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| Chronic respiratory disease | Including those with poorly controlled asthma1 that requires continuous or repeated use of systemic steroids or with previous exacerbations requiring hospital admission, cystic fibrosis, ciliary dyskinesias and bronchopulmonary dysplasia |
| Chronic heart conditions | Haemodynamically significant congenital and acquired heart disease, or less severe heart disease with other co-morbidity. This includes:* single ventricle patients or those palliated with a Fontan (Total Cavopulmonary Connection) circulation
* those with chronic cyanosis (oxygen saturations <85% persistently)
* patients with cardiomyopathy requiring medication
* patients with congenital heart disease on medication to improve heart function
* patients with pulmonary hypertension (high blood pressure in the lungs) requiring medication
 |
| Chronic conditions of the kidney, liver or digestive system | Including those associated with congenital malformations of the organs, metabolic disorders and neoplasms, and conditions such as severe gastro- oesophageal reflux that may predispose to respiratory infection |
| Chronic neurological disease | This includes those with* neuro-disability and/or neuromuscular disease that may occur as a result of conditions such as cerebral palsy, autism, epilepsy and muscular dystrophy
* hereditary and degenerative disease of the nervous system or muscles, other conditions associated with hypoventilation
* severe or profound and multiple learning disabilities (PMLD), Down’s syndrome, including all those on the learning disability register
* neoplasm of the brain
 |
| Endocrine disorders | Including diabetes mellitus, Addison’s and hypopituitary syndrome |
| Immunosuppression | Immunosuppression due to disease or treatment, including:* those undergoing chemotherapy or radiotherapy, solid organ transplant recipients, bone marrow or stem cell transplant recipients
* genetic disorders affecting the immune system (e.g. deficiencies of IRAK-4 or NEMO, complement disorder, SCID)
* those with haematological malignancy, including leukaemia and lymphoma
* those receiving immunosuppressive or immunomodulating biological therapy
* those treated with or likely to be treated with high or moderate dose corticosteroids
* those receiving any dose of non-biological oral immune modulating drugs e.g. methotrexate, azathioprine, 6-mercaptopurine or mycophenolate
* those with auto-immune diseases who may require long term immunosuppressive treatments

Children who are about to receive planned immunosuppressive therapy should be considered for vaccination prior to commencing therapy. |
| Asplenia or dysfunction of the spleen | Including hereditary spherocytosis, homozygous sickle cell disease and thalassemia major |
| Serious genetic abnormalities that affect a number of systems | Including mitochondrial disease and chromosomal abnormalities |
| Pregnancy | All stages (first, second and third trimesters) |

1 Poorly controlled asthma is defined as:

* ≥2 courses of oral corticosteroids in the preceding 24 months OR
* on maintenance oral corticosteroids OR
* ≥1 hospital admission for asthma in the preceding 24 months

[https://www.brit-thoracic.org.uk/covid-19/covid-19-information-for-the-respiratory-community/#jcvi-advice-on-covid-19-](https://www.brit-thoracic.org.uk/covid-19/covid-19-information-for-the-respiratory-community/#jcvi-advice-on-covid-19-vaccination-for-children-aged-12-15-years-in-clinical-at-risk-groups)) [vaccination-for-children-aged-12-15-years-in-clinical-at-risk-groups)](https://www.brit-thoracic.org.uk/covid-19/covid-19-information-for-the-respiratory-community/#jcvi-advice-on-covid-19-vaccination-for-children-aged-12-15-years-in-clinical-at-risk-groups))

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| **Other risk groups** |
| Household contacts of people with immunosuppression | Individuals who expect to share living accommodation on most days (and therefore for whom continuing close contact is unavoidable) with individuals who are immunosuppressed (defined as immunosuppressed in tables 3 or 4). |