

# Cancer Association of South Africa (CANSA)



## Fact Sheet on COVID-19 Vaccination for Individuals Diagnosed with Cancer

### Introduction

The whole world is currently in the midst of a COVID-19 pandemic. As the World Health Organization (WHO) and partners work together on a response – tracking the pandemic, advising on critical interventions, distributing vital medical supplies to those in need – they are racing to develop and deploy safe and effective vaccines.

Scientists around the world are developing various potential vaccines for COVID-19. These vaccines are all designed to teach the body's immune system to safely recognize and block the virus that causes COVID-19.

[COVID-19 Vaccine]



Several different types of potential vaccines for COVID-19 are being developed and submitted to the various health product regulatory authorities for approval, eventual distribution and administration in an effort to flatten the curve of the current pandemic. In South Africa all health products are vetted by the South African Health Products Regulatory Authority (SAHPRA).

Knowledge regarding the different available COVID-19 vaccines is being released on a daily basis. This Fact Sheet is based on the latest available knowledge which is currently evolving on a daily basis. The information on the effectiveness and effects of currently available COVID-19 vaccines on cancer patients and cancer survivors is still limited, however, the Cancer Association of South Africa (CANSA) is confident that basic information and guidelines can be presented to provide information to eagerly awaiting cancer patients and cancer survivors.

The Cancer Association of South Africa (CANSA) wishes to advise the following groups of individuals regarding COVID-19 vaccinations:

- All individuals diagnosed with cancer;
- Cancer patients currently undergoing active cancer treatment;
- Cancer patients who recently (within the past 3 months) received cancer treatment; and
- All cancer survivors.

---

Researched and Authored by Prof Michael C Herbst

[D Litt et Phil (Health Studies); D N Ed; M Art et Scien; B A Cur; Dip Occupational Health; Dip Genetic Counselling; Dip Audiometry and Noise Measurement; Diagnostic Radiographer; Medical Ethicist]

Approved by Ms Elize Joubert, Chief Executive Officer [BA Social Work (cum laude); MA Social Work]  
November 2021

## Facts and Myths About COVID-19 Vaccines

Now that COVID-19 vaccines have been approved by SAHPRA, it is critical that cancer patients and cancer survivors have access to accurate vaccine information. In an effort to answer the most critical questions, a few facts and myths around COVID-19 vaccines are provided.

**Q** - Can a COVID-19 vaccine make me sick with COVID-19?

**A** - **No**. None of the currently approved, authorised and recommended COVID-19 vaccines contain the live virus that causes COVID-19 disease – this means that a COVID-19 vaccine **cannot** make you sick with COVID-19. All the COVID-19 vaccines teach the body how to recognise and fight the virus that causes COVID-19. Sometimes being vaccinated, some individuals may develop symptoms such as fever or a slightly painful vaccination site. Such symptoms are normal and are a sign that your body is building protection against the virus that causes COVID-19.

**Q** - After getting a COVID-19 vaccine, will I test positive for COVID-19 on a viral test?

**A** - **No**. Neither the recently authorized and recommended vaccines nor the other COVID-19 vaccines currently in clinical trials in the United States can cause you to test positive on viral tests, which are used to see if you have an infection.

**Q** - If I have already had COVID-19 and recovered, do I still need to get vaccinated with a COVID-19 vaccine?

**A** - **Yes**. Due to the severe health risks associated with COVID-19 for individuals diagnosed with cancer, and the fact that re-infection with COVID-19 is possible, vaccine should be provided to everyone regardless of whether you already had COVID-19 infection. At this time, experts do not know how long someone is protected from getting sick again after recovering from COVID-19.

**Q** - Will a COVID-19 vaccination protect me from getting sick with COVID-19?

**A** - **Yes**. COVID-19 vaccination works by teaching your immune system how to recognise and fight the virus that causes COVID-19, and this protects you from getting sick with COVID-19. Being protected from getting sick is important because even though many people with COVID-19 have only a mild illness, others may get a severe illness, have long-term health effects, or even die.

**Q** - Will a COVID-19 vaccine alter my DNA?

**A** - **No**. COVID-19 mRNA vaccines do not change or interact with our DNA in any way. Messenger RNA vaccines – also known as mRNA vaccines – teach our cells how to make a protein that triggers an immune response. The mRNA from a COVID-19 vaccine never enters the nucleus of the cell, which is where our DNA is kept. This means the mRNA cannot affect or interact with our DNA in any way. After vaccination, our bodies will have learned how to protect against future infection.

**Q** - Why are 2 vaccine doses needed?

**A** - When the vaccines were first tested, a relatively weak immune reaction was found within a few weeks after people received the first dose of vaccine, followed by a strong reaction when a **second dose** was given.

**Q** - Is it safe for me to get a COVID-19 vaccine if I have been diagnosed with cancer, is currently (or previously have) received cancer treatment?

---

Researched and Authored by Prof Michael C Herbst

[D Litt et Phil (Health Studies); D N Ed; M Art et Scien; B A Cur; Dip Occupational Health; Dip Genetic Counselling; Dip Audiometry and Noise Measurement; Diagnostic Radiographer; Medical Ethicist]

Approved by Ms Elize Joubert, Chief Executive Officer [BA Social Work (cum laude); MA Social Work]

November 2021

Page 2

**A** - Please consult the section of this Fact Sheet on “Information to Cancer Patients, Survivors, and Caregivers.

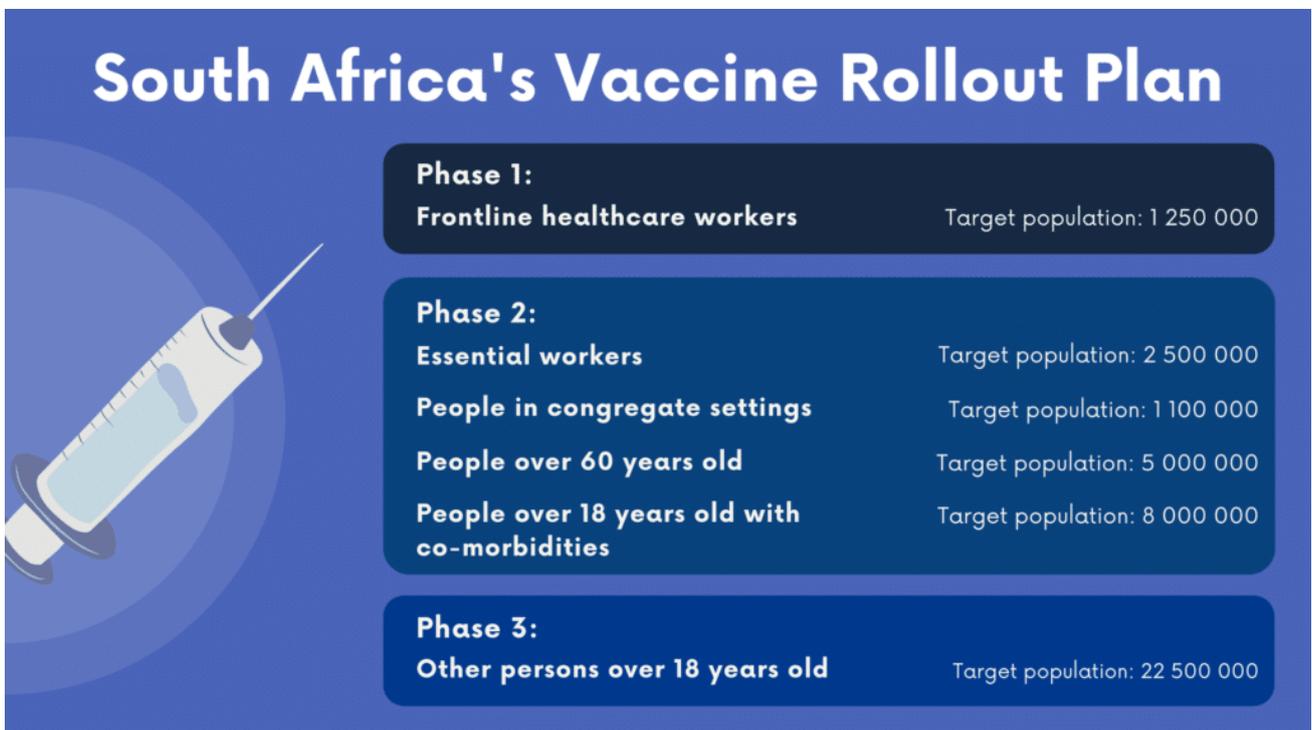
### **The South African COVID-19 Vaccination Rollout Plan**

#### What the strategy of the National Department of Health is about

This past year has seen hundreds of vaccines in development worldwide in response to the growing coronavirus pandemic. In December of last year, a handful of these jabs began to release results showing their efficacy and safety in phase 3 trials, which are usually considered the final stage in a series of tests before companies can begin seeking regulatory approval. During this time, South Africa’s ministerial advisory committee on COVID-19 vaccines developed a strategy to ensure equitable access to vaccines. This strategy outlines the country’s plans for the rollout of a COVID-19 jab, including how the shot can be purchased and who the priority groups for vaccination are.

#### Why vaccines matter

- Vaccines are an important part of stopping the spread of COVID-19 in a country.
- This is because they offer protection to an individual, by reducing a person’s risk of infection or the severity of their symptoms, and also at a population level.
- This population-level protection is often referred to as herd or population immunity and happens when enough people have developed an immune response — in the form of antibodies and killer cells — to fight off the virus that there is a low risk of the virus continuing to spread within that community.
- This immunity can be developed either through receiving a vaccine or by previously having been infected.
- Achieving herd immunity helps to protect those who have not been vaccinated or who have not been previously infected by limiting how much the virus can spread within a population.
- South Africa is aiming to vaccinate 67% of its population to achieve herd or population immunity.



Researched and Authored by Prof Michael C Herbst

[D Litt et Phil (Health Studies); D N Ed; M Art et Scien; B A Cur; Dip Occupational Health; Dip Genetic Counselling; Dip Audiometry and Noise Measurement; Diagnostic Radiographer; Medical Ethicist]

Approved by Ms Elize Joubert, Chief Executive Officer [BA Social Work (cum laude); MA Social Work]  
November 2021

## Information to Cancer Patients, Survivors, and Caregivers

Information about the safety, effectiveness or effect of COVID-19 vaccination on individuals diagnosed with cancer is evolving on a daily basis. This information contained in this Fact Sheet is based on the latest available information.

### Important Information and Facts

Important facts to take cognisance of:

- The number one goal of the COVID-19 vaccination rollout strategy is helping to get the COVID-19 vaccine to as many people as possible.
- Current evidence has shown that people receiving active cancer treatment are at greater risk for worse outcomes from COVID-19, particularly if they are older and have additional comorbidities, like immunosuppression.
- According to the National Comprehensive Cancer Network (NCCN) guidelines state that vaccination of people with cancer is recommended as a prioritised group.
- the NCCN states that available mRNA vaccines do not pose an immediate safety risk for immunosuppressed patients.
- Being vaccinated against COVID-19 does not supersede the need to continue using general precautions, such as wearing of masks, social distancing, regular washing of hands and hand sanitisation as well as avoiding large gatherings.
- The NCCN advises that all patients on active cancer therapy **EXCEPT** patients who underwent allogeneic and autologous stem cell transplants or cellular therapy within the last 3 months should receive the COVID-19 vaccine. For this last-mentioned cancer patients, a delay in vaccination is advised.
- **ADDITIONALLY**, certain conditions in patients with haematologic malignancies, such as the receipt of cytotoxic chemotherapy for acute myeloid leukaemia where the patient has impaired absolute neutrophil count, a delay of vaccination is warranted.

## Pfizer Covid-19 Vaccine approved for Adolescents and Children

The United States Centers for Disease Control and Prevention (CDC) recommends **everyone ages 5 and older get a COVID-19 vaccine** to help protect against COVID-19.

Authorized For	Pfizer-BioNTech	Moderna	J&J / Janssen
4 Years and Under	No	No	No
5 to 11 Years Old	Yes	No	No
12 to 17 Years Old	Yes	No	No
18 Years and Older	Yes	Yes	Yes

---

Researched and Authored by Prof Michael C Herbst

[D Litt et Phil (Health Studies); D N Ed; M Art et Scien; B A Cur; Dip Occupational Health; Dip Genetic Counselling; Dip Audiometry and Noise Measurement; Diagnostic Radiographer; Medical Ethicist]

Approved by Ms Elize Joubert, Chief Executive Officer [BA Social Work (cum laude); MA Social Work]

November 2021

Widespread vaccination for COVID-19 is a critical tool to best protect everyone, especially those at highest risk, from severe illness and death. People who are fully vaccinated can safely resume many activities that they did prior to the pandemic. Children ages 5 years and older are able to get an age-appropriate dose of Pfizer-BioNTech Covid-19 Vaccine.

### Children's Legal Age for Consenting to Medical Treatment



#### Provided By **ADAMS & ADAMS**

Adams & Adams Is An Internationally Recognised Full-Service Corporate Law Firm, Based In South Africa. Our Leadership Position As One Of The Largest Intellectual Property Law Practice's In The Southern Hemisphere, And A... **MORE**

#### By **MTHO MAPHUMULO**

**Topics** Constitutional Law & Civil Rights | Covid-19/Coronavirus | Family Law  
**22 Oct 2021**

The government's efforts to drive the vaccination program towards herd immunity are ongoing. This is obviously not without hurdles, especially as most people are still hesitant to vaccinate for various reasons. The government, for the most part, has been targeting adults for vaccinations, though it seems like children (below 18 years but above 12 years) are next in line. In the past few weeks, there have been reports and concerns about the rise in Covid positive cases amongst children. Since the reports surfaced that the government intends to reduce the vaccination age limit to just 12 years, many parents have raised huge concerns about the appropriateness and health implications of this. Some have even questioned the legality of this. In view thereof, it is pertinent to take a closer look at the children's legal consenting age to medical treatment. In addition, this piece will also consider a situation where a parent refuses to have his/her child vaccinated where a child wants to vaccinate. Lastly, this piece will zoom into potential legal recourse where a child develops health complications.

#### Consenting age

The law is very inconsistent with regard to the age limit for consenting to various medical treatments, procedures and medical decisions in general. In some instances, age 12 is applicable; in some, 16 is applicable; and, in some, age 18 is applicable. Some of these are discussed hereunder. In law, age is just one consideration in the determination of competence to consent. The other critical consideration is mental capacity to consent. With mental capacity, a minor child needs to fully understand and appreciate the associated risks of the treatment, as well as the ramifications and benefits. The child obviously needs to be given all the necessary information and have it all explained to him/her, before consenting. Equally important is the fact that informed consent may be withdrawn at any stage before the treatment or procedure is undertaken.

#### Examples of consenting age:

1. A minor child, aged 12, may consent to medical treatment. This is in terms of the Children's Act, Section 129.
2. A minor girl (of any age) may terminate pregnancy without anyone else's consent (only her consent is necessary). This is in terms of Choice on Termination of Pregnancy Act, Section 5.

---

Researched and Authored by Prof Michael C Herbst

[D Litt et Phil (Health Studies); D N Ed; M Art et Scien; B A Cur; Dip Occupational Health; Dip Genetic Counselling; Dip Audiometry and Noise Measurement; Diagnostic Radiographer; Medical Ethicist]

Approved by Ms Elize Joubert, Chief Executive Officer [BA Social Work (cum laude); MA Social Work]

November 2021

3. No minor child (below 18 years of age) may consent to sterilisation.
4. A minor child, aged 12, may undergo an HIV test with just the minor's consent. This is in accordance with Section 130 of the Children's Act.
5. A minor child, aged 16, may undergo a virginity test with written consent. This is per the dictations of Section 12 of the Children's Act. The parent/guardian may need to assent. This is also the case with circumcision for males only.

These are but some of the examples of a minor's consenting age.

There may be instances where a minor child's views and standpoints are inconsistent with those of the parent/guardian, insofar as medical treatment (including vaccination) is concerned. In this case, the overriding principle is "the best interests of the child". In determining the best interests of the child, the maturity, views, opinions and suggestions of the minor child are considered. Similarly, the objections of the parent/guardian, reasons, views and opinions are given worthy consideration. If the disagreements cannot be resolved, the matter has to be referred to the legal department of the hospital wherein the relevant officer may approach the court for a ruling or apply to the Minister of Health for consent.

In a case where a child, subsequent to consenting and receiving treatment, develops serious health and long-lasting complications, a parent may, depending on the facts and the circumstances, sue the Department of Health or the relevant practitioner. Where informed consent was properly given, it may be comparatively difficult to hold anyone legally accountable unless the parent can prove medical negligence or medical malpractice. However, in an instance where, for example, the parent had to assent to the medical treatment, but the hospital failed and/or refused to do so, then it may be less difficult to succeed with the claim.

It will be interesting to see how the child vaccination program unfolds and whether the legalities pertaining to consent will be strictly enforced and complied with.



Mtho Maphumulo graduated at UKZN with several distinctions, academic awards and Dean's Commendation. During this period, he served active leadership roles in many students' organisations including the Black Lawyers Association Student Chapter, Students for Law and Social Justice. Upon completion of his LLB degree, he joined Adams & Adams wherein he served his 2 years of articles.

Mtho Maphumulo is an associate in the personal injury and insurance departments. He specialises in civil litigation with special emphasis on personal injury related matters, which includes, inter alia, Road Accident Fund, aviation claims, product liability claims, medical negligence, slip and fall and wrongful arrest claims, professional indemnity matters, and insurance related matters.

Mtho also specialises in claims against PRASA/Metrorail train accident claims, fall or push claims against public transport providers as well as aviation accident claims.

Further, Mtho's expertise includes claims against the Minister of Police and other law enforcement agencies where he assists clients with police assault claims, malicious prosecution, wrongful arrest or detention claims. Furthermore, he assists clients with issues arising from personal injuries that occur as a result of animal attacks, dog bites, lift, gate and door malfunction, poorly fitted and maintained equipment and malfunctioning equipment.

With the Consumer Protection Act 68 of 2008, which came into effect on 31 March 2011, Mtho assists clients where injuries or loss occur as a resultant of a faulty or defective product.

---

Researched and Authored by Prof Michael C Herbst

[D Litt et Phil (Health Studies); D N Ed; M Art et Scien; B A Cur; Dip Occupational Health; Dip Genetic Counselling; Dip Audiometry and Noise Measurement; Diagnostic Radiographer; Medical Ethicist]

Approved by Ms Elize Joubert, Chief Executive Officer [BA Social Work (cum laude); MA Social Work]

November 2021

Mtho is a frequent and influential writer on issues pertaining to personal injury claims with some of his articles appearing in publications including, Without Prejudice, Lexology, BusinessBrief, Risk Alert Bulletin, The Star Newspaper, Pretoria News, The Cape Argus and The Daily News.

Mtho is also a frequent contributor and commentator on a variety of legal issues on radio stations and television. He also does talks on contemporary legal issues.

Areas of Specialisation:

- Insurance Litigation
- Medical Malpractice
- Personal Injury Claims
- Professional Negligence
- Road Accident Fund Claims
- Product Liability Claims
- Public Injury Claims
- Transportation Injury Claims
- Animal Injury Claims
- Claims against the Police and other law enforcement agencies

#### **The Position of the Cancer Association of South Africa (CANSAs):**

CANSAs recommends, given the above information from the National Comprehensive Cancer Network (NCCN) and the United States Centers for Disease Control and Prevention (CDC), that cancer patients should, if they feel hesitant about vaccinations, consult their Oncologist or Treating Physician prior to getting vaccinated against COVID-19.

CANSAs recommends that all cancer patients (survivors, newly diagnosed patients, and those on any form of cancer treatment), caregivers and those in close contact with cancer patients, such as household family members, should also receive the COVID-19 vaccine.

#### **Medical Disclaimer**

This Fact Sheet is intended to provide general information only and, as such, should not be considered as a substitute for advice, medically or otherwise, covering any specific situation. Users should seek appropriate advice before taking or refraining from taking any action in reliance on any information contained in this Fact Sheet. So far as permissible by law, the Cancer Association of South Africa (CANSAs) does not accept any liability to any person (or his/her dependants/estate/heirs) relating to the use of any information contained in this Fact Sheet.

Whilst the Cancer Association of South Africa (CANSAs) has taken every precaution in compiling this Fact Sheet, neither it, nor any contributor(s) to this Fact Sheet can be held responsible for any action (or the lack thereof) taken by any person or organisation wherever they shall be based, as a result, direct or otherwise, of information contained in, or accessed through, this Fact Sheet.



---

Researched and Authored by Prof Michael C Herbst

[D Litt et Phil (Health Studies); D N Ed; M Art et Scien; B A Cur; Dip Occupational Health; Dip Genetic Counselling; Dip Audiometry and Noise Measurement; Diagnostic Radiographer; Medical Ethicist]

Approved by Ms Elize Joubert, Chief Executive Officer [BA Social Work (cum laude); MA Social Work]  
November 2021

## Sources and References Consulted and/or Utilised

### COVID-19 Vaccine

<https://www.rand.org/blog/2020/08/its-going-to-be-the-vaccination-stupid.html>

### Myths and Facts About COVID-19 Vaccines

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/facts.html>

### South African National Department of Health

<https://sacoronavirus.co.za/2021/01/12/what-does-south-africas-covid-vaccine-roll-out-plan-say/>

**Sternberg, A.** 2021. NCCN Releases Initial Guidance for COVID-19 Vaccine Administration in Patients with Cancer. January 25, 2021.

[https://www.cancernetwork.com/view/nccn-releases-initial-guidance-for-covid-19-vaccine-administration-in-patients-with-cancer?utm\\_source=sfmc&utm\\_medium=email&utm\\_campaign=01292021\\_CN\\_eNL\\_EXA-20-OND0334\\_ExactSciences\\_Webinar\\_INTL&eKey=bWhlcmJzdEBjYW5zYS5vcmcuemE=](https://www.cancernetwork.com/view/nccn-releases-initial-guidance-for-covid-19-vaccine-administration-in-patients-with-cancer?utm_source=sfmc&utm_medium=email&utm_campaign=01292021_CN_eNL_EXA-20-OND0334_ExactSciences_Webinar_INTL&eKey=bWhlcmJzdEBjYW5zYS5vcmcuemE=)

### United States Centers for Disease Control and Prevention (CDC)

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/children-teens.html>

### World Health Organization

[https://www.who.int/news-room/q-a-detail/coronavirus-disease-\(covid-19\)-vaccines?adgroupsurvey={adgroupsurvey}&gclid=EA1aIQobChMImfy1u7zU7gIVm-7tCh3qTAVZEAAAYAiAAEgJ2aPD\\_BwE](https://www.who.int/news-room/q-a-detail/coronavirus-disease-(covid-19)-vaccines?adgroupsurvey={adgroupsurvey}&gclid=EA1aIQobChMImfy1u7zU7gIVm-7tCh3qTAVZEAAAYAiAAEgJ2aPD_BwE)

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/covid-19-vaccines>

---

Researched and Authored by Prof Michael C Herbst

[D Litt et Phil (Health Studies); D N Ed; M Art et Scien; B A Cur; Dip Occupational Health; Dip Genetic Counselling; Dip Audiometry and Noise Measurement; Diagnostic Radiographer; Medical Ethicist]

Approved by Ms Elize Joubert, Chief Executive Officer [BA Social Work (cum laude); MA Social Work]

November 2021