

**CANADIAN DERMATOLOGY ASSOCIATION POSITION STATEMENT
CDA RECOMMENDATIONS REGARDING COVID-19 VACCINES SIDE EFFECTS
WITH HYALURONIC ACID DERMAL FILLER USE***

* Based on information available as of 11 March 2021

RECOMMENDATIONS:

The Canadian Dermatology Association (“CDA”) recommends the following regarding COVID-19 vaccines in relation to hyaluronic acid (HA) dermal fillers:

- 1. A history of having HA dermal fillers should not dissuade individuals from receiving a vaccine, including a COVID-19 vaccine.**
- 2. If an individual has had a vaccine, including a COVID-19 vaccine, they are able to receive HA dermal fillers in the future.**
- 3. It may be preferable to wait two weeks after HA dermal fillers to receive a vaccination, including a COVID-19 vaccine. However, if the opportunity arises to receive a COVID-19 vaccine, it is our opinion that regardless of the timeline of your HA dermal filler treatment, consider receiving the vaccine.**
- 4. It may be preferable to wait two weeks after vaccination, including COVID-19 vaccination, to receive HA dermal fillers.**
- 5. If you have additional questions, your board-certified dermatologist is an excellent resource as they have residency-trained expertise in both the injection of HA dermal fillers and any possible adverse events related to HA dermal fillers.**

BACKGROUND

This communique is in response to the U.S. FDA reports of COVID-19 vaccine trial side effects. The goal is to provide information, guidance and perspective for patients and practitioners regarding these potential reactions.

On December 17, 2020, the FDA reported that 3 out of 15,184 patients who received at least one Moderna vaccine developed transient facial or lip swelling. These three patients had previously had HA dermal fillers and the associated swelling was assumed to be related to their previous HA dermal filler injections. There have been rare reports in the literature of similar reactions with other COVID-19 vaccines as well.

These events are considered extremely rare. The filler reactions above all completely resolved within 48 hours to one week. None of the reported reactions were considered dangerous or life-threatening. The reactions to date have been temporary and self-resolving and/or successfully treated. To our knowledge, there have been no repeated reactions in these patients and no other subsequent adverse effects.

This rare complication is well known amongst dermatologists who specialize in cosmetic procedures. It has been reported with other vaccines, infections such as the flu, as well as dental procedures. While temporary, this side effect can be treated with medications to speed up resolution if needed. Based on

this experience, the general convention is to recommend spacing vaccinations, dental procedures and HA dermal fillers apart by two weeks.

Given the importance of vaccination, the CDA recommends that the benefits of receiving the COVID-19 vaccine for the individual and population at large far outweigh the possible risks associated with COVID-19 vaccine-related filler reactions.

Our research indicates that there are no reported issues with neuromodulators (i.e. Botox, Dysport, Nuceiva, Xeomin) and any COVID-19 vaccines.

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