

SARS-CoV-2 Vaccines & Tromethamine:

Guidance for Allergists/Immunologists from the CSACI

Current as of January 15, 2023 and based on available evidence to date

Tromethamine (trometamol or Tris) in the Moderna SARS-CoV-2 vaccines and Pfizer-BioNTech bivalent SARS-CoV-2 vaccine has been identified as a potentially allergenic excipient.¹

Millions of individuals are exposed daily to tromethamine in medical and consumer products, including topical emollients, adhesives, coatings, polishes, and drugs such as gadolinium radiocontrast media (RCM) and ketorolac.² A single case report describes an individual experiencing a systemic reaction to RCM in whom an IgE-mediated allergy to tromethamine was the presumed trigger.² Another case report describes someone reacting to ketorolac and no other NSAIDs, suggesting the possibility that tromethamine was responsible.³ However, the risk of anaphylaxis to ketorolac is rare, with only a few case reports in the literature.³⁻⁶ At least one group suggests prescreening and testing for tromethamine,⁷ however, the risk of adverse systemic reactions to this compound is extremely low, and the validity of these tests has not been established.

Therefore, those with a suspected history of adverse reactions to tromethamine, including those with a suspected history of systemic allergic reactions to RCM and ketorolac, may receive vaccines containing tromethamine.

References:

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