

Timing MS Medications with COVID-19 mRNA Vaccines

Based on expert consensus and available data, we offer the following guidance regarding COVID-19 vaccination for people on MS disease modifying therapies (DMTs).

The Pfizer BioNTech and Moderna vaccines are safe for people with MS and they are safe to use with MS DMTs¹. Most DMTs are not expected to affect the responses to the Pfizer BioNTech or Moderna vaccines, though some (see details below) may make the vaccines less effective and coordinating the timing of vaccine administration with these DMTs may provide the best vaccine response².

Given the potential serious health consequences of COVID-19 disease, getting the vaccine when it becomes available to you may be more important than optimally timing the vaccine with your DMT.

The decision of when to get the COVID-19 vaccine should include an evaluation of your risk of COVID-19, including your occupation, and the current state of your MS. Work with your MS healthcare provider to determine the best schedule for you. If the risk of your MS worsening outweighs your risk of COVID-19, do not alter your DMT schedule and get the vaccine when it is available to you. If your MS is stable, consider the following adjustments in the administration of your DMT to enhance the effectiveness of the vaccine:

Avonex, Betaseron, Copaxone, Extavia, glatiramer acetate, Glatopa, Plegridy, Rebif, Aubagio, Bafiertam, Dimethyl Fumarate, Tecfidera, Tysabri and Vumerity—If you are about to start one of these DMTs for the first time, do not delay starting it for your vaccine injection. If you are already taking one of these DMTs, no adjustments of your DMT administration are needed².

Gilenya, Mayzent, Zeposia—If you are about to start Gilenya, Mayzent or Zeposia, consider getting the Pfizer BioNTech or Moderna COVID-19 vaccine so that the second vaccine injection is done 4 weeks or more prior to starting Gilenya, Mayzent or Zeposia. If you are already taking Gilenya, Mayzent or Zeposia, continue taking as prescribed and get vaccinated as soon as the vaccine is available to you.

Lemtrada and Mavenclad—If you are about to start Lemtrada or Mavenclad, consider getting the Pfizer BioNTech or Moderna COVID-19 vaccine so that the second vaccine injection is done 4 weeks or more prior to starting Lemtrada or Mavenclad. If you are already taking Lemtrada or Mavenclad, consider administering the vaccine injections starting 12 weeks or more after the last Lemtrada or Mavenclad dose, with the optimal timing of the vaccine 24 weeks or more after the last DMT dose². When possible, resume Lemtrada or Mavenclad 4 weeks or more following the second vaccine injection. This suggested scheduling is not always possible and getting the vaccine when it becomes available to you may be more important than timing the vaccine with your DMT. Work with your MS healthcare provider to determine the best schedule for you.

Ocrevus and Rituxan—If you are about to start Ocrevus or Rituxan, consider getting the Pfizer BioNTech or Moderna COVID-19 vaccine so that the second vaccine injection is 4 weeks or more prior to starting Ocrevus or Rituxan. If you are already taking Ocrevus or Rituxan, consider getting the vaccine injections 12 weeks or more after the last DMT dose³. When possible, resume Ocrevus or Rituxan 4 weeks or more following the second vaccine injection. This suggested scheduling is not always possible and getting the vaccine when it becomes available to you may be more important than timing the vaccine with your DMT. Work with your MS healthcare provider to determine the best schedule for you.

Kesimpta—If you are about to start this DMT, consider getting the Pfizer BioNTech or Moderna COVID-19 vaccine so that the second vaccine injection is 4 weeks or more prior to starting your DMT. If you are already taking Kesimpta, consider getting the vaccine injections 4 weeks after your last Kesimpta injection. When possible, resume Kesimpta injections 4 weeks or more following the second vaccine injection. This suggested scheduling is not always possible and getting the vaccine when it becomes available to you may be more important than timing the vaccine with your DMT. Work with your MS healthcare provider to determine the best schedule for you.

High-dose steroids—Consider getting the vaccine injections 3-5 days after the last dose of steroids.

[Read our complete guidance on COVID-19 mRNA vaccines](#)

References

1. Farez M, Correale J, Armstrong M, et al. Practice guideline update summary: Vaccine-preventable infections and immunization in multiple sclerosis: Report of the Guideline Development, Dissemination, and Implementation Subcommittee of the American Academy of Neurology. *Neurology* 2019;93(13):584-594.
2. Ciotti J, Valtcheva M, and Cross A. Effects of MS disease-modifying therapies on responses to vaccinations: A review. *Multiple Sclerosis and Related Disorders* 2020;45:102439.
3. Bar-Or A, Calkwood J, Chognot C, et al. Effect of ocrelizumab on vaccine responses in patients with multiple sclerosis: The VELOCE study. *Neurology* 2020;95(14):e1999-e2008.

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