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COVID-19 vaccination Invitations for:

- § Immunocompromised patients aged 12 years and over
- § Household contacts aged 12-15 years of patients who are immunocompromised

Dear Patient

Further to the text message that we sent to you earlier this week, we apologise for any confusion that this may have caused. Due to the complex nature of the immunosuppression criteria, the text was sent to a wider group of patients who may or may not have qualified for a third dose. Please see the following pages for further information as to whether you qualify for a third dose.

- § Immunocompromised patients aged 12 years and over Will need 3 doses of vaccine (given 8 weeks apart) followed by a booster (4th dose - given 3 months after 3rd dose).
- **S** Household contacts aged 12-15 years of those who are immunocompromised Are now eligible to receive the COVID-19 vaccination.

Household contacts of those who are immunocompromised aged 12-15 years will need 2 doses of vaccine, given 8 weeks apart, followed by a booster dose (given 3 months after 2nd dose).

Please see Covid-19 vaccination leaflet for children and young people at:

https://www.thenortholmepractice.co.uk/pages/Covid-19-Vaccination

Please ask any household contacts along with yourself to contact the surgery to book an appointment / or to be placed on the appointment waiting list.

You or your household contacts should not attend a vaccine appointment if you / they are self-isolating or waiting for a COVID-19 test. Ideally you should wait at least 4 weeks after having a positive COVID-19 test.

Yours sincerely

Drs, Chin, Ross, Cameron, Howes, Santhanam & Malone

Immunocompromised

Criteria that means patients are classed as immunocompromised (in the cv19 vaccination program)

These are patients that have a significantly reduced immune system due to a medical condition or medication (immunocompromised).

The NHS has strict rules for who is eligible to be defined as immunocompromised, when it refers to the covid 19 immunisation program.

The patients that it defines as immunocompromised need a slightly different immunisation regime.

Most patients have 2 doses of injection (8 weeks apart) to complete the primary course and then a booster 3 months later.

Immunocompromised patients need 3 doses (8 weeks apart) and then a booster after 3 months.

Medical conditions that mean patients are classed as immunocompromised.

acute and chronic leukaemia, lymphoma who were under treatment or within 12 months of achieving cure at the time of vaccination.

Patients under follow up for c chronic lymphoproliferative disorder including cancer (for example lymphoma, chronic lymphoid leukaemia, myeloma, Walderstroms macroglobulinemia. This list is not exhaustive).

Anyone over 12 with HIV/AIDS with a current CD4 count of under 200.

Primary or acquired cellular combined immune deficiencies (those with low lymphocytes or functional lymphocyte disorder).

Stem cell transplant in the 24 months before vaccination.

Those with stem cell transplant over 24 months before vaccination but had ongoing immunosuppression or graft vs host disease.

Persistent agammaglobulinemia (IgG under 3) due to primary immunodeficiency or secondary to disease/medication.

Medication that means patients are classed as immunocompromised.

Patients on immunosuppressant therapy for solid organ transplant at the time of vaccination.

Those who were receiving or had received in the last 3 months target therapy for autoimmune disease (JAK inhibitors, biologic immune modulators including Rituximab, T-cell co-stimulation modulators, anti-TNF, soluble TNF receptors, interleukin receptor inhibitors.

Those who were receiving (or had received in the last 6 months) immunosuppressive chemotherapy or radiotherapy at the time of vaccination.

Patient that had received high dose steroids (over 40mg a day for over 7 days) for any reason in the month prior to vaccination.

Patients that had received at the time of vaccination:

- High dose steroids (20mg or more prednisolone a day) for more than 10 days in the month before the vaccination
- Long term steroids (10mg or more a day) for more than 4 weeks in the 3 months prior to vaccination
- Methotrexate over 20mg a week oral or subcutaneous injection in the 3 months prior to vaccination
- Azathioprine more than 0.3mg/kg per day in the 3 months prior to vaccination
- 6-meracptopurine more than 1.5mg/kg per day in the 3 months prior to vaccination
- Mycophenolate more than 1g per day in the 3 months prior to vaccination

Certain combination therapies at doses lower than above if taken in combination with other medications that reduce immune system (e.g. over 7.5mg prednisolone a day with another immunosuppressive medication (but not hydroxychloroquine or Sulphasalazine), any dose methotrexate with Leflunomide) in the 3 months prior to vaccination.