



12 Mar 2021

All Registered Medical Practitioners
All Specialist and General Medical Clinics
All Licensed Hospitals and COVID-19 Vaccination Sites

UPDATED GUIDANCE ON THE INDICATIONS AND CONTRAINDICATIONS TO COVID-19 VACCINATION

As COVID-19 vaccination is progressively rolled out to the entire Singapore population, MOH continues to update our local vaccination guidelines, based on latest scientific evidence and data, to ensure that the vaccination remains safe for administration. With the emerging local and international clinical reports on the safety of mRNA-based COVID-19 vaccines, this circular updates medical practitioners on the revised MOH guidance on COVID-19 vaccinations¹ in (i) persons with allergies and (ii) persons with cancer, as recommended by the Expert Committee on COVID-19 Vaccination (EC19V).

PERSONS WITH ALLERGIES

2. Table 1 shows the revised guidance on persons with allergies:

Table 1: Updated Guidance on Persons with Allergies

Allow Vaccination	Persons with a history of allergic reactions to any drug (including NSAIDs), food, insect stings or unknown trigger (idiopathic), not amounting to an anaphylaxis*, CAN be vaccinated.
	Persons with a history of multiple allergies, not amounting to an anaphylaxis*, CAN be vaccinated.

¹ As of 3 Feb, the Pfizer-BioNTech COVID-19 Vaccine and Moderna COVID-19 vaccines have been granted interim authorisation for use in Singapore.



	<p>Persons with atopy (such as eczema, allergic rhinitis or asthma) CAN be vaccinated.</p> <p>Persons with family history of anaphylaxis CAN be vaccinated.</p>
Defer vaccination and refer to an allergist	<p>Persons with a history of allergic reactions to other vaccines (rash OR hives OR face/eyelid/lip swelling) SHOULD NOT receive the mRNA-based COVID-19 vaccines for now. These individuals should also be referred to an allergist for further review on the suitability to proceed with the mRNA-based COVID-19 vaccines.</p>
Defer Vaccination	<p>*Persons with a history of anaphylaxis to drugs, vaccines, food, insect stings or unknown triggers (idiopathic) SHOULD NOT receive the mRNA-based COVID-19 vaccines.</p> <p>Anaphylaxis is a life-threatening allergic reaction with two or more of the following three criteria:</p> <p>a) Hives or face/eyelid/lip/throat swelling; b) Difficulty breathing; c) Dizziness.</p> <p>A history of having been prescribed an Epi-Pen suggests anaphylaxis risk and such persons SHOULD NOT receive the mRNA-based COVID-19 vaccine.</p> <p>Persons with a history of an allergic reaction to a previous dose of the Pfizer COVID-19 vaccine or Moderna COVID-19 vaccine or to any of its components SHOULD NOT receive the mRNA-based COVID-19 vaccine:</p> <ul style="list-style-type: none"> • Persons who develop anaphylaxis after dose #1 are allergic and SHOULD NOT be vaccinated. • Persons who develop urticaria or angioedema with onset within 7 days post-vaccination may be allergic and SHOULD NOT be vaccinated. • Persons who develop generalized maculopapular rashes OR erythema multiforme OR bullous lesions with onset within 7 days post-vaccination may be allergic and

	SHOULD NOT be vaccinated.
	Persons with a history of the following severe drug reactions SHOULD NOT receive the mRNA-based COVID-19 vaccines: a) Stevens-Johnsons Syndrome (SJS); b) Toxic Epidermal Necrolysis (TEN); c) Drug Rash with Eosinophilia and Systemic Symptoms (DRESS); d) Drug-induced Hypersensitivity Syndrome (DIHS).

3. Please refer to **Annex A** for guidance on common examples of persons with allergies.

CANCERS

4. Table 2 shows the revised guidance on cancers:

Table 2: Updated Guidance with Cancers

Allow Vaccination	Active cancer not on treatment with chemotherapy, radiotherapy or immunotherapy CAN be vaccinated.
	Active cancer not on treatment is defined as: a) Not on any treatment in the past 3 months AND b) No planned treatment in the next 2 months.
	Persons on cancer hormonal therapy CAN be vaccinated.
	Persons with a history of cancer, who are in remission, CAN be vaccinated.
Defer Vaccination	Persons on cancer chemotherapy, radiation therapy or immunotherapy SHOULD NOT receive the mRNA-based COVID-19 vaccines.

5. The MOH guidance for vaccination providers and corresponding Annexes for the Pfizer-BioNTech and Moderna COVID-19 vaccines have been made available on the Health Professionals Portal since 11 February 2021.

6. While not all medical practitioners would be directly involved in providing vaccinations, all medical practitioners should be able to advise your patients on medical aspects of the locally available vaccines, including their suitability for vaccination. **Annex B** contains a summary of the recommendations on the indications and contraindications to the Pfizer-BioNTech and Moderna COVID-19 vaccines. **Annex C** contains a list of common medical conditions indicated and contraindicated for mRNA-based COVID-19 vaccinations.

7. Providers administering COVID-19 vaccinations are doing so under MOH direction. Serious adverse events, although rare, may occur when providing vaccinations to the population. Clinicians are expected to adhere to existing standards of good clinical care, including checking for the “5 Rights”, hand hygiene, aseptic technique especially with multi-dose vials, management of refrigerated vaccines etc. **Clinicians who make a judgement call based on MOH’s guidance and follow the correct processes and procedures are indemnified by MOH if an adverse event occurs to the vaccine recipient as a result of the vaccination.**

8. If an individual develops an allergic reaction after vaccination, the allergic reaction can be reported to the Health Sciences Authority. Severe adverse events related to COVID-19 vaccination must be reported to the Health Sciences Authority (HSA) and/or MOH, in accordance to the timeline and format stipulated in MOH Circular No. 04/2021 dated 15 January 2021 entitled “Monitoring Suspected Serious Adverse Events of COVID-19 Vaccines and Incident Reporting at Vaccination Sites. Where access to national electronic medical record systems is available (e.g. CMIS, GPConnect), the allergic reaction should also be recorded therein. Medical practitioners should also advise your patient not to proceed with the 2nd dose of the vaccination and cancel their appointment for it.

9. When further evidence emerges that require adjustments to the recommendations or when other vaccines are authorised for deployment in Singapore, this information will be updated and provided to medical practitioners.



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Yours sincerely



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This circular supersedes MOH CIRCULAR 09/2021 titled “INDICATIONS AND CONTRAINDICATIONS TO COVID-19 VACCINATION”, dated 25 January 2021



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Annexes

A	COMMON EXAMPLES OF ALLERGIES AND GUIDANCE FOR COVID-19 VACCINATION
B	SUMMARY OF THE RECOMMENDATIONS ON CONTRAINDICATIONS AND INDICATIONS TO THE PFIZER-BIONTECH AND MODERNA COVID-19 VACCINES
C	LIST OF COMMON MEDICAL CONDITIONS SAFE FOR MRNA COVID-19 VACCINATION



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COMMON EXAMPLES OF ALLERGIES AND GUIDANCE FOR COVID-19 VACCINATION

Allergy Information	Vaccination Decision
25/M with urticaria to penicillin and cephalosporins. No throat swelling, no shortness of breath, no dizziness, no ulcers. No history of anaphylaxis or Epi-Pen use.	Can vaccinate Allergy is not anaphylaxis
35/F with hives to ibuprofen and celecoxib. <u>Had throat swelling</u> with celecoxib and some <u>dizziness</u> .	Defer vaccination Anaphylactoid reaction
45/F with eye and lip swelling to naproxen and paracetamol. No throat swelling, no shortness of breath, no dizziness, no ulcers. No history of anaphylaxis or Epi-Pen use.	Can vaccinate Allergy is not anaphylaxis
35/M with hives that started <u>8 hours after</u> first dose of mRNA-COVID-19 vaccine. No throat swelling, no shortness of breath, no dizziness. Did not see a doctor. Rash took 2 days to resolve with antihistamines.	Defer vaccination Allergic reaction to mRNA vaccine
35/F with fever and arm swelling after first dose of COVID-19 vaccine. Injection site erythema and swelling was approximately 6 cm.	Can vaccinate Non-allergic side effect.
45/F with rash on limbs after eating crab. No throat swelling, no shortness of breath, no dizziness. Resolved in half a day.	Can vaccinate Allergy is not anaphylaxis
55/M with diabetes, <u>SJS</u> to Bactrim. Severe rash, with lip ulceration, admitted for a week for SJS. No throat swelling, no shortness of breath, no dizziness.	Defer vaccination SJS is a contraindication
55/F with HIV, also macular-papular rash to Bactrim CD4 = 540, virologically controlled. No throat swelling, no shortness of breath, no dizziness, no ulcers	Can vaccinate Allergy is not anaphylaxis
65/M with generalized <u>rash</u> after flu <u>vaccine</u> last year. No throat swelling, no shortness of breath, no dizziness, no ulcers.	Defer vaccination Refer to allergist

Annex B

SUMMARY OF THE RECOMMENDATIONS ON CONTRAINDICATIONS AND PRECAUTIONS TO THE PFIZER-BIONTECH AND MODERNA COVID-19 VACCINES

RECOMMENDED NOT TO VACCINATE	
<p>Individuals under 16 years of age [Pfizer-BioNTech COVID-19 vaccine]</p> <p>Individuals under 18 years of age [Moderna COVID-19 vaccine]</p>	<p>Do not administer vaccine. May be eligible for other COVID-19 vaccines.</p>
<p>Anaphylaxis to any drug, vaccines, food, insect stings or unknown triggers (idiopathic).</p> <p>Anaphylaxis is a life-threatening allergic reaction with <u>two or more of the following three criteria</u>:</p> <p>a) Hives or face/eyelid/lip/throat swelling; b) Difficulty breathing c) Dizziness</p> <p><u>NOTE:</u> <i>Persons with NSAID induced angioedema, but not amounting to anaphylaxis, can be vaccinated.</i></p>	<p>Do not administer vaccine. May be eligible for other COVID-19 vaccines.</p>
<p>A history of having been prescribed an Epi-Pen</p>	<p>Suggestive of anaphylaxis risk. Do not administer vaccine. May be eligible for other COVID-19 vaccines.</p>
<p>Allergic reactions to the Moderna COVID-19, Pfizer-BioNTech vaccine, or any of its components:</p> <ul style="list-style-type: none"> • Persons who develop anaphylaxis after dose #1 • Persons who develop urticaria or angioedema with onset within 7 days post-vaccination • Persons who develop generalized maculopapular rashes, erythema multiforme OR bullous lesions with onset within 7 days post-vaccination 	<p>Do not administer vaccine May be eligible for other COVID-19 vaccines.</p>

SJS / TEN / DRESS / DiHS	Severe drug reactions Do not administer vaccine. May be eligible for other COVID-19 vaccines.
Allergic reactions to other vaccines (rash OR hives OR face/eyelid/lip swelling)	Do not administer vaccine due to concerns with cross reactivity with the mRNA-based vaccines. Refer to allergist for further review on the suitability to proceed with the mRNA-based COVID-19 vaccines
Pregnant women (any trimester)	Do not administer vaccine. May be eligible for other COVID-19 vaccines.
Women who become pregnant after first dose and before second dose	Do not administer second dose of vaccine. Can get second dose after delivery.
Transplant within the past 3 months <ul style="list-style-type: none"> Solid organ or stem cell 	Do not administer vaccine. May be eligible for other COVID-19 vaccines.
Active cancer on treatment with radiation therapy, chemotherapy or immunotherapy* NOTE: <ul style="list-style-type: none"> Persons on hormonal therapy can be vaccinated Persons with cancer NOT on treatment with radiation therapy, chemotherapy or immunotherapy* can be vaccinated <ul style="list-style-type: none"> Not on treatment in the past 3 months AND No planned treatment in next 2 months Persons with a history of cancer who are in remission, can be vaccinated. <p>*Includes immune checkpoint inhibitors.</p>	Do not administer vaccine. May be eligible for other COVID-19 vaccines.

On other aggressive immunotherapy (e.g. Rituximab) such as monoclonal antibody treatment for non-cancer conditions	Do not administer vaccine. May be eligible for other COVID-19 vaccines.
HIV infection <ul style="list-style-type: none"> CD4 < 200 cells/mL NOTE: <ul style="list-style-type: none"> Persons with CD4 ≥ 200 cells/mL and VL suppressed can be vaccinated 	Do not administer vaccine. May be eligible for other COVID-19 vaccines.
Known to have platelets < 50,000 or Known to be over-anticoagulated.	Defer IM injection until condition improved

CAN VACCINATE WITH ADVICE

Increased risk of haematoma with IM injections due to bleeding tendency <ul style="list-style-type: none"> On anti-coagulation Bleeding disorders (haemophilia etc.) Low platelet counts (unless known to have platelets < 50,000) 	Can vaccinate IM, if patient accepts risk. There is no data to support SC injection. Advise to hold firm pressure at the injection site for at least 5 minutes post-vaccination.
Fever (Temperature > 37.5C) in past 24 hours	Defer vaccination until fever resolved.
Breastfeeding	Can vaccinate. Consider suspend breastfeeding for 5-7 days.
Planning pregnancy	Can vaccinate. Consider deferring conception until 1 month after completing second dose of vaccine.
Took other non-COVID-19 vaccines.	Defer vaccination until there is a minimum interval of 14 days before or after any other vaccines i.e. other vaccines should not be administered 14 days or less before the first dose; or 14 days or less after the second dose of a COVID-19 vaccine.

LIST OF COMMON MEDICAL CONDITIONS SAFE FOR MRNA-BASED COVID-19 VACCINES

Can my patients get the mRNA-based vaccine if they have the following medical conditions?				
No	Condition	Safe to get vaccinated?		Comment
1	Acute illness (e.g. pneumonia)		No	Wait until after recovered from acute illness
2	Allergic rhinitis	Yes		
3	Allergies to medications, food and insect stings (not anaphylaxis, SJS, TEN, DRESS, DiHS)	Yes		Hives, rash, angioedema alone can be vaccinated. Chronic/idiopathic urticaria can be vaccinated.
4	Allergies to prior dose of mRNA COVID vaccine or vaccine components		No	
5	Allergies to other vaccines		No	Refer to allergist
6	Anaphylaxis* to meds, vaccines, food, insect stings etc		No	Also includes individuals who were prescribed Epi-Pen
7	Angioedema to painkillers	Yes		Face, eyelid, lip, throat swelling alone (without any shortness of breath or dizziness) can be vaccinated.
8	Anti-coagulation	Yes		Press firmly for at least 5 minutes
9	Anti-platelet agents	Yes		
10	Asthma	Yes		Bring salbutamol inhaler PRN symptoms
11	Atrial fibrillation, any cardiac arrhythmia	Yes		
12	Autoimmune diseases of all kinds	Yes		E.g. Lupus, rheumatoid arthritis, Crohns Disease Refer to immunotherapy table below if on immunotherapy.
13	Bell's palsy	Yes		
14	Breastfeeding	Yes		Consider suspending breastfeeding for 5-7 days
15	Blood disorders of any kind	Yes		E.g. Thalassemia major/minor, hemophilia

16	Cancer – on treatment		No	If on chemotherapy, radiation therapy or immunotherapy. Hormonal treatment is safe for vaccine
17	Cancer – not on treatment	Yes		Not on chemotherapy, radiation therapy or immunotherapy in the past 3 months AND No planned chemotherapy, radiation therapy or immunotherapy in the next 2 months
18	Cancer – treated and in remission	Yes		
19	Chronic obstructive lung disease (COPD)	Yes		
20	Diabetes mellitus	Yes		
21	Dialysis - end stage renal failure	Yes		With or without renal replacement therapy
22	Dementia of any kind	Yes		
23	Eczema	Yes		
24	Epilepsy or seizure disorders of any kind	Yes		
25	Fever		No	Wait until fever resolved at least 24 hours
26	G6PD deficiency	Yes		
27	Gout	Yes		
28	Guillain-Barre syndrome	Yes		
29	Heart disease of any kind	Yes		
30	Heart murmurs of any kind	Yes		
31	Hepatitis B carrier	Yes		
32	Hepatitis C chronic infection	Yes		
33	Hyperlipidemia	Yes		
34	Hypertension	Yes		
35	HIV with CD4 \geq 200	Yes		Based on most recent CD4 result
36	HIV with CD4 $<$ 200		No	Based on most recent CD4 result
37	Hormonal replacement therapy	Yes		For cancers, peri-menopausal or osteoporosis
38	Kidney disease of any kind	Yes		
39	Liver problems or cirrhosis	Yes		
40	Low platelets (\geq 50,000)	Yes		Press firmly for at least 5 minutes
41	Low platelets ($<$ 50,000)		No	Until platelets improve $>$ 50,000
42	Lung disease of any kind	Yes		

43	Neurologic disease of any kind	Yes		E.g. Parkinson's, multiple sclerosis Check immunotherapy table below if on immunotherapy
44	Osteoporosis	Yes		
45	Planning pregnancy (including IVF)	Yes		Wait 1 month after vaccination to conceive
46	Pregnancy – any trimester		No	Vaccinate after delivery
47	Skin disorders of any kind	Yes		Refer to immunotherapy table below if on immunotherapy.
48	Splenectomy or asplenic	Yes		
49	Steroids (oral, IV, IM, intra-articular)	Yes		
50	Stroke	Yes		
51	Surgery of any kind (recent or old)	Yes		
52	Thyroid disease of any kind	Yes		
53	Transplant – solid organ or stem cell		No	Wait until > 3 months after transplant
54	Tuberculosis	Yes		
This is not an exhaustive list of conditions which are safe for COVID-19 vaccination				

Can my patients get the Pfizer or Moderna COVID-19 vaccine if they are taking immunotherapy for <u>non-cancer conditions</u>?				
No	Type of Immunotherapy	Safe to get vaccinated?		Comment
1	Allergy immunotherapy	Yes		
2	Agents inhibiting leukocyte movement	Yes		
3	Agents inhibiting T-cell co-stimulation		No	E.g. Impilimumab
4	Anti-cytokine therapy	Yes		E.g. Infliximab, Tocilizumab
5	Anti-thymocyte globulin		No	E.g. ATGAM
6	Monoclonal antibodies to B-cells		No	E.g. Rituximab, Ofatumumab
7	Monoclonal antibodies to T-cells		No	E.g. Alemtuzumab
8	Monoclonal antibodies to complement		No	E.g. Eculizumab
9	RANK ligand inhibitors	Yes		E.g. Denosumab
10	Small molecule kinase inhibitors	Yes		



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11	Tumor Necrosis Factor (TNF) inhibitors	Yes	E.g. Pembrolizumab
<p>Aggressive immunotherapy refers to immunotherapy that causes SEVERE immunosuppression. These are often used for cancers, but also certain non-cancer conditions.</p> <p>Recommendations in the table are for patients on monotherapy for non-cancer conditions. If patients are on any combination therapy, or if in doubt, please advise patients to consult their treating specialists.</p>			

