The British Transplantation Society (BTS) supports vaccination against COVID-19 in solid organ and islet transplant recipients and patients who are listed for transplantation on the UK transplant list.

Whilst transplant recipients were not included in clinical trials, given experience with other vaccinations, there is no evidence to suggest that any of the available vaccinations against COVID-19 would not be safe and protective in this group of patients. Medicines and Health Products Regulatory Authority (MHRA) latest advice and guidance is here.

Currently, there are no data available to understand the impact of different COVID-19 vaccinations on transmission of the virus or indirect protection (vaccination of others). Therefore, in the absence of any other health contra-indication, it is recommended that suitable recipients receive any of the approved vaccines when one is offered to them. Invitation to attend for vaccination may come via GP practices or from hospitals and all patients may expect to receive their invitation by January/February 2021.

There are legitimate concerns about the response to the vaccine in immunosuppressed or immunocompromised patients but, in common with other vaccinations programmes, this will be carefully monitored in solid organ and islet transplant recipients through existing COVID-19 registries to understand how efficient the vaccination is in this group of people. In view of this, transplant recipients and their close contacts must continue to follow government advice to reduce the risk of infection, even when vaccinated.

Prioritisation for vaccination, including vaccination prior to immunosuppressive treatment, is made according to the advice from the Joint Committee on Vaccination and Immunisation (JCVI). Latest advice for all four UK Countries, including JCVI guidance is found here.

Further guidance for the clinical community about vaccination against COVID-19 can be found here.

Solid organ transplant recipients are designated as extremely clinically vulnerable. The advice for this group is that people of all ages should be offered the vaccine at the same time as people aged 70-74 years of age. There is insufficient evidence to recommend routine COVID-19 vaccination during pregnancy but, individual risk versus benefit assessment for vaccination is recommended for all pregnant woman who are designated as clinically extremely vulnerable. Similar risk assessment is advised in children under 16 years of age according to their risk of exposure and serious outcome from COVID-19.

This position statement will be reviewed and updated as new advice and guidance becomes available.