MS Education Event- February 2021

Question & Answer Session Follow-up

Question: Although vaccines are generally safe, if you have had a neurological reaction to a flu vaccine, are you at risk to experience a similar result with the COVID-19 vaccine?

Answer: Since the COVID-19 vaccine is different from the flu vaccine, having a reaction to the flu vaccine may not necessarily increase your risk of having a reaction to the COVID-19 vaccine.

Question: Does our medication get rid of current B-cells or disrupt the process of making new B-cells?

Answer: Some MS medications like ocrelizumab (Ocrevus) or ofatumumab (Kesimpta) work by getting rid of B-cells that are in circulation. Over some time, the B-cells can repopulate if the medication is discontinued.

Question: Has additional literature regarding the serious side effects that have occurred been made available in academia? I understand these have been rare. I'm just curious if there have been common threads identified.

Answer: So far, there is no scientific evidence on the effects of the COVID-19 vaccine in patients with MS.

Question: If I had a bad reaction to the Copaxone injection are there any similar materials in the COVID-19 vaccine that I may have a similar reaction to?

Answer: The COVID-19 vaccine and Copaxone do not have the same ingredients; therefore, a reaction with Copaxone will not increase your risk for a reaction with the COVID-19 vaccine.

Question: Is Vumerity considered an immunosuppressant?

Answer: Vumerity is very similar to Tecfidera and both of these drugs can be immune suppressive. They can reduce a group of cells called lymphocytes.

Question: Is the COVID-19 vaccine a live vaccine? Should it be taken by MS patients?

Answer: None of the current COVID-19 vaccines available in the United States are live vaccines. The national MS society has release guidance on COVID-19 vaccines in people with MS and the general recommendation is that the vaccines are safe and should be taken by MS patients. More information here: https://www.nationalmssociety.org/coronavirus-covid-19information/multiple-sclerosis-and-coronavirus/covid-19-vaccine-

guidance



Question: How do we know if the medication we are on for MS will interact with the COVID-19 vaccine?

Answer: Based on studies with other vaccines in the past, some MS treatments may impact the response to certain vaccines. For instance, medications like ocrelizumab (Ocrevus) and fingolimod (Gilenya) have been reported to reduce response to the flu or other vaccines. However, the COVID-19 vaccine has not been studied in patients with MS. We are currently enrolling in a study to answer this question.

Question: Have any of your MS patients received the vaccine? Any neurological side effects you can share?

Answer: Some MS patients have received the vaccine. We are enrolling in a study to find out how MS patients respond to the COVID-19 vaccine, but at this time we do not have any results available yet.

Question: If someone is taking the Ocrevus treatment, can they still get the flu shot and the COVID-19 vaccine?

Answer: Based on the National Multiple Sclerosis Society guidance, patients on Ocrevus should consider getting the vaccine and discuss the timing of the vaccine with their doctor. It may be best to wait at least 12 weeks after the last infusion before getting the vaccine according to the guideline from the National Multiple Sclerosis Society.

Question: When will the COVID-19 vaccine be available for individuals with MS? Do we need a doctor's recommendation to receive the COVID-19 vaccine sooner because of having MS?

Answer: Yes, the COVID-19 vaccine will be available to all individuals including those who have MS. Most states have guidelines and policies in how the vaccine is distributed and it's often according to age groups. You can discuss when the vaccine will be available to you with your primary doctor.

Question: My neurologist said that having the COVID-19 vaccine may possibly cause a relapse. She said that there is not enough information at this time to know what will happen to those with MS. What is your reaction to this?

Answer: At this time there is no evidence that the COVID-19 vaccine can cause a relapse. All vaccine types that are available in the U.S. are not live vaccines. According to the National Multiple Sclerosis Society's guidance for the COVID-19 vaccine, people with MS should be vaccinated for COVID-19 in order to prevent infection. You can find more information here:

<u>https://www.nationalmssociety.org/coronavirus-covid-19-</u> <u>information/multiple-sclerosis-and-coronavirus/covid-19-vaccine-</u> <u>guidance</u>



Question: Is it true that the vaccine has some of the same ingredients as Rebif?

Answer: The COVID-19 vaccine does not have the same ingredients as Rebif.

Question: You mentioned the non-live vaccines being thought generally to be safe or relatively safe. What are some specific vaccines that are on that "safe" list?

Answer: All current COVID-19 vaccines are non-live vaccines and according to the National Multiple Sclerosis Society, these vaccines are safe in patients with MS. Other non-live vaccines include the flu vaccine and the Shingrix vaccine. In general, it is good practice to discuss any new vaccinations with your MS doctor before you take it.

Question: How do you "optimally time" the vaccine with your DMT (disease-modifying treatment)? What are the consequences?

Answer: The guidance from the National Multiple Sclerosis Society includes timing for a few DMTs. There is a complete outline of this timing here: <u>https://www.nationalmssociety.org/coronavirus-covid-19-</u> information/multiple-sclerosis-and-coronavirus/covid-19-vaccine-guidance/Timing-MS-Medications-with-<u>COVID-19-Vaccines</u>

Question: As a recovered COVID-19 patient with MS, should I get a vaccine? I had a monoclonal antibody infusion.

Answer: According to the CDC website's FAQ page: "Yes, you should be vaccinated regardless of whether you already had COVID-19... If you were treated for COVID-19 with monoclonal antibodies or convalescent plasma, you should wait 90 days before getting a COVID-19 vaccine." More information here: <u>https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fag.html</u>

Question: How do we sign up for the vaccine?

Answer: Once your age group is eligible for the vaccine, you can sign up on MyChart or discuss with your primary doctor.

Question: Is it safe to get the vaccine if I'm on Aubagio?

Answer: According to the National Multiple Sclerosis Society guidance on the COVID-19 vaccine, patients on disease modifying drugs including Aubagio should consider getting the COVID-19 vaccine. More information here: <u>https://www.nationalmssociety.orq/coronavirus-covid-19-</u> information/multiple-sclerosis-and-coronavirus/covid-19-vaccineguidance/Timing-MS-Medications-with-COVID-19-Vaccines



Question: If a person with MS on Mayzent gets the COVID-19 vaccine, I understand the vaccine may not be as effective because of the DMT. Does this also mean that the vaccine is not going to make the person really sick?

Answer: There is no evidence that being on a DMT reduces the chance of mild side effects as a result of vaccination.

Question: AstraZeneca trials reported transverse myelitis. What is the difference in their vaccine and Pfizer and Moderna?

Answer: The AstraZeneca vaccine uses a viral vector technology while the Pfizer and Moderna vaccines are mRNA vaccines.

Please note: Our MS physicians and clinical team have provided responses to these listed questions that were posed at a live webinar event. The answers noted above are not replacement for treatment. For questions and additional information, please discuss with your MS Provider or Neurologist.

Visit <u>wexnermedical.osu.edu/MSCommunity</u> for resources, to learn more about The Ohio State University Medical Center's MS Clinic and Care Team and to make an appointment.



