

**Health and Seniors Care** 

Population and Public Health 4th Floor; 300 Carlton Street Winnipeg MB R3B 3M9 Email: COVID@gov.mb.ca



Population et santé publique 4e étage; 300, rue Carlton Winnipeg MB R3B 3M9 Email : COVID@gov.mb.ca

November 5, 2021

**COVID-19 Vaccine: Third/Booster Dose Update** 

This guidance is in addition to the memo dated November 3, 2021 (https://manitoba.ca/covid19/vaccine/healthcare-professionals.html).

When using the Moderna/Spikevax™ vaccine for third/booster doses, the maximum number of vial punctures permitted is 20. After 20 punctures, the vial should be discarded.

For adults who are moderate to severely immunocompromised\*:

- Where Moderna/Spikevax™ is given for third doses, use a full dose (100 mcg; 0.5ml). NOTE: there is no change to the Pfizer/Comirnaty™ third/booster dosage.
- The recommended interval between the second and third dose of COVID-19 mRNA vaccines in this patient group continues to be ≥ 28 days; longer intervals may be used based on clinical judgement.

\*Moderate to severely immunocompromised includes individuals with the following conditions:

- Active treatment for solid tumor or hematologic malignancies, OR
- Receipt of solid organ transplant and taking immunosuppressive therapy, OR
- Receipt of CAR-T therapy or hematopoietic stem cell transplant (within 2 years of transplantation or taking immunosuppression therapy), OR
- Moderate to severe primary immunodeficiency, OR
- Stage 3 or advanced untreated human immunodeficiency (HIV) infection and those with acquired immunodeficiency syndrome, OR
- Anti-B cell therapies (monoclonal antibodies targeting CD19, CD20 and CD22), highdose systemic corticosteroids (defined as the equivalent to greater than or equal to 20 mg of prednisone for 4 or more weeks), alkylating agents, antimetabolites, or tumornecrosis factor (TNF) blockers and other biologic agents that are significantly immunosuppressive). For clarity, this includes the following drugs: active treatment with immunosuppressive medications such as cancer chemotherapeutic agents (chemotherapy, immunotherapy or targeted therapies), TNF blockers, certain biologic agents (e.g., rituximab), mycophenolate, tacrolimus, Jak inhibitors, methotrexate, fingolimod, azathioprine and leflunomide.
- Individuals in end stage renal disease undergoing hemodialysis or peritoneal dialysis, those on the transplant list and people with a ventricular assist device have been shown to be at increased risk of experiencing severe outcomes from COVID-19. There is limited data available on the safety and effectiveness of providing additional doses to these relatively small patient populations. Additional dose recommendations for these patient

populations should be made on a case-by-case basis, taking into account the patient's risks of exposure, level of immunocompromise, risk of experiencing severe outcomes as well as the lack of evidence.

The Clinical Practice Guidelines will be updated to reflect these changes and posted at <a href="https://www.gov.mb.ca/covid19/vaccine/healthcare-professionals.html">https://www.gov.mb.ca/covid19/vaccine/healthcare-professionals.html</a>.

Please share this information with all relevant colleagues in your facility/clinic.

Sincerely,

"Original signed by"

Richard Baydack, PhD

Director

Communicable Disease Control

"Original signed by"

Tim Hilderman, MD FRCPC

Medical Lead, Vaccines

Communicable Disease Control