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COVID-19 Vaccine administration guidance

COVID-19 vaccine for the general population

The Centers for Disease Control and Prevention's (CDC's) Advisory Committee on Immunization Practices (ACIP) recommended the m-RNA based COVID vaccine for people ages 16 and older. [COVID 19 vaccine facts](#).

COVID-19 vaccine for patients on immunomodulatory agents

The CDC advises that immunocompromised individuals may receive COVID-19 vaccination if they have no **contraindications*** to vaccination. Currently, there are no data to establish the safety and efficacy of mRNA based COVID vaccines in patients taking immunosuppressive agents, including the systemic drugs and biologic agents used in dermatology. "The CDC does not consider COVID-19 vaccine to be contraindicated in persons taking biologic or traditional immunosuppressive medications, hedgehog pathway inhibitors, and PD1 inhibitors."¹ Therefore CDC suggests that patients should be counseled about the unknown vaccine safety profile and effectiveness in immunocompromised populations, as well as the potential for reduced immune responses and the need to continue to follow all [CDC current guidance](#) to protect themselves against COVID-19.

To access CDC interim considerations to the use of m-RNA COVID vaccine review the link [Interim clinical consideration to use m-RNA COVID vaccine](#)

CDC also recommends not to do antibody testing to assess for immunity to COVID-19 following mRNA COVID-19 vaccination. Shared decision making should be made between the patients and clinicians to guide discussions about the use of oral-systemic and biologic agents during the pandemic. To review the Academy's guidance on the use of immunosuppressive agents during the pandemic review [Guidance on the use of immunosuppressive agents](#).

¹ Based on personal communication with Sarah Schillie from the CDC Clinical Inquiries Team 01/15/2021

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***Contraindications**

	MAY PROCEED WITH VACCINATION	PRECAUTION TO VACCINATION	CONTRAINDICATION TO VACCINATION
CONDITIONS	<p>CONDITIONS</p> <ul style="list-style-type: none"> Immunocompromising conditions Pregnancy Lactation <p>ACTIONS</p> <ul style="list-style-type: none"> Additional information provided* 15 minute observation period 	<p>CONDITIONS</p> <ul style="list-style-type: none"> Moderate/severe acute illness <p>ACTIONS</p> <ul style="list-style-type: none"> Risk assessment Potential deferral of vaccination 15-minute observation period if vaccinated 	<p>CONDITIONS</p> <ul style="list-style-type: none"> None <p>ACTIONS</p> <ul style="list-style-type: none"> N/A
ALLERGIES	<p>ALLERGIES</p> <p>History of allergies that are unrelated to components of an mRNA COVID-19 vaccine[†], other vaccines, injectable therapies, or polysorbate, such as:</p> <ul style="list-style-type: none"> Allergy to oral medications (including the oral equivalent of an injectable medication) History of food, pet, insect, venom, environmental, latex, etc., allergies Family history of allergies <p>ACTIONS</p> <ul style="list-style-type: none"> 30-minute observation period: Persons with a history of anaphylaxis (due to any cause) 15-minute observation period: All other persons 	<p>ALLERGIES</p> <ul style="list-style-type: none"> History of any immediate allergic reaction* to vaccines or injectable therapies (except those related to component of mRNA COVID-19 vaccines[†] or polysorbate, as these are contraindicated) <p>ACTIONS:</p> <ul style="list-style-type: none"> Risk assessment Consider deferral of vaccination and/or referral to allergist-immunologist 30-minute observation period if vaccinated 	<p>ALLERGIES</p> <p>History of the following are contraindications to receiving either of the mRNA COVID-19 vaccines[†]:</p> <ul style="list-style-type: none"> Severe allergic reaction (e.g., anaphylaxis) after a previous dose of an mRNA COVID-19 vaccine or any of its components Immediate allergic reaction* of any severity to a previous dose of an mRNA COVID-19 vaccine or any of its components[†] (including polyethylene glycol)[#] Immediate allergic reaction of any severity to polysorbate^{†#} <p>ACTIONS</p> <ul style="list-style-type: none"> Do not vaccinate[#] Consider referral to allergist-immunologist

“CDC considers a history of the following to be a contraindication to vaccination with both the Pfizer-BioNTech and Moderna COVID-19 vaccines:

- Severe allergic reaction (e.g., anaphylaxis) after a previous dose of an mRNA COVID-19 vaccine or any of its components*
- ‘Immediate allergic reaction of any severity to a previous dose of an mRNA COVID-19 vaccine or any of its components (including polyethylene glycol [PEG])**
- Immediate allergic reaction of any severity to polysorbate (due to potential cross-reactive hypersensitivity with the vaccine ingredient PEG)**

** These persons should not receive mRNA COVID-19 vaccination at this time unless they have been evaluated by an allergist-immunologist and it is determined that the person can safely receive the vaccine (e.g., under observation, in a setting with advanced medical care available).”*

Triage of persons presenting for mRNA COVID-19 vaccination

Table Source: <https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html#Patient-counseling>

† Refers only to mRNA COVID-19 vaccines currently authorized in the United States (i.e., Pfizer-BioNTech, Moderna COVID-19 vaccines)

‡ Immediate allergic reaction to a vaccine or medication is defined as any hypersensitivity-related signs or symptoms consistent with urticaria, angioedema, respiratory distress (e.g., wheezing, stridor), or anaphylaxis that occur within four hours following administration.

These persons should not receive mRNA COVID-19 vaccination at this time unless they have been evaluated by an allergist-immunologist and it is determined that the person can safely receive the vaccine (e.g., under observation, in a setting with advanced medical care available).

Recommendations for COVID-19 vaccinated persons

There is limited information on how much the vaccines might reduce transmission and how long protection lasts as well as on the efficacy of the approved vaccine against emerging SARS-CoV-2 variants. Currently, vaccinated persons should follow [current guidance](#) to protect themselves and others, such as wearing a mask, social distancing (6 ft. apart), avoiding crowds and poorly ventilated areas, covering coughs and sneezes as well as washing hands often. [CDC Travel guidance](#) should be followed, and any guidelines applicable to school, workplace, personal protective equipment, and COVID-19 testing safety.

Vaccinated persons can avoid quarantine post-exposure to someone with suspected or confirmed COVID-19 if the following criteria are met:

- Are fully vaccinated (i.e., ≥ 2 weeks following receipt of the second dose in a 2-dose series, or ≥ 2 weeks following receipt of one dose of a single-dose vaccine)
- Are within 3 months following receipt of the last dose in the series
- Have remained asymptomatic since the current COVID-19 exposure

If all the above-mentioned criterias are not met, people should continue to follow current [quarantine guidance](#) after exposure to someone with suspected or confirmed COVID-19. For more information please see the latest [CDC guidance](#).

Vaccination has proven to prevent symptomatic COVID-19. However, the risk of transmission in vaccinated persons is uncertain. Pre-symptomatic and symptomatic COVID-19 are thought to have a greater role in transmission compared to asymptomatic COVID-19. Additionally, individual and societal benefits of avoiding unnecessary quarantine may outweigh the potential but unknown risk of

transmission, and facilitate the direction of public health resources to persons at highest risk for transmitting SARS-CoV-2 to others. This recommendation aligns with that of [quarantine recommendations for people who have natural immunity](#) and helps ease implementation.

Fully vaccinated persons who do not quarantine should still watch for [symptoms of COVID-19](#) for 14 days following an exposure. If they experience symptoms, they should be clinically evaluated for COVID-19, including SARS-CoV-2 testing, if indicated. In addition, vaccinated persons should continue to follow [current guidance](#) to protect themselves and others, including all other [SARS-CoV-2 testing recommendations](#) and requirements, and [state, territorial, tribal, and local](#) travel recommendations or requirements. For additional considerations regarding quarantine or work restrictions for fully vaccinated healthcare personnel, patients, or residents in healthcare settings, please see section below.

These quarantine recommendations for vaccinated persons, including the criteria for timing since receipt of the last dose in the vaccination series, will be updated when more data become available and additional COVID-19 vaccines are authorized.

COVID-19 vaccine for people with facial fillers

Two of the participants in clinical trials for Moderna's COVID-19 vaccine who had received dermal filler injections in the cheeks were reported to have developed facial swelling after receiving the vaccination. One subject had filler injections two weeks prior to the vaccination and the other 6 months prior. A third person, who had had a history of lip injection, reportedly developed lip angioedema two days after receiving the vaccination. This participant reported a similar reaction in the past following influenza vaccination.

The localized swelling resolved itself after treatment with antihistamines or steroids in all three cases. The majority of trial participants experienced only mild side effects typical with vaccines, including headache, fatigue, and pain at the injection site. In its report on the [Moderna vaccine hearing](#), the FDA notes that "it is possible the localized swelling in these cases is due to an inflammatory reaction from the interaction between the immune response after vaccination and the dermal filler."

Although the data is limited, having a history of fillers **should NOT** prevent you from getting the COVID 19 vaccine considering the limited risks vs benefits.

To read detailed information on the Pfizer and Moderna vaccine trial click the links

[FDA Pfizer Trial Summary](#)

[FDA Moderna Trial Summary](#)

Reporting of vaccine adverse events

The Academy is closely monitoring any reports of cutaneous side effects as the vaccine rollout gets underway and asks physicians to report cases of potential dermatologic side effects in the [COVID-19 Dermatology Registry](#).

Additional Resources on COVID 19 vaccine administration guidance from other medical societies:

- 1) NPF key recommendations for the management of patients with psoriatic disease during the COVID-19 pandemic.:<https://www.psoriasis.org/covid-19-task-force-guidance-statements/>
- 2) Arthritis foundation Q&A <https://www.arthritis.org/health-wellness/about-arthritis/related-conditions/other-diseases/covid-19-faqs-medication-treatment-and-vaccines>
- 3) COVID-19 Vaccine Clinical Guidance Summary for Patients with Rheumatic and Musculoskeletal Diseases: <https://www.rheumatology.org/Portals/0/Files/COVID-19-Vaccine-Clinical-Guidance-Rheumatic-Diseases-Summary.pdf>
- 4) American College of Rheumatology summary on COVID 19 Vaccine: <https://www.rheumatology.org/Portals/0/Files/ACR-Information-Vaccination-Against-SARS-CoV-2.pdf>
- 5) The New England Journal of Medicine COVID-19 Vaccine FAQ: <https://www.nejm.org/covid-vaccine/faq>
- 6) Preliminary Recommendations of the NCCN COVID-19 Vaccination Advisory Committee https://www.nccn.org/covid-19/pdf/COVID-19_Vaccination_Guidance_V1.0.pdf