



33. My patient is breastfeeding her young infant. What can or should I advise her about receiving the COVID-19 vaccine?

NACI as of June 1, 2021 states the following key revised recommendations:

NACI recommends that a complete vaccine series with an mRNA COVID-19 vaccine should be offered to individuals in the authorized age group who are breastfeeding. If an mRNA vaccine is contraindicated, another authorized COVID-19 vaccine should be offered. Informed consent should include discussion about the emerging evidence on the safety of mRNA COVID-19 vaccines in this population. (Strong NACI Recommendation)

There is a long history of safety with inactivated vaccines administered during lactation, as well as there being no biological reason to suspect a safety risk.

34. How should I counsel my immunocompromised patients about receiving the COVID-19 vaccine?

In general, the question is not so much about safety as about effectiveness of the vaccine in an individual who is immunocompromised. The more severe the immunocompromise, the more this may affect the individual's ability to generate immunity from the vaccine. There is also the question of whether individuals who are immunocompromised may be more susceptible to severe COVID-19 disease should they be infected. Surprisingly, according to the CDC, evidence around the severity of COVID 19 and immunocompromised is still not strong.

Immunosuppression from solid organ transplant is more strongly associated with the potential for severe illness, while immunosuppression from other reasons including medical therapy is less certain.

NACI recommends the following:

 NACI preferentially recommends that a complete COVID-19 vaccine series with an mRNA COVID-19 vaccine should be offered to individuals in the authorized age group who are immunosuppressed due to disease or treatment. If an





mRNA vaccine is contraindicated, another authorized COVID-19 vaccine should be offered. Informed consent should include discussion about the possibility that individuals who are immunosuppressed may have a diminished immune response to any of the authorized COVID-19 vaccines. (Strong NACI Recommendation)

 Individuals who are immunosuppressed from disease or treatment should be informed that they may have a reduced immune response to any authorized COVID-19 vaccine series.

A complete COVID-19 vaccine series may be offered to individuals in the authorized age group. As of September 10, 2021, NACI recommended an additional dose (3rd dose post 2-dose series, or 2rd dose post 1-dose series) to be offered to moderately to severely immunocompromised individuals that meet <u>certain criteria</u>.

35. My patient has an autoimmune condition. What advice should I be providing regarding COVID-19 immunization?

The decision may be influenced by the presence of other co-morbid conditions, the patient's age, the patients' general attitude towards COVID-19 and risk factors for acquisition, and the severity of the chronic condition. Also, the spectrum of autoimmune conditions is wide, with varying degrees of autoimmunity, disease progression, and varying use of medications that affect immune function. Specialist advice may also be helpful.

The latest NACI statement advises the following:

NACI preferentially recommends that a complete vaccine series with an mRNA
 COVID19 vaccine should be offered to individuals in the authorized age group
 with an autoimmune condition. If an mRNA vaccine is contraindicated, another
 authorized COVID-19 vaccine should be offered. Informed consent should
 include discussion about the emerging evidence on the safety of mRNA COVID 19 vaccines in these populations. (Strong NACI Recommendation)





The Canadian Rheumatology Association (CRA) released a position statement on the COVID-19 vaccine on May 20, 2021 stating that they recommend COVID-19 vaccination in persons with autoimmune rheumatic disease as the potential benefits outweigh the potential risks.

Other applications of mRNA technologies for the treatment of cancer required anti-self immune response, which raised a theoretical concern that mRNA vaccines for infectious diseases would behave similarly. Previous mRNA vaccine technologies may have elicited inflammation and theoretically exacerbated existing autoimmune disease. Current applications of mRNA technology for COVID-19 vaccines have been optimized to reduce this risk.

A complete COVID-19 vaccine series may be offered to individuals in the authorized age group. As of September 10, 2021, NACI recommended an additional dose (3rd dose post 2-dose series, or 2rd dose post 1-dose series) to be offered to moderately to severely immunocompromised individuals that meet certain criteria.

36. What if my patient has had a previous COVID-19 infection?

There is no contraindication to receiving COVID-19 vaccination in an individual who has previously had a natural COVID-19 infection. What is uncertain still is the duration of natural immunity. We also do not have information on the expected duration of vaccine-induced immunity, or which will provide the stronger or more lasting protection. The NACI statement supports our ability to provide vaccines to these recipients. In a context of limited vaccine supply, these individuals would be a lower priority than others, due to at least some short-term protection. In our context, these individuals may as well be vaccinated when they have an opportunity, either through a community mobile tour or through the normal booking process in Whitehorse. The NACI wording is as follows:

NACI recommends that a complete series with a COVID-19 vaccine may be
offered to individuals in the authorized age group without contraindications to
the vaccine who have had previously PCR-confirmed SARS-CoV-2 infection.





37. Is the COVID-19 vaccine recommended for children?

In Canada, the Pfizer-BioNTech and Moderna COVID-19 vaccines have been approved for use in children between the ages of 12 and 17 years old. However, in the Yukon Moderna vaccine will only be available to adults 18 years of age and older.

38. Can the COVID-19 mRNA vaccines be given simultaneously with blood products or human immunoglobulin?

There is currently insufficient evidence on the receipt of both a COVID-19 vaccine and anti-SARS-CoV-2 monoclonal antibodies or convalescent plasma for treatment or prevention. The timing of administration and potential interference between the two products are currently unknown. Administration of these products close together may result in decreased effectiveness of a COVID-19 vaccine and/or anti-SARS-CoV-2 monoclonal antibodies because the monoclonal antibodies have a high affinity for the spike protein expressed by the vaccines.

Any individual who received monoclonal antibodies or convalescent plasma for treatment of COVID-19 should wait for 90 days to elapse prior to vaccination with a COVID-19 vaccine. A second infection is unlikely to occur in that time period, and a period of 90 days or more will lower the risk of blunting of the vaccine-induced immune response, accounting for the estimated half-life of these treatments.

Those receiving other antibody therapies that are unrelated to COVID-19 treatment (e.g., IVIG, RhoGAM) may receive the mRNA COVID-19 vaccine at the same time or any interval before or after these therapies. They are unlikely to interfere with the immune response to the vaccine.

Contraindications

39. What are the contraindications to the COVID-19 mRNA vaccines?

Both COVID-19 mRNA vaccines are contraindicated in individuals with a history of anaphylactic reaction to a previous dose of the vaccine or to any component of the vaccine (e.g., polyethylene glycol (PEG)).





Clinical trials excluded individuals with a history of severe adverse reactions associated with a vaccine and/or severe allergic reactions to any component of the vaccine.

40. What are the potential allergens in the COVID-19 vaccines that are known to cause type 1 hypersensitivity reactions?

Both COVID-1 mRNA vaccines contain polyethylene glycol (PEG) which can be found in various products such as bowel preparation products for colonoscopy, laxatives, cough syrup, cosmetics, contact lens care solutions, skincare products and as an additive in some food and drinks. No cases of anaphylaxis to PEG in foods or drinks have been reported.

41. What if there is a suspected hypersensitivity or non-anaphylactic allergy to COVID-19 vaccine components?

Consultation with an allergist is advised if there is suspected hypersensitivity or non-anaphylactic allergy to COVID-19 vaccine components. If there is a specific concern about a possible allergy to a component of the vaccine being administered, the individual should wait for a 30 minute extended period of observation post-vaccination. Alternatively, the vaccine could be administered in an emergency room setting, also with a prolonged observation period.

Additional Resources

- 42. What are some additional resources for me or my patients?
 - Yukon Immunization Manual https://yukon.ca/en/immunization-manual
 - Moderna product monograph:
 https://www.modernacovid19global.com/ca/product-monograph.pdf
 - Pfizer-BioNTech product monograph: https://covid-vaccine-pm1-en.pdf
 - Government of Canada COVID-19 vaccine information:
 https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks/covid-19-vaccine-treatment.html





- Government of Yukon COVID-19 information: https://yukon.ca/en/covid-19-information
- Government of Yukon vaccine strategy: https://yukon.ca/sites/yukon.ca/files/hss/hssimgs/yukon_vaccine_strategy_fnl.pdf
- Government of Yukon common questions about the vaccine: https://yukon.ca/this-is-our-shot#common-questions
- Current NACI statements: https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci.html
- CANVAX: https://canvax.ca/covid-19-vaccine-questions-and-answers-healthcare-providers
- Society of Obstetrics and Gynaecology of Canada (SOCG) statement on COVID-19 vaccination in pregnancy: https://www.sogc.org/en/-COVID-19/COVID-19.aspx?hkey=4e808c0d-555f-4714-8a4a-348b547dc268
- American College of Obstetrics and Gynecology (ACOG) guidance on COVID-19 vaccination in pregnancy: https://www.acog.org/clinical/clinical-guidance/practice-advisory/articles/2020/12/vaccinating-pregnant-and-lactating-patients-against-covid-19
- Government of Canada immunization in pregnancy guide:
 https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-3-vaccination-specific-populations/page-4-immunization-pregnancy-breastfeeding.html

COVID-19 mRNA VACCINE SCREENING CHECKLIST

This resource is intended to assist healthcare providers while conducting an informed consent conversation and health assessment with a client. Questions listed below are related to the contraindications, precautions and special considerations for COVID-19 mRNA immunization, for which additional information can be found in the Yukon Immunization Manual - Section 8 - Biological Products.

CONTRAINDICATIONS: A condition in a recipient that increases the risk for a serious adverse event. In general, a vaccine should not be administered when a contraindication is present.	
1. Are you under the age of 5?¹	□ No □ Yes If yes, DO NOT VACCINATE
2. Do you have any allergies?	□ No □ Yes
2a. If yes to #2, do you have a known allergy to polyethylene glycol (PEG)? ²	□ No □ Yes If yes, DO NOT VACCINATE
2b. If yes to #2, have you had anaphylaxis or severe allergy from an <u>unknown</u> cause?	□ No □ Yes If yes, consider referral to specialist prior to immunization
3. Did you have any side effects after your last dose of COVID-19 vaccine? ³	□ No □ Yes If yes, and reportable AEFI, DEFER

In Yukon, 2 Pfizer vaccine products are available; one for ages 5-11 and one for 12-17. For 5-11 product, children must be 5 years of age minimum. For 12-17 product, the minimum age to get a vaccine is based on the year the client was born (i.e. born within year 2009). For 18+, Moderna is to be used.

PEG can be found in cosmetics, skin care products, laxatives, cough syrups, bowel preparation for colonoscopies, and as an additive in some processed foods/drinks. True PEG allergies are very rare.

¹*If client answers 'yes' to question 1 DO NOT VACCINATE.

²*If client answers 'yes' to question 2a: DO NOT VACCINATE.

³ If client answers 'yes' to question 3: and the AEFI is reportable, DEFER and submit an Adverse Events Following Immunization report in Panorama. Refer to the AEFI flow sheet for your facility or Section 13 of the Immunization Manual to determine if event is reportable.

PRECAUTIONS:	
A condition in a recipient that might increase the risk for a serious adverse reaction or might	
compromise the ability of the vaccine to produce immunity. When a precaution is present,	
further assessment and a risk-benefit analysis may be necessary.	
	□No□Yes
4. Do you have any problems with your	If yes, please provide client
immune system, or taking any medications	education AND determine need
that can affect your immune system? E.g.	for 3 rd dose (see 'Guidance for
high dose steroids, chemotherapy⁴	Third Dose of COVID-19 mRNA
	Vaccines')
5. Have you received monoclonal antibodies or	□ No □ Yes
convalescent plasma within the last 3	If yes, DEFER
months? ⁵	
6. Have you been diagnosed with Multisystem	
Inflammatory Syndrome in Children (MIS-C)	□No□Yes
or Adults (MIS-A) within the last 3	If yes, DEFER
months?6	
SPECIAL CONSIDERATIONS:	
	□ No □ Yes
7. Are you feeling ill today? ⁷	If yes, consider deferral
8. Have you ever felt faint or fainted after a	□ No □ Yes
past vaccination or medical procedure?	If yes, consider vaccinating lying
	down

⁴ **If client answers 'yes' to question 4:** mRNA COVID-19 vaccine series should be offered to individuals in the authorized age group who are immunosuppressed due to disease or treatment. Clients should be informed that they may have a reduced immune response and may require a 3rd dose to complete their primary series.

⁵ If client answers 'yes' to question 5: DEFER vaccination for at least 90 days following receipt of these antibody treatments. Deferral is not required following treatment with tocilizumab or sarilumab.

⁶ If client answers 'yes' to question 6: DEFER vaccination for at least 90 days following date of MIS-C or MIS-A diagnosis.

⁷ If the client has COVID-19 symptoms: DEFER, re-direct them to get COVID-19 testing and do not vaccinate.

Guidance for 3rd Dose of COVID-19 mRNA Vaccines

On September 10, 2021, the National Advisory Committee on Immunization (NACI) recommended an additional dose of a COVID-19 vaccine in some immunocompromised individuals, following a 1- or 2-dose primary series. Studies show that some individuals who are moderately to severely immunocompromised who did not respond to or who had a reduced immune response after two doses of an mRNA vaccine can have an increased immune response after a third dose of an mRNA vaccine.

Clients with moderate to severe immunosuppression in the Yukon will be offered a 3rd dose of COVID-19 vaccine beginning the week of September 20th 2021. This recommendation comes from the National Advisory Committee on Immunization (NACI), a/CMOH Dr. Catherine Elliot and the Yukon Immunization Program.

- Active treatment for solid tumour or hematologic malignancies
- Receipt of solid-organ transplant and taking immunosuppressive therapy
- Receipt of chimeric antigen receptor (CAR)-T-cell therapy or hematopoietic stem cell transplant (within 2 years of transplantation or taking immunosuppression therapy)
- Moderate to severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome)
- Stage 3 or advanced untreated HIV infection and those with acquired immunodeficiency syndrome
- Active treatment with the following categories of immunosuppressive therapies:
 anti-B cell therapies (monoclonal antibodies targeting CD19, CD20 and CD22),
 high-dose systemic corticosteroids (e.g., a prednisone dose of ≥ 2 mg/kg/day or
 ≥ 20 mg/day if weight > 10 kg, for ≥ 14 days), alkylating agents, antimetabolites,
 or tumor-necrosis factor (TNF) inhibitors and other biologic agents that are
 significantly immunosuppressive (e.g., cancer chemotherapy, radiation therapy,
 cytotoxic drugs, calcineurin inhibitors, biological response modifiers and
 antibodies that target lymphocytes).

When entering the immunization into Panorama, please ensure to select the appropriate reason for immunization: "YK-6 COVID - CMOH Approved Immunocompromised Reasons - see comments".

Populate the comments field with the name of the immunosuppressive condition, which qualifies the client for a 3rd dose.

FAQs for Third Dose of COVID-19 mRNA Vaccines

Why do immunocompromised clients require an additional dose?

A primary vaccine series is generally considered to be the number of initial doses of vaccine given to induce an immune response and provide initial protection. The general population develops a robust immune response to COVID-19 vaccines, however immunocompromised individuals have a weakened immune system due to disease or treatment. These individuals are shown to have a lower immune response to COVID-19 vaccines compared to the general public. Recent studies show that some individuals who are moderately to severely immunocompromised who did not respond/had a reduced immune response after 2 doses of mRNA vaccine can have an increased response after a 3rd dose; this also aligns with contributing to health equity in the territory.

What is the dosing schedule for these clients?

The 3rd dose of mRNA vaccine (Pfizer or Moderna) should be provided at 28 days after dose 2. Contact the Yukon Immunization Program if there are questions about unique circumstances.

Is this considered a booster dose?

No. A booster dose is used to boost the immune system when protection from a primary vaccine series shows signs of waning over time. The 3rd dose is the completion of a primary series for the clients that meet specific criteria.

Will other immunocompromised clients not on this list require an additional dose to complete their series?

Based on the most recent scientific studies, NACI does not recommend that clients outside of the list above require an additional dose. Guidance on the use of boosters for specific populations, such as long-term care residents, and the general population is being considered by NACI. Guidance will be updated as required.

Are there any safety concerns associated with administering an additional dose?

No safety concerns were identified in the scientific studies that NACI reviewed. Ongoing monitoring at both the territorial and national level will continue.

COVID-19 mRNA Vaccine Information

AGES 12+

Please read this information sheet carefully and ensure all your questions have been answered by a health-care provider before receiving the vaccine.

Please note there is a separate sheet for the Pfizer vaccine for 5 to 11 year olds.

How do mRNA vaccines work?

- mRNA vaccines teach your body to protect itself against COVID-19 without getting sick from the virus.
- The vaccine causes our body to produce antibodies to help keep us from becoming sick if we are exposed to the COVID-19 virus.

How are the vaccines given?

You need 2 (sometimes 3) doses of mRNA vaccines to get full protection. This is called your primary series. You will receive the vaccines in your upper arm (deltoid muscle).

- both Pfizer (Comniraty) and Moderna (Spikevax) first and second doses are recommended to be given 8 weeks apart. Emerging evidence shows that intervals of 8 weeks between the first and second doses of COVID-19 vaccine result in more robust and durable immune response and higher vaccine effectiveness.
- Booster doses: are given 6 months after the completion of the primary series.

What are the benefits of the vaccine?

- The vaccines are the best way to protect against COVID-19 infection.
- In clinical trials the vaccine prevented people from becoming sick with COVID-19 and from severe illness (hospitalization and death) with:
 - 95% efficacy for people aged 18 and older, and
 - 100% efficacy for people aged 12-17.

Who can get the COVID-19 vaccine?

In Yukon, there are three different types of mRNA vaccines available:

- Moderna (Spikevax) is available to adults 18 years of age and older.
- Pfizer (Comirnaty) vaccine is available to children 12-17 years of age.
- Pfizer (Comirnaty) pediatric vaccine is available to children 5 - 11 years of age.

Clients who are pregnant, breastfeeding, immunocompromised, or have an autoimmune condition, can get the vaccine. If you have questions, have a discussion with your health care provider about risks and benefits to help you make a decision.

Who should NOT get the vaccine?

- People under 12 years of age.
- Anyone with symptoms that could be due to COVID-19 should wait to be vaccinated so that they do not spread infection to others at the vaccine clinic. Talk with a health-care provider, call 811, or arrange to get tested for COVID-19.
- Anyone with a known allergy to polyethylene glycol (PEG)* or who has had an allergic reaction from an unknown cause.
- People who had a serious or allergic reaction to a previous dose of COVID-19 vaccine should talk to their health-care provider before getting their 2nd dose.

Note – people age 5 to 11 can get the pediatric version of the Pfizer vaccine. We have a separate information sheet on this vaccine. It is available at yukon.ca/en/vaccine-information-5to11

Note: Rare cases of inflammation of the heart have been reported after getting the Pfizer or Moderna vaccine. This has occurred more commonly after the second dose at a rate of about 1 per 100,000 second doses, and has been observed mostly in males under 30 years of age. This very rare reaction was not observed during the Pfizer (Comirnaty) clinical trials for those age 5 to 11. For more information visit www.yukon.ca/en/heart-inflammation-and-covid-19-mrna-vaccines



^{*} Polyethylene glycol (PEG) can rarely cause allergic reactions. It is found in products such as medications, bowel preparation products for colonoscopy, laxatives, cough syrups, cosmetics, skin creams, medical products used on the skin and during operations, toothpaste, contact lenses and contact lens solution. PEG also can be found in foods or drinks, but is not known to cause allergic reactions from foods or drinks.

COVID-19 Pfizer (Comirnaty) vaccine information

5-11 YEAR OLDS

Please read this information sheet carefully and ensure all your questions have been answered by a health-care provider before your child receives their vaccine. This information sheet is specifically for the Pfizer pediatric vaccine for children age 5 to 11. There is another information sheet for those age 12 and older.

What vaccine will my 5 to 11 year old child receive?

Your child will receive the Pfizer (Comirnaty) pediatric COVID-19 vaccine.

- Children age 5 to 11 receive 10 micrograms per dose.
- Youth age 12 and older receive 30 micrograms per dose.
- If your child turns 12 in between dose one and dose 2, they will receive 30 micrograms for their second dose.

How is the vaccines given?

Your child will need 2 doses of the Pfizer (Comniraty) vaccine to get full protection. This is called the primary series.

Your child will receive the vaccine via a needle in their upper arm (deltoid muscle). The vaccine doses are recommended to be given 8 weeks apart. Evidence shows an 8 week interval between first and second doses results in:

- stronger immune response
- higher vaccine effectiveness that is expected to last longer
- fewer side effects

How does the Pfizer mRNA vaccine work?

- mRNA vaccines teach your body to protect itself against COVID-19 without getting sick from the virus.
- The vaccine causes your body to produce antibodies to help keep you from becoming sick if you are exposed to the COVID-19 virus.

What are the benefits of the vaccine?

 Vaccines are the best protection against COVID-19 infection. In clinical trials, the vaccine prevented children age 5 to 11 from becoming sick with COVID-19 and from severe illness (hospitalization and death) with 90.7% efficacy.

Who can get the COVID-19 vaccine?

COVID-19 vaccines have now been approved for those age 5 and older. In the Yukon the following COVID-19 vaccines are available:

- Children between age 5 to 11 receive the Pfizer (Comirnaty) pediatric vaccine, in doses of 10 micrograms.
- Youth age 12 to 17 receive the Pfizer (Comirnaty) vaccine, in doses of 30 micrograms.
- Adults age 18 and up receive the Moderna (Spikevax) vaccine.

Who should not receive a COVID-19 vaccine?

- Anyone age 4 or younger. There are currently no COVID-19 vaccines approved for children in this age range.
- Anyone with symptoms that could be due to COVID-19 should wait to be vaccinated so that they do not spread infection to others at the vaccine clinic. Talk with a health-care provider, call 811, or arrange to get tested for COVID-19.
- Anyone with a known allergy to polyethylene glycol (PEG)* or who has had an allergic reaction from an unknown cause should speak with their health care provider.
- People who had a serious or allergic reaction to a previous dose of COVID-19 vaccine should talk to their health-care provider before getting their 2nd dose.

Note: Rare cases of inflammation of the heart have been reported after getting mRNA vaccines. This has occurred more commonly after the second dose at a rate of about 1 per 100,000 second doses, and has been observed mostly in males under 30 years of age.

This very rare reaction was not observed during the Pfizer (Comirnaty) clinical trials for those age 5 to 11.

For more information visit www.yukon.ca/en/heart-inflammation-and-covid-19-mrna-vaccines

^{*} Polyethylene glycol (PEG) can rarely cause allergic reactions. It is found in products such as medications, bowel preparation products for colonoscopy, laxatives, cough syrups, cosmetics, skin creams, medical products used on the skin and during operations, toothpaste, contact lenses and contact lens solution. PEG also can be found in foods or drinks, but is not known to cause allergic reactions from foods or drinks.

COVID-19 mRNA Vaccine After Care

FOR AGES 5 AND UP

Wait at the clinic for at least 15 minutes after receiving your vaccine. You may be asked to wait 30 minutes if there is concern about a possible vaccine allergy.

Expected vaccine side effects:

You may experience the following side effects 1-2 days after getting the vaccine:



Pain, redness, itchiness or swelling*



Swelling or tenderness in the armpit*



Tiredness or headache



Fever or chills



Muscle or joint soreness



Nausea and vomiting

Tips for side effects

Sore arm: apply a cool, damp cloth or wrapped ice pack.

Pain or fever: take medication such as acetaminophen or ibuprofen.
Check with your health-care provider if you need advice about medication.

Rare events after getting a vaccine:

Rare cases of heart inflammation have been reported with the mRNA vaccines. Monitor for 7 days after vaccine:

- Chest pain
- · Shortness of breath
- Feeling of a fast-beating, fluttering, or pounding heart that does not go away with rest or is accompanied by other symptoms.

Please note this rare event was not seen in the Pfizer clinical trials for 5 to 11 year olds.

Symptoms to look out for

* may appear right away, or a week or more later

- Serious side effects are rare. If you develop serious side effects or a severe allergic reaction (including hives, swelling of your face, tongue or throat, or difficulty breathing) seek medical attention or call 911 right away.
- Some of the side effects of the vaccine are similar to symptoms of COVID-19 infection, while others are
 not. Runny nose, sore throat and cough are not side effects of the vaccine. It is important not to assume
 that all symptoms are due to the vaccine.
- If you received the vaccine and experience symptoms of COVID-19, and you are a contact of someone
 with COVID-19, self-isolate and arrange for testing as soon as possible. Use the online <u>COVID-19 Self-</u>
 Assessment Tool or call 811.

When should I get my next dose?

2nd dose:

- Pfizer (Comirnaty) vaccine for ages 5 to 17: 8 weeks after your first dose.
- Moderna (Spikevax) vaccine for ages 18 and up: 8 weeks after your first dose.

3rd dose: (for those aged 12 years and older):

 Only for those with moderate to severe immunosuppression given 4 weeks after your second dose.

Booster dose: (Not for 5 to 17 year olds). Check eligibility at www.yukon.ca/this-is-our-shot

• At least 6 months after the completion of your primary series.

primary series



If you want to participate in safety monitoring for COVID-19 vaccines visit: canvas-covid.ca
For more information please visit: yukon.ca/en/covid-19-vaccine



Information on mRNA COVID-19 vaccines for people who are breastfeeding or pregnant

Key information

Public health and immunization experts in the Yukon and across the country are recommending that pregnant and breastfeeding people be vaccinated against COVID-19.

Recently published safety analyses have shown that the mRNA COVID-19 vaccines are safe and effective for these people to the same degree as for the general adult population.

There is a long history of safe use of other vaccines during pregnancy or while breastfeeding.

Making your decision

In Yukon, people who are pregnant or breastfeeding are recommended to receive the COVID-19 vaccine.

The decision to get the vaccine is a personal one. When making your decision, you should understand the risks. The risk of getting sick with COVID-19 outweighs any risk of harm from receiving the vaccine while pregnant or breastfeeding.

You can talk to your health care provider as you make your decision. They will be able to:

- share the latest information about the use of the vaccine in pregnant or breastfeeding individuals;
- talk through your medical status and risk of exposure to COVID-19; and
- review other information about risks and benefits of vaccination.

What we know

There is a long history of safe use of other vaccines during pregnancy or while breastfeeding. The effectiveness and safety of both the Moderna and Pfizer-BioNTech COVID-19 vaccines are similar for people who are or aren't pregnant or breastfeeding. There are no known concerns about harm related to this vaccine for people who are pregnant or breastfeeding, or for their infants.

People who are pregnant or lactating were originally not included in large numbers as participants in early clinical trials. Additional evidence is now available from real-world use of COVID-19 vaccines, primarily mRNA vaccines, in these populations. For example, recently published safety analyses included 35,691 pregnant women in the United State who received an mRNA COVID-19 vaccine without any obvious safety signals. This evidence showed that COVID-19 vaccines are safe in these populations so NACI recommendations for these populations are now the same as for the general adult population.

Higher risk of severe COVID-19 symptoms if infected

The majority of people, including pregnant people, who are infected with COVID-19 have mild symptoms. However, pregnant patients are more likely to experience serious symptoms and outcomes.

Have a discussion with your health care provider to help you make an informed decision.

For more information visit: www.pregnancyinfo.ca/covid/

