

Information for our Patients who are immunocompromised.

Conditions at high risk or very high risk of severe COVID-19 disease are detailed in the table. Those with conditions in the blue shaded areas are immunocompromising conditions that may be associated with a suboptimal response to vaccines. People with these conditions at the time of vaccination; require an additional dose of vaccine for their primary vaccination course (see Section 7.8) and a booster COVID-19 vaccine dose. They are now recommended a 2nd booster COVID-19 vaccine dose after an interval of at least 4 months¹. The HSE and participating GPs are therefore providing the 2nd booster COVID-19 vaccine dose after 4 months from the 1st booster dose for operational purposes.

Medical condition ¹	Very high risk	High risk
Cancer	Receiving or within 6 weeks of receiving systemic cytotoxic chemotherapy, targeted therapy, monoclonal antibodies or immunotherapies Receiving treatment or pending treatment for a haematological cancer Undergoing or within 6 weeks of surgery or radical radiotherapy for lung or head and neck cancer Advanced/ metastatic cancer	Haematological ¹ - within 5 years of treatment Non haematological cancer within 1 year following immunomodulating treatment All other cancers being treated (excluding hormonal treatment)
Chronic heart (and vascular) disease		e.g. heart failure, hypertensive cardiac disease
Chronic kidney disease	On dialysis, or eGFR <15 ml/min	With eGFR <30ml/min
Chronic liver disease		e.g. cirrhosis or fibrosis
Chronic neurological disease or condition	With evolving ventilatory failure (requiring non- invasive ventilation) e.g. motor neurone disease, spinal muscular atrophy	Significantly compromising respiratory function and/or the ability to clear secretions e.g. Parkinson's disease, cerebral palsy
Chronic respiratory disease	Severe e.g. severe cystic fibrosis, severe COPD, severe pulmonary fibrosis	Other e.g. stable cystic fibrosis, severe asthma (continuous or repeated use of systemic corticosteroids), moderate COPD
Diabetes	HbA1c ≥58mmol/mol	All other diabetes (Type 1 and 2)
Immunocompromise due to disease or treatment	Severe e.g. Transplantation: - Listed for solid organ or haematopoietic stem cell transplant (HSCT) - Post solid organ transplant at any time - Post HSCT within 12 months Genetic diseases: - APECED ² - Inborn errors in the interferon pathway Treatment: - included but not limited to Cyclophosphamide, Rituximab, Alemtuzumab, Cladribine or Ocrelizumab in the last 6 months	Other e.g. High dose systemic steroids ³ HIV, not on treatment or CD4 count <200 x10 ⁶ /L for adults
Inherited metabolic diseases ³	Disorders of intermediary metabolism/at risk of acute decompensation e.g. Maple Syrup Urine Disease	Disorders of intermediary metabolism not fulfilling criteria for very high risk
Intellectual disability ³	Down syndrome	Intellectual disability excluding Down syndrome
Obesity	BMI >40 kg/m ²	BMI >35 kg/m ²
Severe mental illness ³		e.g. Schizophrenia, bipolar disorder, severe depression
Sickle cell disease	Sickle cell disease	

¹ Includes e.g., leukaemia, lymphomas, blood dyscrasias or other malignant neoplasms affecting the bone marrow or lymphatic systems

²APECED - autoimmune polyendocrinopathy candidiasis ecto-dermal dystrophy

³ The following doses of prednisolone (or equivalent dose of other glucocorticoid) are likely to be immunosuppressive:

¹ NIAC advises an interval of 6 months but that an interval of 4 months may be used for operational purposes