













Frequently Asked Questions for people living with HIV in Oregon

COVID-19 vaccines and you: an update

It has become very clear: COVID-19 vaccines are very safe and very effective at preventing hospitalization and death due to COVID-19. Vaccines continue to keep people alive and out of the hospital even with the rapid spread of the Delta variant.

This document answers new questions that have developed in the last few months and updates our last FAQ on OHA's <u>COVID-19 and HIV webpage</u> to help people living with HIV make informed decisions about getting the COVID-19 vaccination. This information adds to but does not replace talking with your healthcare providers about the benefits and risks of getting the COVID-19 vaccine.

Q: What COVID-19 vaccines are now available in Oregon?

- Pfizer-BioNTech
- Moderna
- Johnson and Johnson

A: All three are very effective in preventing severe illness, hospitalization, and death due to COVID-19. It is still possible to get COVID-19 even when we are vaccinated, but the illness is less severe and does not usually require hospitalization.

The Food and Drug Administration (FDA) has issued an emergency use authorization for three vaccines now in wide circulation in the U.S. These vaccines include two mRNA vaccines (Pfizer-BioNTech and Moderna) and one viral vector vaccine (Johnson and Johnson).

Recently the FDA granted full approval to the Pfizer-BioNTech vaccine.

Q: How many people living with HIV in Oregon have been vaccinated?

A: As of June 15, 2021, about 61% of people living with HIV in Oregon had gotten at least one dose of a COVID-19 vaccine. At the same time, 65% of people living in Oregon without HIV had been vaccinated with at least one dose.

Q: How effective are COVID-19 vaccines in people living with HIV?

A: When scientists looked at the amount of antibody (proteins that protect us from infection) and infection fighting cells that people produce after vaccination, people with

well-controlled HIV create the same amount of <u>antibodies</u> as people without HIV. This response to vaccination is what protects us from getting COVID-19 and keeps us out of the hospital. Because of the small numbers of people living with HIV in the studies, more research needs to be done to get more information.

Q: Why is it so important that people living with HIV get a COVID-19 vaccination?

A: Studies are showing that people living with HIV are at higher risk of severe COVID-19. A recent national <u>study</u> showed that people living with HIV with a detectable viral load (>50 copies/mL) or a CD4 count < 500 cells/mL were at increased risk of hospitalization and people with a CD4 count < 350 cells/mL were more likely to need mechanical ventilation and were more likely to die from COVID-19.

Q: I've already had two doses of the Moderna or Pfizer vaccine, do I need a third dose?

A: The FDA has just <u>authorized</u> a third dose of the mRNA vaccines for people with compromised immune systems, including people living with advanced or untreated HIV, with bone marrow or organ transplants, on medications that suppress the immune system, or with immunodeficiencies that people are born with.

While no one living with HIV will be refused a third dose of COVID-19 vaccine, the FDA and CDC only recommend that a third dose be given to people living with untreated or advanced HIV and to others whose immune systems might not respond as strongly to two doses of vaccine. Therefore, the FDA and CDC recommend a third dose for people living with HIV who have one or more of the following characteristics:

- 1. Are not on HIV treatment
- 2. Have symptoms of HIV infection
- Have a CD4 count < 350 cells/mL
- 4. Have had an HIV-related malignancy (like lymphoma, Kaposi sarcoma, or cervical or anal cancer) without an appropriate increase in CD4 count after starting HIV treatment
- 5. Have had an opportunistic infection (like pneumocystis pneumonia [PJP or PCP], cryptococcal meningitis, TB, or toxoplasmosis) without an appropriate increase in CD4 count after starting HIV treatment
- Are being treated for cancer
- 7. Have had a bone marrow or solid organ transplant
- 8. Take medications that suppress the immune system (like high doses of prednisone, methotrexate, Humira, or Remicade)
- 9. Have kidney disease that requires dialysis
- 10. Are older than 65 years of age

If you have any questions, talk to your healthcare providers, and discuss whether a third dose of vaccine is right for you.

Q: When should I get my third dose of vaccine?

A: You can get the third dose of an mRNA vaccine (Moderna or Pfizer) 28 days or more after your second dose. For most people, that means that they can receive their third dose now.

Q: If I received the Moderna vaccine first, can I now get the Pfizer vaccine for my third dose? Or, if I received the Pfizer vaccine first, can I now get the Moderna vaccine for my third dose?

A: While it is best to get the same version of the mRNA vaccine for all three shots, we recognize that this is not always possible. Therefore, yes, you can mix and match the Pfizer and Moderna vaccines for a third dose.

Q: I received the Johnson and Johnson one-dose vaccine. Can I get additional doses of this shot?

A: At this time, there is no evidence that an additional dose of the Johnson and Johnson vaccine improves the immune response in people living with HIV. We do not currently recommend additional doses of the Johnson and Johnson vaccine. It is also not clear that people who did received the Johnson and Johnson vaccine should now get the Moderna or Pfizer vaccines.

Q: So, is the third dose also a booster?

A: The terms can be confusing here. For some people, like folks with immune compromise, it takes three doses for the body to create a full protective response after vaccination.

Boosters are given to people whose immune systems have responded appropriately to the vaccine but that response decreases over time. A booster dose keeps the immune response high.

It is possible that even after a third dose of COVID-19 vaccine, people living with HIV may need a booster as well.

Q: Do we know more about side effects?

A: The most common <u>side effects</u> are pain, redness and swelling at the injection site, fatigue, fever, chills, muscle aches, and headache. While these side effects can be rough, they usually go away in 24-48 hours. If possible, schedule your vaccination so that the day after your shot you can rest and drink plenty of fluids.

Severe allergic reactions and inflammation of the heart in younger people after the Moderna or Pfizer vaccines, and blood clots after the Johnson and Johnson vaccine, are **very rare** side effects of the vaccines.

A third dose does not seem to cause more side effects than first or second doses.

Q: If I am pregnant or breastfeeding, should I get the vaccine?

A: Yes. In a large national <u>study</u>, the vaccines were shown to be very safe for pregnant and breastfeeding people, protecting mom and baby from COVID-19. The CDC recommends that all pregnant and breastfeeding people be vaccinated against COVID-19.

Q: What if I've already had COVID-19, can I still get the vaccine?

A: Yes. People who have had COVID-19 can, and should, still get the COVID-19 vaccine. If you are recovering from COVID-19, wait until your symptoms resolve to get the vaccine.

Q: Can I get other vaccines at the same time?

A: Yes. Initially, the CDC recommended waiting 14 days between getting the COVID-19 and other vaccinations; however, at this time, it is safe to get the COVID-19 vaccine at the same time as other vaccines, like the flu shot.

Q: Where can I get the COVID-19 vaccine?

A: There are many options for getting vaccinated. First, you can talk with your healthcare provider or case manager; they may be offering vaccination on site or can direct you to where you can get vaccinated. Second, major pharmacy chains are offering vaccination, including Safeway/Albertsons/Sav-On, Costco, Fred Meyer, Walgreens, CVS, Bi-Mart, Health Mart and Credena. Third, many local organizations are holding vaccine events. You can find locations and testing events at getvaccinated.oregon.gov.

While there are no services that provide COVID-19 vaccine at home, there is help to get vaccinated. If you need help finding a vaccine site, scheduling a vaccination appointment, or need transportation to a vaccine site, talk to your HIV Case Manager or Care Coordinator. If you do not have one, talk to a CAREAssist Case Worker.

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