

COVID VACCINE CONFIDENCE

OCTOBER 14, 2021

Undecided about getting a COVID-19 vaccine? Here we address some of the common concerns that may be keeping you from getting vaccinated. If your question(s) is/are not answered here, email pandemic@viha.ca and we'll do our best to get you the information you need.

Questions about the vaccine mandate roll-out (expectations, medical exemption process, testing, etc) are answered in the [updated HR FAQs](#).

I had a very bad reaction to my first dose and I'm scared to get my second dose. What do I do?

Sometimes people feel very ill after a dose. This is a good indication that their immune system is reacting well – but it can feel terrible. This does not mean that the second dose will be the same or worse. If you'd like to speak with a clinical advisor, please call your [local health unit](#) to report an *Adverse Event Following Immunization* (AEFI). A clinical staff member will speak with you directly – or follow up with you to discuss your reaction and concerns.

Originally religious exemptions were being considered and now they're not. Why?

After weighing the health interests of patients, residents and health-care staff and medical staff in facilities, against the interests of unvaccinated persons who provide care and services in those settings (for reasons other than medical contraindication) – and taking into account the importance of maintaining a healthy workforce, the stress under which the public health and health-care systems are currently operating, and the impact COVID-19 is having on the provision of health care to the population – as well as the burden which responding to more COVID-19 clusters and outbreaks and responding to more patients with serious illness would place upon an already overburdened health care system, and the risk inherent in accommodating persons who are not vaccinated – Dr. Bonnie Henry has decided to **NOT consider** any request for an exemption, by way of a variance under section 43 of the Public Health Act, other than on the basis of a medical contraindication to vaccination.

What is the approved legal status of any COVID vaccine in Canada?

The mRNA vaccines (Moderna's 'Spikevax' and Pfizer-BioNTech's 'Comirnaty') are approved by Health Canada under the Food and Drug Regulations. The viral vector vaccines (AstraZeneca's 'Vaxzevria' and Janssen 'Johnson & Johnson') were, "authorized for use in Canada under the Interim Order respecting the importation, sale and advertising of drugs for use in relation to COVID-19. The interim order expired on September 16, 2021, however the vaccine will continue to be authorized while the submission is under review for transition into the Food and Drug Regulations." [Read more](#) about all approved COVID vaccines in Canada. (Source: Health Canada)

COVID VACCINE CONFIDENCE

Can the mRNA vaccines alter someone's DNA?

No - mRNA vaccines can not alter a person's DNA for 3 reasons ([source](#)):

1. **Location:** mRNA is active in the cytoplasm of a cell, whereas DNA is protected in a cell's nucleus. The mRNA can NOT enter the nucleus, so the two nucleic acids are never in the same place within a cell.
2. **Process** – mRNA is not DNA. So, if a person's DNA was going to be altered, the RNA would have to be made into DNA. This would require a special enzyme that only exists in some viruses. Coronaviruses are not one of them as they have only single-stranded RNA which means that when they enter into a cell's cytoplasm they don't need to be translated. Proteins (like the spike protein) can be made directly from the RNA.
3. **Stability** – mRNA is not very stable and can only stay alive in human cells for hours.

Do COVID-19 vaccines violate the Nuremberg Code?

No. Any claims of forced global experimentation on people that violates the [Nuremberg Code](#) are factually wrong. The Nuremberg Code (created in 1947 following World War II), addresses the treatment of human subjects in medical experiments, and says nothing about the use of tested and authorized vaccines on patients. COVID vaccines approved for use in Canada are long past the experimental stage – and all underwent rigorous, carefully monitored, large-scale clinical trials before being reviewed by Health Canada. During the clinical trial phase, all human participants who took part did so with voluntary consent following the bioethical rules around the development of drugs, as set out in Canadian law professional codes of conduct. Studies are reviewed and approved by research ethics boards to ensure the protection of participants and the full disclosure of risks of participation, along with very clear language that their participating is voluntary. Health Canada mandates following international standards of Good Clinical Practice, which were designed to protect the rights, safety and welfare of human participants and ensure the integrity of the conduct of the studies, it will not accept data from trials that did not adhere to these standards. There was no forced participation in any clinical trials for COVID-19 vaccines. Authorized vaccines are deemed safe by Health Canada and are not experimental. Read more about [how vaccines are authorized](#) in Canada.

How do we know the vaccines have been fully, independently and rigorously tested against control groups and what are the subsequent outcomes of those tests?

Health Canada's independent drug authorization process is recognized around the world for its high standards and rigorous reviews. For any new vaccine or treatment, all evidence and scientific data is reviewed before a decision is made to authorize use for the general public. Authorization only happens when the evidence shows that the vaccine:

- is safe, effective and of good quality **and**
- demonstrates that the benefits outweigh the risks

Health Canada also works with [international regulators](#) to collaborate on the review process to get vaccines to market as quickly as possible. However, Health Canada always makes an independent, science-based decision around any vaccine, to be sure it's in the best interest of the public.

COVID VACCINE CONFIDENCE

For detailed information about the outcome of tests, see:

- [Advisory Committee Statement \(ACS\) National Advisory Committee on Immunization \(NACI\) Recommendations on the use of COVID-19 vaccines](#)
- [Health Canada records](#), which include full clinical data used in authorization process

Can you please give me the list of ingredients of the vaccine I am to receive and possible side effects?

- Moderna 'Spikevax': [Ingredients](#) and [Possible Side Effects](#)
- Pfizer-BionTech 'Comirnaty': [Ingredients](#) and [Possible Side Effects](#)
- AstraZeneca 'Vaxzevria': [Ingredients](#) and [Possible Side Effects](#)

What are all of the adverse reactions associated with the vaccines since their introduction?

Find information about reactions in BC on the [BCCDC website](#). Under 'Monitoring Adverse Events in BC' you can find a list of weekly reports. Nationally you can find information on the [Health Canada website](#).

What is the likely risk of death should I contract COVID-19?

The incidence of COVID-19 infection, hospitalization and death are significantly higher in unvaccinated vs. vaccinated persons, and the incidence rate ratios are related to vaccine effectiveness. Based on BCCDC data (September 2021), unvaccinated individuals have died at 36 times the rate of those fully vaccinated, , and unvaccinated people were 61 times more likely to be admitted to hospital and 12 times more likely to be infected than vaccinated people ([source](#)).

Who is liable if I experience an adverse reaction to the COVID vaccine? Is it the manufacturer or the employer?

Any person who receives a COVID vaccine is consenting to the provision of healthcare. Employees of Island Health who are being immunized are treated as any other patient in regards to consent for immunization. Employees who experience adverse reactions from the required vaccine may pursue medical and/or wage loss claim through [WorkSafeBC](#).

If the fully vaccinated can still transmit the virus, how are we more at risk from unvaccinated individuals?

Vaccinated people are not as likely to spread COVID-19 as unvaccinated people. It is true that vaccinated individuals can experience breakthrough infections, and when they do, they can potentially infect those who are susceptible – but the risk of them infecting someone with protection is very low, given the protection afforded to that person by their shot. This is the primary reason why mitigation measures, such as masking and good hand hygiene, still make sense to help limit the spread, even for the vaccinated.

Studies indicate that natural antibodies are more effective than vaccines in preventing infection.

Why aren't we supporting that?

This is misleading. Antibody levels are highly variable after recovering from COVID infections, and those at the lower end of the spectrum might be more susceptible to reinfection. For those who have put off getting vaccinated because they've already been infected with the coronavirus, a growing [body of evidence](#) suggests vaccination plus natural immunity leads to particularly robust protection, including against variants of the virus.

People who want natural immunity are willing to risk it. Why can't we make that choice?

For those willing to risk it, it is important to know that you are also putting others around you at risk – those who are too young to be vaccinated and those with weakened immunity. As an individual, you can make that choice – but it is important to understand the ramifications of that choice with the [Provincial Order](#) (and the subsequent expanded Order) and how that could impact your employment at Island Health. As well, your choice will also impact access to many other aspects of society (i.e. travel, dining out, events, etc).

Were any human or animal embryonic or fetal tissue specimens used to develop/create/test the COVID vaccines approved for use in Canada?

In 1973 and 1985, scientists used fetal tissue from two voluntary abortions to start laboratory grown cell lines. 40-50 years later, scientists now have modified cells that are thousands of generations removed from the original fetal tissue. Vaccine makers Pfizer and Moderna used fetal cell lines from a 1973 specimen during the research and development phase of their vaccines. The AstraZeneca/COVISHIELD vaccine is manufactured using the kidney cell line that was isolated in 1973s, while the Janssen vaccine uses the retinal cell line that was isolated in 1985. The cell lines are used widely in academic research and in the pharmaceutical and biotechnology industries.

Although these cell lines are used in the manufacturing process, the final vaccine does not contain any cells. The [Catholic Church](#) has stated that receiving a COVID-19 vaccine that required fetal cell lines for production or manufacture is morally acceptable. All four approved vaccines in Canada were trialed for safety and effectiveness on animals during the non-clinical testing phase.

Provincial Health Orders:

- [Residential Care Covid-19 Preventive Measures](#) – October 4, 2021
- Hospital And Community (Health-Care & Other Services) Covid-19 Vaccination Status Information And Preventive Measures – October 13, 2021 [see: [PHO website](#)]