



A Gynecologic Cancer fact sheet

COVID-19 Vaccination

your guide

Speak with your provider, they are there to support you.

As a gynecologic cancer patient, should I get vaccinated for COVID-19?

- The short answer is yes!
- We encourage all gynecologic cancer patients who are on active therapy or have completed therapy to get vaccinated, especially since COVID-19 can be particularly dangerous for patients with cancer. The only patients who should not get the vaccine are those who have had an immediate allergic reaction to components of the vaccine or who are younger than 16. See below for more information.
- For some patients whose treatment goals have changed and may include hospice and palliative care only, you may want to discuss with your provider what is best for you.
- These recommendations are based on the current data we have available (Feb. 2021) and may change as more data is published.
- For any specific questions, please reach out to your provider.

Should people undergoing active treatment (chemotherapy, immunotherapy, hormonal therapy, radiation, or enrolled in a clinical trial) for cancer be vaccinated against COVID-19?

- Yes! For some patients whose treatment goals have changed and may include hospice and palliative care only, you may want to discuss with your provider what is best for you. You should talk to your oncologist about the timing of the vaccine to increase how well the vaccine works and to help keep you safe.

- Experts say that immunocompromised patients may not get as much protection against COVID-19 from the vaccine as someone who is not immunocompromised. However, the vaccine is still likely helpful in reducing the severity of COVID-19. Additional information about the vaccines can be found on the Center for Disease Control (CDC) website.
- If you are participating in a clinical trial and interested in vaccination, please discuss this with your research team prior to receiving the vaccine. The National Comprehensive Center Network (NCCN) supports the vaccination of participants on clinical trials.

Should people scheduled for surgery be vaccinated against COVID-19?

- Yes. The NCCN recommends not being vaccinated within a few days of surgery. In the event of a bigger surgery that could involve removing the spleen (like an ovarian cancer surgery), do not receive the vaccine 2 weeks before or after surgery. This will help determine if any symptoms are side effects from the surgery or the vaccine. Notify your surgeon immediately if you are offered an appointment to get your COVID-19 vaccine but have an upcoming surgery.

Are there people who should not be vaccinated?

- At this time, the only patients who should not get the vaccine are those who have had an immediate allergic reaction to components of the vaccine. An immediate allergic reaction is a reaction that occurred within 4 hours of exposure, including hives, swelling or problems breathing.
- The most likely component to cause an allergic reaction in the vaccine is polyethylene, or PEG. Polysorbate is not in the vaccine but is very similar

to PEG. The CDC recommends that people who have had an immediate allergic reaction to PEG or polysorbate should not receive the vaccine.

- People who have an immediate allergic reaction to the first COVID-19 vaccine should not get the second vaccine. So far these reactions have been extremely rare.
- People who had an immediate reaction to carboplatin or paclitaxel can safely receive the vaccine. If you had an immediate reaction to a different chemotherapy, it is most likely still safe to receive the vaccine, however please check with your provider first.
- Children younger than 16 currently cannot receive the vaccine. This may change with new trials that are ongoing.

How Effective is the COVID-19 vaccine?

- The Pfizer/BioNTech vaccine was reported to be 95% effective after two doses, and 52% effective after the first dose alone. The Moderna vaccine was reported to be 94.1% effective after two doses (CDC report). The vaccine is fully effective 1 – 2 weeks after the second dose. This is true for all groups of participants who were evaluated, regardless of age, weight, or race. We do not know if the vaccine will be as effective in women who are immunocompromised (for instance, people receiving chemotherapy, radiation, or immunotherapy) as they were not included in the study. Even if the vaccine is less effective in women who are immunocompromised from cancer treatment than it was in the trials, it should still provide more protection than not getting the vaccine.

Can I get COVID from the Vaccine?

- No. The COVID-19 vaccine does not contain the COVID-19 virus, so you can't get COVID-19 from the vaccine.

What is known about COVID-19 vaccine side effects?

- Flu-like symptoms (headache, fever, muscle aches) may happen, especially after the second vaccination.
- This is a normal sign that the body is building protection and should go away in a few days. However, if you do not have these symptoms, your body can still be mounting a strong immune response, so don't worry.

Should getting the vaccine change how I behave?

- Until experts learn more about the protection that COVID-19 vaccines provide under real-life conditions, people who are vaccinated should continue to follow all current guidance to protect themselves against COVID-19 after they are vaccinated especially because we don't know exactly how effective the vaccine is. That means:
 - Wearing a mask
 - Staying at least six feet away from others
 - Avoiding crowds
 - Washing hands with soap and water for 20 seconds or using hand sanitizer with at least 60% alcohol