MARAC Advisory Statement: Immunizations

August 30, 2022 - August is National Immunization Awareness Month. What does that mean for individuals with sickle cell disease (SCD)?

The Big Picture from SCDA MARAC

Individuals with sickle cell disease are more likely to have complications from many infections and receive a lot of benefit from immunizations. Family members can help protect a child or adult with sickle cell disease by also getting immunizations.

More Information

Immunizations and vaccines protect people from serious disease. The possible risks from a vaccine are much smaller than the possible bad outcomes from the diseases.

Streptococcus Pneumoniae

a. *Streptococcus pneumoniae* bacteria was a leading cause of death for children with SCD.

b. Infection with Strep pneumo can move quickly from fever to extremely sick in the intensive care in just a few hours for children with SCD. Losing spleen function due to clogging of the spleen with sickle red blood cells is what makes Strep pneumo bacteria so dangerous for SCD patients.

c. Immunizations against Strep pneumo are important for every child, and extra immunizations are recommended for individuals with SCD: Pneumovax-23 and PCV20.

Monkeypox (MPV)

a. MARAC monitoring has not found any unusual monkeypox problems in individuals with sickle cell disease. If anybody hears of unusual events with monkeypox and sickle cell disease, please pass along this information to the SCDA Chief Medical Officer Dr. Lewis Hsu at info@sicklecelldisease.org.

b. MARAC encourages anyone with symptoms of monkeypox (MPV) to see a health care provider to get tested. If you do not have access to a provider, visit findahealthcenter.hrsa.gov to get connected.

c. There is a vaccine available for those who are at highest risk. If you are experiencing any symptoms contact your health care provider, avoid close contact with others and take a break from sex, going out to bars, gyms, clubs and other events. Do not share personal items, wash your hands and clean shared surfaces regularly.

COVID-19

a. The latest data continues to show that SCD does have increased vulnerability to severe COVID.

b. COVID can trigger SCD symptoms like vaso-occlusive pain or sickle acute chest syndrome.

c. MARAC strongly urges everyone with SCD and their families to get vaccinated and get all recommended boosters. In addition, you should consider wearing a mask, avoiding crowds and standing at least six feet away from other people.

continued
COVID-19 (continued)

d. Do not attend social events if you have symptoms of COVID-19 or tested positive for COVID 5 days prior, even if you’re vaccinated.
e. If you do catch COVID, SCD is among the conditions eligible to receive treatments to reduce the risk of getting severe disease and hospitalization. Contact your health care provider.

Influenza (the Flu)

a. MARAC encourages everyone to get immunized against influenza, especially individuals with SCD and their family members.
b. Influenza can lead to severe illness in individuals with SCD. Influenza can trigger a vaso-occlusive painful event or acute chest syndrome. The risks of the immunizations are less than the risks of severe influenza disease.

Other diseases

a. Immunizations against meningitis are very important in all individuals living with sickle cell disease.
b. Children with sickle cell should all be immunized following the recommendations of the CDC and American Academy of Pediatrics. Childhood immunizations can help protect against diseases that are deadly or disabling, like measles, polio, mumps, whooping cough or rubella.
c. There is currently an outbreak of Polio in communities with low rates of polio immunizations. Polio can cause permanent paralysis.
d. In tropical areas with malaria, avoid mosquito bites and take anti-malarial medicines, especially young children with SCD. Malaria immunizations began to be offered in 2021.
e. The risks of the immunizations are much smaller than the risks of these severe diseases.