

COVID-19 vaccine FAQs

Please check the Haemophilia Foundation Australia website for updates –
www.haemophilia.org.au

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With the rollout of the COVID-19 vaccine commencing in Australia, members of the community have asked us about how this will impact on people with bleeding disorders.

The Australian Haemophilia Centre Directors' Organisation (AHCDO) has endorsed the joint [COVID-19 vaccination guidance for people with bleeding disorders](#), produced by the World Federation of Hemophilia (WFH), European Association for Haemophilia and Allied Disorders (EAHAD), European Haemophilia Consortium (EHC), and U.S. National Hemophilia Foundation (NHF). This has detailed information and is available on the AHCDO website (see NEWS) – www.ahcdo.org.au

AHCDO has advised HFA on some answers to some common questions.

These FAQs may be updated as more information becomes known.

FREQUENTLY ASKED QUESTIONS

Q1 – Is the COVID-19 vaccination safe for people with bleeding disorders?

A - In general the COVID-19 vaccine is as safe and effective for people with bleeding disorders as for anybody else without a bleeding disorder. As with all immunisations, there are some steps you may need to take before being vaccinated. See Qs 4,5 and 6 below.

The Australian Government has a careful and thorough process to check that the COVID-19 vaccines in Australia are safe and effective before it makes them available to the community. You can find more information about this on **HealthDirect**, the Australian Government-funded health information website - www.healthdirect.gov.au/coronavirus

Q2 – Am I in a priority population because of my bleeding disorder?

A - People with bleeding disorders are not at greater risk of contracting COVID-19 or developing a severe form of the disease, so they are not considered a priority group for vaccination.

The Australian Government will roll out the vaccine in phases, starting with priority populations. Some groups have been prioritised because they will be the most affected if they become infected with COVID-19. Information on the phases for the vaccine rollout is on the HealthDirect website - www.healthdirect.gov.au/covid-19-vaccination

Q3 – Where will I receive my vaccination?

A - You can find more information about where you can get the vaccine on the HealthDirect website - www.healthdirect.gov.au/covid-19-vaccination

Q4 – Do I need treatment for my bleeding disorder before I have the vaccine?

A - Both of the currently approved vaccines require 2 intramuscular injections over a number of weeks for full vaccination. They cannot be given sub-cutaneously (under the skin) like the Fluvax.

You may also need to have treatment beforehand to prevent bleeding from the injection. Please contact your HTC to discuss this.

If you have a moderate or severe bleeding disorder, such as haemophilia or VWD or a rare clotting factor deficiency:

- If you are on prophylaxis with clotting factor concentrate, time it to have it on the day of your vaccination before the injection
- If you do not routinely give yourself factor, please contact your HTC for advice
- If you are taking emicizumab (Hemlibra®), whether you have inhibitors or not, just follow your usual treatment plan - you do not need to take any extra treatments before the vaccine injection.

If you have mild haemophilia or Type 1 or Type 2 VWD:

- Usually you will not need any special treatment with factor concentrate or DDAVP before the vaccine. Please follow the general precautions for immunisations - see below.
- However, if you have ever had a problem with bleeding from an injection in the past, please contact your HTC or haematologist for advice before you have the vaccine.

Q5 – How do I prevent bleeding with the vaccine injection?

A – As you would do with any immunisation, let the health care provider who is giving the vaccine know that you have a bleeding disorder.

- Ask them to use the smallest gauge needle that is available for the vaccine. Some COVID-19 vaccines must be administered with the needle and syringe package provided and a smaller gauge needle may not be possible.
- Apply pressure on the injection site for 10 minutes after the injection to reduce bleeding and swelling
- Check the injection site several minutes and 2-4 hours after the injection, both visually and by touching it, to make sure bleeding and swelling (haematoma) has not occurred
- You may have discomfort in the arm for 1-2 days afterwards. If it becomes worse and there is swelling, contact your Haemophilia Treatment Centre (HTC)
- Do not lift anything heavy with that arm for 24 hours, eg, shopping bags, gym weights, handbags.

Q6 – Does my bleeding disorder mean I am more likely to have an allergic reaction?

A - No.

It is rare, but some of the vaccines are known to cause allergic reactions in people who have a history of severe allergic reaction.

If you have ever had an allergic reaction to any vaccine or drug (for example, a severe allergic reaction to PEG or other vaccines) or have had other severe allergic reactions, you should talk to your doctor before you have the vaccine.

If you experience an allergic reaction after the vaccine injection (fever, warmth, redness, itchy skin, rash, shortness of breath, or swelling of the face or tongue), contact your doctor immediately and go to the nearest hospital emergency department straight away as it can be life-threatening.

Q7 – Do I need to have the Fluvax as well as the COVID-19 vaccine?

A - Current advice is that people should still have a Fluvax this season as well as the COVID vaccination.

Ask your doctor about having Fluvax and the timing of having it if you are also having the COVID vaccination.

If you have any questions about your bleeding disorder in relation to the COVID-19 vaccine, contact your [Haemophilia Treatment Centre](#) or your treating haematologist.

Contact details for Haemophilia Treatment Centres are available on the HFA website - www.haemophilia.org.au/support-services/treatment-services

Important Note: This information was developed by Haemophilia Foundation Australia for education and information purposes only and does not replace advice from a treating health professional. Always see your health care provider for assessment and advice about your individual health before taking action or relying on published information.

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