Should I Get the COVID-19's Third Shot Vaccination Booster?

We have been starting to get calls asking about the third dose COVID-19 vaccinations, what is considered "immunocompromised" which would qualify them at this time for the booster shot, and other related questions. This is the agreed direction from our oncologist team:

A patient is immunocompromised if one of the following conditions exist:

1) Anyone that is actively on treatment for malignancy (chemotherapy or immunotherapy).

2) Any patient with a hematologic malignancy - i.e. lymphoma, leukemia, myeloma, etc.

These immunocompromised patients are encouraged to receive a booster vaccine as recommended by the CDC. The CDC guidelines state the third dose of Moderna or Pfizer should be at least 28 days after the second dose for immunocompromised patients. (For the public it is 8 months after the second dose.) The current recommendation is that you get the same dose of booster that you received as original doses. There is no data available yet if those who received the Johnson & Johnson vaccination also get a booster.

Dr. Nwaneri, Medical Director at JENCC, expands to say, "The immune response (the number of antibodies generated to fight an infection or the COVID-19 virus in this case) generated by some patients is not very strong. This poor immune response is more common in patients undergoing treatment for cancer or other serious blood diseases. This may also happen in organ transplant patients who take medicines that prevent them from rejecting the transplanted organs or in patients who had a bone marrow (stem cell) transplant for serious blood cancers like multiple myeloma."

"Our group of doctors at JENCC and other cancer doctors/specialists do recommend a third booster shot to increase the chance of a more robust immune response. Additionally, patients and family members should continue to encourage everyone they know; especially close personal contacts, persons with chronic illnesses, and caregivers to persons with serious medical problems, to be vaccinated as soon as possible."

If patients do not fall into the above immunocompromised conditions, they should speak to their primary care physician or oncologist to determine what they should do.

Dr. Nwaneri states that the Delta variant (DV) and its ongoing effects have shown us that vaccination is important for all, that vaccination is protective and in the face of COVID-19 (for most variants) leads to mild illness and a very low likelihood of death (compared to what happened at the beginning of the COVID-19 pandemic; until the vaccines became available). He continues, "Many of the severe illnesses and deaths we are seeing currently with the DV has been in the unvaccinated populations of people or in people with severely compromised immune systems."

We encourage vigilance, diligent mask use; especially in enclosed spaces (indoor public spaces), and sensible social distancing/hand hygiene. Dr. Nwaneri says, "COVID-19 is likely going to be with us for much longer than anticipated, and a new norm may be learning to live with COVID-19 with its expected periodic mutations/variants over the long term. Our currently available vaccinations (despite their uncertainties) may be our only short-term protection, for now. Everyone should strive to be vaccinated."