

Advice for the use of AstraZeneca vaccine in individuals with antiphospholipid syndrome

What is the condition that has been reported following COVID-19 vaccination?

There have been reports from the UK and internationally of a very rare condition of blood clots and low platelets following the first dose of the AstraZeneca vaccine. The risk of this very rare side-effect is higher in younger age groups and is 1 in 50,000 for adults aged 18 to 39 years and 1 in 100,000 for adults aged 40 or older. This compares with the risks of severe outcomes following COVID-19 infection being higher in older adults and those with serious health problems.

Current advice for the AstraZeneca vaccine

The current advice from the UK expert advisory committee, the Joint Committee on Vaccination and Immunisation (JCVI) is that adults aged 39 or younger who do not have serious underlying medical problems should be preferentially offered an alternative to the AstraZeneca vaccine, where possible and only where no substantial delay or barrier in access to vaccination would arise.

Healthy individuals aged 40 years or older should continue to be offered any of the available vaccines. Those who have received their first dose of AZ vaccine without suffering this rare side-effect should continue to be offered the second dose to complete the course. This includes individuals who are aged 39 years or younger.

Contraindications for use of the AstraZeneca vaccine

The contra-indications to vaccination with the AZ COVID-19 vaccine include individuals who have a history of heparin induced thrombocytopenia and thrombosis (HITT or HIT type 2). These individuals may be offered vaccination with an alternative COVID-19 vaccine.

Individuals who experience blood clots with low platelets following the first dose of the AZ COVID-19 vaccine should be properly assessed and if they are considered to have the reported condition, vaccination should be delayed until their clotting has completely stabilised and they should be considered for a second dose of an alternative COVID-19 vaccine.

Is antiphospholipid syndrome a contraindication?

No, anti-phospholipid syndrome is not a contraindication for the use of AstraZeneca vaccine. Antiphospholipid syndrome increases the risk of blood clots but there is no evidence that individuals with a prior history of blood clots or known risk factors for blood clots are more at risk of developing the immune complication reported after the AZ vaccine. If an individual with antiphospholipid syndrome is aged 40 years or older and has no contraindications (see contraindications above) to the AZ vaccine, then they can receive the AZ vaccine.

The above information is consistent with the JCVI's advice. The MHRA's current advice is that the AZ vaccine should be considered in individuals with antiphospholipid syndrome when the benefits of the vaccine outweigh the risk for that individual. The JCVI has reviewed the evidence on risks and benefits and has provided the advice to the UK population on who should continue to be offered the AZ vaccine (see above). This is the advice, as outlined in the Green book, that should be followed for vaccination decisions, and antiphospholipid syndrome is not a contraindication to the AZ vaccine.

Resources

FAQs have been developed for healthcare professionals and there is a specific question on the use of AstraZeneca vaccine in individuals with Anti-Phospholipid Vaccine: [COVID-19 vaccination: blood clotting information for healthcare professionals - GOV.UK \(www.gov.uk\)](#)

The Green Book has the latest information on vaccines and vaccination procedures and for vaccine preventable infectious diseases in the UK. It reflects the advice from the JCVI and is based on the best available evidence and is updated regularly. The chapter on the COVID-19 vaccines includes the contraindications on the use of the AstraZeneca vaccine. [COVID-19 Greenbook chapter 14a \(publishing.service.gov.uk\)](#)

Note: the advice in the Green Book for the use and contraindications for the use of vaccines reflects the advice from the JCVI should be followed in the UK.