

South African Transplant Society

COVID-19 VACCINATION

Position Statement on COVID-19 Vaccination in South Africa

The South African Transplantation Society (SATS) recommends that all patients for organ transplantation be vaccinated against COVID-19.

We recognize and advocate for the use of vaccines in the prevention of COVID-19 infections. There is clear scientific evidence for the use of vaccinations to reduce the risk of both hospitalization and death in COVID-19 infections with the benefit of vaccination far outweighing its risk.

The mortality rate for transplant recipients from COVID-19 is reported to be 20%, which is 10-fold higher than the general population (1), due to their need for lifelong immunosuppression medication.

With such a scarce resource such as organs for transplantation there is an ethical obligation to ensure that the gift of donation is used in the best way possible and for maximum benefit.

As such transplant centres require patients to demonstrate adherence to optimum medical therapy prior to surgery and that patients undertake to continue such therapy after transplantation.

Adherence to best medical therapy (e.g. for diabetes and hypertension), being fully vaccinated including booster doses (e.g. against hepatitis B), abstinence from alcohol consumption (in cases of alcoholic liver cirrhosis) are already established as routine in a transplant assessment and work-up.

Transplant centres should appropriately counsel patients and living donors about their need for COVID-19 vaccination. They should play an active role in ensuring that misinformation and vaccine hesitancy is appropriately addressed as part of that work-up. All healthcare workers involved in the transplantation or management of transplant patients should be vaccinated against COVID-19. For children receiving transplants it is important that family members are also fully vaccinated.



Dr David Thomson - SATS President, on behalf of the EXECUTIVE COMMITTEE

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Further information:

Currently in South Africa there are two SARS-CoV-2 vaccines being used in the national vaccine programme: the Pfizer-BioNTech and the Johnson & Johnson vaccines. The Pfizer-BioNTech vaccine is an mRNA vaccine that is given as two doses separated by 42 days. The Johnson & Johnson vaccine is an adenovirus-vectored DNA vaccine given as a single dose.

Both were evaluated in randomized controlled trials involving over 40,000 participants to evaluate efficacy and safety before being used in vaccine programmes. In these trials, the Pfizer-BioNTech vaccine resulted in a 95% reduction in COVID-19 infections. (2) A similar reduction in cases of severe COVID-19 was observed. The Johnson and Johnson vaccine resulted in an 85% reduction in severe-critical COVID-19. (3) Even with the spread of the delta variant of the virus both vaccines remain highly effective at preventing severe COVID-19 that results in hospital admission and death.

Mild side effects are common with all SARS-CoV-2 vaccines and reflect the immune system being stimulated by the vaccine. Severe side effects have also been reported in a transparent manner during the trials and during programmatic use but are exceptionally rare. The overwhelming benefits of vaccination in terms of preventing death from COVID-19 far outweigh the risks of these rare severe side effects.

As a professional society, we therefore strongly recommend the use of vaccination for COVID-19 and would encourage all people (including transplant recipients) to be vaccinated and so help protect themselves and others.

References:

- (1) M. Alfishawy et al . Int J Org Transplant Med 2020; Vol. 11 (4): p145-162
- (2) Polack, Fernando P., et al. "Safety and efficacy of the BNT162b2 mRNA Covid-19 vaccine." *New England Journal of Medicine* (2020).
- (3) Sadoff, Jerald, et al. "Safety and efficacy of single-dose Ad26. COV2. S vaccine against Covid-19." *New England Journal of Medicine* 384.23 (2021): 2187-2201.