



NORTHEAST HEALTH DISTRICT

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FREQUENTLY ASKED QUESTIONS ABOUT THE COVID-19 VACCINE

Is the vaccine safe?

Over 18,000 people received the vaccine and were compared to a second group of people who did not receive the vaccine. Both groups were followed for approximately two months after receiving the second dose. There were no serious or life-threatening events in either group. The most commonly reported side effects of the vaccine were pain at the injection site, tiredness, headache, muscle pain, chills, joint pain, and fever. These side effects typically lasted several days and went away on their own.

Participant Diversity

Approximately **42%** of overall and **30%** of U.S. participants have diverse backgrounds

Participants	Overall Study	U.S. Only
Asian	5%	6%
Black	10%	10%
Hispanic/Latinx	26%	13%
Native American	1%	1%
Ages 56 to 85	41%	45%

Does the vaccine work? How effective is it?

The vaccine was 95% effective in preventing COVID-19 disease among clinical trial participants. There were a total of 170 cases of COVID-19 among the 37,000 participants: 162 in the group that did not receive the vaccine and only 8 cases in the group that did receive the vaccine.

Of the 170 cases of COVID-19, four were considered severe: 3 in the group that did not receive the vaccine and only 1 severe case in the group that did receive the vaccine.

How long does the vaccine last? Will I need to get the vaccine every year, like the flu shot?

We don't yet know how long protection from the vaccine will last, but this is being studied.

Can I get COVID-19 from the vaccine?

No. The vaccine does not contain the virus, and it cannot give you COVID-19.

How will I feel after getting the vaccine? Are there any side effects?

The most commonly reported side effects were pain at the injection site, tiredness, headache, muscle pain, chills, joint pain, and fever. These side effects typically lasted several days and were more common after the second dose.

Who can get the vaccine?

Because there is only a limited amount of vaccine available, people who are the most at risk of infection will be given the vaccine first. As more vaccine becomes available, more people will be able to receive the vaccine based on their risk levels and other factors. Right now, healthcare workers and residents of long-term care facilities are eligible to receive the vaccine.

To learn about how groups are prioritized to receive the COVID-19 vaccine, visit:

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations-process.html>

Is there anyone who shouldn't get the vaccine?

The COVID-19 vaccine is for people age 16 years or older; it is not authorized for children.

You should not get the vaccine if you have had a severe allergic reaction to any of the vaccine ingredients or to a previous dose of the vaccine.

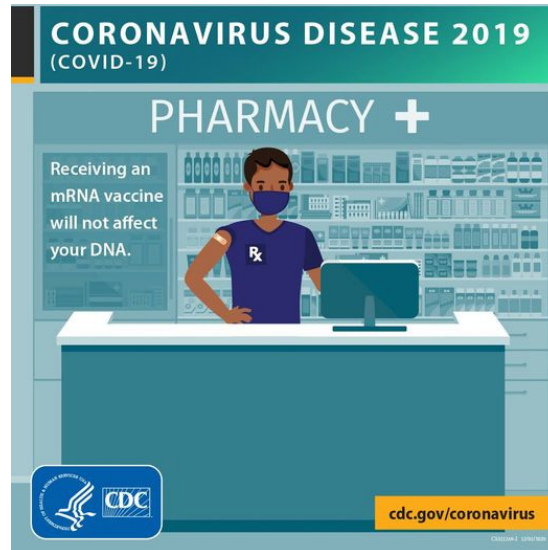
With any vaccine, it is important to talk to your healthcare provider about any medical conditions you have and any medications you take. Be sure to tell your provider if you:

- Have allergies
- Have a fever
- Have a bleeding disorder
- Take a blood thinner
- Are immunocompromised
- Take a medicine that affects your immune system
- Are pregnant or plan to become pregnant
- Are breastfeeding
- Have received another COVID-19 vaccine

How does the vaccine work? Can it change my DNA?

The vaccine is given in two doses, several weeks apart. The vaccine contains a small piece of the virus' mRNA that instructs cells in your body to make harmless copies of the virus' spike protein, which triggers the immune system to defend itself by producing antibodies.

The vaccine does not affect or interact with your DNA in any way. mRNA never enters the nucleus of the cell, which is where DNA (genetic material) is kept. The cell breaks down and gets rid of the mRNA soon after it is finished using the instructions.



Are mRNA vaccines new?

Although there are currently no licensed mRNA vaccines in the United States, researchers have been studying and working with them for decades. These vaccines can be developed in a laboratory using readily available materials, which allows for large scale vaccine production. Some mRNA vaccines that have been studied include influenza, Zika, rabies, and cytomegalovirus (CMV).

When can I stop wearing a mask and avoiding close contact with others after I have been vaccinated?

We do not yet know if the vaccine prevents people from carrying the virus to others, even if they never get sick or show any symptoms themselves. Until more is known, it is still recommended that people continue to wear masks and avoid close contact with those outside of their household.

I've had COVID-19. Do I need the vaccine?

We do not know how long after recovering from a COVID-19 infection someone is protected from getting COVID-19 again. Early evidence suggests natural immunity after recovering from COVID-19 may not last very long, but more studies are needed to better understand this.

Due to the severe health risks associated with COVID-19 and the fact that re-infection with COVID-19 is possible, people may be advised to get a COVID-19 vaccine even if they have been sick with COVID-19 before.

What is an Emergency Use Authorization (EUA), and how does it apply to the COVID-19 vaccine?

The Food and Drug Administration (FDA) is responsible for ensuring that vaccines undergo rigorous checks of vaccine safety, effectiveness, and quality. An [Emergency Use Authorization \(EUA\)](#) is a way to make vaccines and other medicines available quickly during public health emergencies, such as the current COVID-19 pandemic. Under an EUA, the FDA may allow the use of unapproved medical products (or unapproved uses of approved medical products) as long as certain conditions have been met. The conditions for an EUA are:

- A declared emergency due to a serious or life-threatening disease or condition.
- No adequate, approved, and available alternatives exist.
- There is evidence for effectiveness.
- The benefits outweigh the risks.

[The COVID-19 vaccine has been authorized by FDA under an EUA.](#)

Were any steps skipped in the process of testing the vaccine?

No. Recognizing the urgent need for safe and effective vaccines, the FDA is utilizing its various authorities and expertise to make vaccines available as quickly as possible. Some steps in the authorization process might have occurred simultaneously instead of sequentially, but no steps were skipped. These vaccines must still meet rigorous standards for quality, safety, and effectiveness. Authorized vaccines are carefully evaluated during clinical trials with thousands of participants that take place over several months.

Has there been a coronavirus vaccine developed before?

Severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS) are two diseases caused by coronaviruses that are closely related to the virus that causes COVID-19. Researchers began working on developing vaccines for these diseases after they were discovered in 2003 and 2012, respectively. None of the SARS vaccines ever made it past the first stages of development and testing, in large part due to lack of interest because the viruses disappeared. One MERS vaccine (MVA-MERS-S) successfully completed a phase 1 clinical trial in

2019. Lessons learned from this earlier vaccine research have been used to inform strategies for developing a COVID-19 vaccine.

For additional questions, visit:

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html>

For more information about current vaccine trials:

Pfizer study results:

https://pfe-pfizercom-d8-prod.s3.amazonaws.com/2020-11/C4591001_Clinical_Protocol_Nov2020.pdf

Moderna study results:

https://www.modernatx.com/sites/default/files/content_documents/mRNA-1273-Update-11-16-20-Final.pdf