



# FREQUENTLY ASKED QUESTIONS

regarding the  
**COVID-19  
VACCINE**

**ANSWERED BY DR. KARA MASCITTI**

Network Director, Healthcare Epidemiology and Infection Prevention  
President, Network Medical Staff; Physician, St. Luke's Infectious Disease Associates



*I want to get vaccinated but recently had COVID. When my 90 day wait period is over, where there still be enough vaccine for me?*

Yes! We will continue to serve as a vaccine distribution site for our employees, our patients, and our community for months to some. Those individuals who have delayed vaccination for a recent COVID infection will absolutely have access to the vaccine when they are ready.



*I am interested in the vaccine but I don't work in direct patient care. I feel "guilty" getting it when there may be others that would benefit more?*

St. Luke's has received ample vaccine supply to be able to offer vaccine to all of our employees, so your receipt of the vaccine will not prevent any other employees from having access. Furthermore, we continue to proactively and successfully administer vaccine to frontline providers in the community including (but not limited to) independent practitioners and their staff, dentists, optometrists, pharmacists, home health, physical therapy, and EMS. Our approach is that anyone who works at SLUHN is critical and essential to our ability to provide healthcare to our patients and our communities. Please take this opportunity to get the vaccine NOW to prevent yourself and those around you and to keep #StLukesStrong!

*Read the next pages for some COVID-19 Vaccine Myths Debunked!*



## FOR MORE READING:

<https://www.mayoclinichealthsystem.org/hometown-health/featured-topic/covid-19-vaccine-myths-debunked>  
<https://health.ucdavis.edu/health-news/newsroom/the-real-facts-about-common-covid-19-vaccine-myths/2020/12>



# COVID VACCINE MYTHS DEBUNKED!

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## Myth

The COVID-19 vaccine is not safe because it was developed and released too quickly.

**The current Pfizer and Moderna vaccines were able to get released so quickly due to a remarkable and historic global response.**

- An ENORMOUS amount of resources were invested globally by governments and pharmaceutical companies alike to focus solely on the development of these vaccines. (US: \$9 billion, Global: >\$8 billion). Money talks!
- There was an unprecedented amount of international cooperation and exchange of information that aided vaccine development. Pre-school circle time on steroids!
- Although this is the first mRNA vaccine on the market, researchers have been working with mRNA vaccines for 10 years. Think “Plug and Play”!
- mRNA technology allows rapid synthesis of clinical-grade vaccines (sometimes within weeks!) as opposed to other vaccines that require cell culture techniques which can take years to scale up for mass production.
- Over decades of vaccine studies, the industry has learned to develop more rapid ways of conducting clinical trials. This allowed the simultaneous design and implementation of various phases of clinical studies without “cutting corners”.
- There was huge support from the community with record numbers of participants willing to rapidly enroll into studies that vaccinated over 70,000 volunteers in a short amount of time. Incredible!
- Skyrocketing rates of COVID-19 in the United States and other countries where these vaccines were tested allowed enough infections to occur to give us a rapid answer as to whether the vaccine would work.

## Myth

The timing of the vaccine is suspicious in our political environment.

**The current political climate has had no effect on the integrity of the development or approval process of the vaccine.**

- Pfizer did not take any up-front investment from the US government (it actually got a large investment from Germany!) and instead decided to get reimbursement from the US via the sale of the vaccine once it was approved. That’s about as transparent as a pharmaceutical company will get!
- The Pfizer and Moderna vaccines have also been independently approved in the United Kingdom, the European Union, and Canada. Remember, some of these countries don’t even like us or our current president right now!



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## Myth

The COVID vaccine causes severe allergic reactions including anaphylaxis and is therefore dangerous to take.

**Footage and news of allergic reactions from the COVID vaccine have made sensational headlines around the globe, but severe reactions are extremely rare.**

- Most observed reactions with the COVID vaccine have been mild, self-limited reactions that completely resolve without permanent complication or injury.
- Reactions with the COVID vaccine are no different than those observed with any other vaccine, and are related to the expected immune response elicited by the vaccine.
- Reactions from the vaccine are MUCH less severe than having COVID infection itself.
- Many of the individuals with severe reactions to the COVID vaccine had a history of similar reactions to foods or medication in the past, making them high-risk for a severe reaction to any vaccine.

## Myth

More people will die as a result of a negative side effect to the COVID-19 vaccine than would actually die from the virus.

**There have been no deaths associated with the COVID vaccine. There have 1.87 million deaths worldwide from COVID (which is likely an underestimation).**

- COVID has mortality rate of 1-2% (1-2 per 100 individuals)
- Vaccines in general have a rate of serious side effects of 1-2 per million individuals, not necessarily including death. This should be no different with the COVID vaccines.
- To do some simple math:

We aim to vaccinated 200 million Americans by the end of 2021.

If 200 million more Americans were to get COVID, 2 million more people would die.

If 200 million Americans were to get the COVID vaccine, 2-4 people would have a serious adverse event (and probably not death).

## Myth

The COVID-19 vaccine was developed to control the general population either through microchip tracking or "nanotransducers" in our brains.

**Brain nanotransducers are so far only possible in the movies. I know we've been watching a lot of Netflix lately, but really?**

- There is no microchip or nanotransducer in the vaccine
- The vaccine will not track people or gather personal information into a database
- This myth likely started after comments made by Bill Gates related to a digital certificate of an individual's vaccine status, which is complete unrelated (and actually pretty cool!).

<https://www.axios.com/digital-coronavirus-immunity-certificates-edf8cf57-ec26-4500-8f0b-84a8a241a6f8.html>

## Myth

COVID-19 vaccines were developed using fetal tissue.

**Current mRNA COVID-19 vaccines do not require the use of fetal cell cultures (or any other cell culture for that matter) in the production process.**



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## Myth

COVID-19 vaccines will alter my DNA.

**There are no permanent affects on your own genetic material from these vaccines.**

- The Pfizer and Moderna vaccines are messenger RNA (mRNA) vaccines, NOT DNA vaccines.
- mRNA vaccines work by instructing cells in the body how to make a protein that triggers an immune response
- Injecting mRNA into your body will not interact or do anything to the DNA of your cells
- Human cells break down and get rid of the mRNA soon after they have finished using the instructions

## Myth

COVID vaccines cause infertility or miscarriage.

**COVID vaccines have not been linked to infertility or miscarriage, nor is there any theoretical concern that they should be.**

- A disinformation campaign (thought to have originated from a former scientist known to hold anti-vaccine views) has been circulating on the internet
- This “fake news” claimed that antibodies to the spike protein induced by the COVID vaccine can bind to placental proteins, thereby preventing pregnancy or causing miscarriage
- This is not scientifically plausible:

COVID infection itself has not been linked to infertility or miscarriage.

Natural antibodies induced by COVID infection have not been linked to infertility or miscarriage.

No other viral infection or vaccine-induced immunity has been shown to cause infertility or miscarriage.

## Myth

COVID-19 vaccines must be stored at extremely low temperatures because of preservatives in the vaccines.

**Both vaccines contain messenger RNA that is fragile and can break down easily and thus require an ultra-cold environment keeps them stable and safe. There are no preservatives in either vaccine.**

## Myth

Vaccines cause autism.

**Multiple studies have shown that vaccines are incredibly safe and effective.**

[www.cdc.gov/vaccinesafety/concerns/autism.html](https://www.cdc.gov/vaccinesafety/concerns/autism.html).



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