

Advanced Rheumatology of Houston

COVID-19 Vaccine Frequently Asked Questions

****Updated COVID-19 Vaccines for use in US Beginning in Fall 2023****

FDA has advised manufacturers who will be updating their vaccines, that they should develop monovalent SBB1.5 composition. Estimated to be available September or early October.

Will the providers in your office be vaccinated for COVID-19?

Yes! Both providers and all of our eligible staff have been vaccinated with both injections. Except for mild symptoms, no issues have been reported.

I am on medications that suppress my immune system to treat my autoimmune condition. Can I take the vaccine?

Yes, with the following considerations:

If you are taking medications that suppress your immune system, your immune system might not produce as many antibodies to the virus, and therefore, might not work as well.

All vaccines have additives which your body can see as a foreign substance and may trigger your immune system. With autoimmune disorders, vaccine additives can potentially cause your symptoms to worsen for short period of time after receiving the vaccine. If this happens, please contact our office.

Please see the below recommendations regarding our frequently used medications:

What medications should I consider holding after receiving the vaccination?

Tylenol (acetaminophen) and all NSAIDs (ibuprofen, Motrin, Aleve, Advil, Meloxicam, Diclofenac, Naproxen, etodolac, etc) should be held for **24 hours** prior to all vaccines (Pfizer, Moderna, and Johnson & Johnson)

DMARDS: Hydroxychloroquine (Plaquenil), Leflunomide (Arava), Azathioprine (Imuran), Cyclophosphamide, and Sulfasalazine **DO NOT** need to be held.

DMARD: **Mycophenolate Mofetil (Cellcept)** should be held **one to two weeks** after **all doses** of vaccine (as disease activity allows).

DMARD: **Methotrexate** should be held **one to two weeks** after **all doses** of vaccine (as disease activity allows).

Biologics that **DO NOT** need to be held:

TNF inhibitors: Humira, Enbrel, Simponi, Cimzia, Remicade

B-cell inhibitor: Benlysta – IV Infusion

IL-6 inhibitors: Actemra, Kevzara

IL-17 inhibitors: Cosentyx, Taltz

IL-12/23 inhibitor: Stelara

IL-23 Inhibitor: Tremfya

JAK inhibitors: Xeljanz, Rinvoq, Olumiant - hold **one to two weeks** after **all doses** of vaccine (as disease activity allows).

Benlysta Home Injections: hold **one to two weeks** after **all doses** of vaccine (as disease activity allows).

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Injectable - hold **one week** before AND after vaccine.

IV infusion - our office will contact you regarding your infusion schedule as this will have to be carefully timed.

For all Rituxan infusions, our office will be in contact with you regarding your infusion schedule as this will have to be carefully timed.

Supplemental Dosing (i.e., COVID booster dose)

It is advised that all rheumatology patients, on immunosuppressive medications receive the COVID-19 vaccine.

You are up to date with your COVID-19 vaccines if you have completed a COVID-19 vaccine primary series (a total of 3 shots, Pfizer or Moderna) and received the most recent booster dose recommended for you by CDC.

Vaccine recommendations are based on your age, the vaccine you first received, and time since last dose. People who are moderately or severely immunocompromised have different recommendations for COVID-19 vaccines.

Use this table to determine when or if you can get one or more COVID-19 boosters:

COVID-19 vaccination history	Bivalent Vaccine	*Number of bivalent doses indicated	Interval between doses
Unvaccinated	Moderna or Pfizer	3	Dose 1 and Dose 2 4 weeks Dose 2 and Dose 3: At least 4 weeks
2 doses monovalent	Stay with original Moderna or Pfizer	1	At least 4 weeks after monovalent dose
3 doses monovalent	Moderna or Pfizer	1	At least 8 weeks after monovalent dose
3 doses monovalent and 1 dose bivalent mRNA	-	*See note	-

**Moderately or severely immunocompromised have the option to receive 1 additional dose of Moderna or Pfizer bivalent vaccine at least 2 months following the last recommended bivalent vaccine dose. Any additional doses should be administered at least 2 months after the last COVID-10 vaccine dose.*