

THIRD PRIMARY or any BOOSTER DOSE COVID VACCINATION - GUIDANCE FOR MANAGING ADULT PATIENTS WHO HAVE A HISTORY OF ALLERGIC REACTIONS

Has the patient had a previous Comirnaty / Spikevax (mRNA) vaccine?

Yes

Allergic reaction to Comirnaty /Spikevax?

No

Proceed with vaccination

Yes

PATIENT CHARACTERISTICS

Symptoms of anaphylaxis¹ within 2 hours of previous Comirnaty/ Spikevax vaccination

PATIENT CHARACTERISTICS

Immediate Non-anaphylactic or delayed (>2 hours) symptoms to vaccination

Reaction to last dose?

Give Comirnaty/Spikevax vaccine **in hospital setting**
Pre-dose with non-sedating antihistamine* and check baseline observations
Observe for 60 mins

Tolerated last dose of Comirnaty / Spikevax

Give Comirnaty/Spikevax vaccine **in any setting**
Pre-dose with non-sedating antihistamine* and check baseline observations
Observe for 30 mins

PATIENT CHARACTERISTICS

History of immediate anaphylaxis¹ to multiple drugs, a vaccine or idiopathic anaphylaxis or anaphylaxis suspected due to PEG containing medication or mastocytosis

Refer to NUH Allergy triage for advice on COVID vaccination
nuhnt.nuhvaccine@nhs.net

PATIENT CHARACTERISTICS

Diagnosis of PEG allergy **confirmed by Allergy Service**

Is there a contraindication to Novavax vaccine?

No

Refer for Novavax vaccine - **hospital hub sites**
Patients will need to be consented by onsite prescriber, for individual risk based discussion.
Observe for 30 minutes

Yes

SYMPTOMS OF ANAPHYLAXIS¹

- 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)

PATIENT CHARACTERISTICS

Previous allergic reaction (including anaphylaxis¹) to a food, insect sting and most medicines

Family history of allergies

Previous Non- Systemic reaction to non COVID vaccine

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

Chronic Spontaneous / Idiopathic Urticaria (CSU)

Proceed with Comirnaty/Spikevax vaccination **in any setting**. See Green Book guidelines.
Observe for 15 minutes
CSU patients can pre-dose with non-sedating antihistamine*

* Suggested adult pretreatment regimen:
Cetirizine 20mg 30mins prior to vaccine then continue Cetirizine 10mg BD for 3 days or longer if required (NB: off label dose)
Reactions may occur despite pre-medication

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
- life-threatening 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 **confirmed** NUH Allergy advice.

ACKNOWLEDGEMENT

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