

COVID-19

Vaccine Fact Sheet No. 7

Overcoming vaccine hesitancy.

Important questions about variants and vaccine safety.

Q: What are the “variants” we keep hearing about?

A: Like all viruses, the virus that causes COVID-19 is always mutating, which is another way of saying its genetic makeup continuously changes. Scientists are tracking several mutated strains of the virus, some of which are more contagious than the original virus.

Viruses mutate faster and become more deadly when they are free to spread from one host to another. With the novel coronavirus, unvaccinated people who get infected (even if they’re asymptomatic) are making it easier for dangerous variants to emerge and harder for vaccines to prevent COVID-19. The best way to limit the emergence and spread of viral variants is for everyone to get vaccinated as soon as possible. For more information on COVID-19 variants, click [here](#).

Q: How do we know COVID-19 vaccines are safe?

A: Prior to being authorized for emergency use by the FDA, the three vaccines currently being administered in the United States (see graphic) underwent extensive clinical trials. Other than the expected tiny percentage of people who experienced adverse or allergic reactions, no significant or widespread health risks have been linked to the vaccines.

Over 342 million vaccine shots have been administered in the United States and 165 million Americans are fully vaccinated as of July 2021, with adverse reactions occurring in less than .1% of recipients.

Contrast that with the 600,000+ Americans who have died from COVID-19 and the many millions of survivors suffering from debilitating health problems as a result of having contracted the disease. The safest choice is to get vaccinated.

Q: Isn’t my immune system good enough to keep me healthy?

A: Even if an unvaccinated person feels healthy or doesn’t get sick very often, they are taking a risk of acquiring a debilitating and often deadly disease that can largely be prevented through a free and, for most people, nearly painless injection.

More importantly, by getting vaccinated, a healthy person can help protect immunocompromised people for whom vaccines are ineffective. For example, those who suffer from autoimmune diseases like Crohn’s and rheumatoid arthritis often need to take drugs that suppress their immune systems, leaving them unable to develop enough coronavirus antibodies. They are counting on the healthy people in their community to help keep them safe by getting vaccinated.

FDA Approved		
Brand	Dose	Ages
Pfizer-BioNTech	2 doses, 21 days apart*	16 and up

Authorized for Emergency Use		
Brand	Dose	Ages
Moderna	2 doses, 28 days apart*	18 and up
Johnson & Johnson	1 dose	18 and up
Pfizer-BioNTech	2 doses, 21 days apart*	12 - 15

*As of August 12, 2021 the FDA has authorized a 3rd dose of both the Pfizer-BioNTech and Moderna vaccines for certain immunocompromised individuals. To learn more click [here](#).

What’s the difference between FDA approval and Emergency Use Authorization?

FDA approval of a drug is granted after the FDA has analyzed the condition being treated and reviewed the other available treatments, assessed the drug’s benefits and risks based on clinical findings, and ensured a viable risk-management strategy is in place.

In the event of a public health emergency—such as the COVID-19 pandemic—the FDA may grant Emergency Use Authorization (EUA) to new vaccines or medical products (or existing medical products previously approved for other uses) to enable the treatment or prevention of a life-threatening illness. EUA only occurs if there are no other available alternatives, and if sufficient clinical evidence exists regarding the safety and efficacy of the product.

On August 23, 2021, the Pfizer-BioNTech vaccine (brand name “Comirnaty”) was given full FDA approval for use in people aged 16 and older, and EUA remains in effect for those aged 12-15. Moderna’s COVID-19 vaccine is still under review as of September 1, 2021.

