

COVID-19 Vaccine Recommendations

Dear Patient,

We recognize the COVID-19 pandemic has brought many challenges and concerns, especially related to the recent surge in cases due to the delta variant. We know you have many questions, so we would like to provide our transplant candidates and recipients with updated information regarding the vaccines and vaccination.

The Emory Transplant Center leadership recommends:

- **All transplant recipients and candidates, care partners, and eligible household contacts complete COVID-19 vaccination as soon as possible.**
- **Transplant recipients who have received the Pfizer or Moderna vaccine now receive a 3rd dose of vaccine. We recommend that you receive this 3rd dose at your local pharmacy or local health department.**
- **Currently, there are no recommendations for additional vaccine doses for patients who received the Johnson & Johnson vaccine.**

At this time, COVID-19 vaccination is NOT available at our Transplant Clinics.

Please continue to follow *best* practices to avoid contracting COVID-19: minimize going out in public, wear a mask when out of the house; and, clean your hands frequently with sanitizer or soap and water. Until we learn more about the vaccine response in transplant recipients, we recommend that you continue to take measures to protect yourself from COVID-19 *even if you are vaccinated and receive a third dose.*

Continue to stay safe. You and your health and safety are very important to us.

Sincerely,

The Emory Transplant Center Team

Phone: 1-855-EMORY-TX (366-7989)

Additional Information

As a transplant candidate or recipient, weighing the risks and benefits of getting vaccinated is important. Below are several points we want you to be aware of regarding COVID-19 vaccines:

- Emergency Use Authorization (EUA) by the FDA is not the same as full FDA approval. EUA is a means to facilitate the

availability and use of vaccines and other unapproved medications during a public health emergency such as a pandemic.

- Without a vaccine there is risk of severe disease, long-term complications, and death. To date, transplant recipients appear to have clinically worse outcomes from COVID-19 when compared to non-transplant patients. This may be due to overall health status or to medications used to prevent rejection of the transplanted organ (being immunosuppressed).
 - We know that 67% of transplant patients who get COVID-19 will be hospitalized. Thirty-five to 40% will develop severe disease requiring care in the Intensive Care Unit, and despite the best available therapy we have, 15-20% will die from COVID-19.
- Among immunocompetent persons, the Pfizer and Moderna mRNA vaccines have a reported effectiveness of 94-95%, and the Johnson & Johnson vaccine is 86% effective in preventing severe COVID-19. However, the antibody response to COVID-19 vaccination appears lower among solid organ transplant recipients, and current data show that about 50% of patients will have detectable antibodies after completion of the vaccine series.
 - A third dose of the COVID-19 vaccine is now recommended for transplant recipients who have completed the Pfizer or Moderna series. You should wait at least 28 days between the second and third vaccine doses. However, if you were treated for rejection within the last 6 months, please discuss the timing of the third dose with your coordinator or care team. Third doses of vaccine can be administered at your local pharmacy, and you should receive the same brand of vaccine as you did previously. Measurement of antibody response after vaccination is not currently recommended outside of a research study.
 - Emerging research shows that transplant recipients may have T-cell responses to the vaccine in the absence of an antibody response and that there may be lower rates of COVID-19 among vaccinated versus non-vaccinated transplant patients.
- If you have recently received other vaccines (influenza, shingles, etc.), you should wait one month before receiving the COVID-19 vaccine.
- The circulating delta variant is much more infectious than other strains of the virus, and vaccination is highly effective in preventing severe COVID-19 infections due to this variant. In order to protect your health, we highly recommend that your care partners and eligible household contacts receive the COVID-19 vaccination. Currently, anyone 12 and older can get vaccinated.
- Please contact your coordinator or care team immediately if you are exposed to COVID-19 through a close contact, as you may qualify for monoclonal antibody therapy for prevention of COVID-19.
- To most efficiently address questions, we are regularly updating the Emory Healthcare website for answers to frequently asked questions about the COVID-19 vaccine. Please visit the site before calling us: [COVID-19 Vaccine FAQs](#).

Vaccine: Frequently Asked Questions:

Do mRNA vaccines alter your genes?

Simply put, they do not. The vaccines are used to make a viral protein which are then recognized by the immune system. This results in antibody production and T-cell responses. The mRNA in the vaccines is broken down by the body in just a few hours.

Can the vaccines cause sterility?

They do not. Despite using effective birth control, there were 100s of women who became pregnant while participating in the research studies. There was no difference in the pregnancy rate between those who got the vaccine and those who didn't.

Can I trust a vaccine that was created so fast?

While the vaccines did become available quickly, there were no shortcuts. The FDA used a mechanism to reduce red tape, but not the review process. Each study had about 30,000-40,000 participants who were all followed for 6 months prior to being considered for emergency authorization. We know from previous vaccine studies that side effects related to vaccination appear within a few months after the vaccine is given.

Across the country over 96% of doctors have received the vaccine. These are the people who are most likely to spot flaws in the science or process. Yet, they've willingly rolled up their sleeves and haven't hesitated to take the vaccine themselves.

Are the vaccines safe?

In addition to having an excellent safety record shown during the studies, since the emergency authorization over 150 million people have been vaccinated. While there may be a few deaths (<5) associated with vaccination this is far fewer than the number of deaths from COVID-19 which stands at over 620,000. It is much safer to get vaccinated than to chance getting COVID-19.

I know people who were vaccinated and still got the delta variant. Why bother?

True, no vaccine is perfect and the delta variant is different enough that vaccinated people can get sick. However, the vaccines still protect these people from being hospitalized and dying.

Do masks really help?

Yes, they really do help. No one likes wearing a mask, but we do it to protect ourselves and those around us. They can be uncomfortable but it's a small price to pay for the safety of all.