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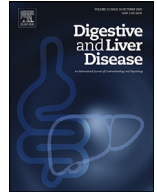
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Correspondence

Comment on: “Reduced humoral response to two doses of COVID-19 vaccine in patients with inflammatory bowel disease: Data from ESCAPE-IBD, an IG-IBD study”



Dear Editor,

We would like to comment on the article, entitled “Reduced humoral response to two doses of COVID-19 vaccine in patients with inflammatory bowel disease: Data from ESCAPE-IBD, an IG-IBD study [1].” Although the majority of IBD patients exhibited seropositivity following COVID-19 vaccinations, Macaluso et al. found that the size of the humoral response was much lower than in HCs [1]. These results appear to be mostly unrelated to the use of immune-modifying therapies, in contrast to those of other research [1]. Numerous variables could have a substantial impact on the COVID-19 vaccination’s efficacy. Different doses and administration techniques are available. Compared to a typical, healthy vaccine recipient, patients who use prescription medicines or have underlying medical conditions may be more susceptible to immunizations. We can all agree that it is a good idea to administer the COVID-19 vaccine. The relatively common precursor COVID-19 without symptoms might possibly play a role [2].

Testing is frequently skipped to rule out a prior, asymptomatic COVID-19 infection. Regular blood testing can reveal more about a person’s underlying immunological issues. It is possible to more precisely forecast how the COVID-19 vaccination will perform by routinely tracking people’s underlying immunological disorders. This is an important consideration when determining the efficacy or safety of a vaccination. Despite the fact that there is frequently little information available regarding pre-vaccination immunological or health status, and the possibility of confounding with non-symptomatic SARS-Co-V2 infection cannot be effectively ruled out, numerous studies have demonstrated the efficacy, safety, or clinical

significance of the COVID-19 vaccine. Finally, a recent study found a link between vaccine recipients’ baseline genetic variation and their immunological response to vaccination [3]. If additional research is planned, the implications of the genetic polymorphism should be evaluated.

Declaration of Competing Interest

None.

References

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- [2] Joob B, Wiwanitkit V. Letter to the Editor: coronavirus Disease 2019 (COVID-19), Infectivity, and the Incubation Period. *J Prev Med Public Health* 2020;53(2):70.
- [3] Čiučulkaitė I, Möhlendick B, Thümmler L, Fisenkci N, Elsner C, et al. GNB3 c.825c>T polymorphism influences T-cell but not antibody response following vaccination with the mRNA-1273 vaccine. *Front Genet* 2022;13:932043.

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