

# COVID Vaccination Support Bulletin

**Issued to:**

**Staff delivering COVID-19 Vaccination Programme**

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## Introduction

Welcome to this edition of the COVID-19 Vaccination Programme Bulletin. In this edition we provide a key practice points update on asplenia/splenic dysfunction and why this isn't in the eligibility criteria for the Spring Booster campaign. We also give updates on the new expiry date for Comirnaty 30 micrograms/dose and advice on disposal of expired vaccination to minimise risk.

If there are any other topics you would like to see an extended update on in the next edition, then please do let the team know using the email contacts at the end of the bulletin.

**Dr Vijay Rawal**

**Regional Medical Director for Primary Care (including Public Health  
Commissioning)**

**NHS England and NHS Improvement- Midlands**

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## CARS best practice tips: throw it out!

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Please do not quarantine or store expired vaccine on site - it should be disposed of in your usual manner. CARS has received multiple reports of expired vaccine used accidentally: reduce the risk by removing it from the cold chain and disposing of it as soon as it has expired.

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## Withdrawal of fractionated dose of Comirnaty 30micrograms/dose for at risk children

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As there is now a good supply of **Comirnaty 10micrograms/dose** in the programme it is no longer necessary to given under 12's fractionated doses of **Comirnaty 30micrograms/dose**.

**In addition- giving those over the age of 12 two or three doses of Comirnaty 10micrograms/dose in place of the correct vaccine is NOT ACCEPTABLE PRACTICE.**

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## Comirnaty 30 micrograms/dose extension

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The recent NVOC update contained information that the manufacturer has data that **Comirnaty 30micrograms/dose** remains safe for longer than was initially anticipated- so **the FROZEN expiry** will be extended to twelve months. This is the date on the vial.

The important detail to note with this is that all extended vials will start to arrive at sites from June 6th, 2022 and the date on the outer packaging **will already be altered**. Sites should refer to this date, rather than the date on the vial. Sites should not alter any dates themselves and should there be any concerns or queries please contact CARS for assistance.

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## Booster trial patients now eligible for formal booster

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Information will be released soon to support vaccination sites with the arrival of patients who have participated in a booster dose trial. The patients will be attending sites with a letter that will allow overriding of the flag on Pinnacle that prevents trial participants from being eligible.

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## Spring booster update

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### Asplenia and splenic dysfunction

**Q.** Are individuals with asplenia/ splenic dysfunction eligible for a 3rd primary dose and/or a spring booster?

**A.** No. Individuals without a spleen, or who have any degree of splenic dysfunction, are not routinely\* eligible for either a 3rd primary dose or a spring booster (unless one or more other eligibility criteria apply).

They are eligible for a 2-dose primary course and routine booster BUT they are not usually\* immunosuppressed so don't need the additional doses offered to people who are.

#### Why they don't usually\* need a 3<sup>rd</sup> primary dose

The purpose of the 3rd primary dose is to optimise the initial immunological response, which is likely to have been sub-optimal in anyone who was immunosuppressed at the time of receiving primary dose 1 and/or 2.

Individuals with asplenia or splenic dysfunction can make normal responses to vaccines – so this doesn't generally\* apply to them.

#### If they are not classed\* as immunosuppressed, what are their risks?

They are at increased risk from certain diseases (those caused by encapsulated bacteria – principally meningococcal and pneumococcal disease). They are offered additional vaccines against these diseases, and an annual flu vaccine and COVID-19 vaccines – because of the risk of a secondary bacterial pneumonia if they become ill with flu or COVID-19.

#### What about sickle-cell disease?

Sickle-cell anaemia is a known cause of splenic dysfunction. There is some evidence that children with sickle-cell disease do badly if they have COVID-19 infection, and so it is important they are vaccinated - but not they are not classed\* as immunosuppressed.

In summary, individuals with asplenia or splenic dysfunction (including sickle-cell disease) are not eligible for 3rd primaries or spring booster doses on this basis alone, but:

\*there are individuals in whom the underlying reason for their splenic dysfunction, or the treatment received for this or for another reason, may make them immunosuppressed. The advice of their specialist may need to be sought and they should be considered for vaccination on a case by case basis.

Note: for the above reasons, household contacts of individuals with asplenia or splenic dysfunction are not therefore routinely\* covered by the 'household contacts of an individual with immunosuppression' criteria – because they are not usually\* immunosuppressed!

## Contact us

If you would like to contribute to future bulletins and have any insights to share, please contact us at:

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**Clinical Advice Response Service (CARS):** send an email to [england.midscovid19vacs.pmo2@nhs.net](mailto:england.midscovid19vacs.pmo2@nhs.net) marked 'for the attention of CARS'

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