Pfizer-BioNTech),¹ tozinameran and famtozinameran (COMIRNATY Bivalent original & BA.4/BA.5),² elasomeran (SPIKEVAX, Moderna),³ elasomeran and imelasomeran (SPIKEVAX Bivalent original & BA.4/5, Moderna)⁴
- **Recombinant protein vaccine:** COVID-19 Vaccine (recombinant protein, adjuvanted) (NUVAXOVID, Novavax)⁵

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 children 6 months to 11 years of age, with young children getting a smaller dose of the same vaccine for youth and adults.⁶ The National Advisory Committee on Immunization (NACI) has released their statements for these age groups.^{7,8,9}

People who receive the mRNA vaccine (COMIRNATY [Pfizer-BioNTech] or SPIKEVAX [Moderna]) for their first dose will be offered either mRNA vaccine for subsequent doses, with the exception of preferential recommendations based on age and immunosuppression.¹⁰ NACI concludes that bivalent Omicron-containing vaccines can be used for the primary series.¹¹ 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.¹² For those who are not able, or willing, to receive mRNA vaccines, Novavax vaccine is available as an alternative for individuals 12 years of age and older.⁵

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).¹²

Third doses as part of primary vaccine series:

Research studies demonstrate that some people who are immunocompromised develop an improved antibody response after a third dose of vaccine.¹³ Therefore, moderately to severely immunocompromised people in B.C. are eligible to receive a third dose of an mRNA COVID-19 vaccine as part of their primary vaccine series. NACI recommends the SPIKEVAX (Moderna) for children 6 months to 4 years of age.^{8,14} A minimum interval of 28 days between dose 2 and dose 3 is recommended for those eligible for a third dose. As per the B.C. Immunization Manual, SPIKEVAX (Moderna) is preferred for individuals who are moderately to severely immunocompromised, but if it is unavailable (or if the individual prefers), COMIRNATY (Pfizer-BioNTech) may be provided.¹⁵

If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.



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Specifics on current eligibility for a third dose may be reviewed here: <https://www2.gov.bc.ca/gov/content/covid-19/vaccine/plan#clinically-vulnerable>

Additional doses:

Beginning in October 2023, for those previously vaccinated against COVID-19, NACI recommends a dose of the new formulation of COVID-19 vaccine for individuals in the authorized age group. 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 XBB.1.5 product page under '[Special Considerations](#)'.¹⁶ Vaccine dose formulations have been updated to target more recent, immune-evasive SARS-CoV-2 variants. Individuals vaccinated with the updated formulation are expected to benefit from a better immune response against these variants compared to current vaccines.¹²

At least one COVID-19 XBB.1.5 mRNA vaccine is recommended for everyone 6 months of age and older. It is particularly recommended for those at increased risk of COVID-19 infection or severe disease, including¹⁷:

- People 65 years of age and older
- Indigenous peoples 55 years of age and older
- Residents of long-term care homes and other congregate living settings for older adults
- Individuals with underlying medical conditions that place them at higher risk of severe COVID-19
- Individuals who are pregnant
- Individuals residing in Indigenous communities
- Healthcare workers
- First responders: police, fire fighters, ambulance

Previously NACI has recommended that at least one booster dose¹⁸ should be offered to all adults 18 years of age and over, and adolescents 12 to 17 years of age who are at increased risk of severe illness, along with additional specific population recommendations in the [fall of 2022](#)¹⁸ and [spring of 2023](#)¹⁹.

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. Booster 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.²⁰ This suggested interval is based on immunological principles and expert opinion. When considering whether or not 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 minimum interval between completion of the primary series, or a prior booster dose, is 8 weeks for immunocompromised individuals. For optimal response, the recommended interval should be observed.¹⁶



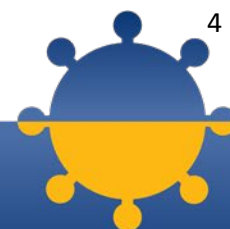
Other vaccines:

NUVAXOVID (Novavax)⁵

NUVAXOVID⁵ is a different class of vaccination, a protein subunit vaccine, that will give British Columbians another option to protect themselves against COVID-19. NUVAXOVID may be offered to individuals for whom COVID-19 mRNA vaccines are contraindicated or have been refused. This vaccine is available to people aged 12 years and older.²¹ It is a two-dose vaccine, and a limited number of doses is available in B.C.²²

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Authors

Clinically Extremely Vulnerable Populations Task Force

