### **COVID-19 Vaccine Third Dose**



#### Why do I need a third dose?

- Emerging evidence suggests vaccine effectiveness against asymptomatic infection and mild COVID-19 disease may decrease over time<sup>1,2,3</sup>. Due to the highly contagious Omicron variant, a third dose is recommended to help restore and maintain protection against infection<sup>1,2,3</sup>.
- Two doses of COVID-19 vaccines may be less effective against the Omicron variant, compared to the Delta strain and previous variants<sup>4</sup>. A third dose offers additional protection against the Omicron variant<sup>5</sup>.
- Although Omicron appears to cause less severe disease, third doses are recommended to protect our healthcare system and limit the number of hospitalizations, due to Omicron's high transmissibility<sup>4</sup>.

#### Is it safe?

- Research suggests that a third dose of an mRNA COVID-19 vaccine produces a very good immune response that is higher than the immune response after two doses, has a favourable safety profile, and provides good short-term protection against infection<sup>2</sup>.
- Side effects of a third dose can include pain, redness or swelling at the site of injection, as well as tiredness, headache, muscle pain, chills, and mild fever<sup>6</sup>.

## Which vaccines will be offered for the third dose?

 Only Moderna or Pfizer vaccines will be used for third doses (regardless of which COVID-19 vaccine was received for the first and second doses)<sup>2</sup>. It is advised that individuals younger



than 30 years of age receive a Pfizer vaccine for their third dose. This is due to the higher rate of myocarditis/pericarditis seen in individuals between the ages of 12 and 29 following vaccination with Moderna compared to Pfizer<sup>7</sup>.

#### Who should receive a third dose?

- 1. Adults 18 years of age and older<sup>2</sup>
- Residents of long-term care homes, retirement homes and other congregate settings for older adults<sup>2</sup>
- 3. Moderately and severely immunocompromised individuals<sup>2</sup>
- Health care workers and designated essential caregivers in congregate settings (including long-term care home and retirement home staff and designated caregivers)<sup>2</sup>
- Individuals who received a complete series of viral vector vaccines (two doses of the AstraZeneca or Janssen COVID-19 vaccine)<sup>2</sup>
- 6. First Nation, Inuit and Métis adults and their non-Indigenous household members<sup>2</sup>



**ST. MICHAEL'S** UNITY HEALTH TORONTO It is recommended that moderately and severely immunocompromised individuals receive their third dose 28 to 56 days after their second dose, but the timing should be decided with their treating provider<sup>2,9</sup>. All other listed groups should receive their third dose at least three months after their second dose<sup>2,5</sup>. Individuals 18 years of age and older are also eligible for a third dose three months after receiving their second dose<sup>8</sup>. In the coming months, Ontario will be expanding eligibility for third doses to all Ontarians aged 12 and over<sup>9</sup>.

## Why are certain populations strongly encouraged to receive a third dose?

- Older adult populations living in high-risk settings (i.e., congregate living with other vulnerable, high-risk adults) are at an increased risk of infection and severe illness due to a reduced immune response and a more rapidly decreasing antibody response<sup>1</sup>.
- Moderately and severely immunocompromised individuals are at increased risk of severe outcomes from COVID-19 infection due to their sub-optimal immune response to the two-dose COVID-19 vaccination series<sup>1,2</sup>.
- Older adults are more likely to experience severe illness, hospitalization, and death from COVID-19 infection, due to their age and underlying medical conditions<sup>2</sup>.
- Health care workers are at an increased risk of COVID-19 infection due to their ongoing interactions and potential exposure to patients who are or may be infected with COVID-19<sup>2</sup>. Health care workers may also pose an increased risk of transmission to vulnerable populations they work with, if they become infected with COVID-19<sup>1</sup>.
- Vaccine effectiveness against COVID-19 has consistently been somewhat lower with viral vector vaccines compared to mRNA vaccines<sup>3</sup>.
- First Nations, Inuit and Métis populations have been disproportionately affected by COVID-19 in Canada and have experienced higher rates

of COVID-19 infection due to various health inequities<sup>1,2</sup>.

Third doses are being recommended to these populations based on evidence of gradual waning immunity three months after receiving a second dose and a higher risk of severe illness from COVID-19<sup>2</sup>.

#### Who should receive a fourth dose?

- <u>A fourth dose of a COVID-19 mRNA vaccine is</u> recommended for residents of long-term care homes, retirement homes, and older adults living in other congregate settings who received their third dose at least three months ago due to waning immunity against the COVID-19 virus<sup>8</sup>.
- Moderately to severely immunocompromised individuals are also recommended to receive a fourth dose at least three months after their third dose<sup>8</sup>.

# How can I book my third dose appointment?

- Through the <u>COVID-19 vaccination portal</u>
- Call the Provincial Vaccine Contact Centre at 1-833-943-3900
- Public health units that use their own booking systems
- Indigenous-led vaccination clinics
- Select pharmacies
- Primary care settings



### References

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