

Statement

EURORDIS-Rare Diseases Europe urges governments across Europe and the world to make the third dose a priority for people with certain immune conditions

22 July 2021, Paris – EURORDIS-Rare Diseases Europe encourages EU Member States and countries across Europe and beyond to consider administering a third dose of vaccines against COVID-19 for transplant recipients, dialysis patients, patients taking immuno-suppressants and people with cancer and severe immune deficiency, including those living with a rare disease.

While equitable access to COVID-19 vaccines remains a challenge for the global community and countries around the world, 55.4% of people living in the EU/EEA have received at least one vaccine dose.¹ These vaccines have shown a high level of efficacy at preventing severe illness from coronavirus. However, the same is not true for people with certain immune conditions, including those living with a rare disease, representing a population of several million European citizens and many more worldwide. Figures show that antibody response after two doses was insufficient in transplant recipients (varied between 17% and 45%), dialysis patients and people taking an immuno-suppressive treatment.²

This raises concerns about the effectiveness of available vaccines and subsequent need for a booster shot. One of the most prominent RNA vaccine manufacturers, Pfizer, says early data from the company's booster study suggests people's antibody levels jump five- to 10-fold after a third dose, compared to their second dose months earlier. With the highly contagious Delta variant, slowly but steadily becoming the dominant strain of COVID-19 worldwide, ensuring safety and a sense of security for people with rare diseases, often dependent on their carers and healthcare professionals in hospitals and at home, is ever more important.

In Europe, France is setting an example by handing out third shots of the two-dose vaccines to cancer and other immunocompromised patients. Israel has also begun offering a third dose of the Pfizer-BioNTech vaccine to people with a compromised or impaired immune response, including cancer patients and transplant recipients, to protect the most vulnerable and prevent hospitalisations and serious illness.

³ https://apnews.com/article/europe-coronavirus-pandemic-science-health-34c3f2536747a7co898od7359a8de7oc



¹ https://ourworldindata.org/covid-vaccinations

² https://solidarites-sante.gouv.fr/IMG/pdf/avis_du_cosv_6_avril_2021pdf.pdf

Equity should be at the centre of decision making, prioritising at-risk populations. Not only will a booster shot help protect people with severe immune deficiency, but it can also contribute to sparing vaccine doses in the future due to its longer-lasting effect.

EURORDIS calls upon EU Member States and countries across Europe and the world to make the third dose a priority for people living with some specific diseases to guarantee everyone's right to health and leave no one behind.

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About EURORDIS-Rare Diseases Europe

<u>EURORDIS-Rare Diseases Europe</u> is a unique, non-profit alliance of over 960 rare disease patient organisations from 73 countries that work together to improve the lives of the 30 million people living with a rare disease in Europe. By connecting patients, families and patient groups, as well as by bringing together all stakeholders and mobilising the rare disease community, EURORDIS strengthens the patient voice and shapes research, policies and patient services.

About rare diseases

The European Union considers a disease as rare when it affects less than 1 in 2,000 citizens. Over 6,000 different rare diseases have been identified to date affecting an estimated 30 million people in Europe and 300 million worldwide. 72% of rare diseases are genetic whilst others are the result of infections (bacterial or viral), allergies and environmental causes, or are degenerative and proliferative. 70% of those genetic rare diseases start in childhood.

Due to the low prevalence of each disease, medical expertise is rare, knowledge is scarce, care offerings inadequate and research limited. Despite their great overall number, rare disease patients are the orphans of health systems, often denied diagnosis, treatment and the benefits of research.

