



The effect of the COVID-19 pandemic on routine adult vaccination in cancer patients

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To the editor,

Since the priority in healthcare services is to control the COVID-19 pandemic, the management of other diseases and the provision of preventive health services (such as vaccination) have been put in the secondary plan [1]. Fear of infection and ongoing national and state measures (such as curfew/lockdowns or restrictions on public transport) cause patients to delay hospital visits even if necessary. For this reason, the routine provision of preventive health services such as vaccination has been interrupted.

COVID-19 is severe in the elderly as well as in patients with chronic diseases and cancer, where concomitant diseases affecting the respiratory system prolong the course of infection and worsen the clinical condition in patients [2]. Administration of influenza and pneumococcal vaccines in high-risk patients can reduce the burden of secondary infections and contribute to the resolution of COVID-19 with fewer complications [3].

Adult vaccination rates, which are known to be further affected by the disruption of health services due to the epidemic, are still below expectations. Although there are few studies examining the effects of pandemic on childhood vaccination, its impact on adult vaccination has not been investigated. Therefore, we would like to share the COVID-19-related findings of an ongoing cross-sectional study that aims to demonstrate the impact of pneumococcal vaccine information provided to cancer patients by a clinical pharmacist in outpatient settings in tertiary hospitals.

Following the first COVID-19 case in the country, Turkey, on March 11, 2020, the vaccination status of cancer

patients were evaluated. During the study, cancer patients' vaccination status after the provision of vaccine information/recommendation were questioned at monthly interval for 3 months, and the reasons for the patients not being vaccinated were also recorded.

In this study, at the end of 3 months according to the cross-sectional evaluation (March–November 2020), 102 out of 162 patients were not vaccinated. Among them, the reasons for not having pneumococcal vaccination (n,%) were reported as follows: not being able to go to a health facility due to COVID-19 (n = 35, 34.32%), lack of access to the vaccine (n = 21, 20.59%), not believing that the vaccine is necessary (n = 18, 17.65%), preferring to ask the specialist first but not being able to communicate yet (n = 6, 5.88%), not having time to go to the family physician (n = 5, 4.9%), initiation of a new chemotherapy protocol (n = 5, 4.9%), indecision (n = 4, 3.9%), fear of side effects (n = 3, 2.9%), forgetting (n = 2, 1.9%), not paying attention (n = 2, 1.9%), and not seeing it necessary by the family physician (n = 1, 0.9%). Although patients have hesitations to go healthcare facilities due to the fear of COVID-19, the pharmacist persuaded 37% (n = 60) of patients to visit healthcare services to get vaccinated through 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 can contribute to improved health outcomes in patients with cancer during the COVID-19 pandemic.

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Declarations

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