P072 AUDIT ON THE UPTAKE OF COVID-19 VACCINATION IN BIOLOGIC PATIENTS WITH AUTOIMMUNE CONDITIONS

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Background/Aims
Coronavirus-2 (SARS-CoV-2) has become a disastrous pandemic since its first outbreak in December 2019. Until 8th of October, 2021, more than 239 million people were infected by COVID-19 leading to over 4.8 million deaths. While vaccines and drugs are two arms in controlling the pandemic, safe and effective vaccines are one of the most reliable interventions to suppress viral transmission. Patients with specific immunological deficits, such as patients with autoimmune diseases or those receiving immunosuppressive need special attention. Besides, vaccination in these patients is problematic due to the probable suppression or over-activation of the immune system. However, there still remain questions about the efficacy and safety of vaccination in immunocompromised patients. Studies are ongoing into the safety and immunogenicity of approved of SARS-CoV-2 vaccines, with regards to immuno-deficient individuals. The aim of this audit was to check the uptake and side effects of the BNT162b2 and ChAdOx1 vaccines.

Methods
We collected data on 352 patients from routine clinics which included diagnosis, type of vaccine, number of doses, side effects of the vaccines and flare up of arthritis or underlying autoimmune condition. Descriptive statistics were used to analyse the data.

Results
Of the 352,174 (49%) were Males and 178 (51%) Females. Most common diagnosis was Rheumatoid Arthritis 181 (51%), Axial spondyloarthritis 80 (23%), Psoriatic Arthritis 65 (18%), GCA 10 (3%), Non-Radiographic Axial Spondyloarthritis 5 (1.4%), JIA 3 (0.9%), Sarcoidosis 1 (0.3%), and overlap 6 (2%). Medications: 227 (65%) patients were on Biosimilars, 26 (7%) on Biologics, 28 (8%) Certolizumab pegol, 21 (6%) Secukinumab, 2 (0.6%) Baricitinib, 3 (0.8%) Abatacept, 29 (8%) Tocilizumab and 16 (4.5%) on Tofacitinib.

Vaccination uptake: 329 patients received double dose and 8 received single dose. 15 (4.3%) patients didn’t take vaccine. Reasons for not taking vaccine were severe reactions to Arthritis medication and biologics, concerned they may have severe reaction with the vaccine. Some were worried that vaccine may trigger flares, COVID-19 vaccine potentially has tracking chips, didn’t trust the vaccine as not gone through enough clinical trialling, lack of any statistics on side effects of the vaccines in immunocompromised patients. Side effects: 146 patients experienced mild side effects based on CTAEs criteria. Only 3 (2.1%) had severe side effects Grade 3 or above, this included Pulmonary embolism, Stroke, and symptomatic pleural effusion. 15(10%) reported Arthritis flare. Most common side effects were Headache 50(34%), Fatigue 32(22%), Myalgia 32(22%), Fever 30(21%), Chills 30(21%), Injection site pain 26(19%), Rhinorrhea 11(7.5%), Lethargy 11(7.5%) and maculopapular rash 5(3.4%).

Conclusion
This audit highlights both the ChAdOx1 and BNT162b2 are safe for use in immune-deficient patients. Immunocompromised patients should be encouraged to take vaccines as benefits of the COVID-19
vaccination outweigh the risks and might reduce the risk of developing severe complications due to COVID-19.

Disclosure
G.M. Koduri: None.