# FIRST DOSE COVID VACCINATION - GUIDANCE FOR MANAGING ADULT PATIENTS WHO HAVE A HISTORY OF ALLERGIC REACTIONS



#### PATIENT CHARACTERISTICS

Previous allergic reaction (including anaphylaxis¹) to a food, insect sting and most medicines (where trigger has been identified)

Family history of allergies

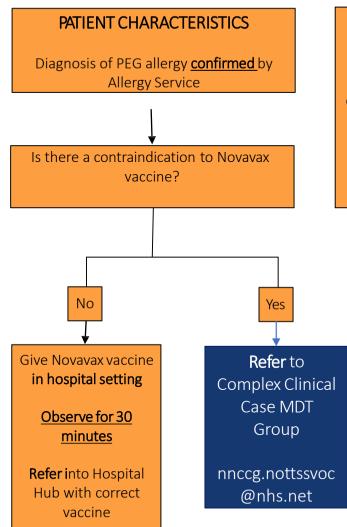
Previous <u>non-systemic reaction</u> to a

Hypersensitivity to non-steroidal antiinflammatory drugs e.g. aspirin, ibuprofen

Chronic Spontaneous / Idiopathic
Urticaria

Proceed with vaccination as normal. See Green Book Guidelines.

Observe for 15 mins



## PATIENT CHARACTERISTICS

History of immediate anaphylaxis¹ to multiple drug classes (not vaccines/biologics) or anaphylaxis suspected due to PEG containing medication History of unexplained anaphylaxis or mastocytosis

#### PATIENT CHARACTERISTICS

History of immediate anaphylaxis¹ to non-COVID vaccine or biologics e.g. Infliximab, adalimumab, tocilizumab, secukinumab, ustekinumab. anakinra

**Refer** to NUH Allergy triage for advice on COVID vaccination

nuhnt.nuhvaccine@nhs.net

### SYMPTOMS OF ANAPHYLAXIS<sup>1</sup>

- sudden onset and rapid progression of symptoms
- life-threatening airway and/or breathing and/or circulation problems
- skin and/or mucosal changes (flushing, urticaria, angioedema) with features above
- there can also be gastrointestinal symptoms (e.g. vomiting, abdominal pain, incontinence)







#### **REFERENCES**

1. Green Book, V4\_0, Chapter 8- Vaccine safety and the management of adverse events following immunisation, p58

Anaphylaxis is likely when all of the following three criteria are met:

- sudden onset and rapid progression of symptoms
- <u>life-threatening</u> airway and/or breathing and/or circulation problems
- skin and/or mucosal changes (flushing, urticaria, angioedema).

#### THE FOLLOWING SUPPORTS THE DIAGNOSIS:

exposure to a known allergen where the patient is already known to be allergic.

#### **REMEMBER:**

- skin or mucosal changes alone are not a sign of an anaphylactic reaction
- skin and mucosal changes can be subtle or absent in up to 20% of reactions (some patients can have only a decrease in blood pressure, i.e. a circulation problem)
- There can also be gastrointestinal symptoms (e.g. vomiting, abdominal pain, incontinence)
- •. Most anaphylactic reactions occur in individuals who have no known risk factors.

#### **REFERRALS:**

- NUH Allergy referral form available on Nottinghamshire APC website; send to nuhnt.nuhvaccine@nhs.net
- NUH Hospital Hub and SFHFT KMH Hospital Hub for vaccination in hospital settings & alternative vaccines with <u>confirmed</u> NUH Allergy advice.
- Complex Cases MDT Group referrals to be sent to nnccg.nottssvoc@nhs.net

## **ACKNOWLEDGEMENT**

Extension to flowchart devised by BSACI and published in the Green Book Chapter 14a COVID-19 - SARS-COV-2



