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## COVID-19 Vaccine: Update #50

### Eligibility for Third and Fourth Doses, Preferential Moderna Recommendation in Older and Immunocompromised and Updated Guidance on Immunization Following Myocarditis/Pericarditis Post-mRNA Vaccination

**Attention:** Physicians, Emergency Departments, Hospital CEOs, Hospital Laboratories, Infection Control Practitioners, Occupational Health Practitioners, Walk-In Clinics/Urgent Care Clinics, Nurse and Nurse Practitioners, EMS, Designated Officers, Midwives, Family Health Teams, Pharmacies, Central LHIN, NSM LHIN, Beausoleil First Nation, Moose Deer Point First Nation, Rama First Nation, Wahta First Nation, Long-term Care Homes, Retirement Homes, Hospices, Coroners, Funeral Directors, Dentists, Group Homes, Homes for Special Care, Optometrists, Corrections, Municipalities, Licensed Child Care Providers

**Date:** January 19, 2022

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All Simcoe Muskoka District Health Unit community COVID-19 vaccination clinics **are now accepting walk-ins for anyone age 5+** for any dose they are currently eligible for.

#### Clarification on Eligibility for Third and Fourth Doses

The provincial eligibility for third and fourth doses has been updated to reflect recent recommendations of the National Advisory Committee on Immunization (NACI) and the Ontario Immunization Advisory Committee (OIAC). Those currently eligible for a fourth dose in Ontario include:

- All residents of a Long Term Care home (LTCH), Retirement home (Rhome), Elder Care Lodge or other seniors congregate living setting
- Anyone 18+ who is severely or moderately immunocompromised (refer to table below)

Residents of other congregate settings (i.e. group homes, shelters) are not currently eligible for fourth doses.

Those who are severely or moderately immunocompromised who are attending a community clinic to receive their fourth dose will need to bring documentation from their treating physician noting eligibility or their prescription if they are taking an eligible immunosuppressing medication. This can include referral letter or documentation used for COVID-19 vaccination dose three.

Re-vaccination with a new COVID-19 vaccine primary series is recommended post-transplantation for hematopoietic stem cell transplant (HSCT), hematopoietic cell transplants (HCT) (autologous or



allogeneic), and recipients of CAR-T-cell therapy given the loss of immunity following therapy or transplant. Optimal timing for re-immunization should be determined in consultation with the client’s specialist, and the client needs to provide written documentation from their specialist to clinic staff.

**Preferential Moderna Recommendation for Booster Doses for Older Adults & Immunocompromised**

The provincial [COVID-19 Vaccine Third Dose Recommendations](#) guidance document was updated to **preferentially recommend Moderna vaccine (0.5 ml) for third doses** (& fourth doses for those eligible) for the following based on emerging data that Moderna provides a more robust humoral and cellular immune response:

- Those 70+
- Residents of a LTCH, Rhome, Elder Care Lodge and other seniors congregate setting
- Anyone 30+ who is moderately or severely immunocompromised

The following table provides an overview of third & fourth dose eligibility for those who are severely or moderately immunocompromised incorporating this preferential Moderna recommendation:

Those who are on the <b>severely or moderately immunocompromised</b>	Age group	Vaccine and Dosage	Third dose to extend primary series	Fourth dose Booster
<ul style="list-style-type: none"> <li>• receiving dialysis (hemodialysis or peritoneal dialysis)</li> <li>• receiving active treatment (e.g., chemotherapy, targeted therapies, immunotherapy) for solid tumour or hematologic malignancies</li> <li>• Recipients of solid-organ transplant and taking immunosuppressive therapy</li> <li>• Recipients of chimeric antigen receptor (CAR)-T-cell therapy or hematopoietic stem cell transplant (within 2 years of transplantation or taking immunosuppression therapy)</li> <li>• Individuals with moderate to severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome)</li> <li>• Individuals with stage 3 or advanced untreated HIV infection and those with acquired immunodeficiency syndrome</li> <li>• Individuals receiving active treatment with the specific immunosuppressive therapies</li> </ul>	5 through 11 years old	Pediatric Pfizer 0.2 ml	Yes – 8 weeks after 2 <sup>nd</sup> dose	<b>No</b>
	12 through 17 years old	Pfizer 0.3 ml	Yes – 8 weeks after 2 <sup>nd</sup> dose	<b>No</b>
	18 through 29 years old	Pfizer 0.3 ml	Yes – 8 weeks after 2 <sup>nd</sup> dose	Yes – 3 months after 3 <sup>rd</sup> dose
	30+	Preferentially to receive Moderna 0.5 ml Data suggest that Moderna provides a more robust humoral and cellular immune response.  Can receive Pfizer if no Moderna available 0.3 ml	Yes – 8 weeks after 2 <sup>nd</sup> dose	Yes – 3 months after 3 <sup>rd</sup> dose

## **Updated Guidance on Immunization Following Myocarditis/Pericarditis Post-mRNA Vaccination**

As per [recent recommendation](#) of the NACI, for those who have developed myocarditis or pericarditis in the 6 weeks following vaccination with an mRNA vaccine:

### NACI continues to recommend that:

In most circumstances, and as a precautionary measure until more information is available, further doses of mRNA COVID-19 vaccines should be deferred among people who experienced myocarditis (with or without pericarditis) within 6 weeks of receiving a previous dose of an mRNA COVID-19 vaccine. This includes any person who had an abnormal cardiac investigation including electrocardiogram (ECG), elevated troponins, echocardiogram or cardiac MRI after a dose of an mRNA vaccine.

### NACI now recommends that:

Those with a history compatible with pericarditis and who either had no cardiac workup or had normal cardiac investigations, can receive the next dose once they are symptom free and at least 90 days has passed since vaccination.

Some people with confirmed myocarditis (with or without pericarditis) after a dose of an mRNA COVID-19 vaccine may choose to receive another dose of vaccine after discussing the risks and benefits with their healthcare provider. If another dose of vaccine is offered, they should be offered the Pfizer-BioNTech 30 mcg vaccine due to the lower reported rate of myocarditis and/or pericarditis following the Pfizer-BioNTech 30 mcg vaccine compared to the Moderna 100 mcg vaccine. Informed consent should include discussion about the unknown risk of recurrence of myocarditis and/or pericarditis following receipt of additional doses of Pfizer-BioNTech COVID-19 vaccine in individuals with a history of confirmed myocarditis and/or pericarditis after a previous dose of mRNA COVID-19 vaccine, as well as the need to seek immediate medical assessment and care should symptoms develop. For these individuals, if they are seeking vaccination at a community clinic they will be required to show documentation from their treating physician supporting revaccination.

## **Encouraging Pregnant Women to Receive Boosters**

With the continued spread of COVID-19 and the Omicron variant in the community, the Chief Medical Officer of Health strongly encourages individuals who are pregnant receive their booster at least 3 months from their second dose to help limit their risk for severe illness impacting the pregnant individual and their fetus, if infected with COVID-19.

Studies of hundreds of thousands of pregnant people who have received COVID-19 vaccines show it is safe and helps prevent COVID-19 and protect against severe illness. Studies also suggest the antibodies developed following vaccination will pass on to the baby, which may provide protection after birth.

Additional information and resources on COVID-19 vaccines in pregnancy is available on [the health unit website](#) and the [Government of Ontario](#) website.

## **Additional COVID-19 Vaccine Information**

For more information about the rollout of COVID-19 vaccine in our area, please refer to the SMDHU [COVID-19 Vaccine and Immunization](#) webpages.

There are a number of COVID-19 resources and documents available through our Health Professional Portal at [www.smdhu.org/hpportal](http://www.smdhu.org/hpportal) as well as through [Public Health Ontario](#) and the [Government of Ontario](#).