COVID-19 VACCINE QUESTIONS & ANSWERS
(LAST UPDATE 3/2/2021)

The COVID-19 pandemic continues to have a significant impact on the lives of many, including our patients, their families, friends, and caregivers.

You may be wondering when you will be able to get the COVID-19 vaccine. As vaccine production and availability increases. Here’s a general overview of vaccine planning, and more specifically, information for patients with cancer (or with a history of cancer).

In addition to the answers below, we strongly encourage you to visit the county’s website for which you live and work and consult your Epic Care physician on the risk and benefits of the COVID vaccine.

GENERAL OVERVIEW

Q: Who decides who gets the vaccine?
A: The federal and state governments have set priorities for COVID-19 vaccine.

Q: Who is able to get a vaccine in Phase 1a?
A: Vaccines are being allocated first to health care workers (physicians and staff) and residents at long-term care facilities. This is so healthcare workers can continue to be available to treat COVID and non-COVID patients and the other health care needs of our community.

Q: When will Epic Care patients be able to get the vaccine?
A: Regardless of where patients receive healthcare, vaccine administration is based on an individual’s healthcare role, age, and health status. Phases 1b and 1c will cover persons of 65 years old and 50-64 with high-risk medical conditions, respectively.

Q: Will I be able to get the COVID-19 vaccine at Epic Care?
A: At this time, we do not plan to provide the vaccine at any of our Epic Care locations. Vaccine planning and distribution are determined by the county for which you live and work.

Q: Should I call my Epic Care doctor to find out when I can get the vaccine?
A: We respectfully request that you do not call your doctor’s office to ask when you might be able to get the vaccine or other vaccine related questions. Instead, please visit the county’s website for which you live and work and consult your Epic Care physician on the risk and benefits of the COVID vaccine

Q: Where do I go for vaccine information?
A: For Contra Costa County visit their website at https://www.coronavirus.cchealth.org/vaccine. For Alameda County you may go to https://covid-19.acgov.org/vaccines

FOR PEOPLE WITH CANCER OR HISTORY OF CANCER

Q: Which COVID-19 Vaccines are available?
A: Currently, two COVID-19 vaccines have received emergency use authorization (EUA) from the U.S. Food and Drug Administration (FDA):
• The **Pfizer-BioNTech vaccine** is authorized for people 16 years of age or older. It is given in 2 doses, 3 weeks apart.
• The **Moderna vaccine** is authorized for people 18 years of age or older. It is given in 2 doses, 4 weeks apart.
• The **Johnson & Johnson (Janssen) vaccine** is authorized for people 18 years of age and older. It is given as a single injection.

All three of these vaccines have been found to significantly lower the risk of COVID-19 infection. They have also been shown to be effective at lowering the risk of severe disease, being hospitalized, or dying from COVID-19 if you are infected.

The Pfizer-BioNTech and Moderna vaccines contain messenger RNA (mRNA), which is genetic material. After a person receives the vaccine, the mRNA tells the cells in the body to make copies of the virus’s “spike” protein (the protein that normally helps the virus infect human cells). This doesn’t cause disease, but it does trigger the immune system to learn to act against the virus if the body is exposed to it in the future.

The Johnson & Johnson (Janssen) vaccine contains an adenovirus – a type of virus that is different from the coronavirus that causes COVID-19. This adenovirus has been altered so that it contains the gene for the COVID-19 virus’s spike protein. Once this adenovirus enters the body’s cells, the gene tells the cells to make copies of this spike protein. This causes the immune system to recognize and attack the COVID-19 virus if the body is exposed to it in the future. The adenovirus used in this vaccine is not a live virus – it cannot cause disease.

**Q: What is an emergency use authorization (EUA)?**
**A:** In an EUA, the FDA allows the use of a vaccine or drug during a time of emergency, such as the current COVID-19 pandemic, when the available evidence shows the potential benefits outweigh the potential risks. An EUA is not the same as a full FDA approval, which requires a more thorough review of safety and effectiveness.

Drugs and vaccines that have been given an EUA continue to be studied in clinical trials. In the meantime, we recommend that those who get the vaccine still wear a mask and continue to practice social distancing and good hand hygiene.

**Q: What are the side effects of the vaccines?**
**A:** Some people have reported side effects after getting the vaccines, such as pain at the injection site, tiredness, headache, muscle and joint pain, chills, and fever. These side effects typically improve after a few days.

Some individuals may experience swelling or tenderness of lymph node under the arm in which they got the infection. This can be a normal response by the body’s immune system. A swollen lymph node under the arm might cause concern, since it can also be a sign of cancer. The lymph nodes may take a few days to a few weeks to shrink back down after getting the vaccine. If you are still experiencing swollen or tender lymph nodes after a few weeks (or if they continue to worsen), please contact your doctor for further evaluation and management.

Very few serious safety concerns have been reported for either vaccine so far. In very rare cases, people have had serious allergic reactions after getting one of the vaccines. This seems to be more likely in people who have had serious allergic reactions before.
These vaccines are still fairly new, so possible long-term side effects are still being studied.

Q: Are the COVID-19 vaccines available for people with cancer?
A: Currently, the supply of vaccines in the United States is limited. The supply also varies in different parts of the country based on the distribution of the vaccine, the priorities for vaccination in different areas, and the number of people who want to get the vaccine.

The US Centers for Disease Control and Prevention (CDC) has made recommendations as to which groups of people should get the vaccines first. States and other authorities are using these recommendations to guide their distribution of the vaccine, but they do not have to follow them exactly. To learn more about the priorities for vaccination in your area, please contact your state or local health department.

Other COVID-19 vaccines are also likely to become available in the coming months as well, which should help with the supply of vaccines. However, it will probably still be some time before the vaccines become widely available.

Q: I have cancer. Should I be vaccinated against COVID-19?
A: At this time, patients with cancer may be offered vaccination against COVID-19 as long as components of that vaccine are not contraindicated. The current U.S. CDC recommendations around vaccination do not mention cancer specifically, but do discuss immunocompromised individuals. They state: “Immunocompromised individuals may still receive COVID-19 vaccination if they have no contraindications to vaccination. However, they should be counseled about the unknown vaccine safety profile and effectiveness in immunocompromised populations, as well as the potential for reduced immune responses and the need to continue to follow all current guidance to protect themselves against COVID-19.” The expert panel noted that while some immunocompromised patients may experience decreased response to the vaccine, it may still confer some benefit and is important to reduce the risk or severity of COVID-19 to cancer patients, especially given recent evidence of higher rates of severe infection.

Q: Do the vaccines contain “live virus”?
A: Some vaccines for other diseases contain live viruses, which typically are not recommended for cancer patient and immunocompromised individuals because they might have unwanted effects. However, the COVID-19 vaccines available so far do not contain live viruses, so these vaccines are safer for cancer patients and immunocompromised individuals.

Q: I am currently being treated for cancer. Should I be vaccinated against COVID-19?
A: At this time, patients undergoing treatment may be offered vaccination against COVID-19 as long as any components of the vaccine are not contraindicated. Oncologists have experience providing other types of vaccines to patients receiving treatment for cancer, including chemotherapy, immunotherapy, radiation therapy or stem cell transplantation. Strategies such as providing the vaccine in between cycles of therapy and after appropriate waiting periods for patients receiving stem cell transplants and immune globulin treatment can be used to reduce the risks while maintaining the efficacy of vaccination.

- For patients undergoing chemotherapy, radiation, or targeted therapy: These treatments may lessen the vaccine’s effectiveness, but experts do not know by how much yet.
- For patients on immunotherapy: This form of treatment actually stimulates the immune system instead of suppressing it.
- For patients participating in a clinical trial: Clinical trials usually have specific guidelines regarding what is allowed and not allowed for patients participating in the study.
- For patients undergoing surgery: Patients should allow for a certain number of weeks in between their vaccination and surgery. These are unique situations and should be discussed on
a case by case basis. Please consult your physician and surgeon. For some, it might make more sense to undergo surgery and get vaccinated after they’ve recovered. For others, putting off surgery until after getting the vaccine might make more sense.

- **For patients who have undergone or are undergoing a bone marrow transplant (BMT):** The idea behind a BMT is to wipe out the immune system and bring a new one in, a rejuvenated one. However, there will be a period where there is not enough bone marrow to generate an adequate immune response. Please consult your hematologist regarding the best window of opportunity for when the COVID-19 vaccine may be most effective.

- **For those in active surveillance:** Please talk with your doctor about any specific questions or concerns you might have, like whether you still fall into a high-risk category and should get vaccinated sooner.

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**Q: I am a cancer survivor. Should I be vaccinated against COVID-19?**

**A:** Cancer survivors may be offered vaccination against COVID-19 as long as any components of the vaccine are not contraindicated. Please talk with your doctor about any specific questions or concerns you might have, like whether you still fall into a high-risk category and should get vaccinated sooner.

**Q: Is it okay for cancer caregivers to be vaccinated against COVID-19?**

**A:** Some vaccines for other diseases contain live viruses, which typically are not recommended for cancer caregivers because they might have unwanted effects on cancer patients. However, the COVID-19 vaccines available so far do not contain live viruses, so getting one of these vaccines does not put you at risk for passing COVID-19 on to the person you’re caring for. It’s important to know that if you do get a COVID-19 vaccine and are later exposed to the virus, it’s not yet clear if the vaccine will prevent you from infecting someone else (even if you don’t get sick). Because of this, we recommend that those who get the vaccine still wear a mask and continue to practice social distancing and good hand hygiene.

People getting the vaccine might also not feel well for a few days after each dose, so it might make sense to have someone else available to help with caregiving during this time.

**Q: Who should not be vaccinated against COVID-19?**

**A:** At this time, only those with contraindications to a specific vaccine component should not be offered vaccination with that specific product.

**Q: Do I still have to wear a mask and practice social distancing if I get vaccinated?**

**A:** As there is still uncertainty around the extent to which immunocompromised patients with cancer will develop immunity in response to vaccination, vaccinated patients should continue to follow current guidance to protect themselves from exposure to COVID-19. Please continue the best practices of wearing masks, social distancing, and maintaining good hand hygiene even after vaccination.

**Q: Will the vaccine affect my cancer treatment?**

**A:** No. At this point, there are no data to suggest that the vaccine should affect your cancer treatment. But you should talk to your oncologist if you are concerned.

**Q: If I don’t get a vaccine, am I at greater risk?**

**A:** Yes, you will be at a greater risk for contracting COVID-19 than someone who has received a vaccine. Depending on your type of cancer or the treatments you are on, you may also be at risk for ...
a more serious form of the illness. We continue to take all the same safety precautions that we put in place when the pandemic began and we will continue to ensure that our environment is as safe as possible for all patients and staff, but we strongly encourage everyone to get their vaccine as soon as they are eligible to do so and if they are able to do so.

Q: Where can I find out more information regarding the COVID-19 vaccines?
A: The CDC and FDA have more information about COVID-19 vaccines, including the approval process, safety, the different types of vaccines, and the known possible risks and benefits of each one.

Q: Thank you for your continued support!
A: We greatly appreciate our Epic Care community and are heartened by the great interest in receiving the vaccine, as it is the most effective way to end the pandemic.

Thank you!