

Table 3: Guidance Related to the Use and Timing of Vaccination and Immunomodulatory Therapies in Relation to COVID-19 Vaccination Administration in RMD Patients*

Medication	Timing Considerations for Immunomodulatory Therapy and Vaccination*	Level of Task Force Consensus
Hydroxychloroquine; apremilast; IVIG; glucocorticoids, prednisone-equivalent dose <20mg/day	No modifications to either immunomodulatory therapy or vaccination timing	Strong-Moderate
Sulfasalazine; Leflunomide; Mycophenolate; Azathioprine; Cyclophosphamide (oral); TNFi; IL-6R; IL-1; IL-17; IL-12/23; IL-23; Belimumab; oral calcineurin inhibitors; Glucocorticoids, prednisone-equivalent dose ≥ 20mg/day**	No modifications to either immunomodulatory therapy or vaccination timing	Moderate
Methotrexate	Hold MTX 1 week after each vaccine dose, for those with well-controlled disease; no modifications to vaccination timing	Moderate
JAKi	Hold JAKi for 1 week after each vaccine dose; no modification to vaccination timing	Moderate
Abatacept SQ	Hold SQ abatacept both one week prior to and one week after the <u>first</u> COVID-19 vaccine dose (only); no interruption around the second vaccine dose	Moderate
Abatacept IV	Time vaccine administration so that the first vaccination will occur four weeks after abatacept infusion (i.e., the entire dosing interval), and postpone the subsequent abatacept infusion by one week (i.e., a 5-week gap in total); no medication adjustment for the second vaccine dose	Moderate
Cyclophosphamide IV	Time CYC administration so that it will occur approximately 1 week after each vaccine dose, when feasible	Moderate
Rituximab	Assuming that patient's COVID-19 risk is low or is able to be mitigated by preventive health measures (e.g., self-isolation), schedule vaccination so that the vaccine series is initiated approximately 4 weeks prior to next scheduled rituximab cycle; after vaccination, delay RTX 2-4 weeks after 2nd vaccine dose, if disease activity allows	Moderate

RMD = rheumatic and musculoskeletal disease; IVIG = intravenous immunoglobulin; TNFi = tumor necrosis factor inhibitor; IL = interleukin; JAKi = janus kinase inhibitor; CYC = cyclophosphamide; RTX = rituximab; IV = intravenous; SQ = subcutaneous

*guidance to 'hold' a therapy was made based on the assumption that the patient had well-enough controlled disease to allow for a temporary interruption; if not, decision-making should be determined on a case-by-case basis, considering the circumstances involved

**consensus was not reached for vaccination timing in patients receiving prednisone-equivalent doses ≥ 20mg/day; see full guidance document, when published, for additional details

IL-6R = sarilumab; tocilizumab; IL-1R = anakinra, canakinumab; IL-17 = ixekizumab, secukinumab; IL-12/23 = ustekinumab; IL-23 = guselkumab, rizankizumab; JAKi = baricitinib, tofacitinib, upadacitinib