

FAQ for COVID-19 Vaccine and People with HIV

Version: 2/2/21

Adapted from [HIVMA and IDSA FAQ](#), [Mayo Clinic](#), [AAFP](#), [CDC](#)
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How to talk to our patients?

- 1) Start from a place of empathy and understanding
- 2) Give your strong recommendation!
- 3) Address misinformation
- 4) Listen to and respond to patient questions
- 5) Proactively explain side effects
- 6) Assume patients will want to be vaccinated but be prepared for questions

Presumptive vs. Participatory Approach

- People are more likely to accept vaccination if you recommend ("I strongly recommend") as opposed to leaving it open ("What would you like to do about your shots?")

"I strongly recommend you get a COVID-19 vaccine. This shot is especially important to for you because of your [job, underlying health conditions, like HIV, high blood pressure, diabetes, chronic lung disease]"

References:

- 1) [CDC: Making a Strong Recommendation for COVID-19 Vaccines](#)

What if they are really hesitant about getting the vaccine?

C.A.S.E Approach

- **Corroborate:** Acknowledge their concerns
 - "It's scary..."

- **About me/ask permission:** “I have looked into this a great deal. Can I share with you what I’ve learned and I think it’s important? Ultimately, the final decision is yours.”
 - Ask permission to give information.
- **Science:** What does the evidence show?
- **Explain/Advise:**
 - What are your thoughts about the COVID-19 vaccine now?
 - Would you like more information?
 - Let them know that we will discuss at future visits because it is so important.
 - Remember that at the end of the day, there’s patient autonomy!

C.A.S.E. Approach

Corroborate

About me

Science

Explain/Advise

References:

- 1) [Seattle Children’s Hospital](#)

Ways to stay healthy during the pandemic

<p>Ways to stay healthy during the COVID-19 pandemic</p>	<p><u>Tips for staying healthy:</u></p> <ol style="list-style-type: none">1. Follow prevention advice (see below).2. Take your medication everyday to keep your immune system healthy.3. Stock up on medication. Have at least 30 days' supply. Ideally, 3 months' supply.4. Make sure you are up-to-date with your vaccines, like the flu shot and pneumonia shot.5. Have a plan in place in case you are unwell and need to stay home.6. Take care of yourself. Eat well, sleep, exercise, and look after your mental health.7. Get labs done if your doctor ordered them.
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How to protect yourself from COVID-19

1. **Wear a face mask** around others.
2. **Avoid crowded places**, especially indoors
3. **Wash your hands** regularly or use an alcohol-based hand sanitizer
4. **Avoid touching your face**, especially eyes, nose and mouth
5. **Stay at least 6 feet away from people**, and even further when indoors
6. **Cover your nose and mouth** with a clean tissue when you sneeze or cough.
7. **Call us (510-437-8500) if you have fever, difficulty breathing, cough, loss of smell, or feeling unwell.**
8. **Get vaccinated** against COVID-19!

Common Concerns

Concern #1: MRNA what??

- The vaccine injects a small genetic code that teaches our cells how to make a piece of “spike protein” (a harmless protein). Our body develops an immune response to the material. Our body quickly clears away the genetic material once it is introduced.

Concern #2: How do I know it is safe?

- “The vaccines have been tested in large clinical trials (>70,000 people participated!) to make sure they meet safety standards. Many people were recruited to participate in these trials, including different ages, races, ethnicities, as well as different medical conditions.”
- “The FDA only approves when the expected benefits outweigh potential risks.”

Concern #3: It makes me feel sick.

- The vaccine does not cause COVID. It does not have live virus.
- Most people do not have serious problems after being vaccinated.
- Your arm may be sore, red, or warm to touch. These symptoms usually go away on their own within a week.
- Some people report getting a headache or fever when getting a vaccine.
 - These side effects are **a sign that your immune system is doing EXACTLY what it is supposed to do.**
 - **It is working and building up protection to disease.**

Concern #4: Are the COVID-19 vaccines safe for people with HIV?

- Yes, we anticipate that the COVID-19 vaccine is safe for PLH.
 - a) Based on how the vaccines work, **we do not anticipate safety concerns** specific to people with HIV. However, we are still waiting on the safety data for PLH.
 - b) The CDC recommends that people with HIV may receive the vaccine as long as they do not have other conditions that would exclude them, such as known allergic reaction to the COVID-19 vaccine
- The Pfizer and Moderna COVID-19 vaccines **do NOT** contain the infectious virus.
- It is possible that the vaccines may not be as strong for people who are immunocompromised, but it may also be possible that the level of protection is the same compared to people without HIV. We just don't know at this time.

Concern #5: Were people living with HIV included in the vaccine trials?

- Yes! The Pfizer study recruited 196 people with HIV. The Moderna study recruited 176 people with HIV. The Oxford/AstraZeneca studies have recruited 160 people with HIV.
- We are waiting for the results in this sub-population.

Concern #6: Will the vaccine be effective or recommended if I have a CD4 <200 or a low immune system?

- The CDC advises people who are immunocompromised to receive the vaccine because **of the potential increased risk for serious illness due to COVID-19.**

- We do not know whether the protection from COVID-19 will be as strong as the general population.

Concern #7: A Covid-19 vaccine was developed in less than a year and we still don't have an HIV vaccine after 40 years - why can't they develop the HIV vaccine as quickly as the COVID one?

- The viruses that cause COVID-19 and HIV are very different. The body can get rid of the virus that causes COVID-19 but the HIV virus stays in the body. This makes it much harder to develop a vaccine for HIV.
- There is still a lot of effort going into creating an HIV vaccine.

Concern #8: Will I have more side effects because I have HIV?

- Researchers are still examining the effects of the vaccine on people with HIV.
- The most common side effects are mild and do not last longer than a few days.
 - Current known side effects are pain and swelling at the injection site, fatigue, and headache.
 - A small number have had a fever.
 - Serious allergic reactions are rare.
 - We currently observe all patients for 15 minutes, and at least 30 minutes if someone has had a reaction to the vaccine.

Concern #9: Could they cause problems that we don't know about yet? What about long-term problems?

- COVID-19 vaccines are being tested in large research trials to assess their safety. It will take time for us to learn about the **very rare** or **long-term side effects**.
- If a safety issue is detected, we will take immediate action to determine whether the side effects are due to the vaccine and determine the best course of action.

Concern #10: Should I get the vaccine if I have already gotten COVID?

- Yes, because people's immune responses to COVID-19 can vary and we don't know how long people's immunity lasts.

- The CDC recommends offering the vaccine to people who have already had COVID-19. Vaccinations should be delayed for people who have active COVID-19 until they have recovered.

Concern #11: Why do some people get COVID-19 even after getting vaccinated?

- Since it takes a few weeks for the body to develop enough immunity to protect you from the virus, some people may still contract the virus while building immunity.
- It is important to continue to wear a mask, stay at least 6 feet from others, avoid large crowds or gatherings and regularly wash your hands

Concern #12: I am afraid of needles!

- Bring a buddy/friend for distraction.
- Ice pack can lessen discomfort

Concern #13: I've heard my HIV medicine protect me from getting COVID-19 so do I even need the vaccine?

- There is **NO EVIDENCE** that HIV medications can prevent or treat COVID-19. Some HIV medications, like TAF/FTC (Descovy) or TDF/FTC (Truvada) are currently being studied to see if they can treat COVID-19, but the results are pending.
- Studies on lopinavir/r (Kaletra) have not found to be effective.
- We do not recommend changing regimens. We recommend getting vaccinated.

Concern #14: Will the vaccine interact with my medications? Should I stop taking my HIV medications while I am getting the doses?

- The two vaccines (Pfizer and Moderna) do NOT interact with HIV medications.
- Do not stop your HIV medications. Stopping your medications could put you at greater risk for HIV-related illnesses and for serious infection due to COVID-19

Concern #15: Does the vaccine prevent infection?

- We are currently still learning about whether the COVID-19 vaccines prevent asymptomatic infection (getting the virus without getting sick). We know it prevents getting seriously ill and dying from COVID-19.

- In the meantime, we should continue to wear masks, stay 6 feet apart, avoid large gatherings or crowd, and regularly wash our hands to protect others.

Concern #16: Do I have to continue to wear a mask and avoid close contact after I have been vaccinated?

- Right now, since we don't know how the protection lasts, whether the vaccine prevents asymptomatic infection, and not everyone will be vaccinated yet, it is important to continue masking and practicing social distancing.

Concern #17: How soon after vaccination will I be protected from becoming ill from COVID-19?

- It typically takes a few weeks after vaccination for the body to develop enough immunity for protection. For Pfizer and Moderna, they are most effective after receiving both doses.

Myths vs. Facts

Myth #1: can the mRNA vaccines alter my DNA?

- No, the mRNA delivered by the vaccine does not enter the cell nucleus where DNA is located. It cannot alter your DNA.

Myth #2: I am allergic to eggs so I shouldn't get the COVID-19 vaccine.

- FACT: Neither the Pfizer or Moderna contain eggs nor were eggs used the development or production of either vaccine.
- Those with severe allergic reactions to eggs or any other substance are encouraged to remain after vaccination for 30 minutes for observation.

Myth #3: COVID-19 was developed to control the general population through microchip tracking.

- FACT: There is no vaccine microchip, and the vaccine will not track people or gather personal information into a database. This myth started after Bill Gates mentioned a

digital certificate of vaccine records. The technology he was referring was not in relation to microchip, nor has it been developed/implemented in anyway.

Myth #4: Can the MRNA vaccines cause infertility?

- **FACT:** The COVID-19 vaccines do not cause infertility. Some people made false claims on the internet stating that COVID-19 proteins are similar to the proteins in the placenta. Coronavirus proteins and placenta proteins are very different. There is no reason to believe that it would cause infertility.