



COVID-19 Vaccination in Patients Who Develop COVID-19 following Cancer Surgery: Correspondence

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Dear Editor,

We would like to share our ideas on the publication “Vaccination against SARS-CoV-2 Decreases Risk of Adverse Events in Patients Who Develop COVID-19 following Cancer Surgery.”¹ Verhagen et al. investigated the effect of vaccination on these outcomes and reported 30-day unfavorable postoperative event rates in individuals who develop postoperative COVID-19.¹ The risk of developing COVID-19 after surgery is not prevented by vaccination, however Verhagen et al. reported that postoperative SARS-CoV-2 infection is still a substantial risk factor for mortality and morbidity.¹ Vaccination lowers the risk of negative postoperative outcomes. Verhagen et al. came to the conclusion that, although postoperative COVID-19 infection is a rare complication in patients receiving oncologic resection, it is nevertheless extremely harmful. A vital, generally accessible strategy to reduce this risk is the SARS-CoV-2 vaccine, which ought to be a requirement for preoperative optimization.¹

There are several considerations that need to be made in order to arrive at an accurate interpretation. One of the potential confounding variables that could have affected the outcomes of the initial dose was a real poor reaction. Examples include the COVID-19 strain, the method of administration, the environment, and the comorbidity of the recipient prior to vaccination. Asymptomatic COVID-

19 and the absence of clinical symptoms may be connected.² COVID-19 must be ruled out if neither the previous symptoms nor the current symptoms are present. It is impossible to totally rule out the possibility of cross-contamination with an undiagnosed SARS-CoV-2 infection. The impact of inherited genetic diversity on vaccine recipients’ immunological reactions has also been studied and established.³ To determine whether the conclusions of the current paper are supported, more empirical research should be done.

DISCLOSURE None.

REFERENCES

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