## Patient treated with immunomodulatory drug

## Immunomodulatory drugs are beta interferon beta and glatiramer acetate

There is no restriction for vaccines associated with immunomodulators

## It is recommended to:

- ✓ Update vaccinations following the vaccinal schedule
- ✓ Propose seasonal flu vaccination (more details below)
- ✓ Ensure the patient has received 2 doses of MMR vaccination.

Vaccination status should be verified and updated for:

- ✓ DTP
- √ Whooping cough
- √ Hepatitis B
- ✓ MMR
- ✓ VZV in case of negative serology

## **Additional remarks:**

- Seasonal flu vaccination is recommended for patients with EDSS ≥3.0 and can be proposed for other patients.
- To anticipate a potential switch to an immunosuppressive drug, the following can be discussed:
  - ✓ Propose VZV vaccination in cas of negative serology
  - ✓ Propose anti pneumococcus vaccination : 13 valences vaccine injection followed by a 23 valences vaccine injection 2 months later
  - √ Vaccination against hepatitis B if not done and in case of negative serology
- If yellow fever vaccination is required, the decision should be discussed with the patient as there may be a risk of disease reactivation following this vaccination.
- Vaccination against hepatitis A is recommended for frequent travelers patients that will receive immunosuppressive drugs