Frequently Asked Questions (FAQ) COVID-19---Your Covid Information Sheet
(Updated 1 September 2021)

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This is **EDITION NUMBER FORTY-SIX** of **FAQ**.

Should you have ideas, questions, or comments please reach out to us through the **AF Connect App**, under the "*FAQ Covid-19*" button and select "*Ask a Question to the Medics*." Fill out the form. Your answer will appear in a day or two on the app. If you desire a personal reply or phone call, simply indicate that preference. Alternatively, make contact via email to franklin.meyers@us.af.mil. For your convenience in navigating this document, new or updated information is listed first and/or highlighted. Older, but still relevant, information follows.

The Big News is the vaccine mandate. As of 23 August 2021, the FDA approved the Pfizer mRNA vaccine for general use. The Secretary of Defense mandated the vaccine for all service members as of 24 August 2021.

Is Comirnaty different than the Pfizer vaccine which has been available for the last several months? No. It's the same exact mRNA vaccine that Pfizer has been producing through the emergency use authorization, but now it's being marketed under the new name since FDA approval was achieved on 23 August 2021. Comirnaty is administered in two doses, three weeks apart, just like Pfizer doses have been all along. The vaccine name is pronounced koe-mir'-na-tee.

May I complete my Moderna series, or select the Johnson and Johnson vaccine instead of Comirnaty? Yes. Both Moderna and J&J are acceptable alternatives for achieving Covid vaccination. All three of the Covid vaccines approved in the USA are available at your local pharmacy. Simply Google "Covid vaccine, where to get it." It is easy to find a site for receiving the vaccine. Please bring proof of vaccination to the MDG in order to update your medical/IMR record.

The Delta Variant. The Delta Variant is still the most important challenge we face in the ongoing Covid-19 Pandemic. First detected in the US in March 2021, it originated in India. It is the fourth Covid-19 variant (preceded by Alpha, Beta and Gamma). The Delta Variant is the primary cause of Covid-19 infection worldwide. It has now become the primary SARS-CoV-2 strain in the US now accounting for more than 99% of cases. It is more transmissible. Children and adults are 2.5 times more likely to become infected with Delta (yalemedicine.org/news). The Delta variant also seems to be causing more severe disease.

Those most vulnerable to the Delta Variant are those who are not vaccinated. There are areas in the US which are under-vaccinated, for example Mississippi. There, 20% vaccination rates are associated with a surge of Covid-19 due to the Delta Variant. Of particular concern is that the Delta variant has a predilection to affect younger people, perhaps because they also tend to be less vaccinated.

Fortunately, vaccination is effective at preventing illness from this and all variants or mutations. One dose of a two dose series is LESS effective against this more virulent strain. A full vaccine series is needed to confer protection. For example, the Pfizer mRNA vaccine has an 88% Vaccine Effectiveness (VE) against the Delta variant after fully vaccinated, however only 33% VE after 1 dose. Less than 1% of fully vaccinated people experience a "breakthrough" Covid-19 infection. And…in breakthrough cases, the disease tends to be milder among the vaccinated and the need for hospitalization less likely.

Unvaccinated people are about 29 times more likely to be hospitalized with Covid-19 than those who are fully vaccinated, according to a CDC study released on 24 August. The new study also found that unvaccinated people were nearly five times more likely to be infected with Covid than vaccinated people.

The emergence of the Delta Variant poses a challenge toward emerging more completely from this pandemic and is a compelling reason to accept vaccination.

Updated news! Vaccine statistics. Data is current as of 31 August2021.
Globally: More than 5.31 billion people have been vaccinated across 183 countries. This rate is increasing at roughly 40.3 million doses per day. In the US, more than 370 million doses have been given so far for an average over the last week of 899,462 doses per day. The 5.31 billion doses that have been administered are enough to fully vaccinate about 34.6% of the global population.
In the US: Approximately 74.2% of people age 18 or older have had at least one dose and 63.5% are fully vaccinated. 92% of those over age 65 have had at least one dose and 81.7% are fully vaccinated.
In Wisconsin: 54.7% (3,182,301) of Wisconsin residents have had at least one dose as of 31 August 2021. Go Badgers! (Sources: Bloomberg.com/graphics/covid-vaccine-tracker-global-distribution/ & CDC.gov).

I'm concerned about side effects or complications from taking the vaccine. What are the data?
Your concerns are valid. Anytime a medicine or vaccination is recommended, there is a balance of risk vs benefit. Hopefully the following information will help you in your decision making process.

Side effect/complication/adverse event

Anaphylaxis. A severe allergic reaction that may lead to airway compromise and death. This is the quintessential medication adverse event. Those with anaphylaxis to any drug, antibiotic or vaccine should avoid that vaccine and consider allergy consultation in order to pin point the substance to which the life threatening allergic reaction has occurred. Anaphylaxis is fortunately a rare event after Covid vacation with an occurrence rate of 2 to 5 per million. This is the reason the member waits for 15 minutes after vaccination as anaphylaxis occurs rapidly, within minutes, if it going to occur.

Thrombosis with Thrombocytopenia Syndrome (TTS). In plain English this side effect is a blood clot associated with low platelet counts on blood testing. This is a rare, but potentially serious complication of the Johnson and Johnson vaccine which has occurred in women under age 50. As of 6 July there were 38 reported cases of TTS among 12.6 million doses of the J&J vaccine given in the US.

Myocarditis and pericarditis. This is an inflammation of the heart muscle (myocardium) or the sac around the heart (pericardium). As of 6 July, 971 reports of myocarditis or pericarditis have been reported among people age 30 or younger particularly in male adolescents age 16 and under. Through follow-up the CDC and the FDA have confirmed 594 cases happening after mRNA Covid-19 vaccination (Pfizer and Moderna Vaccines). The risk- 594 of 184 million people vaccinated is 1 in 310,000 or .0003%. This typically occurs within several days after Covid-19 vaccine and is a bit more common after the second dose. Reference: https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/myocarditis.html

Death after Covid -19 vaccine. From 14 December 2020 to 6 July 2021, *VAERS* received 5,946 reports of death among people who received a Covid-19 vaccine. A rate of .0018% Please note that Healthcare

providers are required to report to *VAERS* any death after Covid-19 vaccine even if it's unclear whether the vaccine was the cause of death.

Guillain-Barre Syndrome (GBS): Labeling for the Johnson and Johnson Covid-19 vaccine has been revised by the FDA to acknowledge a small chance of acquiring GBS. GBS is a neurological disorder in which the body's immune system damages nerve cells, causing muscle weakness or paralysis in severe cases. Each year an estimated 3000 to 6000 people develop GBS. Fortunately most recover. GBS has historically been observed at an increased rate associated with certain vaccines including the flu shot and the shingles vaccine. The available evidence suggests an association of GBS with the J&J Covid-19 vaccine, although it is insufficient to establish a causal relationship. Based on VAERS reporting, there have been (as of 13 July 2021) 100 preliminary reports of GBS after J&J vaccination for Covid-19. Of these 95 were serious and required hospitalization. There was one death. These 100 cases occurred among 12.5 million doses administered for a rate of 1 per 125,000 or 0.0008%

Common "mild" adverse events include: swelling, redness and soreness at the injection site; headache, fatigue, muscle soreness, chills, and nausea typically lasting 24 to 48 hours after vaccination. These "prodromal" symptoms are seen with many vaccines and signal the body's immune response is occurring.

Recommendation: The Covid-19 vaccines are safe and effective as determined by the most intense vaccine safety monitoring program in US history. This program is known as the *Vaccine Adverse Event Reporting System (VAERS).* The CDC continues to recommend vaccination for everyone over age 12.

Primary reference: https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/adverse-events.html & https://www.fda.gov

Vaccine Comparison.

We now have a choice of three vaccinations made by Pfizer (Comirnaty) , Moderna, and Johnson&Johnson. Vaccine availability is wide-spread. Most pharmacies, physician's offices and other venues offer easy access to vaccination. So which vaccine should I choose?

BLUF: Pfizer (Comirnaty) and Moderna vaccines are a bit more effective, but require two doses for "full vaccination" status. The Johnson&Johnson vaccine is a single dose, but a bit less effective. The following table offers a comparison among these three vaccinations so you can make a choice of which one is right for you. The table is modified from one published in *The Medical Letter*.

	Pfizer (Comirnaty)	**Moderna**	**Johnson&Johnson**
Vaccine type	mRNA	mRNA	Adenovirus Vector
Age	12yrs and older	18yrs and older (Approval for younger forthcoming)	18yrs and older
Dosage Regimen	2 shots 21 days apart	2 doses 28 days apart	1 dose

Effectiveness

	Pfizer (Comirnaty)	Moderna	Johnson&Johnson
Onset	7 days after 2nd dose	14 days after 2nd dose	28 days after 2nd dose
Overall	95%	94%	66-70%
In adolescents (age 12-15)	100%	96-100%	N/A
Preventing Covid death	100%	100%	100%
In elderly persons	94.7% (>65yrs)	86.4% (>65yrs)	66.2% (>60yrs)

Availability of vaccines:

All vaccines are widely available. Text your zip code to 438829 to get three locations near you with vaccines in stock. OR Google Covid vaccine, where do I get?

Am I going to need a booster shot? The CDC is recommending that those vaccinated 8 months ago are eligible for a vaccine and those who are immunocompromised are eligible now for a booster. mRNA vaccines can be tweaked to better cover the variants. Hopefully the boosters will be modified slightly to boost protection against the Delta variant. For now, the standard vaccine is very effective against all current variants.

Mask Wear:

Because of the surge in Covid cases attributable to the Delta variant, mask wear is required by all in DoD facilities. Also a good idea to wear mask while in public. This applies to all, vaccinated or not.