

Fight Parkinson's statement on COVID 19 Vaccination, anti-viral treatments, and Parkinson's

Updated - October 2023

This statement is based on the review undertaken by the International Movement Disorder Societies Scientific Issues Committee, January 12, 2021, the Australian Technical Advisory Group on Immunization, October 2023 and of current advice from the Department of Health and Ageing.

The aim of this statement is to provide People living with Parkinson's and Atypical Parkinson's information to assist them in making an informed decision regarding COVID 19 Vaccination and anti-viral treatments.

Keeping the Parkinson's Community safe and informed is a primary objective of Fight Parkinson's. Fight Parkinson's has reviewed available scientific information on the COVID 19 vaccines and available anti-viral treatments for COVID 19 and the impact on people living with Parkinson's and Atypical Parkinson's around the world.

The vaccination is used to reduce the risk of contracting COVID 19. The vaccines have to date been identified as being highly effective in preventing severe and mild forms of COVID 19 infection in most people who receive them. The available vaccines induce an immune response to the COVID 19 virus and do not interact with the currently known (neurodegenerative) pathways which cause Parkinson's symptoms. There does not appear to be any interaction between the inflammatory processes which are thought to be associated with Parkinson's and the immunity response to these vaccines.

Like other vaccines, the COVID 19 vaccination does not interact with current Parkinson's treatments. There have been some reported side effects experienced by people who have received the vaccine, in most instances these are considered as; allergic reaction, mild and include mild pain and irritation at the injection site, mild fever, and headache. In rare occasions myocarditis and pericarditis have been reported following the second dose of an mRNA vaccine, mainly in people aged between 15- and 39, however older adults may also be affected. Symptoms can include shortness of breath feelings of pressure in the chest and chest pain usually occurring within 2 days of the vaccination.

The published data has shown the incidence of side effects and the impact was the same for people living with Parkinson's compared to the general population.

Current guidance from the Australian Technical Advisory Group on Immunisation regarding COVID 19 Vaccination doses is:

A 2023 COVID-19 vaccine dose is recommended for the following groups, to be given at least 6 months after their most recent COVID-19 vaccine dose:

- All adults aged ≥ 65 years,
- adults aged 18–64 years who have medical comorbidities that increase their risk of severe COVID-19, and
- adults who have a disability with significant or complex health needs.

A 2023 dose may be considered for other adults aged 18–64 years, based on an individual risk-benefit assessment.

A second 2023 COVID-19 vaccine dose, is recommended for all adults aged ≥ 75 years if 6 months have passed since their last dose.

Access to Anti-viral treatment

Anti-viral medication can reduce the severity of a COVID 19 infection should you test positive. The anti-viral medication is safe to take when you are living with Parkinson's and does not interact with currently available Parkinson's treatments.

Department of Health and Ageing guidance for access to antiviral treatments is:

If you test positive for COVID-19, you may be eligible for antiviral treatments if you are:

- 70 years of age or older, regardless of risk factors and with or without symptoms.
- 50 years of age or older with additional risk factor/s for developing severe disease
- First Nations people, 30 years of age or older and with one additional risk factor for developing severe disease.

Risk factors include:

- living in residential aged care
- living with disability with multiple conditions and/or frailty (but not limited to living in supported accommodation)
- neurological conditions like stroke or dementia and demyelinating conditions, for example, multiple sclerosis, Guillain-Barre Syndrome
- chronic respiratory conditions including COPD, moderate or severe asthma
- obesity or diabetes (type I or II requiring medication)
- heart failure, coronary artery disease, cardiomyopathies
- kidney failure or cirrhosis
- living remotely with reduced access to higher level healthcare
- past COVID-19 infection episode resulting in hospitalisation.

Fight Parkinson's recommend you discuss the COVID 19 vaccination and use of antiviral treatments for guidance specific to your personal circumstances with your treating Neurologist or General practitioner.

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References

<https://www.health.gov.au/health-alerts/covid-19/treatments/eligibility>

<https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/covid-19#recommendations>

<https://www.movementdisorders.org/COVID-19-Pandemic-MDS/MDS-COVID-19-Vaccine-Statement-for-Patients.htm>

<https://www.parkinsons.org.uk/news/coronavirus-vaccine-and-parkinsons#:~:text=On%20%20December%2020%20the,to%2095%25%20protection%20against%20coronavirus.>

https://www.elsevier.com/_data/assets/pdf_file/0003/1106679/Pfizer-BioNTech-COVID-19-Vaccine-Pt-Education_12.21.2020.pdf

https://www.elsevier.com/_data/assets/pdf_file/0004/1106680/Moderna-COVID-19-Vaccine-Patient-Education_12.21.2020.pdf

Polack FP, Thomas SJ, Kitchin N, Absalon J, Gurtman A, Lockhart S, Perez JL, Pérez Marc G, Moreira ED, Zerbini C, Bailey R, Swanson KA, Roychoudhury S, Koury K, Li P, Kalina WV, Cooper D, Frenck RW Jr, Hammitt LL, Türeci Ö, Nell H, Schaefer A, Ünal S, Tresnan DB, Mather S, Dormitzer PR, Şahin U, Jansen KU, Gruber WC; C4591001 Clinical Trial Group. Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine. N Engl J Med. 2020 Dec 10. doi: 10.1056/NEJMoa2034577. Online ahead of print. PMID: 33301246

Jackson LA, Anderson EJ, Rouphael NG, Roberts PC, Makhene M, Coler RN, McCullough MP, Chappell JD, Denison MR, Stevens LJ, Pruijssers AJ, McDermott A, Flach B, Doria-Rose NA, Corbett KS, Morabito KM, O'Dell S, Schmidt SD, Swanson PA 2nd, Padilla M, Mascola JR, Neuzil KM, Bennett H, Sun W, Peters E, Makowski M, Albert J, Cross K, Buchanan W, Pikaart-Tautges R, Ledgerwood JE, Graham BS, Beigel JH; mRNA-1273 Study Group. An mRNA Vaccine against SARS-CoV-2 - Preliminary Report. N Engl J Med. 2020 Nov 12;383(20):1920-1931. doi: 10.1056/NEJMoa2022483. Epub 2020 Jul 14. PMID: 32663912

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