

Hong Kong College of Dermatologists Position statements on COVID-19 vaccination in people with inflammatory skin disease (26 June 2021)

Supplementary note (27 November 2021 update):

Subsequent to submission of the position statements consolidated in the HKCD meeting on 26 June 2021 and publication in Hong Kong J. Dermatol. Venereol. (2021) 29, 84-85 (referred as S-D hereafter), HKCD has noted that the HK Institute of Allergy has updated its “Consensus Statements on COVID-19 Vaccine Allergy Safety in Hong Kong” (referred as S-A hereafter). The purpose of this footnote is to highlight the update the views of HKCD on these updates wherein relevant.

1. One hour is stated to more clearly define the meaning of “immediate” in “immediate-type allergy reactions” in S-A;
2. Referring to point 2) in the supplementary information in S-D, S-A extended to also include people with history of non-immediate type of allergic reaction to prior COVID-19 vaccination which required medical attention for recommendation for referral to allergist’s review. HKCD regards that judicial clinical assessment is required to ascertain the nature of the “allergy reaction” before referring. Instances like minor flare of pre-existing dermatitis, chronic urticaria or other chronic skin diseases may not qualify the diagnosis of “allergy reaction” and so not justify a referral for allergy assessment.
3. S-A specifically states that people with history of severe immediate type allergy to multiple drugs may have undiagnosed excipient including PEG allergy and recommends these people to have vaccination with a non-PEG-containing COVID-19 vaccine (for the time being in HK, vaccine of the inactivated virus platform is recommended);
4. S-A specifically stated that people with (allergic rhinitis, asthma), atopic dermatitis, chronic urticaria do not need to see an allergist for evaluation of COVID-19 vaccine allergy risk.
5. Referring to point 3) in the supplementary information in S-D, S-A (updated) specifically stated that people with drug and food allergies, and anaphylaxis unrelated COVID-19 vaccines do not need to see an allergist for evaluation of COVID-19 vaccine allergy risk (This recommendation is different from S-D). Given the cumulation of data since COVID-19 introduction in HK, HKCD concurs with this updated recommendation.
6. S-A specifically recommends people who develop 1) mucocutaneous symptoms (i.e. without systemic symptom) < 1 hour after 1st dose of COVID-19 vaccine; 2) mucocutaneous symptoms > 1 hour after 1st dose of COVID-19 vaccine and are suspected to have allergy to COVID-19 vaccination but are self-limiting or resolved by oral anti-histamine, to proceed to have next dose using same COVID-19 vaccine but to be observed for 30 minutes after vaccination. Given the cumulation of data since COVID-19 introduction in HK, HKCD concurs with this updated recommendation.