



## **Recommendation of the SSoP: Spinal cord injury and vaccination against COVID-19**

15 January 2021

### **Background:**

As the vaccination against COVID-19 is prescribed and recommended by the authorities, the SSoP refers to all the documents issued by the Swiss government.

On 22 December 2020, the first FOPH vaccination recommendation for the vaccination against COVID-19 was published (1).

*Based on the information on the website on 10 January 2021, the SSoP would like to refer to the following points in particular:*

Vaccine doses will be delivered to Switzerland in batches, which is why vaccination of the population will take months.

People who are at especially high risk will be vaccinated first. The authorities in the individual cantons will determine when and where people who are at risk can be vaccinated. Information about this is available on the [cantonal website](#). Each canton will decide independently who is assessed to be at risk and how to prioritise the vaccinations.

The aim of this vaccination is to provide direct protection for vaccinated people against severe cases of the disease, including the reduction and prevention of hospitalisations and deaths (1).

The COVID-19 vaccination is free of charge for those affected and will be funded by the Swiss government and health insurance companies.

People at especially high risk are 1. People with an increased risk of severe cases of the disease, 2. Healthcare professionals with patient contact and carers for people at especially high risk and 3. Close contacts of people defined to be at especially high risk (adult household members). In addition, the people listed under Points 4. and 5. will also be vaccinated.

### **1. People at especially high risk:**

People aged  $\geq 65$  years and adults under 65 years with chronic diseases. These include certain forms of

- a. Cardiac disease
- b. Arterial hypertension
- c. Respiratory disease (including COPD and pulmonary fibrosis)
- d. Kidney disease
- e. Diabetes mellitus
- f. Obesity (BMI  $\geq 35$  kg/m<sup>2</sup>)

g. Congenital or acquired immunodeficiency and immunosuppressive therapy.

**2. Healthcare professionals with patient contact and carers for people at especially high risk**

As the vaccine is not yet fully available, it is possible that institutions and cantons will prioritise healthcare professionals differently. Specialist medical staff caring directly for patients with acute COVID-19 may be prioritised. It can be assumed that the vaccination will be available to all interested parties over the coming months.

**3. Close contacts of people defined to be at especially high risk (adult household members)**

The aim of vaccinating groups 2 and 3 is to reduce COVID-19 exposure for people at especially high risk. A further aim is to provide direct protection for vaccinated people against frequent mild cases and rare severe cases of the disease. This will help to maintain a functioning healthcare system and to ensure the care of people at especially high risk by reducing the loss of working hours caused by cases of COVID-19.

**4. Adults under 65 years in communal facilities with an increased risk of infection and outbreaks**

The vaccination aims to help prevent/reduce outbreaks in these facilities. On the one hand, the vaccination will reduce the number of cases of the disease and, on the other hand, it will prevent severe cases and deaths in vaccinated people, which will also reduce the number of hospitalisations.

**5. Vaccination is also recommended for all other adults as soon as the vaccine is available in sufficient quantities.**

For the time being, the vaccination is not yet recommended for pregnant women and for children and adolescents under the age of 18 years (under the age of 16 years for ComirnatyR). There is insufficient data available for the use of the vaccine in these groups.

Based on the current level of knowledge (2;3;4;5), people with a spinal cord injury do not have a generally increased risk of severe cases of COVID-19. Their vaccination should be prioritised due to the additional diseases (comorbidities) and increased susceptibility to pulmonary complications, in particular in people with tetraplegia or high-level paraplegia. As with all vaccinations, vaccine urgency must be weighed up against vaccine tolerance on a case-by-case basis, with the risk of an expected severe case of COVID-19 and the presence of known chronic diseases being relevant factors.

As the vaccination against COVID-19 is prescribed and recommended by the authorities, the applicable laws basically cover with two primary subjects of liability: the manufacturer of the vaccine, on the one hand, and the vaccinating doctor, on the other hand. The doctor must also contribute to the implementation of the national vaccination plan (6). In addition to the duty of care during vaccination, the duties of the vaccinating doctor also include an individual conversation with the patient that cannot be replaced by an information form (6).

From the point of view of the SSoP, vaccination against COVID-19 is generally highly recommended.

To obtain individual details on the procedure, people with a spinal cord injury should contact their GP or their preferred spinal cord medicine centre.

Where and how vaccination will take place for people with a spinal cord injury depends on their canton of residence. (see link)

The spinal cord medicine centres are committed to representing the particular situation of people with a spinal cord injury at a political level and to making vaccination against COVID-19 possible.

- 1) Federal Office of Public Health: <https://foph-coronavirus.ch/vaccination/>
- 2) Spinal Cord injury and COVID-19: some thoughts after first wave, J. Sanchez-Raya; Spinal Cord (2020) 58:841-843
- 3) Risk Factors for COVID-19 Mortality among Privately Insured Patients, White Paper, FairHealth, 2020
- 4) Spinal Injury Association. Information Sheet, Corona Vaccine, 6 January 2021
- 5) Clinical features and prognosis of COVID-19 in people with spinal cord injury: a case-control study, S. D'Andrea, Spinal Cord Ser Cases. 2020; 6: 69
- 6) COVID-19-Impfung: Haftung und Patientenrechte; U. Pally Hofmann; Schweizerische Ärztezeitung; 2021;102(1-2):5-7