

Frequently Asked Questions about the COVID-19 Vaccines: Information for Residents of Correctional Facilities Produced by Amend at University of California, San Francisco

Leah Rorvig, MD, MS, Amend at UCSF; David Sears, MD, Amend at UCSF; Zoe Kopp, MD, UCSF Clinician Educator Fellowship; Ilana Garcia-Grossman, MD, UCSF National Clinician Scholars Program; Brie Williams, MD, MS, Amend at UCSF & See the last page for our partners!

COVID-19 VACCINES: THE BASICS

- Vaccines teach the immune system how to recognize and fight off the virus that causes COVID-19. This prevents vaccinated people from getting sick. There are currently 3 vaccines available in the United States, made by the drug companies Pfizer, Moderna, and Johnson & Johnson.
- The Pfizer and Moderna vaccines have 2 shots that are given 3 weeks apart (Pfizer) or 4 weeks apart (Moderna). The Johnson & Johnson vaccine (also called Janssen or J&J) is 1 shot. Some people require a 3rd dose or a booster, see below.
- All 3 vaccines are **SAFE** and **HIGHLY EFFECTIVE** at **preventing serious illness and death from COVID-19**.
- The vaccines have been given to hundreds of millions of people and have a strong record of safety.
- While it may seem like the vaccines were developed in record time, the science behind these vaccines has been in development for many years, and these vaccines have gone through all of the steps required for any vaccine to be approved.

SAFETY & EFFICACY

How effective are each of the 3 vaccines at preventing COVID-19?

- All 3 vaccines are **highly effective at preventing serious illness and death** due to COVID-19.
- The initial research shows that the Moderna and Pfizer vaccines were more than 90% effective in preventing mild COVID-19 illness, while Johnson & Johnson was 66% effective. The Johnson & Johnson vaccine was studied in places where more contagious COVID-19 variants (“strains”) were present, so it is not possible to compare the original research studies.
- Since these original research studies, we have seen that the vaccines are less effective (likely due to COVID-19 variants spreading more easily and each person’s immune protection decreasing over time), however, they are **still more than 90% effective at preventing severe illness** including hospitalization and death.
- Unvaccinated people are 6 times more likely to get COVID and 11 times more likely to die from COVID compared with fully vaccinated people.

Are the vaccines effective against the new COVID-19 “variants” (also called “strains”)?

- Research suggests the vaccines are slightly less effective against the variants (like Delta), but **all 3 vaccines are still more than 90% effective at preventing serious illness and death**. The Delta variant has caused more “breakthrough infections” in vaccinated people than the original COVID-19 virus, but most people have mild disease (showing the vaccines are working).

Will the vaccines work against all future variants?

- Viruses constantly change their DNA (or “mutate”). This can cause new variants (also called “strains”). Scientists monitor these variants to identify any that spread easily or are resistant to vaccines.
- The most common variant is Delta, which spreads faster and causes more infections than the original COVID-19 virus. **Most serious infections with Delta are in unvaccinated people**.
- It is impossible to predict whether the vaccines will work against variants that do not yet exist, but it is reassuring that so far, they are effective against the current strains.

Are the COVID-19 vaccines safe? Should I worry that they were developed so quickly?

- All vaccines were found to be safe and effective in adults (including Black and Latinx people) who participated in high quality research – the same research that any new vaccine or medicine must undergo before it is approved.
- Since the original research studies, hundreds of millions of vaccines have been given across the world and further studies have confirmed they are safe and effective.

Are the vaccines approved by the Food & Drug Administration (FDA)?

- The FDA initially allowed use of all 3 vaccines under Emergency Use Authorization (EUA) which requires a thorough review process and strict standards.
- The COVID-19 vaccines have gone through all of the steps required for any vaccine to be approved. It takes a very long time for the FDA to go through the full process. Currently, Pfizer has been fully approved, while Moderna and Johnson & Johnson are still under review. We do not recommend waiting for full FDA approval before getting vaccinated.

SIDE EFFECTS & MEDICAL QUESTIONS

What are the possible side effects of the vaccines?

- The most common vaccine side effects are arm soreness, tiredness, headache, muscle pain, chills, joint pain, and fever. These side effects are more common after the 2nd vaccine dose and – if they occur – should stop within 2 days.
- These symptoms are **normal**, they are a sign that your immune system is building protection against COVID-19!

- Among the millions of people who have received COVID-19 vaccines, a very small number of people have experienced severe allergic reactions (~2-5 people per million). If you have ever had a severe allergic reaction to a vaccine or other substance, you should tell the health care professionals giving you the vaccine.
- Now that hundreds of millions of people have received the vaccine, we are seeing some extremely rare but serious reactions that might be caused by the vaccine such as blood clots (“thrombosis” and “thrombocytopenia syndrome”), heart inflammation (“myocarditis”) and neurologic disease (Guillain-Barré). [See below for more info.](#)

What about serious side effects like blood clots?

- Out of more than 15 million people who received the Johnson & Johnson vaccine by October 2021, 48 people developed unusual blood clots within 4 weeks of getting the vaccine (~3 people out of 1 million vaccines given). These blood clots are very serious and nearly all were in women younger than 50 years old.
- Five people died of these clots. For comparison, remember that COVID-19 is a very dangerous disease. For every 1 million unvaccinated people who get COVID-19, about 18,000 people will die. Because these blood clots are extremely rare and COVID-19 is very dangerous, medical experts recommend getting the vaccine.

What about heart inflammation (myocarditis)?

- Myocarditis is inflammation of the heart. It can be caused by infections (including COVID-19) and immune diseases.
- As of October 2021, ~1000 cases of myocarditis occurred in people after receiving the Pfizer or Moderna vaccine (~10 people per 1 million). Myocarditis was most common in young men, and it most often occurred a few days after dose 2.
- [Myocarditis can also be caused by COVID-19.](#) In fact, COVID-19 is more likely to cause myocarditis than the vaccine.

What about neurological disease (Guillain-Barré Syndrome)?

- Guillain-Barré Syndrome is a rare disease where the body’s immune system attacks nerve cells and causes weakness and sometimes paralysis. Most people fully recover but some have permanent nerve damage. It can be triggered by many different infections and occasionally vaccines.
- Out of the more than 15 million people who received the Johnson & Johnson vaccine by October 2021, there were reports of 244 people developing Guillain-Barré (~16 people out of 1 million vaccines given). Most occurred within 2 weeks of vaccination in men 50 years or older.

How do I know if I have one of these rare but serious side effects related to the vaccine?

- If you received a vaccine within the last month and have a severe headache, difficulty breathing, shortness of breath, chest pain, leg swelling, severe abdominal pain, or weakness and tingling in your feet that spreads up your legs, you should contact a health care provider immediately. **Keep in mind these side effects are extremely rare.**

Can I get COVID-19 from the vaccines?

- **No.** Because of how the vaccines work, **it is impossible to get COVID-19 from the vaccines.** The vaccines also cannot make you test positive for COVID-19.

I have diabetes, high blood pressure, hepatitis C, and/or HIV. Is it safe to get the COVID-19 vaccine?

- Yes. It is **safe for people with any medical condition** to receive the COVID-19 vaccine. People who have had allergies to ingredients of the COVID-19 vaccine in the past should discuss with their doctor. None of the vaccines contain eggs, gelatin, latex or any preservatives.

If I already had COVID-19, do I need to get the COVID-19 vaccine?

- Yes. You should get the vaccine even if you have already been infected with COVID-19.
- Most people who have gotten sick with COVID-19 are protected for at least a couple months after the illness. However, [the protection from the vaccine is stronger and lasts longer](#) than infection.

BOOSTERS AND THIRD DOSES

Who should get a third dose of the mRNA vaccines (Pfizer or Moderna)?

- People with compromised immune systems do not develop the same type of protection from the 2-dose mRNA vaccine series. Because of this, the CDC recommends these people get a 3rd dose (this is different than a booster).
- People who should get a 3rd dose have “moderate to severely compromised immune systems.” For example, people who have active cancer, had an organ transplant, had a stem cell transplant within 2 years, advanced HIV, or take medications that suppress the immune response (including high dose steroids).
- Third doses are given at least 28 days after the 2nd dose of Moderna or Pfizer, ideally with the same type of vaccine.
- There isn’t currently data on immunocompromised people who received the Johnson & Johnson vaccine, but they should get a booster (see below).

Who should get a booster and when should you get it?

- **If you received your initial vaccination with Pfizer or Moderna:** people who are 65 years and older, or 50–64 years old with underlying medical conditions, or 18 years and older who live or work in “high-risk settings” (including correctional facilities) should receive a booster shot, at least 6 months after their 2nd shot of Pfizer or Moderna vaccines.
- **If you received the Johnson & Johnson vaccine:** all people 18 years and older who received the Johnson & Johnson COVID-19 vaccine should receive a booster shot, at least 2 months after their first shot.

Why are boosters needed?

- The purpose of the booster shot is to increase the protection from your original COVID-19 vaccine and remind your immune system how to fight COVID-19. Studies show that the protection from your original vaccine may decrease over time. We think the reason the vaccine is less effective over time is because of both decreasing protection and new, more infectious variants such as Delta, which spread faster and cause more infections.
- In research studies, people who got a booster shot made more antibodies (increased protection) to help their immune system fight COVID-19.

If I am eligible for a booster, which booster should I choose?

- It is safe to receive either a booster shot that is the same as the original vaccine you received, or different from the original vaccine you received.
- Studies are being performed to see if one booster shot leads to better protection against COVID-19 compared with another. Initial research shows mixing vaccines may lead to more antibodies measured in the blood stream (compared to using the same vaccine), but it is not clear whether this definitely leads to better protection.

How frequently will we have to get boosters?

- Many vaccines need to be given more than once (for example, the tetanus vaccine is given every ten years and the flu shot is given every year). More research is needed to determine if boosters are necessary for everyone, and whether a one-time booster is adequate or if people will need to get boosters regularly to make sure they are still protected against COVID-19.

I reacted poorly to the initial vaccine – will I have the same reaction to the booster?

- Side effects people report after getting a booster shot are similar to side effects after the 2-shot series. However, it's hard to predict whether a person will or will not have side effects. See above for more info.

COMMON MISUNDERSTANDINGS ABOUT THE COVID-19 VACCINES

I heard that some of the officers, warden or health care staff are refusing to get the vaccine, why should I?

- Reasons that people don't get the vaccine include not knowing how safe and effective they are, a lack of understanding about COVID-19 itself, mistrust of the medical system, and more. We encourage you to empower yourself by learning as much as you can about the COVID-19 vaccines and make your own decision about getting the vaccine based on facts.

Will the COVID-19 vaccine harm my fertility?

- No. There is no evidence that the vaccine affects the fertility. There is also no evidence of infertility caused by COVID-19.

The Pfizer and Moderna COVID-19 vaccines are mRNA vaccines. Does that mean they change your DNA (your genetic code)?

- The Pfizer and Moderna vaccines both use "messenger RNA" (also called mRNA) to teach the cells in your body to recognize the outside part of the COVID-19 virus (called the spike protein) and create antibodies against the virus. That way, if you are exposed to the virus, your immune system will attack the virus and stop it from making you sick.
- The COVID-19 vaccine **does not change your DNA**. mRNA cannot combine with your DNA.

Do the vaccines contain fetal tissue?

- None of the vaccines contain fetal tissue.

AMEND at the University of California, San Francisco, draws on the principles of public health and human rights to bring transformative change to incarceration in the U.S. Our mission is to create stronger communities by transforming prisons and jails into places of rehabilitation, healing, and health.

MORE RESOURCES

Ask your friends or family to get more information about COVID-19 vaccines at these trusted sites:

Centers for Disease Control and Prevention <https://www.cdc.gov/coronavirus/>

State of California COVID-19 Vaccine Information <https://covid19.ca.gov/vaccines/>

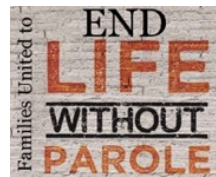
W. Kamau Bell Addresses Vaccine Hesitancy with Black Doctors: <https://www.youtube.com/watch?v=zvncqnojjDU>

If you or your loved ones have more questions we should answer on the next version of this FAQ, email us at info@amend.us or write to us at AMEND, UCSF Box 1339 | San Francisco, CA 94143.

If you are in California, you can also call the Transitions Clinic Network Reentry Healthcare Hotline to speak to a community health worker with a history of incarceration. This hotline accepts collect calls from California state prisons and county jails that use GTL. The hotline is open M-F, 9-5pm. Call: 510-606-6400. You can also contact them via JPAY at tcninfo@ucsf.edu

References: Centers for Disease Control and Prevention, State of California COVID-19 Vaccine Information Center, UCSF COVID-19 Vaccine Information Hub

THE AMEND TEAM AND OUR PARTNERS ON THIS FAQ ALL SUPPORT VACCINATION:



Prisonerreentrynetwork.org

