

Frequently Asked Questions related to COVID-19 Vaccines:

Who will UCSF vaccinate first?

Healthcare workers and nursing home residents are being vaccinated first. UCSF is working on the details of who will be considered for vaccination next.

Vaccine eligibility criteria is still being finalized by UCSF's advisory council. Early information indicates that the following groups of patients will likely be considered eligible for early vaccination:

- UCSF Patients over the age of 65, especially those with heart issues, lung problems, and diabetes.
- UCSF Patients aged 50-64 who are considered high risk. High risk criteria is still being determined, however, it MIGHT include patients on certain MS medications
- UCSF Patients not fitting into the above criteria that have significant disability, especially those requiring caregiver assistance with their activities of daily living. (Eating, bathing, taking medications, etc.)

Can my doctor place me on a list for early vaccination?

No. Individual UCSF providers do not have the ability to change their patients' status with regard to vaccine eligibility. Vaccine eligibility will be determined by an advisory council based on current scientific knowledge regarding risk of coronavirus complications. UCSF providers do not prescribe the vaccine. Once a pool of eligible patients is identified they will be sent vaccine invites via MyChart per a lottery system.

What should I do if I'm offered an early vaccine?

If you are a healthcare worker or otherwise eligible for early vaccination please contact your MS provider via MyChart and let them know when you expect to be vaccinated. We will review your MS medications and advise you if any changes should be made.

Is it safe for me to take a COVID vaccine given that I have Multiple Sclerosis?

The vaccine clinical trials do not include individuals with autoimmune conditions like multiple sclerosis (MS), but there is no indication based on the vaccine mechanisms that these vaccines would be unsafe for people with MS. We generally recommend that our MS patients take this vaccine when available unless they have other conditions that would prevent them from doing so, such as history of severe allergic reactions to vaccines.

Why was I told in the past to avoid vaccines?

Prior concerns about vaccine use in people with MS were largely due to the medications MS patients take and not the MS itself. In general those on MS-specific therapies and other immunotherapies are advised to avoid live vaccines, but we still recommend receiving age-appropriate inactivated/non-live vaccines. The first-generation COVID-19 vaccines with proven efficacy are not live vaccines. These include the Pfizer BioNTech mRNA vaccine (recently FDA approved 12/10/20), Moderna mRNA vaccine (to be reviewed by FDA 12/17/20), and the AstraZeneca adenoviral vector vaccine.

Does MS qualify as a condition that would get me on an “early list” for vaccination?

MS alone doesn't increase risk for COVID complications so it would not qualify a person for earlier immunization. Some patients that are age 50 or older might fall into an early vaccination category if they are on certain MS medications. We don't yet know specifically which medications will qualify a patient for earlier vaccination. We are awaiting formal guidance from the UCSF Medical Center vaccine distribution committees on specifics.²

Can I receive the vaccine at my next appointment?

No, this vaccine is not yet available to the general public and it is unlikely that specialty clinics or infusion centers will offer this due to storage and security concerns. This may change as these vaccines become more widely available.

Will the vaccine be less effective given that I have MS and/or am on a Disease Modifying Therapy (DMT)?

MS alone doesn't reduce vaccine response. Overall we don't expect a significant blunting of response to COVID-19 vaccine for patients on MS therapies, with the exception of B-Cell depleting therapies like Ocrevus, Rituxan, Truxima, and Kesimpta. The vaccine might not be as effective for people taking B-cell depleting therapies as it would be for people not taking those medications. Though the immune response to vaccine may be decreased, we do feel the vaccines will provide some level of valuable protection.

I take infusions to help prevent MS relapses. Should I wait a certain length of time before or after my infusion to be vaccinated against COVID-19?

Yes, timing will likely play a role relative to vaccinations and infusions. This is something that should be talked about with your doctor before vaccination as each case is different.

Where can I find more information about COVID-19 vaccine availability through UCSF?

The UCSF Multiple Sclerosis and Neuroinflammation Center will not be distributing this vaccine. UCSF will eventually offer COVID-19 vaccines to UCSF patients once available. Please visit this site regularly for the latest information: <https://coronavirus.ucsf.edu/vaccines>

Additional Resources:

Multiple Sclerosis and the Coronavirus, National Multiple Sclerosis Society (Expected updated vaccine information in January 2021): <https://www.nationalmssociety.org/About-the-Society/News/COVID-19-Vaccine-Guidance-for-People-Living-with-M>

California Vaccinate ALL 58 Program Information (State of California COVID-19 Vaccine Deployment information): <https://covid19.ca.gov/vaccines/>

California Department of Public Health COVID-19 Information: <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/ncov2019.aspx>