

# COVID-19 Briefing Webinar

Webinar 6 in the COVID-19 Briefing Series  
January 18, 2021

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# THIS MEETING WILL BE RECORDED

**Please note this meeting will be recorded.**

- During this meeting, you will have the opportunity to contribute or ask questions
- Questions will be gathered and sorted to avoid duplication and ensure the best response
- Although your name will not appear on the screen to attendees, producers and presenters may have access to that information
- If you have questions about the recording of this webinar, please contact [HEOCLiaison@york.ca](mailto:HEOCLiaison@york.ca)

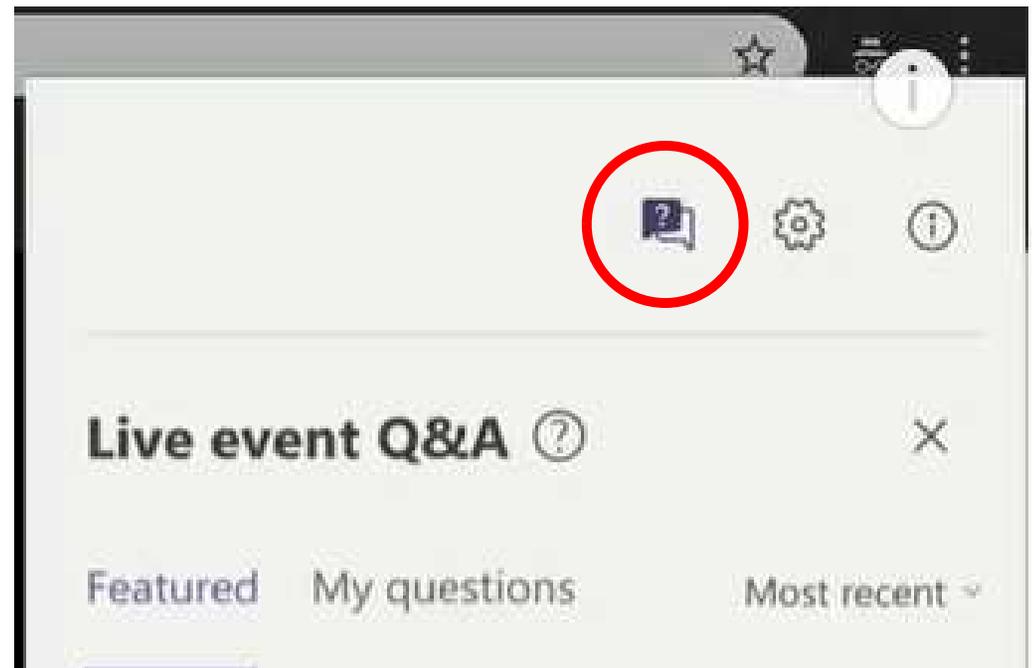
# DO YOU HAVE A QUESTION?

## To ask a question:

Select **Q&A** on the right side of the screen.

Type your question in the compose box, and then select **Send**.

Questions will be screened by the moderator and posed to the presenters.



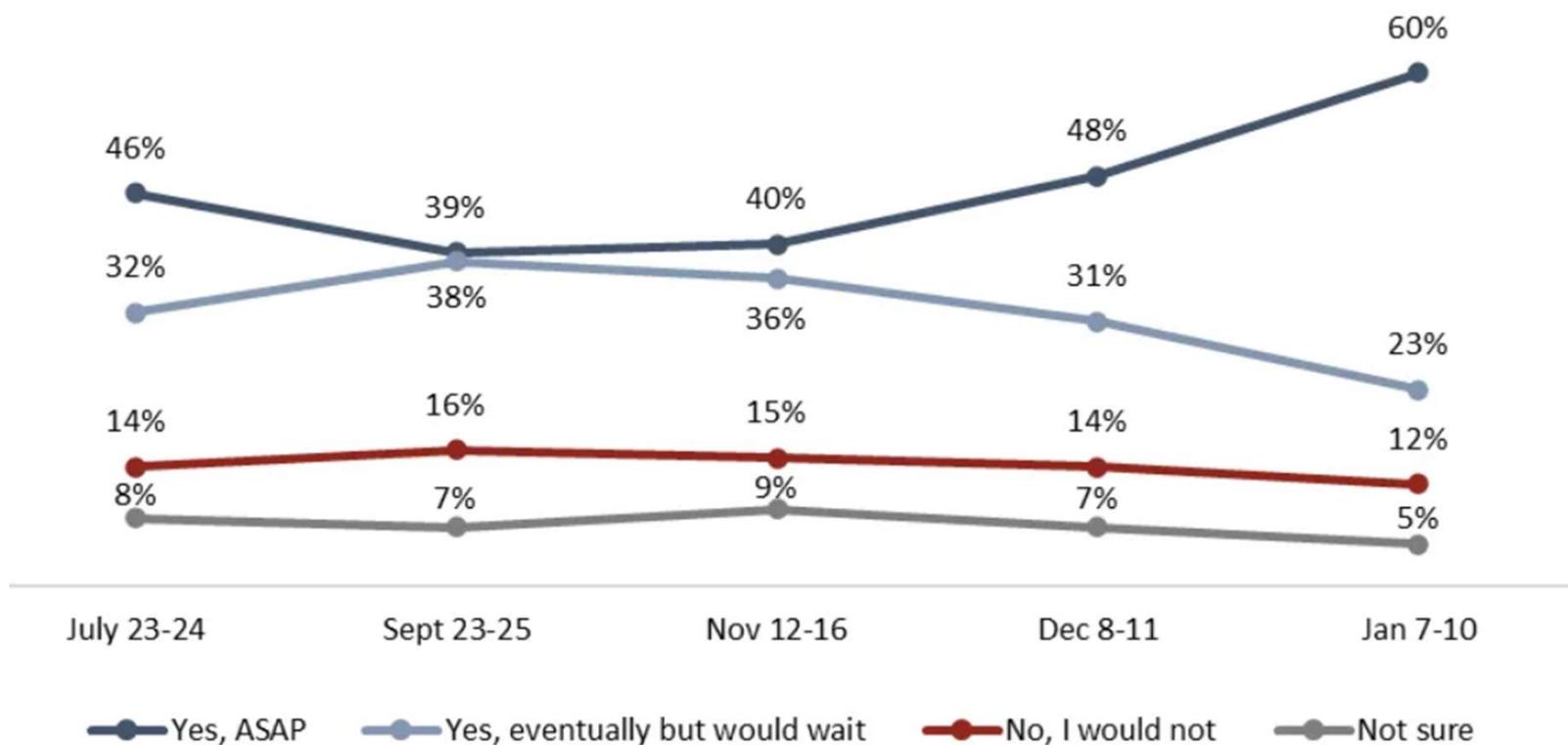
# CONTENT

1. Setting the stage
2. Common questions from providers and patients
3. A look at safety and adverse events
4. Special populations – recommendations
5. Q&A

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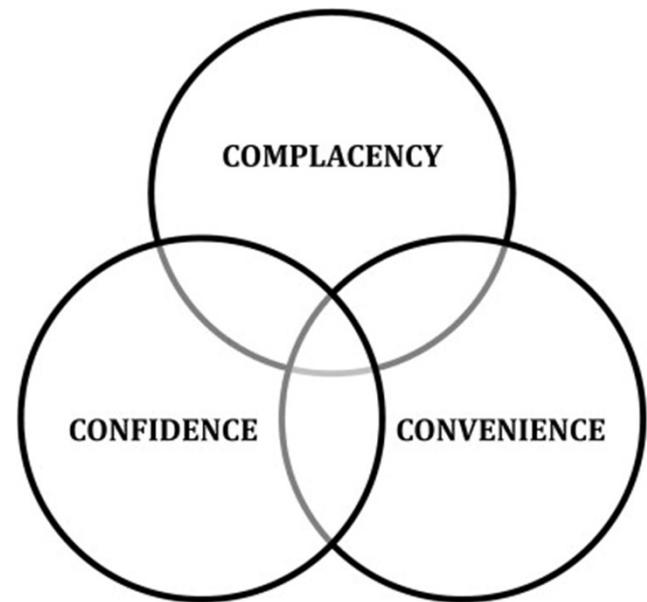
**THE CONTEXT — WHY ARE WE TALKING ABOUT THIS?**

### If a vaccine against the coronavirus became available to you, would you get vaccinated, or not?



# Vaccine Hesitancy — Top reasons why

- Primary reason is concern about side effects
- Other reasons include:
  - Doubts about effectiveness
  - Not being at risk



## Key points for front line health care workers

- A recommendation to be vaccinated from a health care provider is critical to vaccine acceptance
- Vaccine hesitancy does not mean refusal
- Some evidence-based tips:
  - *Present vaccination as the default approach*
  - *Be honest about side effects when asked, and reassure patients of a robust vaccine safety system*
  - *Tell stories in addition to providing scientific facts*
  - *Build trust*
  - *Address pain*
  - *Focus on individual and community benefit*

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**QUICK UPDATE OF WHERE THINGS ARE AT**

## Phase 1

**Timing:** December 2020 to March 2021

**Who will be vaccinated:**

Early doses will be available for:

- Residents, staff, essential caregivers (including family caregivers) and other employees in **congregate living settings for seniors**
- Health care workers, including hospital employees, staff who work or study in hospitals and health care personnel
- Adults in First Nations, Métis and Inuit populations
- Adult recipients of chronic home health care

## Phase 2

**Timing:** March to July 2021\*

**Who will be vaccinated:** ~8.5 million people\*\*

- Older adults, beginning with those **80 and older** and decreasing in five-year increments over the course of the vaccine rollout
- People who live and work in **high-risk congregate settings** (for example, shelters, community living)
- **Frontline essential workers**, including first responders, teachers and other education staff and the food processing industry
- Individuals with **high-risk chronic conditions** and their caregivers
- Other populations and communities facing **barriers related to the determinants of health** across Ontario who are at greater COVID-19 risk

## Phase 3

**Timing:** August 2021 and beyond\*

**Who will be vaccinated:** Remaining Ontarians in the **general population** who wish to be vaccinated.

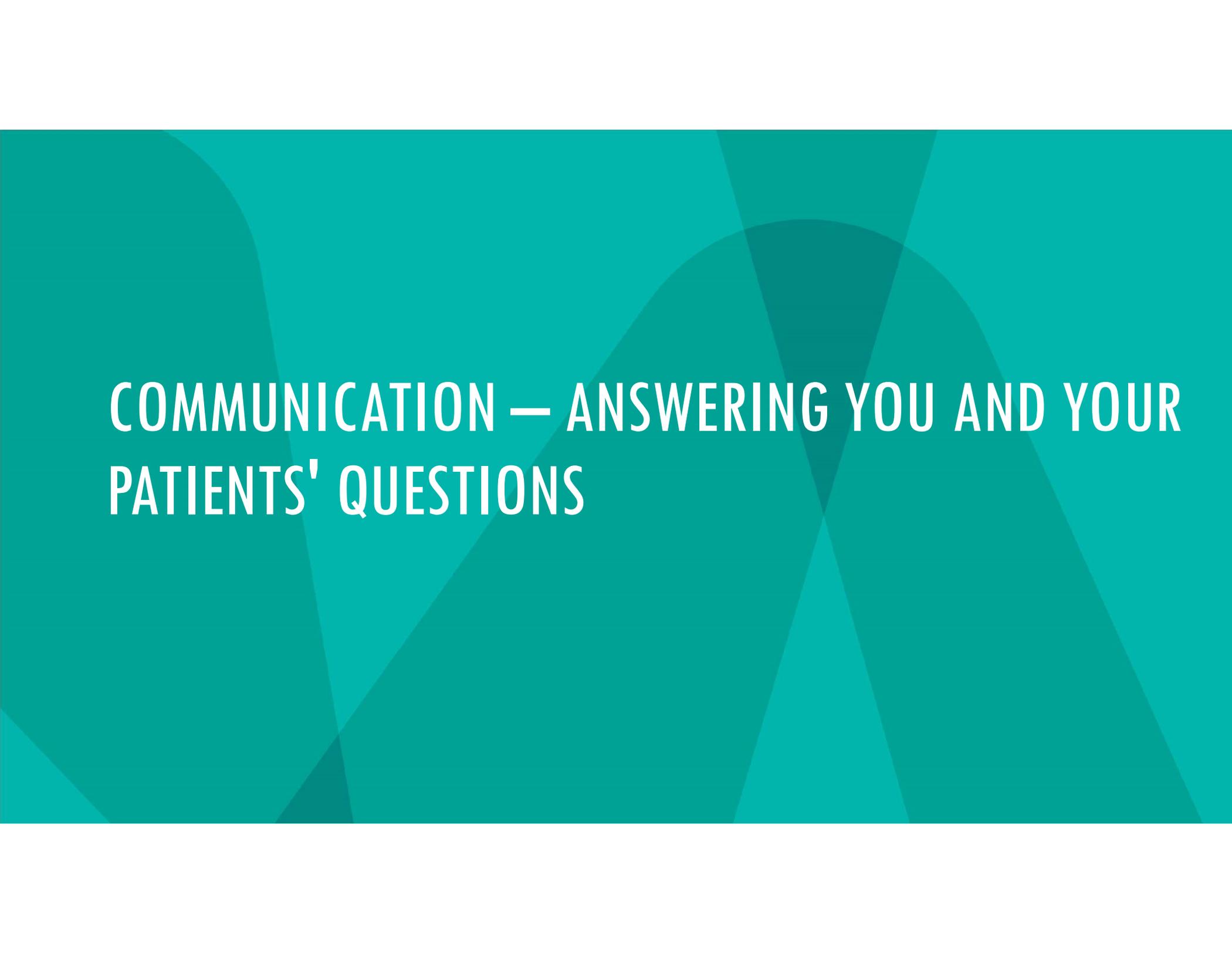
The ethical framework, data and available vaccine supply will help to prioritize groups in this phase.

**Vaccines will not be mandatory, but are strongly encouraged to obtain herd immunity**

	<b>Moderna COVID-19 vaccine</b>	<b>Pfizer-BioNTech COVID-19 vaccine</b>
<b>Type of vaccine</b>	COVID-19 mRNA	COVID-19 mRNA
<b>Date of authorization in Canada</b>	December 23, 2020	December 9, 2020
<b>Authorized ages for use</b>	18 years of age and older	16 years of age and older
<b>Dose</b>	100 mcg of mRNA per 0.5 mL (no dilution)	30 mcg of mRNA per 0.3 mL (after dilution)
<b>Schedule</b>	2 doses, a minimum of 21 days apart (authorized interval: 1 month apart)	2 doses, a minimum of 19 days apart (authorized interval: 21 days apart; NACI recommended interval: 28 days apart)
<b>Route of administration</b>	IM	IM
<b>Nature of the antigen</b>	Prefusion spike protein	Prefusion spike protein
<b>Adjuvant</b>	None	None
<b>Formats available</b>	Multi-dose vial (10 doses), preservative-free	Multi-dose vial (5 doses), preservative-free

## Potential third candidate vaccine — Johnson & Johnson

- Recombinant; adenovirus vector
- Studied and efficacious on participants age 18-55 and 65+
- After 1 dose, > 90% mounted an immune response within a month, and all had levels of neutralizing antibodies by day 57
- Phase 3 trials currently underway to evaluate 1 vs 2 doses
- Similar safety profile to currently approved vaccines
- Can be refrigerated for up to 3 months (between 2-8 C)

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# COMMUNICATION — ANSWERING YOU AND YOUR PATIENTS' QUESTIONS

# What is an mRNA vaccine and how is it different from other vaccines?

## **How to explain the technology in laymen's terms:**

The vaccines work by teaching our cells how to make a protein we see on the coronavirus that will trigger an immune response without using the live virus that causes COVID-19.

Once triggered, our body makes antibodies that help us fight infection if the real virus enters our body in the future.

## **Key points to stress to clients:**

- Once the protein is made, the mRNA is broken down and leaves your body
- Unlike traditional vaccines, mRNA vaccines do not use the live or inactive virus that cause infection and they do not interact with our DNA in any way
- mRNA technology itself is not completely new; while it hasn't been used in vaccine manufacturing it has been used in various treatments (e.g., cancer)

# Efficacy and immunogenicity considerations

## **Efficacy: Pfizer**

Based on studies in about 45,000 participants, the Pfizer-BioNTech COVID-19 vaccine was **95% effective** in preventing COVID-19 beginning 1 week after the second dose

## **Efficacy: Moderna**

Based on studies in about 30,000 participants, the Moderna COVID-19 vaccine was **94.1% effective** in preventing COVID-19 beginning 2 weeks after the second dose.

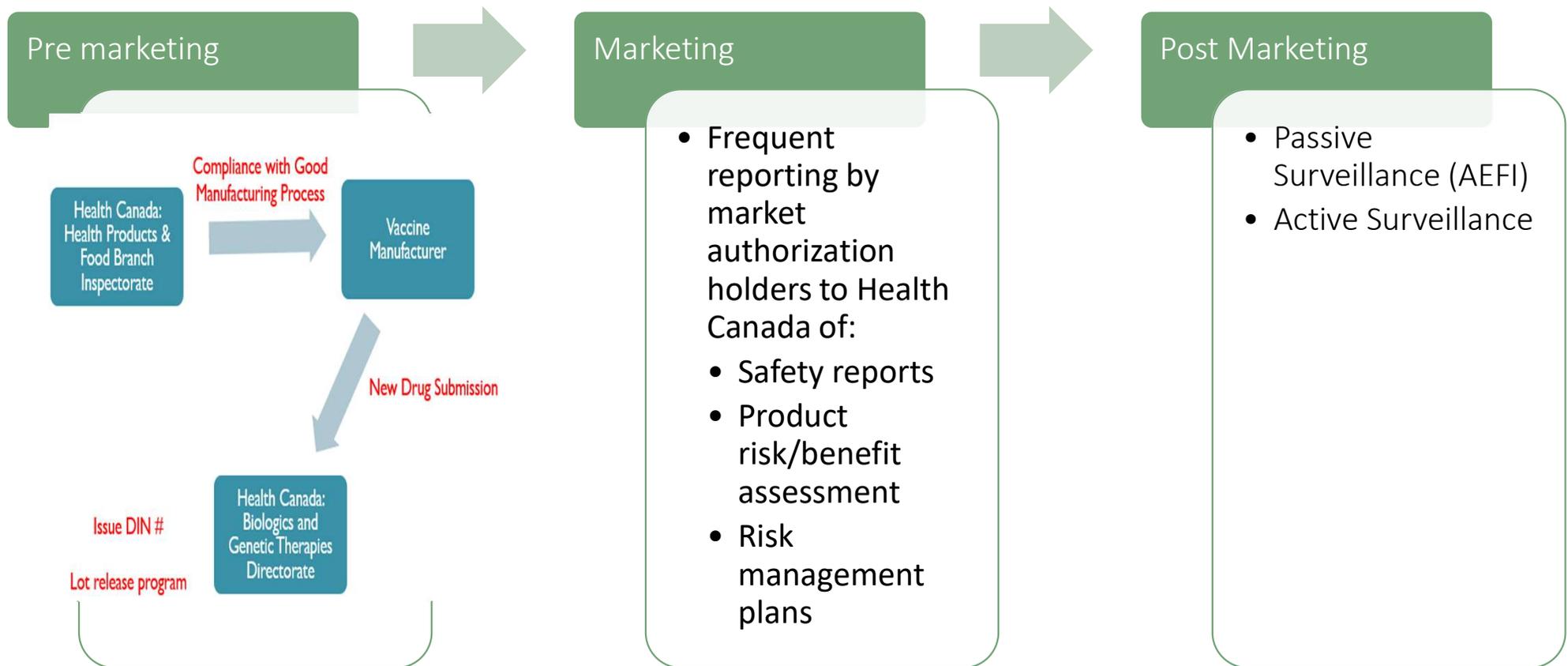
## **Immunogenicity**

Medium (longer than 3 months) and long-term evidence on immunogenicity is unknown. However, studies are ongoing.

## **Other Variants**

There is currently no evidence to suggest that the approved vaccines will **not** be effective against the new variants of the virus. Research is ongoing to learn more about variant strands.

# Has approval for the COVID-19 vaccines been rushed?



## **I've already had COVID-19, do I still need to get the vaccine?**

At this time, both vaccines are recommended for people who have had COVID-19 in the past.

While rare, it is possible to be re-infected by COVID-19. Immunity is still being researched. Emerging information on immunity after infection suggests not all infected individuals mount the same immune response, and that the immune response may wane over time. Some studies suggest antibodies may persist for as long as four months after infection. Information on the duration of protection will increase as more experience and evidence emerge.

**NOTE: Serological testing is NOT required before administering the vaccine**

## After I've been vaccinated, can I still get COVID-19?

Both the Pfizer and Moderna vaccine report being approximately 95% effective.

However, there is a small chance you could still get COVID-19 after being vaccinated. In addition, it is currently unknown if you can transmit the virus after being immunized, even though you wouldn't be affected yourself.

If someone is symptomatic, they should still go for testing and isolate (more guidance on this is coming, particularly for health care professionals).

**COVID-19 vaccine is NOT a live virus and testing for COVID-19 is not impacted after vaccine receipt.**

# What percentage of the population needs to be vaccinated for herd immunity?

When large amounts of people in a community are vaccinated, we can achieve herd immunity. The more people that are vaccinated the lower the risk of infection for other members of the community that cannot be vaccinated or who only achieve partial immunity.

At this time, we don't know what level of immunity in the population is needed to achieve herd immunity for COVID-19.

Until that time, we should continue to wash our hands, stay home when we are feeling sick, maintain physical distancing, wear face masks and keep using good cough and surface hygiene.

# When can I stop wearing a mask and keeping physical distance from others after I've received the vaccine?

Both the Pfizer and Moderna vaccine report being approximately 95% effective. However, there is a small chance you could still get COVID-19 after being vaccinated. In addition, it is currently unknown if you can transmit the virus after being immunized, even though you wouldn't be affected yourself.

Even as vaccinations begin in Ontario, we must continue to follow public health measures to keep everyone safe and healthy: avoid social gatherings, practice physical distancing, wear a mask when required and wash your hands frequently.

We don't have a date yet, but as more people are immunized, slowly we will be able to remove our masks and hug again.

NACI statement does recommend continuing to follow public health measures regardless

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# A SPECIAL LOOK AT SAFETY and ADVERSE EVENTS

# Are the COVID-19 vaccines safe and how do we know?

Vaccines are tightly regulated and closely monitored in Canada. Health Canada will only approve a vaccine that is safe for widespread use.

RNA is a very unstable molecule, which is degraded rapidly by your body. This means that your body quickly reacts to the vaccine prompt and eliminates the ingredients. After a few days only your immune response remains.

The Pfizer and Moderna vaccines have undergone large clinical trials: the Pfizer-BioNTech trial had more than 45,000 participants and the Moderna trial had over 30,000.

Health Canada has a webpage that is updated weekly with adverse events of the COVID-19 vaccines: <https://health-infobase.canada.ca/covid-19/vaccine-safety/>

PHO: [Vaccine Safety in Ontario 2019](#)

# What are the common side effects of the vaccine?

Pfizer	Moderna
<p><b>Very common side effects</b> (<i>may affect more than 1 in 10 people</i>)</p> <ul style="list-style-type: none"><li>• Pain at injection site (84.1%*)</li><li>• Fatigue (62.9%*)</li><li>• Headache (55.1%*)</li><li>• Muscle pain (38.3%*)</li><li>• Chills (31.9%*)</li><li>• Joint pain (23.6%*)</li><li>• Fever (14.2%*)</li></ul> <p><b>Uncommon side effects</b> (<i>may affect up to 1 in 100 people</i>)</p> <ul style="list-style-type: none"><li>• Enlarged lymph nodes (0.008%**)</li></ul>	<p><b>Most frequent side effects:</b></p> <ul style="list-style-type: none"><li>• Pain at injection site (92%)</li><li>• Fatigue (70%)</li><li>• Headache (64.7%)</li><li>• Muscle pain (61.5%)</li><li>• Chills (5%)</li></ul>

[COVID-19 Guidance for Health Care Settings: Managing Health Care Workers with Symptoms within 48 Hours of Receiving COVID-19 Vaccine](#)

[COVID-19 Vaccine After Care Sheet](#)

## What if I have an adverse reaction from the vaccine?

An AEFI is an event or reaction that occurs following immunization that may or may not be caused by the vaccine. Health care providers are required to report AEFIs to York Region Public Health under the Health Promotion and Protection Act.

To report an AEFI:

- Complete an [adverse event form](#), or [download the form](#) and complete, then fax the completed form to York Region Public Health at 905-898-5213, or
- Call Health Connection at 1-877-464-9675, ext. 73452

Visit York Region's webpage [COVID-19 Information for Health Professionals](#) for more information.

# Canada has a robust post-marketing safety surveillance program

- Passive surveillance
  - Mandatory AEFI reporting
- Active surveillance
  - Canadian National Vaccine Safety Network (CANVAS)
- Consultation available to clinicians via the Special Immunization Clinic (SIC) Network that has recently expanded to include additional adult sites in Ottawa and Toronto, including The Ottawa Hospital, St. Michael's Hospital, and University Health Network

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# SPECIAL POPULATIONS

# How effective is the vaccine for seniors?

## **Pfizer**

- The Pfizer-BioNTech vaccine trials included patients aged over 65, and the efficacy was very similar to the younger age group, with older patients experiencing slightly fewer side effects like local reactions, headaches and body aches

## **Moderna**

- The Moderna vaccine trials included patients aged over 65, and the efficacy was 86.4% – similar to the younger age group. Older patients experienced slightly fewer side effects like local reactions, headaches and body aches

## **Roll out to Seniors**

- Seniors living in the community are to be immunized in Phase 2

## Is the vaccine available for children?

The COVID-19 vaccines currently approved by Health Canada are not intended for children. The Pfizer-BioNTech is approved for people **16 years** of age or older.

The Moderna COVID-19 vaccine (mRNA-1273) is approved for people **18 years** of age and older. Its safety and effectiveness in people younger than 18 years of age have not yet been established.

A COVID-19 vaccine for children is not currently available. A timeline for when a COVID-19 vaccine for children will be available in Canada has not yet been announced.

# Is the vaccine safe for pregnant/breastfeeding women?

## NACI statement (Jan 2021)

- Vaccine may be offered if a risk assessment deems benefits of vaccine outweigh risks and if informed consent includes discussion about the insufficient evidence in these populations (pregnancy and breastfeeding)

## SOGC statement (Jan 2021)

- Women who are pregnant or breastfeeding should be offered vaccination at any time if they are eligible and no contraindications exist. This decision is based on the women's personal values and an understanding that the risk of infection and/or morbidity from COVID-19 outweighs the theorized and undescribed risk of being vaccinated during pregnancy or while breastfeeding. Women should not be precluded from vaccination based on pregnancy status or breastfeeding.

## Ministry of Health document (Jan 2021)

- Pregnant women: Can get if informed counseling occurred
- Breastfeeding: Vaccine should be offered after acknowledging lack of evidence

# Is the vaccine safe for people who are immunosuppressed because of disease or treatment

## NACI statement (January 2021):

- Can be offered the vaccine if a risk assessment deems that benefit outweighs risk and if informed consent includes discussion about the lack of evidence in this population

## Ministry of Health document (January 2021):

- Individuals in the authorized age group with autoimmune conditions, immunodeficiency conditions or those immunosuppressed due to disease or treatment may choose to receive the vaccine after informed counselling

# Can I get the vaccine if I have an egg or other allergy?

The list of ingredients for the Pfizer and Moderna vaccine does not list egg protein as an ingredient.

## NACI statement:

- COVID-19 vaccine is contraindicated for anyone with severe, immediate reactions or anaphylaxis to any component of the vaccine

## Ministry document:

- If anaphylaxis to any COVID-19 vaccine component: contraindicated
- If immediate reaction to any component: allergist/immunologist
- If anaphylaxis to another vaccine or injectable: allergist/immunologist
- If immediate reaction to another vaccine or injectable: informed consent +/- allergist immunologist consult
- If food or other allergy – vaccine can be offered

# I don't know if my religious beliefs allow me to get vaccinated?

Some patients may have questions regarding their religion and receiving COVID-19 vaccines.

The approved COVID-19 vaccines do not contain any food products or gelatin and are recommended or permissible by many religious organizations.

Many religious organizations have issued statements that encourage COVID-19 vaccination for the health and safety of individuals and their communities, following the advice of patients' healthcare providers.

These organizations include:

- [The Vatican and the Canadian Conference of Catholic Bishops](#)
- [Muslim American Society](#)
- [World Jewish Congress and World Council of Churches](#)
- [Orthodox Union and Rabbinical Council of America](#)

## Key Messages

- **Primary care providers and patients can be confident.** Standards of safety, efficacy, and quality have not been compromised to expedite the approval of COVID-19 vaccines.
- **Health Canada oversight of COVID-19 vaccines will NOT stop at approval.** Health Canada will monitor the vaccine's safety and effectiveness now and into the future.
- **Research into the value of mRNA for vaccinations has been progressing for over ten years.** Though the new vaccine is the first mRNA vaccine approved for use in humans, mRNA has been successfully used in cancer treatments.

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**Q&A PERIOD**

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# ADDITIONAL RESOURCES

# YORK.CA/HEALTHPROFESSIONALS

- CANCER
- COVID-19
- DENTAL
- ENVIRONMENTAL HEALTH
- FOOD SAFETY
- HEALTH AT WORK
- HEALTH INFORMATION LINE
- HEALTH PROFESSIONALS
- Announcements and Resources
- Cannabis
- Child Growth and Development
- COVID-19 Information for Health Professionals
- Early Years Support Services Registry
- Ebola Virus Disease for Health Professionals
- E-Newsletter for Health Care Professionals
- Health Statistics and Reports
- Infectious Diseases and Outbreak Management
- Information for Dental and Healthcare Providers
- Mental Health and Wellbeing
- Opioids
- Quitting Smoking
- Tuberculosis
- Vaccination Information for Healthcare Professionals



## Announcements and Resources

York Region provides important public health updates and offers events and resources, like the Public Health Matters newsletter, to support health care providers



## COVID-19 Information for Health Professionals

York Region Public Health continues to provide support for health professionals related to COVID-19 (formerly referred to as novel coronavirus or 2019-nCoV)



## Cannabis

Cannabis, also known as marijuana, weed or pot, can be consumed for medical and non-medical purposes. Find out more about legalization and the health effects of cannabis use in adults and youth.



## Child Growth and Development

Find tools and resources for parents to help children grow and develop. When parents know what to expect at each stage of development, it can be easier to meet their child's needs and understand their behaviour.



## E-Newsletter for Health Care Professionals

Sign up to receive the quarterly Public Health Matters E-Newsletter for health care professionals.

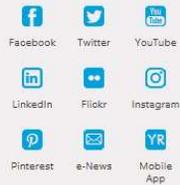


## Early Years Support Services Registry

This is a resource for health, early learning and child care professionals in York Region who wish to refer a young child or their family for support services. It provides information about programs and services available including details regarding eligibility and

## NEWSROOM

### Connect With Us!



### Campaigns & Projects



## Radon: Test Your Home

You can't see, taste or smell radon but it is the second leading cause of lung cancer. Learn more about radon and the York Region study.

[More Campaigns & Projects >>](#)

### Contact Us

### Health Connection

EMAIL

# LINKS TO BOOKMARK

## York Region

- [york.ca/healthprofessionals](https://york.ca/healthprofessionals) - health care provider specific page
- [york.ca/COVID19vaccine](https://york.ca/COVID19vaccine) - York Region COVID-19 vaccine information page

## Public Health Ontario

- [Report of Adverse Event Following Vaccination](#) - form

## Ministry of Health

- [COVID-19 Guidance for the Health Care Sector](#)
- [COVID-19 Vaccine-Relevant Information and Planning Resources](#)
- [COVID-19 Vaccination Recommendations for Special Populations](#)

## Government of Canada

- [NACI: Recommendations on the use of COVID-19 vaccines](#)
- [Vaccines and treatments for COVID-19: Progress](#)

## Society of Obstetricians and Gynecologists of Canada

- [SOGC Statement on COVID-19 Vaccination in Pregnancy](#)

# THANK YOU

Remember to sign up to [Public Health Matters](#) for:

- Today's slides
- Follow up Q&As and
- Future webinar information

