Information for Cancer Patients about the Influenza (Flu) Vaccine During the Coronavirus (COVID-19) Pandemic

As a result of the current pandemic there is a substantial media campaign around the flu vaccine and eligibility for the vaccine has been increased. We’d like to take this opportunity to provide clarity about which of our patients should have the flu vaccine and, very importantly, when to have it. This information has been verified by the Consultant Oncologists (Cancer Doctors) at the Oncology Centre and is based on current guidance.

I’ve just been diagnosed with cancer, can I have a flu vaccine?
If you are newly diagnosed and have not yet started treatment you should have your flu vaccine at the earliest opportunity.

I’m having chemotherapy treatment currently, when can I have the flu vaccine?
If you are currently receiving chemotherapy you need to plan your vaccination around your treatment cycles. The best time to have the vaccination is one or two days before your next cycle of chemotherapy, when your blood count is likely to be highest i.e. if you are on a three weekly (21 day) cycle the best day to have the vaccination is days 19-20.

I’m having immunotherapy treatment currently, when can I have the flu vaccine?
If you’re having single agent immunotherapy you need to plan your vaccination around your treatment cycles. The best time to have the vaccination is in the week before your next treatment cycle is due i.e. if you are on a three weekly (21 day) cycle the best day to have the vaccination is days 14-20.

If you are receiving dual agent immunotherapy you should contact your Consultant for individual advice.

If you’re unsure about the type of your treatment you’re having please contact your treatment unit for advice.

I’m having radiotherapy currently, when can I have the flu vaccine?
Yes, you can have the flu vaccine at any point in your radiotherapy treatment.

I’ve been treated for cancer in the past, can I have the flu vaccine?
If you have previously been treated for cancer you may still be eligible for the vaccination and there are no restrictions on when you should have it.

Can my family also have the flu vaccine?
People who live in the same household (property) as someone on the shielded list are also able to have the flu vaccine this year. You should be on the shielded list if you are: having active chemotherapy; radical radiotherapy for lung cancer; have a cancer of the blood or bone marrow (such as leukaemia, lymphoma or myeloma at any stage of treatment); having immunotherapy or ongoing antibody treatment; having other targeted cancer treatments (such as protein kinase inhibitors or PARP inhibitors); anyone who has had a bone marrow or stem cell transplant within the last 6 months or who are still taking immunosuppression drugs. If you are unclear if you are in this group please speak to your medical team.

Important notes:
If you have previously had an anaphylactic reaction in response to a flu vaccine or if you have an egg allergy you should seek medical advice from your GP.

The nasal spray version of the flu vaccine (commonly given to children) contains a live attenuated version of the flu virus, this makes it unsuitable for anyone whose immune response may be compromised. It is therefore not suitable for anyone currently having cancer treatment.

Your specialist may recommend that you do not have a vaccine during treatment if you have a blood cancer. Cancers of the blood include leukaemia, lymphoma and myeloma. They can let you know when you can have a vaccine after your treatment has finished. If you have had a stem cell transplant, your specialist will usually suggest you wait about 6 months before you have the flu vaccine.

Coughs and Colds
We appreciate that the symptoms of COVID-19 and common coughs and colds that can affect us all at this time of year are very similar and we realise that this may bring additional anxiety.

<table>
<thead>
<tr>
<th>Symptom</th>
<th>COVID-19 Symptoms range from mild to severe.</th>
<th>Flu Rapid onset of symptoms.</th>
<th>Cold Gradual onset of symptoms.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fever</td>
<td>Common</td>
<td>Common</td>
<td>Rare</td>
</tr>
<tr>
<td>Cough</td>
<td>Common (new &amp; continuous)</td>
<td>Common (usually dry)</td>
<td>Common (usually mild)</td>
</tr>
<tr>
<td>Loss of Taste/Smell</td>
<td>Common</td>
<td>Rare</td>
<td>Sometimes</td>
</tr>
<tr>
<td>Sneezing</td>
<td>No</td>
<td>No</td>
<td>Common</td>
</tr>
<tr>
<td>Fatigue</td>
<td>Sometimes</td>
<td>Common</td>
<td>Sometimes</td>
</tr>
<tr>
<td>Aches &amp; Pains</td>
<td>Sometimes</td>
<td>Common</td>
<td>Common</td>
</tr>
<tr>
<td>Sore Throat</td>
<td>Sometimes</td>
<td>Sometimes</td>
<td>Common</td>
</tr>
<tr>
<td>Shortness of Breath</td>
<td>Sometimes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Headaches</td>
<td>Sometimes</td>
<td>Common</td>
<td>Rare</td>
</tr>
<tr>
<td>Runny or Stuffy Nose</td>
<td>Rare</td>
<td>Sometimes</td>
<td>Common</td>
</tr>
</tbody>
</table>

Source: NHS and WHO websites (Sept 2020).

Swabbing
Routine nose and throat swabs may be in place for specific patient groups based at some points on treatment. We will advise you of the process should this be relevant to you. Staff are being swabbed according to hospital guidelines and best advice available.

Further information is available here:

If you have any queries or concerns at any point please don’t hesitate to speak to a member of the team.

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