

Joint statement on the need for improved protection and prevention for immunocompromised patients in the context the COVID-19 pandemic

The European Union successfully coordinated a common response to the pandemic through the joint purchase of vaccines, accelerated approval of medicinal products through the European Medicine Agency, supporting research and virus genomic sequencing, and more. The European Union must maintain its high level of attention for the pandemic at a time when other emerging political priorities may divert policymakers' and media attention, with the risk of underestimating the importance of the pandemic. This is paramount to protect EU citizens and, in particular, the most vulnerable groups among them.

There are 14.5 million estimated immunocompromised people across the EU who are disproportionately affected by SARS-CoV-2. This group includes patients living with an organ transplant, on dialysis, those affected by cancer and those on immunosuppressants.^{1,2} While the EU's efforts have introduced significant improvements for the protection of the general population, the pandemic is far from over, and two major unmet needs disproportionately threaten immunocompromised patients.

First of all, immunocompromised patients suffer from lower vaccine efficacy than the general population.³ Taking the example of kidney patients in the first months of the pandemic, one in four patients infected with SARS-CoV-2 died of COVID-19 within four weeks, compared to one in sixteen in the general population. While vaccines reduced the mortality rate of kidney patients to 5% in the first quarter of 2022, this rate is still 10 times higher than in the general population.⁴ In general terms, lower vaccine efficacy exposes this subgroup to both a higher risk of infection and to more severe disease, especially at a time when governments around the globe have lifted social distancing measures and are reopening society.

Secondly, SARS-CoV-2 has proven particularly adaptable, developing several escape variants that evade vaccine protection and monoclonal antibody treatments. Variants emerging over the last two years show significant differences in transmissibility and disease severity. The most recent variant of concern, Omicron, led to an overall increase in COVID-19 mortality both in the general population as well as in the immunocompromised patients in the first quarter of 2022 compared to the second half of 2021.⁵ Moreover, the ongoing rapid evolution of the virus is likely to produce new variants that may feature higher disease severity and transmissibility thus leading to more and more severe COVID-19 cases.⁶ This will again increase the threat for the immunocompromised patients due to the lack of protection from vaccines and monoclonal antibody treatments.

¹ Combined data from GlobalData, DG Santé cancer fact sheets and Statista

² Suarez-Garcia et al. (2021), In-hospital mortality among immunosuppressed patients with COVID-19: Analysis from a national cohort in Spain, PLoS ONE 16(8):

³ Yan Bin Lee et al. (2022), Efficacy of covid-19 vaccines in immunocompromised patients: systematic review and meta-analysis, BMJ2022;376:

⁴ Analysis based on <https://ukkidney.org/audit-research/publications-presentations/report/covid-19-surveillance-reports> and <https://coronavirus.data.gov.uk/details/testing>

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⁶ Markov, P.V., Katzourakis, A. & Stilianakis, N.I. Antigenic evolution will lead to new SARS-CoV-2 variants with unpredictable severity. Nat Rev Microbiol 20, 251–252 (2022).

So far, the EU has focused its effort and resources on prevention through vaccines and on the treatment of infected patients. However, because preventive action through vaccines is suboptimal for immunocompromised patients, and treatment may come too late to avoid severe consequences, the need for effective prevention for the vulnerable immunocompromised population remains unanswered.

For this reason, the undersigned organisations call on the European Commission, Parliament, and the Council to fully integrate the systematic protection of immunocompromised patients in their response and preparedness efforts against the current and future health crises such as the next infectious disease outbreak. Only through a long-term and systematic approach with a particular emphasis on prevention against infections, the EU will be able to deliver a truly equitable health strategy to protect all its citizens.

Signatories



**European Cancer
Patient Coalition**

ECPC – European Cancer Patient Coalition



EKHA – European Kidney Health Alliance



ESOT – European Society for Organ
Transplantation



UNION therapeutics