

## Response to: 'Correspondence on 'Influence of COVID-19 pandemic on decisions for the management of people with inflammatory rheumatic and musculoskeletal diseases: a survey among EULAR countries' by Nokhatha *et al*

The letter from Al Nokhatha *et al* nicely complements our study whose primary purpose was to investigate how COVID-19 related closure of services influenced decisions of rheumatologists and health professionals in rheumatology regarding the management of patients with inflammatory rheumatic and musculoskeletal diseases (RMD).<sup>1,2</sup> In contrast to the study by Al Nokhatha *et al*, we did not include data on vaccinations, which were at that time still far away.

The authors of this letter correctly point out that vaccination is fundamental to our patients in order to protect them from adverse outcomes of (certain) infections. However, many patients with inflammatory RMD are immunocompromised, and it is well known that in such a clientele, vaccination is challenging regarding both efficacy and safety. Paget *et al* recently concluded that influenza vaccination should continuously be promoted during COVID-19 pandemic as a central public health measure.<sup>3</sup> The reason is that the evidence accrued so far clearly indicates that the management of the coronavirus pandemic can greatly benefit from influenza vaccination, for example, by facilitating differential diagnosis and by avoiding an overload of health services and hospitals associated with influenza infections.<sup>3,4</sup> Also, influenza vaccination protects elderly people which are particularly vulnerable to COVID-19. Al Nokhatha *et al* noted that there are some barriers to receive influenza vaccination that might also be relevant for ongoing vaccination against SARS-CoV-2: peoples' fear of adverse reactions, perceived good health, personal lack of belief in the vaccine effectiveness, a reported history of side effects, a lack of recommendation from healthcare workers or lack of access to the vaccine.<sup>1</sup> The authors of this correspondence have experienced some additional obstacles during COVID-19 pandemic such as patients' fear to enter health service structures, lack of manpower to adequately organise and conduct vaccination, lack of vaccine and patients' fear that influenza vaccination might lower the defence against COVID-19.

Given the vulnerability of patients with inflammatory RMD to infections, we need to make sure that our patients undergo influenza and SARS-CoV-2 vaccinations. We should develop strategies to address patients' specific concerns about the new vaccine, such as the fact that the vaccines have not been specifically tested in patients with autoimmune disease or that possible long-term consequences of SARS-CoV-2 vaccination are unknown yet.

In accordance with a recent statement from 'European League Against Rheumatism',<sup>5</sup> we think that rheumatologists should be the primary experts to discuss these issues with their patients. Moreover, national societies of rheumatology should launch public programmes influencing mass opinion in order to convince patients with RMD, their relatives and friends,

that vaccination against SARS-CoV-2 is the only way to protect people from COVID-19.

Christian Dejaco <sup>1,2</sup>, Johannes WJ Bijlsma <sup>3</sup>, Frank Buttgerit <sup>4</sup>

<sup>1</sup>Rheumatology, Medical University of Graz, Graz, Austria

<sup>2</sup>Rheumatology, Hospital of Brunico (SABES-ASDAA), Brunico, Italy

<sup>3</sup>Rheumatology & Clinical Immunology, University Medical Center Utrecht, Utrecht, The Netherlands

<sup>4</sup>Rheumatology and Immunology, Charité University, Berlin, Germany

**Correspondence to** Dr Christian Dejaco, Rheumatology, Medical University of Graz, 8036 Graz, Austria; christian.dejaco@gmx.net

**Handling editor** Josef S Smolen

**Contributors** All authors drafted the manuscript together and approved its final version.

**Funding** European League against Rheumatism (EULAR), project number EPI025.

**Competing interests** CD received consulting/speaker's fees from Abbvie, Eli Lilly, Janssen, Novartis, Pfizer, Roche and Sanofi, as well as grant support from Celgene, all unrelated to this manuscript. JWJB received honoraria from Lilly, Roche, Abbvie, Galapagos, SUN all unrelated to this manuscript. FB received consulting/speaker's fees from Abbvie, Lilly, Horizon Therapeutics, Pfizer and Roche/Chugai, all unrelated to this manuscript.

**Patient and public involvement** Patients and/or the public were not involved in the design, or conduct, or reporting, or dissemination plans of this research.

**Patient consent for publication** Not required.

**Provenance and peer review** Commissioned; internally peer reviewed.

© Author(s) (or their employer(s)) 2021. No commercial re-use. See rights and permissions. Published by BMJ.



**To cite** Dejaco C, Bijlsma JWJ, Buttgerit F. *Ann Rheum Dis* 2021;**80**:e171.

Received 18 January 2021

Accepted 20 January 2021

Published Online First 28 January 2021



► <http://dx.doi.org/10.1136/annrheumdis-2021-219847>

*Ann Rheum Dis* 2021;**80**:e171. doi:10.1136/annrheumdis-2021-219866

### ORCID iDs

Christian Dejaco <http://orcid.org/0000-0002-0173-0668>

Johannes WJ Bijlsma <http://orcid.org/0000-0002-0128-8451>

Frank Buttgerit <http://orcid.org/0000-0003-2534-550X>

### REFERENCES

- Al Nokhatha SA, MacEoin N, Conway R. Correspondence on 'Influence of COVID-19 pandemic on decisions for the management of people with inflammatory rheumatic and musculoskeletal diseases: a survey among EULAR countries'. *Ann Rheum Dis* 2021;**80**:e170.
- Dejaco C, Alunno A, Bijlsma JWJ, *et al*. Influence of COVID-19 pandemic on decisions for the management of people with inflammatory rheumatic and musculoskeletal diseases: a survey among EULAR countries. *Ann Rheum Dis* 2021;**80**:518–26.
- Paget J, Caini S, Cowling B, *et al*. The impact of influenza vaccination on the COVID-19 pandemic? evidence and lessons for public health policies. *Vaccine* 2020;**38**:6485–6.
- Li Q, Tang B, Bragazzi NL, *et al*. Modeling the impact of mass influenza vaccination and public health interventions on COVID-19 epidemics with limited detection capability. *Math Biosci* 2020;**325**:108378.
- EULAR. EULAR View-points on SARS-CoV-2 vaccination in patients with RMDs, 2021. Available: [https://www.eular.org/eular\\_sars\\_cov\\_2\\_vaccination\\_rmd\\_patients.cfm](https://www.eular.org/eular_sars_cov_2_vaccination_rmd_patients.cfm) [Accessed 15 Jan 2021].