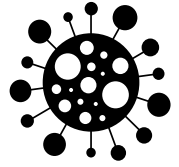


Version 3 – 07/04/2021

Making decisions with my healthcare professional about the COVID-19 vaccine when I have a rheumatology condition, or a musculoskeletal (joint, bone, spine or muscle) condition



You may find it helpful to use this tool to prepare for appointments, during appointments, or both.

Useful information about me

Name:

.....

My rheumatology, or musculoskeletal, condition is: (list any rheumatology conditions you have)

.....

My rheumatology, or musculoskeletal, medicines are: (include any injections or infusions (intravenous drips) that you have had for your condition in the last year)

.....

My allergies are: (if you have no allergies, you can write 'none')

.....

I would also like to tell you that: (include anything that seems relevant about your situation)

.....

Today, I hope we can:

.....

.....

Why vaccines are important for people with rheumatology conditions

- When the immune system is weakened by a rheumatology condition or treatment, the risk from COVID-19 is higher.
- People that catch COVID-19 can become very unwell. Many people will need hospital treatment even if they do not have a health condition. Even with the best treatment, some people will die from COVID-19.
- Vaccines are a good way for people with rheumatology conditions to stay safe. They teach the immune system to recognise infections, stopping people becoming unwell.

It's OK to ask questions. Here are some that may help you understand your options.

How could the vaccine help me?

.....
.....

What vaccines are available? Will I have a choice?

.....
.....

Are the vaccines safe for people with my condition?

.....
.....

Will my treatment make the vaccine work less well?

.....
.....

When is the right time for me to have the vaccine?

.....
.....

Do I still need to be careful about COVID-19 once I've had the vaccine?

.....
.....

If you're offered the vaccine and delay taking it, then you leave yourself at risk from COVID-19.

Staying safe during the COVID-19 pandemic

- Make sure you always follow the latest government guidance on handwashing, face coverings and social distancing.
- This will help keep you and others safe, whatever your decision about the vaccine.

What do we know about the COVID-19 vaccines?

Availability

Three COVID-19 vaccines are available in the UK – Pfizer, Oxford/AstraZeneca, and Moderna. In general, people will not be able to choose which vaccine they receive.

Safety with rheumatology treatments

None of these vaccines is a 'live' vaccine that could make you ill. All are safe for people whose immune system may not be strong.

Protection from COVID-19

All three vaccines are very good at stopping people becoming seriously ill with COVID-19. This is what the trials found:

Oxford vaccine: Prevented COVID-19 in about 7 in every 10 people (70%), and reduced the risk of being admitted to hospital with COVID-19 by 94%.

Pfizer vaccine: Prevented COVID-19 in over 9 in every 10 patients (95%), and starts to work around 10 days after the first dose.

Moderna vaccine: Prevented COVID-19 in more than 9 in every 10 people (92%) after the first dose.

Need for a second dose

The first dose of either vaccine protects people from COVID-19 for up to 12 weeks. People will be offered a second dose up to 12 weeks after the first injection. The second dose gives more long-term protection from COVID-19.

Steroid tablets (such as prednisolone), or steroid injections

Delaying a non-urgent steroid injection until two weeks after the COVID-19 vaccine could help the vaccine be more effective. Cutting down steroids can be dangerous, so only do this on the advice of a healthcare professional.

Medicines (tablets, injections, or drips) that suppress the immune system, including rituximab

If a new, or repeat, treatment with a medicine that suppresses the immune system is not urgent, then delaying starting it until two weeks after the second dose of the vaccine could help the vaccine be more effective. But stopping or delaying urgent medicines that suppress the immune system could cause a flare-up, which can increase your risk of COVID-19.

Surgery

Guidelines recommend people do not have major surgery and vaccines within one week of each other. This is because both surgery and the vaccine can cause a fever.

Pregnancy and breastfeeding

Guidelines recommend that if you are pregnant and at high risk from COVID-19, you should have the vaccine. If you are pregnant but not at high risk from COVID-19, do not have the vaccine. There are no known risks from non-live vaccines to babies who are breast fed. You can talk to your midwife if you're not sure.

Side effects

Many people will get mild side effects. These can include pain where the injection goes in, tiredness, headaches and aching muscles. The Pfizer vaccine may not be suitable for people with severe allergies.

Sharing decisions

You may find it helpful to keep a record of what you and your healthcare professional agreed.

We agreed that:

- I would like to make some decisions today
- I would like to talk to my family and/or friends before making a decision
- I would like to make another appointment
- I would like to have more information

I will:

.....
.....



My healthcare professional will:

.....
.....

I should come back to see a healthcare professional if:

.....
.....



If I have a problem or a concern, I should contact: (name and contact details)

.....

I can find out more information at:

1. NHS England:
nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/coronavirus-vaccine
2. Versus Arthritis:
versusarthritis.org/covid-19-updates/vaccines-for-covid-19-your-questions-answered

**These guidelines will help your healthcare professional discuss these issues with you.
This will help you make a decision together about what is best for you.**

The information in this tool is based on national guidelines: arma.uk.net/covid-19-vaccination-and-msk

Acknowledgements

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