

-Covid-19 – impact in cancer patients session-

COVID-19 vaccination in cancer patients (C Bardin)

Immunocompromised persons ICPs, including cancer patients (with active immunosuppressive treatment) often fail to mount an adequate response to a primary series of COVID-19 vaccine, as reflected by lower protective immune response rates and vaccine effectiveness, leaving them more susceptible to COVID-19. And if infected, ICPs are more likely to become severely ill from COVID-19 than non-ICPs.

Overall, the current evidence suggests **that an additional dose** increases the immune response rate of the primary vaccination series in ICPs (third dose of mRNA vaccine) at an interval of 1–3 months after a homologous primary vaccination series. This includes induction of an antibody response in a portion (typically 25–50%) of individuals (with high variability depending of patient groups) with a low or undetectable antibody response after the standard primary vaccination series.

Booster doses after primary vaccination (2 or 3 doses) in cancer patients resulted in a significant increase in patients with neutralizing Ab titres against omicron variants. Immune responses following third COVID-19 vaccination are reduced in patients with hematological malignancies especially those on B-cell-depleting therapies compared to patients with solid cancer.

Early treatment with neutralising monoclonal antibodies or antivirals might be beneficial to these patients.