



Questions on Immunization and Vaccination and Short Answers

Bağışıklama ve Aşı ile İlgili Sorular ve Kısa Cevaplar

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Question 1: When should the flu vaccine be administered?

Influenza usually starts to become active in our country after the second half of December (1). Antibody response should be achieved before the second week of December. However, it should be noted that the COVID-19 pandemic has altered the seasonality of influenza. While there were case reports in June 2021, we have seen cases reported as of September, as documented in the weekly influenza reports of the General Directorate of Public Health of the Ministry of Health. Although the increase in influenza activity starts in the second half of December, cases were detected in October and November. In the light of this information, the influenza vaccine should be given as it becomes available for clinical use, without waiting for a specific period. However, because influenza remains active in our country until April, it is important to remember that people can be vaccinated up until and including March. The antibody response to the vaccine is considered protective after day 14. Therefore, it should be remembered that protection against influenza begins as of the 14th day of vaccination. It should also be mentioned that the recommended number of doses of influenza vaccine for children under the age of nine who are being vaccinated for the first time is two, with a minimum four-week interval, and that protection begins 14 days after the second dose.

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Question 2: What are the primary and booster doses of COVID-19 vaccines recommended for immunocompromised individuals in Turkey?

Following their meeting on November 3rd, 2021, the COVID-19 Scientific Advisory Board recommended three primary doses for people who “received a solid organ transplant or bone marrow transplant, have active cancer, HIV infection with a CD4 count below 200, are on hemodialysis, or are severely immunosuppressed with high-dose steroids or biological agents.”

The primary vaccination series with mRNA vaccines should be given in three doses, with the third dose administered at least 28 days after the second dose. The third dose of an inactivated vaccine should be given at least two months after the second dose. Furthermore, for these individuals who are likely to have a low antibody response, a booster dose for both vaccines is recommended six months after the third dose. These recommendations appear to have been based

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on the literature on transplant patients (1-3). It has also been stated that the booster dose can be given three months after the last dose because emerging variants of the virus that causes COVID-19 may evade the vaccine response.

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Question 3: Is thrombophilia a contraindication for the Biontech vaccine?

Thrombophilia is not a contraindication for the Biontech vaccine. However, since late February 2021, there have been reports following the administration of adenoviral vector vaccines. A prothrombotic syndrome has been observed in persons receiving the AstraZeneca vaccine, an adenoviral vector-based vaccine. Similar findings were observed in those who received the Johnson & Johnson vaccine later on. This syndrome has been identified as vaccine-induced immune thrombotic thrombocytopenia (VITT). It has also been named thrombosis with thrombocytopenia syndrome (TTS) and vaccine-induced prothrombotic immune thrombocytopenia (VIPIT).