COVID-19 Vaccination in Cancer Patients: Correspondence

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Dear Editor, we would like to correspond on the publication "COVID-19 Vaccination in Cancer Patients: A Review Article." The published study reviewed the mRNA-based COVID-19 vaccines. Prior to the customary thorough safety and efficacy evaluation process, Mekkawi et al. highlighted that several vaccines had been given an emergency use permission. Second, for safety considerations, certain populations, such as cancer patients, were excluded from the approval trials. Mekkawi et al. also highlighted that several COVID-19 vaccine recommendations were extrapolated from research on other vaccines. To close these research gaps and gain a better knowledge of the safety and effectiveness of vaccinations in cancer patients, observational studies involving cancer patients are needed.

The published study by Mekkawi et al. provides new data and may support the benefits of immunization for the patients with malignancy. Cancer patients who take prescription medications or those with underlying medical conditions may respond to immunizations differently than the typical, healthy vaccine receiver. We all concur that giving the COVID-19 vaccine should be advantageous. The results of the investigation demonstrate that the COVID-19 vaccine has a protective effect based on earlier immunizations. However, an issue to be concerned about is a reasonably prevalent antecedent COVID-19 without symptoms.² In most cases, no testing is done to rule out the potential of earlier asymptomatic COVID-19. There is a limited clinical data on the usage and risk of COVID-19 vaccines in cancer patients. The efficacy of the conventional inactivated vaccination is often poor, and moderate side effects have been noted.³ It would be interesting to discuss the safety of the more recent mRNA COVID-19 vaccines for cancer patients who have previously had COVID-19. If the participants' pre-existing immunological status is frequently evaluated, it is feasible to forecast the outcomes of receiving the COVID-19 immunization more accurately. When the effectiveness or safety of the vaccination is evaluated, this is a crucial problem. Currently, numerous trials indicate the effectiveness or safety of the vaccine, but there is

frequently little information on the pre-vaccination health or immunological status of cancer patients, and the confounding asymptomatic COVID-19 is not excluded.

The authors emphasize the prospect of tailoring COVID-19 vaccine recommendations for cancer patients depending on circulating antibody levels. While adopting such a strategy would be ideal, the authors hereby acknowledge that it is made more difficult by 3 factors: (1) a lack of evidence for a protective antibody cutoff even in immunocompetent people; (2) the diversity of cancer patients' cancer diagnoses and treatments; and (3) the ongoing development of new variants and updated vaccines.

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