

The Effect of COVID- 19 Pandemic on Routine Adult Vaccination in Cancer Patients

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To the Editor,

Since the priority in health services becomes to control the COVID-19 pandemic, the management of other diseases and provision of preventive healthcare services (such as vaccination) have remained secondary in a period where the whole focus is directed to COVID-19 [1]. Patients fear of becoming infected and ongoing national & government measures (such as curfew/lockdown or restriction in public transportation) cause patients to delay hospital visits even if necessary. Therefore, routine delivery of preventive healthcare services, such as vaccination has disrupted.

COVID-19 presents severe course in elderly as well as patients with chronic diseases and cancer [2], in which concomittant diseases affecting respiratory system prolong the course of infection and worsen clinical situation in patients [3]. The administration of influenza and pneumococcal vaccines in patients at high

risk may reduce the burden of secondary infections and contributes to resolution of COVID-19 with fewer complications [4, 5].

It has been known that adult vaccination rates are still lower than expected, which is also affected by disrupted healthcare services due to pandemic. Although few studies have examined the effects of pandemic on childhood vaccination, its impact on adult vaccination has not been investigated. Therefore, we would like to share cross-sectional and COVID-19 related findings of an ongoing study, which was aimed to show the impact of pneumococcal vaccine information provided to cancer patients by a clinical pharmacist at outpatient settings in tertiary care hospitals.

After the first COVID-19 case was seen in the country, Turkey on March 11th, 2020, the vaccination behavior of cancer patients was evaluated. During the study, cancer patients' vaccination status after the provision of vaccine information/recommendation were questioned at monthly interval for 3 months and reasons for patients not being vaccinated were also recorded.

According to the cross-sectional evaluation (March – November 2020) in this study, 102 out of 162 patients were not vaccinated at the end of 3 months. The reasons (n, %) for not getting pneumococcal vaccine were reported as; not able to go healthcare facility due to COVID-19 (n=35, 34.32%), vaccine is not available / out of stock (n=21, 20.59%), believed that it is not necessary (n=18, 17.65%), prefer to ask the specialist first, but not able to contact yet (n=6, 5.88%), do not have time to attend family physician (n=5, 4.9%), started a new chemotherapy protocol (n=5, 4.9%), undecided (n=4, 3.9%), fear of side effects (n=3, 2.9%), forget to have it (n=2, 1.9%), pay no attention (n=2, 1.9%) and family physician do not see it necessary (n=1, 0.9%). Although patients have hesitations to go healthcare facilities due to the fear of COVID-19, the pharmacist persuaded 37% of patients (n=60) to visit healthcare services to get vaccine by informative and encouraging counseling.

Vaccine-preventable diseases and associated complications cannot be overcome due to disruption of healthcare services during the pandemic in countries that have not reached intended rate in adult vaccination. We believe that monitoring and reinforcement of patients on vaccination may contribute to improved health outcomes in patients with cancer during COVID-19 pandemic.

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