

# ACAAI: Reaction to COVID-19 vaccine unlikely for those with common allergies

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that is known to cause anaphylaxis. Regardless of patient history, all vaccine administration should occur in a health care setting where anaphylaxis can be treated. Relatedly, all individuals should be monitored for adverse reactions for at least 20 to 30 minutes after injection. Epinephrine should serve as the first-line treatment for any anaphylactic reactions.

"The Pfizer-BioNTech COVID-19 vaccine is not a live vaccine and it can be administered to immunocompromised patients," according to the [task force](#). "Physicians and other providers should inform such immunocompromised patients of the possibility of a diminished [immune response](#) to the vaccine. We do not know at this time if people with a weakened immune system will respond to the vaccine and be protected from COVID-19."

**More information:** [More Information](#)

Allergic reactions to vaccines are generally rare and people with common allergies are not more likely to have a reaction to the Pfizer-BioNTech COVID-19 vaccine, according to guidance released by the American College of Allergy, Asthma & Immunology (ACAAI).

The ACAAI COVID-19 Vaccine Task Force issued the guidance related to the risk for an allergic reaction with the Pfizer-BioNTech COVID-19 vaccine that was given emergency use authorization by the U.S. Food and Drug Administration on Dec. 11.

Members of the task force say that individuals with common allergies to medications, foods, inhalants, insects, and latex are no more likely than the [general public](#) to have an allergic reaction to the Pfizer-BioNTech COVID-19 vaccine. However, the task force does not recommend the Pfizer-BioNTech COVID-19 vaccine for individuals with a known history of a severe allergic reaction to [polyethylene glycol](#), a component of this vaccine

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