



9 June 2021

The Royal Australian and New Zealand College of Radiologists Statement on Vaccine Induced Adenopathy

Recent literature from the United States has indicated that some individuals own immune response post COVID vaccination (Pfizer and Moderna) may manifest as unilateral axillary lymphadenopathy related to the vaccinated arm.^{1, 2}

Such responses have not been reported with the Astra-Zeneca vaccine thus far.

Unilateral axillary lymphadenopathy may present as a palpable lump in the axilla clinically. It may inadvertently be seen on routine breast imaging. Clinical history (correlating timing and site of vaccination) and examination should guide appropriate management, including follow up and further investigation, if required. Most vaccination related lymphadenopathy will resolve within 1-2 weeks, some lasting up to 6 weeks. If lymphadenopathy persists, further investigations should be undertaken to rule out alternative conditions.

The Royal Australian and New Zealand College of Radiologists notes that the rare occurrence of axillary lymphadenopathy following COVID vaccinations may cause diagnostic confusion. However, balanced with the risk of increased screening intervals, RANZCR does not recommend delaying screening, particularly for higher risk groups, and rural and remote populations where access to screening is not always available. Patients with unilateral axillary lymphadenopathy should be managed on a case-by-case basis.

References

¹ [Unilateral axillary Adenopathy in the setting of COVID-19 vaccine - ScienceDirect](#)

² [Mitigating the Impact of Coronavirus Disease \(COVID-19\) Vaccinations on Patients Undergoing Breast Imaging Examinations: A Pragmatic Approach : American Journal of Roentgenology : Ahead of Print \(AJR\) \(ajronline.org\)](#)

Please direct any queries to the Faculty of Clinical Radiology at fcr@ranzcr.edu.au

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