COVID-19 Immunosuppressants & Sjögren’s patients:

Are patients with Sjögren’s Immunocompromised/Immunosuppressed?

Not all Sjögren’s patients have compromised immune systems. This specific risk factor is for those who regularly take drugs to suppress the immune system. Examples include prednisone, methylprednisolone, Imuran®, azathioprine, methotrexate, leflunomide, Arava®, CellCept®, mycophenolate, Rituxan® (rituximab), cyclophosphamide.

Please note that hydroxychloroquine (Plaquenil®) does NOT suppress your immune system and does not increase any risk for a more serious illness from COVID-19. However, all Sjögren’s patients should still be diligent and be tested if symptoms become present.

What are Immunosuppressant’s?

Immunosuppressants are a class of drugs that interfere with the function of cells composing the immune system. Drugs used in the chemotherapy of malignant disease and in the prevention of transplant rejection are generally immunosuppressive and occasionally are used to treat severe autoimmune disease.

Examples of immunosuppressant’s that Sjögren’s patients sometimes take include prednisone, methylprednisolone, Imuran®, azathioprine, methotrexate, leflunomide, Arava®, CellCept®, mycophenolate, Rituxan®, cyclophosphamide. If you take one of these drugs, your immune system is being suppressed and you should take extra precautions in preventing contracting COVID-19.

Steroid Injections, Immunosuppressive Drugs and COVID-19 Vaccine

“Should I talk to my doctor about temporarily stopping my immunosuppressive drugs, like methotrexate and rituximab, or treatments of chronic steroids/steroid injections while receiving the vaccine?”

Yes, you should talk to your doctor about your immunosuppressive drugs prior to scheduling your COVID-19 vaccine, in particular the following drugs: a. Methotrexate b. Rituximab

Rituximab has the most negative effect on COVID-19 vaccine effectiveness and your vaccine will have to be timed appropriately around your rituximab infusions. Methotrexate has less of an impact, but your provider may still discuss the option of holding off on a dose or two of methotrexate after your COVID-19 vaccine, but this is not right for every patient and should be decided only after a discussion with your doctor.