FRESENIUS KIDNEY CARE

Understanding the facts about the COVID-19 vaccines and updated booster

MYTH: People on dialysis are not at a greater risk for COVID-19 complications.

FACT: This is not true. People on dialysis have compromised immune systems, which means it's harder to protect yourself from getting COVID-19 and harder to fight off COVID-19 if you are infected. Research shows that about 63% of unvaccinated people on dialysis have been hospitalized with COVID-19.[1] It's especially important to get fully vaccinated, including your updated booster, to strengthen your immune system against COVID-19.

MYTH: The COVID-19 vaccines are not effective against variants.

FACT: This is not true. Even though some of the variants are more contagious, the vaccines remain effective in preventing severe illness, hospitalizations, and death. People who are vaccinated and boosted are 68 times less likely to die from COVID-19 than people who are not vaccinated.[2] The more people who get vaccinated, the better chance we have to stop the spread of COVID-19 and prevent variants from developing.

MYTH: After I get my primary COVID-19 vaccine series, I won't need any more doses.

FACT: That is not true. All individuals should stay up to date with their COVID-19 vaccination by completing a primary series and receiving the recommended booster. For individuals who are immunocompromised, it is recommended that they receive a third dose as part of the primary series. Whether a two-dose or three-dose primary series is received, it is recommended that all individuals receive the updated booster vaccine at least two months after the initial series or the last dose of a previous monovalent booster dose.

MYTH: I already got my first COVID-19 vaccine series, so I don't need any boosters.

FACT: This is not true. Immunity from your first vaccine(s) may lessen over time and new variants will likely emerge. Boosters help restore protection that has decreased since your previous vaccination and provide better defense against newer variants (like Omicron).

MYTH: I won't need to wear a mask after I get the COVID-19 vaccines or updated booster.

FACT: This is not true. Current CDC guidelines recommend masking if you're at increased risk of getting a severe case of COVID-19; if there is a high level of COVID-19 spreading in your community; if certain locations (e.g., healthcare settings or facilities) require or request them; or for your personal comfort level.

MYTH: You don't need the vaccine if you already had COVID-19.

FACT: This is not true. If you were previously infected with COVID-19, your natural immunity may not be as effective against new variants. After being infected with COVID-19, there is an immune response in protection for about six months but it is not as strong as protection from the vaccine. Your immune response is about eight times higher with the vaccine and immunity is going to last longer than natural immunity. Vaccines add protection to natural immunity after infection and reduce risk to previously infected individuals.

MYTH: The COVID-19 vaccines have many serious side effects.

FACT: This is not true. Serious side effects that could cause a long-term health problem are extremely unusual following any vaccination, including COVID-19. The CDC reports that the risk of experiencing a serious side effect is less than 0.0022%.[4] The vaccine benefits far outweigh the known potential risks of becoming infected with COVID-19.[4] More than 80% of people in the United States have safely received at least one vaccination against COVID-19.[5]

MYTH: There are COVID-19 treatments available so I don't need the vaccine.

FACT: This is not true. There are few treatments that are recommended for people with kidney disease. Even though these treatments work to reduce the severity of symptoms, it's not a reason to not get vaccinated. The best prevention and protection against COVID-19 is to be fully vaccinated. We will continue to monitor treatment therapies as they become available.

MYTH: The COVID-19 vaccines are not safe because they were rapidly developed.

FACT: This is not true. In public health emergencies, like the global COVID-19 pandemic, the development process may be sped up and still meet the FDA's rigorous and science-based standards for quality, safety, and effectiveness. COVID-19 vaccine development began in January 2020, shortly after the virus's genome sequence was identified and shared globally among US and international governments, scientists from universities, nonprofit organizations, and pharmaceutical companies.

MYTH: COVID-19 vaccines can give you COVID-19 and will alter your DNA.

FACT: This is not true. The vaccines were not made with the COVID-19 virus and therefore cannot transmit the virus. They deliver instructions to cells to make a protein to fight off the virus, and they never enter the nucleus of the cell, which is where our DNA is located. The vaccines cause a natural response in the body to develop immunity to the disease.

MYTH: The COVID-19 vaccines will impact my reproductive health, limiting my chances to have children.

FACT: This is not true. According to the CDC, current research and data suggest that the benefits of being vaccinated outweigh any known potential risks of vaccination during pregnancy. Developing research continues to show that it's safe to receive COVID-19 vaccination during pregnancy. Currently there is no evidence showing that any vaccines cause fertility problems in women or men.

1 Taji L, Thomas D, Oliver MJ, Ip J, Tang Y, Yeung A, Cooper R, House AA, McFarlane P, Blake PG. COVID-19 in patients undergoing long-term dialysis in Ontario. CMAJ 2021 Feb 22;193(8):E278-E284.
2 covid.cdc.gov/covid-data-tracker/#rates-by-vaccine-status
3 assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1045619/Technical-Briefing-31-Dec-2021-Omicron_severity_update.pdf
4 cdc.gov/coronavirus/2019-ncov/vaccines/safety/safety-of-vaccines.html
5 cdc.gov/coronavirus/2019-ncov/covid-data/covidview/index.html