

Debunking 6 Misconceptions*

With help from federal and state agency resources and vaccine manufacturer data as well as Vidant's infectious disease experts, we have debunked six common misconceptions related to the COVID-19 vaccine. This includes facts about vaccine safety, side effects and more.

The vaccine is not safe because of how quickly it was developed, trialed and distributed.

The U.S. vaccine safety system ensures that all vaccines are as safe as possible. Safety is a top priority for vaccine manufacturers and federal agencies. While the process followed a compressed timeline as compared to what we have seen in the past, the vaccines still followed the normal quality control and development procedure. Based upon completion of that process, the vaccine's use was authorized based on an emergency use authorization (EUA).

Clinical trials for the COVID vaccine were conducted according to the rigorous standards set forth by FDA in their June 2020 guidance document (https://www.fda.gov/media/139638/download).

After passing rigorous study trial criteria, the Pfizer, Moderna and Johnson & Johnson vaccines are all considered highly effective, safe and proven to dramatically reduce hospitalizations and deaths related to the virus. Individuals who receive the vaccine will continue to be monitored for side effect reports, which is customary for any new drug product release.

I will get COVID-19 as a result of receiving the COVID vaccine.

You will not contract COVID-19 from receiving the vaccine.

None of the COVID-19 vaccines currently in development in the United States use the live virus that causes COVID-19. There are several different types of vaccines in development. However, the goal for each of them is to teach our immune systems how to recognize and fight the virus that causes COVID-19. Sometimes this process can cause symptoms, such as sore arm, fever, muscle aches, etc. These symptoms indicate your body's immune response and are typically mild and go away after a few days.

It typically takes a few weeks for the body to build immunity after vaccination. That means it's possible a person could be infected with the virus that causes COVID-19 just before or just after vaccination and get sick. This is because the vaccine has not had enough time to provide protection.

And while the vaccine is highly effective and proven to dramatically reduce hospitalizations and deaths related to the virus, studies have shown that it is possible for people who have been vaccinated to still become infected with COVID-19 either between doses or, in rare cases, after full vaccination. This is one of the reasons it's important we maintain vigilance in masking, hand hygiene and social distancing.

The vaccine will permanently change my DNA.

COVID-19 vaccines do not change or interact with your DNA in any way.

The Pfizer and Moderna COVID-19 vaccines contain a specific kind of genetic material called mRNA. The mRNA in the vaccines does not go into the nucleus of a cell, where DNA is stored. The use of mRNA allows

the bodies' immune system to develop a defense against COVID-19 which is an RNA virus. While this technique is new, it is not unknown. The technology has been studied for over a decade. Learn more from the CDC.

Johnson & Johnson's Janssen COVID-19 vaccine is a "viral vector" vaccine, which uses a modified version of a different, harmless virus (the vector) to deliver important instructions to our cells to start building protection. The instructions are delivered in the form of genetic material. This material does not integrate into a person's DNA.

The side effects are unknown and I do not want to take that chance.

As with any vaccine, it is common to experience mild or moderate side effects such as pain at the injection site, fatigue and body aches and other flu-like symptoms.

Any potential long-term side effects are continuing to be monitored. Health officials are monitoring and asking people to report any side effects so it can be documented and reported. Early research has not shown a cause for concern.

At Vidant, team members and providers can report side effects directly to the state; however, only a few have reported any complications to Occupational Health.

I already had COVID-19, so I don't need to be vaccinated.

There is not enough information currently available to say if or for how long after infection someone is protected from getting COVID-19 again; this is called natural immunity. Early evidence suggests natural immunity from COVID-19 may not last very long, but more studies are needed to better understand this.

The CDC recommends those with COVID-19 who have symptoms should wait to be vaccinated until they have recovered from their illness and have met the <u>criteria</u> for discontinuing isolation; those without symptoms should also wait until they <u>meet the criteria</u> before getting vaccinated. This guidance also applies to people who get COVID-19 before getting their second dose of vaccine. For two-dose vaccines, the second dose can be given up to six weeks after the first dose and still be very effective, so do not worry if you have to reschedule your appointment for a later date. Once you have recovered, it is safe to get vaccinated with any COVID-19 vaccine if you have been infected in the past.

The vaccine isn't safe for me because I'm pregnant, breastfeeding or plan to be pregnant in the next few years.

Until findings are available from clinical trials and additional studies, only limited data are available on the safety of COVID-19 vaccines administered during pregnancy. CDC and the FDA have safety monitoring systems in place to capture information about vaccination during pregnancy and will closely monitor reports.

If you are pregnant, breastfeeding or plan to be pregnant and have questions or concerns, it is recommended for you to discuss with your primary care provider before getting vaccinated.

The research has not shown a link between the COVID-19 vaccine and infertility or miscarriage. <u>The CDC</u> provides additional information for those who are pregnant or breastfeeding.

*Enclosed content, data and recommendations have been compiled from CDC, FDA and NCDHHS resources in conjunction with Vidant Health infectious disease experts.