

## **Covid-19 vaccination Frequently Asked Questions**

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## What is the purpose of the vaccine?

The purpose of the vaccine is **to reduce severe illness/hospitalisation**

## How does the pfizer vaccine work?

Conventional vaccines are produced using weakened forms of the virus.

The Pfizer/BioNTech vaccine works by using the **mRNA ('messenger' copy of genetic code)** of the Sars-Cov-2 coronavirus, relating specifically to the production of its spike protein. This is injected into the body, where it enters cells and tells them to **create the coronavirus spike protein**. This prepares the **immune system to recognise the spike protein** in the future, and to subsequently **produce antibodies and to activate T-cells** to quickly fight the virus on exposure to Covid-19. Vaccines mimic natural infection, without actually causing the person to become unwell.

## How does the oxford vaccine (also known as the Astra Zeneca vaccine) work?

Conventional vaccines are produced using weakened forms of the virus.

This vaccine is created from a **modified virus** that normally causes the common cold in chimpanzees. A tiny bit of genetic material is removed from this virus so that it **CANNOT** trigger infection in humans. Into this gap scientists have **inserted a fragment of the genetic code for coronavirus**. This makes up the vaccine, and once injected, it **induces an immune response**, allowing **our body to attack the coronavirus** if we get infected with it. The technical term is a '**viral vector**' vaccine, and this same method has been used for previous vaccines.

## How does the moderna vaccine work?

The Moderna vaccine works in the same way as the Pfizer vaccine. It is made using messenger RNA (aka mRNA), which delivers a bit of genetic code to cells, in effect to make the surface protein (aka spike protein) on the SARS-2 virus. This prepares the **immune system to recognise the spike protein** in the future, and to subsequently **produce antibodies and to activate T-cells** to quickly fight the virus on exposure to Covid-19

## How will we know if the vaccine is safe and effective?

The vaccines currently approved for use in the UK are known as the **Pfizer/BioNTech** vaccine, the **Moderna** vaccine and the **Oxford/AstraZeneca** vaccine. All three have met **strict standards of safety, quality and effectiveness** set out by the MHRA (the Medicines and Healthcare products Regulatory Agency), which follows international standards of safety. So far, millions of people have been given the Pfizer and AstraZeneca covid-19 vaccine, and reports of a serious side effect, have been **very rare**.

## How is the process for approving a vaccine moving so quickly?

Traditionally, it has taken many years to develop a vaccine, and confirm its safety and efficacy. This timeline is **substantially shortened** for SARS-CoV-2 vaccines in development. There are several ways this has been made possible.

**Firstly**, scientists have been **studying different types of coronavirus for many years** so they are not learning from scratch when they learned about SARS-CoV-2.

Researchers across the world have **quickly mobilised** to share their data with other scientists to work together to discover a vaccine.

**Secondly**, trials are normally made up of 3 phases, and each phase would normally need to be approved (a time consuming process) before the scientists can move onto the next phase. Some clinical trials have **combined phases 1 and 2 to assess safety and the immune responses**.

**Thirdly**, because of the high number of new cases of Covid-19, differences between those who received the viral vaccine and those who received the placebo vaccine can be **measured more quickly** than in the absence of a pandemic.

And finally, governments across the world **have heavily invested in the development of this vaccine** to produce large numbers of vaccine doses, even before the final results of the phase 3 trials were available. Traditionally drug companies would wait for the results of phase 3 trials before manufacturing the vaccine on a large scale.

### What are common side effects following vaccination?

**Sore arm**

Feeling **achey**

Feeling **tired**

**A headache**

**Fever** – a fever may be present for **upto 48 hours** post-vaccination

It may be advisable to **take paracetamol shortly after** receiving your vaccine to help prevent some of these common side effects.

### How long will protection last following vaccination?

We are still learning about the duration of protection following infection with SARS-CoV-2 and it is too early to tell how long protection will last.

There are ways to potentially **enhance protection** following vaccination, such as with **booster doses** of the vaccine. It is **very important to attend for the two doses of the vaccine** (the 2<sup>nd</sup> dose is the booster dose) and there will be a 3<sup>rd</sup> booster vaccine available in the Autumn for the vulnerable.

### How many vaccines do I need to have?

**2 doses**, with the second dose to be given from **between 4-12 weeks after** the first dose. In Autumn, the government will be rolling out a 3<sup>rd</sup> booster dose for certain vulnerable groups.

### If I already had Covid-19, should I still get a vaccine?

**Yes**. We do **not yet know how long people are protected** after having Covid-19 and if protection only lasts for several months, vaccination could be of benefit.

### Can someone get Covid-19 from the vaccine?

**No**, it is not possible to get Covid-19 from vaccines.

### Who will be vaccinated first?

We have strict instructions to vaccinate patients in the following order;

**Over 80yrs**, frontline healthcare workers and care home staff and residents

**75yrs** and over

**70yrs** and over AND shielding patients/clinically extremely vulnerable

**65yrs** and over

**16-65yrs** AND in an **at risk** group

**60yrs** and over

**55yrs** and over

**50yrs** and over

**Under 50yrs – please note that we will not be offering vaccines to the under 50s (unless you are in an at risk group). These vaccines will take place in local participating pharmacies and mass vaccination sites.**

Please **wait for the surgery to contact you** to make an appointment.

### **Who cannot have the vaccine at present?**

Anyone with a **previous anaphylactic reaction to a previous Covid-19 vaccine** or a confirmed anaphylactic reaction to any component of the vaccine **HOWEVER**, individuals with a history of immediate onset **anaphylaxis to multiple classes of drugs** or an **unexplained anaphylaxis** should **not** be vaccinated with the Pfizer vaccine. The **AstraZeneca/Oxford vaccine can be used instead** (as long as the patient has not had a prior anaphylactic reaction to this vaccine or to any of its components)

Those individuals who have a **localised skin reaction** to the first vaccine **may still have the second and third** vaccine, but must be observed for 30 minutes after the subsequent doses

### **Can I have the vaccine if I am pregnant?**

**Vaccination in pregnancy can be offered to all pregnant patients, and should be considered** where the **risk of exposure to SARS-CoV2 infection is high** and cannot be avoided, or where the woman has **underlying conditions** that put her at risk of serious complications of Covid-19 eg Diabetes, Hypertension, Asthma, overweight, BAME origin. In these circumstances, clinicians should **discuss the risks vs the benefits**. There is currently safety monitoring/research ongoing into the effects of the vaccine on pregnant women and their unborn babies. The risk to pregnant women and neonates following COVID-19 infection is generally low and more than half of pregnant women who test positive for SARS-CoV-2 are asymptomatic and there is no increase in rate of stillbirth or neonatal death. The Pfizer and Moderna vaccines are the preferred vaccines to offer pregnant women as there is more data available on these vaccines in pregnancy. If a woman finds out that she is pregnant after she has started a course of vaccine, she may complete vaccination during the pregnancy using the same vaccine product, or alternatively, as soon as possible after delivery.

Women who are trying to become pregnant, **do not need to avoid pregnancy** after vaccination

JCVI (Joint Committee on Vaccination and immunisation) has advised that there is **no known risk with giving non-live vaccines** (such as the Pfizer and Oxford vaccines) whilst breastfeeding

### Why can't children get the vaccine?

Currently the vaccine is being targeted to **those individuals most at risk**. Children have a much **lower risk** of being badly affected by Covid-19 if they catch it – currently fewer than 5% of Covid-19 cases are amongst children. The Pfizer vaccines are approved for use in children aged 12 years old and upwards. It is likely that Moderna will have a similar safety profile.

### Is the vaccine safe if you are on blood thinners?

Those on blood thinners such as warfarin should have **well controlled INR levels** prior to vaccination. This is because the vaccine is given **into a muscle**, and injections given into the muscle **may bleed more** than injections given under the skin. If your INR level is not well controlled, then it is best to **speak to your GP** to help with the management of this. Once the warfarin level/INR is well controlled, you will be able to have the vaccination

### Can I have the vaccine if I am immunosuppressed?

It is **safe for people who are immunosuppressed** to get the vaccine, but it is not yet clear **how effective** it will be for this group of people. So, if you're immunosuppressed, it's very important you **continue to follow social distancing rules**. It is worth asking **those you live with** to do this as well.

Nb examples of immunosuppressed patients includes those on **long-term steroids**, on **immunosuppressant drugs** (including chemotherapy), patients with conditions that **compromise the immune** system eg HIV, blood cancers, autoimmune conditions etc.

Please note that **cancer treatments may affect how your body responds** to the vaccine, therefore it is worth **liaising with your oncology team** about the best time to have the vaccine. As we learn more about the vaccine in this group of patients, we will update our patient information sources.

### Does the vaccine contain egg, gelatin, gluten or any animal products?

**No**

### Where will the vaccine take place?

We have been fortunate enough to be able to use **Heald Green Village Hall** for our vaccination clinics. The address is **Outwood Rd, Heald Green, Cheadle SK8 3JL**.

### What if I am housebound?

Please contact your surgery urgently to inform them if you are unvaccinated, housebound and unable to get to the vaccination clinic. We are very keen to get you vaccinated and protected as soon as possible

### Should I get the vaccine for influenza (flu vaccine)?

**Yes**, if you have been invited to get a flu vaccine by your surgery, it is **important to have it, particularly this season** when both influenza viruses and SARS-CoV-2 will infect people. We still do not know how these two viruses will interact but people can get infected with both viruses and this will likely cause **more severe disease**. Reducing the number of people who are admitted to hospital due to severe influenza will also help ensure that the NHS will not be overwhelmed should there be an increase in Covid-19 cases. Initial advice was to leave at least 7 days between a flu vaccine (or any other vaccine) and the Covid19 vaccine but it is likely that the flu vaccine and 3rd booster doses of the covid19 vaccine will be co-administered but we are still awaiting confirmation on this.

### **Will we still need to wear masks and practice social distancing once a vaccine is available?**

We will **still need to wear masks and practice social distancing** until a large proportion of the population is vaccinated and we are sure that the vaccine provides **long-term protection**. Initially, **we will not have enough vaccines to vaccinate everyone** who wants the vaccine and the virus will still be transmitted.

If a vaccine not only **protects** against disease but **reduces transmission**, and continues to do so for many years, we are likely to reach a state of **'herd immunity'** when masks and physical distancing will **no longer be required**. Herd immunity is when most of a population is **immune to an infectious disease**, and this then provides **indirect protection** (or herd immunity) to **those who are not immune** to the disease.

From 19<sup>th</sup> July 2021, the legal requirement to wear a mask in enclosed public spaces ends but it is still encouraged to wear a mask in crowded areas and businesses can make their own rules. We will still be requesting that all our staff and patients wear a mask when in the surgery, to minimise risk of infection to all. Some of patients may not have been fully vaccinated, or may be immunocompromised, so it is of importance to us to protect you all.

### **Is there a link between blood clots and the AstraZeneca/Oxford vaccine?**

Recently a rare condition involving blood clots, accompanied by low platelet counts has been reported after the AstraZeneca vaccine. The current reported rate of this event in the UK is around 15 cases per million after the first dose, although a higher incidence appears to be seen in younger individuals, therefore the Pfizer or Moderna are recommended in under 40 yr olds.

### **What should I do if I feel unwell after the vaccination?**

Side effects are common for 48 hours or so after the vaccines. If you have prolonged symptoms, and if you received your vaccine at our vaccination site, please contact the GP for advice. If you received your vaccine at a mass vaccination centre, please contact 119 for advice.

### **Is there going to be a 3<sup>rd</sup> booster dose?**

As of 19<sup>th</sup> July 2021, the government has recommended 3<sup>rd</sup> booster doses to vulnerable patients. This is likely to be rolled out in 2 stages;

Stage 1; Clinically extremely vulnerable, care home residents, 70 yrs and older, frontline health and social care workers

Stage 2; 50 yrs and older, 16-49 year olds in an at-risk group, household contacts of immunosuppressed patients

These 3<sup>rd</sup> doses may be given at the same time as the flu vaccines. We are still awaiting official guidance on this, and we are still in the process of confirming whether our practice will be offering the 3<sup>rd</sup> doses. We will update guidance once all has been confirmed.