

Recommended vaccinations for people with cancer*



Cancer can affect the immune system. This means some people with cancer are more at risk of become seriously ill from bugs like COVID-19, flu and pneumonia because their immune systems are less able to fight infection. If this applies to you, you can protect yourself by getting vaccinated against COVID-19 and flu. People whose immune systems are particularly weak can also get vaccinated against pneumococcal infections that can cause pneumonia, septicaemia and meningitis.

These vaccinations are free on the NHS for eligible groups. If you are currently on systemic anti-cancer therapy (SACT) – for example, chemotherapy or immunotherapy – then follow this guidance about when to get vaccinated.

*The Flu and Pneumococcal information does not apply to patients who are only having radiotherapy. All sections exclude stem cell / bone marrow transplant patients – they follow their own vaccination schedule in line with EBMT guidelines.

Vaccine	Who is eligible?	When to get vaccinated?	How to get vaccinated?	Other information
COVID-19	There is a NHS national programme. Currently all adults over the age of 18 are eligible to receive a primary vaccination course and a booster vaccine	 Any time but it is advisable not to get vaccinated: On the same day as receiving most systemic anti-cancer therapy*. While being treated for an infection. If feeling very unwell due to side-effects from anti- cancer treatment. In the week before planned surgery and to wait until fully recovered after being discharged. If you are on chemotherapy the best time to get vaccinated is in the week before your next chemotherapy is due 	You can book your vaccines through the NHS portal which can be accessed here https:// www.nhs.uk/ conditions/ coronavirus- covid-19/ coronavirus- vaccination/ book- coronavirus- vaccination/	We would strongly recommend that people with cancer get vaccinated when invited, unless specifically advised not to by their medical team. In general, the advice to people with cancer is not different to any other older adult with an underlying health issue. The benefits of vaccination are considerable for these groups. Although people with weak immune systems may not develop a strong a response to the vaccine, the potential benefits are still significant. The additional (3rd) dose

		*If you're on daily tablet treatment, you can be vaccinated the same day. You can receive a 3rd dose of the vaccine as part of the initial vaccination schedule if you are on SACT or high doses (more than 40mg) prednisolone as long as it has been at least 8 weeks since your second dose Everyone is eligible to receive a booster dose as long as it has been at least 3 months since you completed the primary course		and booster vaccines are recommended to help with this.
Flu This is an annual (1-year) vaccination that protects against the main strains of flu this year.	Anyone* under 65 in high-risk groups (incl people with cancer) Anyone aged 65 and over Long-stay care home residents Close contacts of people whose immune systems are compromised (e.g. people who live with someone having chemotherapy) *Except babies under 6 months	Any time but preferably before treatment or before the next cycle of chemotherapy	Ask your GP or community pharmacist	People with weak immune systems may not develop a full set of antibodies to flu but the vaccination will still offer valuable partial protection

This is a one-off vaccination that can be repeated every 5 years for high-risk groups. It protects against pneumococcal infections that can develop into pneumonia, septicaemia or meningitis. Anyone aged 65 and over

Immunosuppressed patients (i.e. people whose immune systems are particularly weak) Ideally 4-6 weeks before you start treatment.

If this is not possible, you can be vaccinated up to 2 weeks before treatment.

If you have already begun treatment, or are due to start it in less than 2 weeks, we advise against having a pneumococcal vaccination until at least three months* after you complete treatment. This will allow your body to have a full antibody response to the vaccine.

*Leukaemia and bone marrow transplants patients should wait longer – see 'Other information' Ask your GP

If you have leukaemia, you should wait 6 months after completing chemotherapy.

Bone marrow transplant patients should be offered the vaccination 9-12 months following a transplant.