



Q&A for health care workers on vaccination during the COVID-19 pandemic

1. Is it safe to vaccinate children during the COVID-19 pandemic?

Yes. Potential contact with an infectious disease is not a contraindication for routine immunization¹. Therefore, the COVID-19 pandemic does not pose any specific risk linked to vaccination. Routine immunization sessions should continue to the extent possible and as permitted within the local COVID-19 response context. However, standard infection prevention measures should be in place to minimize the risk of COVID-19 transmission to all staff and visitors to the facility.

The World Health Organization (WHO) recommends that all routine vaccinations be administered as scheduled, even during the COVID-19 pandemic. It is especially important that children receive all the vaccines scheduled at birth and in the first two years of life². These vaccines may vary according to national recommendations. Any interrupted immunization services should be resumed and catch-up vaccinations offered as quickly as possible². Timely vaccination is key to protect young children from serious life-threatening infectious diseases, and to avoid the accumulation of unvaccinated groups and potential loss of community (herd) immunity¹.

2. Does vaccination increase a child's risk of becoming infected with COVID-19 or of developing the disease?

No. There is currently no evidence that vaccination would increase the risk of a child becoming infected with COVID-19 nor affect the course of the disease. Being vaccinated against one disease does not weaken a person's immune response to another disease^{3,4,5}. Furthermore, continuing routine vaccination of children during the COVID-19 pandemic will protect them from vaccine-preventable diseases (VPD). Ensuring that the immunization sessions are conducted in a facility with adequate infection prevention measure will minimize any potential risk of children getting COVID-19.

3. Why is vaccination particularly important during the COVID-19 pandemic?

¹ Vaccine safety and false contraindications for vaccination. Training manual. WHO Regional Office for Europe, 2017 (http://www.euro.who.int/_data/assets/pdf_file/0009/351927/WHO-Vaccine-Manual.pdf) (accessed 22 April 2020)

² Guidance on routine immunization services during COVID-19 pandemic in the WHO European Region (2020). <http://www.euro.who.int/en/health-topics/communicable-diseases/hepatitis/publications/2020/guidance-on-routine-immunization-services-during-covid-19-pandemic-in-the-who-european-region-2020> (accessed 22 April 2020)

³ Offit P. Addressing parents' concerns: do multiple vaccines overwhelm or weaken the infant's immune system? *Pediatrics*, 2002;109:124-9

⁴ Global Advisory Committee on Vaccine Safety, 6–7 June 2006. *Weekly Epidemiological Record*, 2006; 28(81):273–284 (https://www.who.int/vaccine_safety/committee/reports/wer8128.pdf?ua=1) (accessed 22 April 2020)

⁵ Miller E. Bacterial infections, immune overload, and MMR vaccine. *Arch Dis Child*, 2003;88: 222-3



Any disruption of immunization services, even for short periods, would leave population and especially children at immediate risk of VPDs⁶. Adding to the number of susceptible individuals already present in a community, this would put community (herd) protection at risk and increase the likelihood of VPD outbreaks. Such outbreaks may result in VPD-related illnesses and deaths and an increased burden on healthcare systems already strained by the response to the COVID-19 outbreak.

4. Is it dangerous to vaccinate a child during the incubation period for COVID-19?

No. This is a general principle that also applies to COVID-19: vaccination does not pose any known risk to a person who is in the post-exposure or incubation period of a disease^{1,7}. This means that vaccination will not influence the course of COVID-19 disease in a child who might already be infected with COVID-19 but is not yet symptomatic at the time of vaccination, or for a child who becomes infected with COVID-19 soon after vaccination. The child's potential COVID-19 infection will also not influence the safety or efficacy of the vaccine that is administered.

5. Is COVID-19 infection a contraindication for vaccination?

While mild symptoms as fever and/or cough, also seen in COVID-19 disease, are not necessarily a contraindication for vaccination¹, it is important that anyone who has tested positive for COVID-19 remains isolated in line with the national instruction to ensure that they do not infect others and contribute to further spread of the SARS-CoV2 virus.

6. Are there any specific vaccines recommended for health care workers in the context of COVID-19?

There is no vaccine against COVID-19 at this point of time. As of 11 April 2020, 6 candidate vaccines have entered clinical evaluation stage while 77 other candidate vaccines are in preclinical evaluation stage⁸. WHO is working with all stakeholders to ensure equitable distribution and prioritization of the COVID-19 vaccine once a safe and effective vaccine becomes available. While waiting for the COVID-19 vaccine, in general, but especially during the COVID-19 pandemic all health care workers should be up-to-date with the recommended vaccines according to their national schedule.⁹

⁶ Takahashi S. Reduced vaccination and the risk of measles and other childhood infections post-Ebola. *Science*, 2015;347(6227):1240-2. doi: 10.1126/science.aaa3438. PubMed PMID: 25766232; PubMed Central PMCID: PMC4691345.

⁷ Rubin LG. 2013 IDSA clinical practice guideline for vaccination of the immunocompromised host. *Clin Infect Dis*, 2014;58(3):309-18.

⁸ Draft landscape of COVID-19 candidate vaccines. World Health Organization, 2020 (<https://www.who.int/who-documents-detail/draft-landscape-of-covid-19-candidate-vaccines>) (accessed 22 April 2020)

⁹ Summary of WHO Position Papers – Immunization of Health Care Workers. World Health Organization. (https://www.who.int/immunization/policy/Immunization_routine_table4.pdf) (accessed 22 April 2020)

**Further information**

Guidance on routine immunization services during COVID-19 pandemic in the WHO European Region. <http://www.euro.who.int/en/health-topics/communicable-diseases/hepatitis/publications/2020/guidance-on-routine-immunization-services-during-covid-19-pandemic-in-the-who-european-region-2020>



Q&A for parents regarding vaccination during COVID-19 pandemic

1. Should my child be vaccinated during the COVID-19 pandemic?

Yes, it is important that your child receives all routine vaccinations on time to protect him or her against several dangerous diseases now and in the future.

Follow the guidance of your national health authorities to learn where and when vaccinations are being offered. If immunization services are interrupted temporarily due to the COVID-19 response in your area, be sure to catch up on any missed doses as soon as possible once services resume.

2. Is it safe to vaccinate my child during the COVID-19 pandemic?

Yes, it is safe for your child to be vaccinated. COVID-19 does not pose any specific risk linked to vaccines or to being vaccinated.

3. We have been told to stay at home as much as possible due to COVID-19. Should I wait to vaccinate my child until the pandemic is over?

No. It is important to keep up with routine vaccinations as much as possible even during the COVID-19 pandemic. Health authorities are doing everything they can to keep immunization services open because immunization is an essential part of protecting public health. It is also your child's right to get the healthiest possible start in life.

In communities where physical distancing measures are in place, health authorities will take steps to minimize the risk of COVID-19 transmission during immunization sessions, for example by adapting waiting times and areas in the facility. If necessary, services may be temporarily suspended, with catch-up vaccinations offered as quickly as possible when they resume normal operation.

4. Can routine vaccines protect my child or me from COVID-19 infection?

There is currently no evidence at this time that vaccination against other diseases, such as polio or tuberculosis, can help prevent COVID-19 infection or reduce symptoms of the disease.

By ensuring you and your child are up-to-date with the routine vaccines, you can protect yourself and your child from other infectious diseases.

5. Can my child receive routine vaccinations if she has a cough or fever (and has not been tested for COVID-19)?

If your child is not feeling well be sure to inform your health care provider before bringing her or him to the health facility. Your health provider would advise you whether or not to postpone vaccination.



6. What if my child has tested positive for COVID-19 but has only mild symptoms?

While mild symptoms are not necessarily a contraindication for vaccination, it is important that anyone who has tested positive for COVID-19 remains isolated to ensure that they do not infect others and contribute to further spread of the virus.

7. What if my child is potentially infected with COVID-19 but has no symptoms? Could vaccination make it more difficult for him to fight off the infection?

No. Being vaccinated against one disease does not weaken a person's immune response to another disease. There is no indication that any routine vaccination will increase (or decrease) your child's risk of becoming infected with COVID-19 or that it would affect his or her response to the disease.

On the other hand, missing or postponing vaccination does pose a serious risk, by leaving a child vulnerable to several dangerous vaccine-preventable diseases.

8. Is there a vaccine against COVID-19?

No. COVID-19 is a new disease and there are not yet any vaccines available to prevent it. Scientists around the world are working to develop vaccine against COVID-19 and WHO is working with all stakeholders to ensure that once a safe and effective vaccine becomes available, it will be distributed equitably to all those who need it.

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