



**Get the vaccine. Wear a mask. Save lives.**

 Home Health Foundation  
The Leaders in Home Health and Hospice Care

## **COVID-19 Vaccine FAQ**

### **About the Vaccine**

#### **What are the differences between the two vaccines, and which one will Home Health Foundation employees receive?**

The Pfizer vaccine was the first to achieve emergency use authorization, and the Moderna vaccine is expected to also be approved very soon. They both use messenger RNA as a mechanism of action, and they both have had very high levels of effectiveness and similar side effects which are generally mild and self-limiting. The Moderna vaccine does not need to be super chilled so it will be easier to distribute to broad populations outside of the hospital setting. The Moderna vaccine's second dose is 4 weeks after the initial dose, while the Pfizer vaccine's second dose is 3 weeks after the first. Currently, all of Wellforce has received the Pfizer vaccine. Once the Moderna vaccine is approved, it is also expected to be available at Wellforce.

#### **What is the timing of receiving the COVID-19 vaccine for Home Health Foundation employees?**

All patient-facing staff will have access by the end of January 2021; all non-patient-facing staff will have access by end of February 2021.

#### **Can I trust that the vaccine has been kept at the extreme temperatures required at every checkpoint from the manufacturer, to transportation and storage to finally the consumer?**

The vaccine is being transported in portable coolers with dry ice. Storage at Wellforce is in industrial super-cooler refrigerators, and the logistics and controls during transport and receipt are very solid and overseen by the Infectious Disease department.

#### **I understand the concern about safety and the first dosing, but would it be all for nothing without the second dosing? And when would that be administered?**

The second dose must be received to achieve the full effect of the vaccine and to have long-lasting protection. The Pfizer vaccine requires the second dose in three weeks and the Moderna vaccine in four weeks.

#### **How diverse was the testing pool during the trial? Did they test people with underlying health conditions?**

It is important to have a diverse sample population take part in the trials who are at sufficient risk so that one can assess the efficacy of the vaccine. Of the participants in the Pfizer trial, 42% came from diverse racial and ethnic backgrounds. People over the age of 55 represented 40%

of participants, and two-thirds were either overweight or obese. Participants included people with diabetes, pulmonary conditions and HIV.

**Is it mandatory for you to take the vaccine to maintain employment?**

The vaccine is not mandatory - it is in emergency use authorization and so it is entirely up to the individual to decide.

**Will the COVID-19 vaccine be administered annually like the flu vaccine?**

It is not anticipated that this will be an annual vaccine like the flu. We will not know how long the protection lasts until more time has gone by, but it is expected to be long lasting.

**Where will the vaccine be administered?**

The vaccine will be administered at Lowell General Hospital and MelroseWakefield Hospital. We are looking into partnering with York Hospital for our York hospice staff.

**Home Health Foundation staff see COVID+ patients in their home, at High Pointe House and in Skilled Nursing facilities, yet they are not prioritized with other direct patient care staff. I don't understand that.**

Wellforce is prioritizing HHF staff as part of their overall vaccine distribution plan. The State of MA did differentiate home health workers from other patient-facing direct care workers and we have notified the state that we disagree with this. Wellforce is working closely with HHF to ensure equitable distribution.

**I would like to review the information. Where is the best place to start?**

Information is available from Wellforce –a good first step is to watch the infectious disease Q&A from 12/15, and available on Workplace on the COVID-19 update page. We have also posted fact sheets about the vaccine.

## Side Effects and Efficacy

**What are the side effects?**

Most side effects are minor and could include arm soreness and redness; some people, especially younger people develop fever and malaise that is self-limiting and resolves within 1-2 days. The instance of fever and malaise is also more common after the second dose rather than the first.

**Not everyone will be vaccinated, will this be effective enough?**

Dr. Anthony Fauci recently stated that 75% of our country's population will need to become vaccinated to achieve herd immunity. This will take time and depends on the acceptance of the vaccine.

**Can you get COVID-19 from the vaccine?**

You cannot get the virus from the vaccine. The vaccine uses messenger RNA to signal the body's cell to create a harmless spike protein that "looks" like the COVID-19 molecule. It tricks the body's immune response to attack the protein and it will do so if the virus enters the body subsequently.

**If you receive the vaccine can you still become infected with COVID-19?**

The vaccine is 95% effective at preventing COVID and 99% effective at preventing severe disease.

**Is it possible to infect others with COVID-19 once vaccinated?**

It is not entirely clear whether a vaccinated person can still infect others. It is thought that they would not be infectious, because the body's immune response will not allow the virus to multiply, thus preventing the person from becoming infectious. This will be studied further as more people are vaccinated. The Moderna vaccine, which has not yet been approved, does show evidence that it can prevent the spread of infection to others.

**How long will the vaccine protect me?**

It is not known how long the protection will last and will be part of the ongoing analysis.

**Can the vaccine cause death?**

There have been no deaths associated with the vaccine.

**The long-term side effects are unknown. Will the vaccine need to be administered each year?**

It is expected that the two inoculations will provide long-term immunity, although more study will occur in time and it cannot be ruled out that booster shots might be necessary in the future.

**What are the long-term effectiveness and effects of the vaccine?**

It is not possible to determine whether there will be long-term effects. The CDC and FDA have thoroughly examined the vaccine and its effectiveness and approved it for emergency use. There will continue to be robust data collection and analysis as the vaccine is distributed. The mechanism of action is well known and has been studied for many years. It uses an RNA messenger protein that creates a spike protein similar in structure to the virus, tricking the immune system to have a response when it encounters the virus. The RNA messenger does not enter the cell's nucleus and cannot affect the cell's DNA. There is no virus, live, attenuated or killed that is part of the vaccine.

**I heard that a side effect included Bell's Palsy. Is that true?**

Bell's palsy was addressed by the Tufts infectious disease doctor during the Q&A session that took place on 12/15. There is not a known correlation. The virus is known to affect the cranial nerves (loss of taste and smell), but because the vaccine does not contain any virus it is not understood how it would cause Bell's palsy. It has been reported that four individuals who

participated in the study and received the vaccine did develop Bell's palsy, but this incidence was not statistically significant.

## Health Concerns

### **I plan to get the vaccine, but not sure if it will be through Home Health Foundation or from my PCP.**

We believe you will have access to the vaccine through work before you will be able to receive it from your doctor, based on the state's prioritization list.

### **If you already had COVID-19, should you still get the vaccine?**

It is recommended that someone who had a confirmed COVID-19 wait 90 days after recovery before taking the vaccine. 90 days is the estimated length of time that someone has immunity following an illness. Waiting also allows a colleague to receive the vaccine in the meantime.

### **Were there any allergic reactions reported to the public?**

Two allergic responses were not anaphylactic, among a study group in England. The FDA has advised that *anyone with an allergy to a vaccine component not get the vaccine*. Caution should be exercised for anyone with a history of anaphylaxis (needing to carry an epi-pen). In all cases, people will be observed for 15 minutes, and supportive care in case of an allergic reaction will be immediately available at the immunization site. The vaccine ingredient spoken about most frequently concerning allergies is PEG (polyethylene glycol).

### **I have allergies to medications, what are the ingredients of the vaccine?**

The Pfizer BioNTech COVID-19 Vaccine includes the following ingredients: mRNA, lipids ((4-hydroxybutyl)azanediyl)bis(hexane-6,1-diyl)bis(2-hexyldecanoate), 2 [(polyethylene glycol)-2000]-N,N-ditetradecylacetamide, 1,2-Distearoyl-sn-glycero-3-phosphocholine, and cholesterol), potassium chloride, monobasic potassium phosphate, sodium chloride, dibasic sodium phosphate dihydrate, and sucrose. If you have allergies to any vaccine component you should not take it.

### **I have an egg allergy, does the vaccine contain egg?**

The Pfizer/BioNTech COVID-19 vaccine does not contain any egg proteins and is safe for those with an egg allergy. Instead of injecting you with a tiny piece of the virus (which is how most vaccines work that contain egg), the new generation of COVID-19 vaccines rely on RNA molecules that actually send messages and provide instructions to your cells. Those instructions direct your body to produce proteins that will trigger your immune system, telling it to make antibodies that can fight coronavirus if you contract it.

### **Is it safe for the immunocompromised patient?**

Yes. People who are immunocompromised, including those with autoimmune disease, are encouraged to take the vaccine, although due to the nature of their immunocompromised

condition, their body may not develop as strong of a protective response to the vaccine. It will still offer some protection against the virus.

### **What are the long-term effects when you have many comorbidities?**

The existence of comorbidities is not identified as an exclusion from obtaining the vaccine. Since people with comorbidities are at much greater risk of severe illness, it may be a strong rationale to take the vaccine. If in doubt, we recommend discussing it with your doctor.

### **I am over 65 and have had cancer. Should I get the vaccine?**

This was a question that was answered by the Infectious Disease Chief at Tufts on 12/15. Even if you have active cancer, it is recommended that you receive the vaccine. Depending on your treatments, your immune response may not be as great as someone without illness, however, the protection you will receive will help you avoid severe illness from COVID-19.

### **I have heard the vaccine can cause a stroke, is that true?**

There is no evidence at this time that the vaccine can cause a stroke.

## **Pregnancy and Breastfeeding Mothers**

### **Is the vaccine safe if you become pregnant or are pregnant?**

Although pregnant women were not included in the initial study, 23 women became pregnant before the second dose was administered. Of those, 12 received the vaccine and 11 received the placebo. There were no adverse reaction differences between the two groups. If you are pregnant, discuss your options with your healthcare provider.

### **Is the vaccine unsafe for breastfeeding mothers?**

If you are breastfeeding, discuss your options with your healthcare provider.

### **Is there a chance that it may change DNA and reproductive health?**

Messenger RNA cannot alter DNA according to scientists who have studied the mechanism of action. The development of this vaccine is many years in the making; messenger RNA as a delivery system has been studied for over a decade. Spike protein-type vaccines were developed first during SARS but were not used because they were not needed by the time they were developed. In reality, the work had already been done, which is how we can have a vaccine for COVID in such a short amount of time.