

Q&A on vaccination during the COVID-19 pandemic





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

WHO recommends that all routine vaccinations be administered as scheduled, even during the COVID-19 pandemic. There is currently no evidence that the COVID-19 pandemic poses any specific risk linked to vaccination. Evidence for other infectious diseases is therefore applied. This evidence suggests that potential contact with an infectious disease is not a contraindication for routine immunization (1). 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 health facility.

It is especially important that children receive all the vaccines scheduled at birth and in the first two years of life (2). These vaccines may vary according to national recommendations. Any interrupted immunization services for any age groups should be resumed and catch-up vaccinations offered as quickly as possible. Timely vaccination is key to protect young and old from serious and life-threatening infectious diseases, and to avoid the accumulation of unvaccinated groups and potential loss of community immunity (1).



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

COVID-19 is a new disease for which information is still being gathered. However, based on experience with other infectious diseases, vaccination against one disease does not weaken a person's immune response to another disease (3), (4), (5). There is currently no evidence that vaccination would increase the risk of a child becoming infected with COVID-19 or affect the course of the disease in a child who has been inadvertently vaccinated during the asymptomatic phase or incubation period.

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 measures will minimize any potential risk of children getting COVID-19.

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

Any disruption of immunization services, even for short periods, would leave a community and especially children at immediate risk of VPDs (6). By adding to the number of susceptible individuals already present in a community, this would put community 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 health-care systems already strained by the response to the COVID-19 outbreak.



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Is it dangerous to vaccinate a child during the incubation period of COVID-19?

There is currently no specific evidence regarding COVID-19 and vaccination, and general principles of vaccination of patients with infectious diseases should be applied. According to these principles, vaccination will not influence the course of infectious disease in a child who might already be infected but who is not yet symptomatic at the time of vaccination, or a child who becomes infected soon after vaccination. Neither will the child's potential infection influence the safety or efficacy of the vaccine that is administered (1), (7).



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Is COVID-19 a contraindication for vaccination?

Mild symptoms such as fever and/or cough are not necessarily a contraindication for vaccination (1). In line with normal procedures, the health-care provider should make recommendations based on a risk–benefit assessment (severity of symptoms and risk and severity of VPDs). If the practitioner decides against vaccination on that day, the normal vaccination schedule for the child should be resumed as soon as possible after he or she recovers.

It is important that anyone who has tested positive for COVID-19 remains isolated in line with national recommendations to ensure that they do not infect others and contribute to further spread of the virus.



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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 time. Over 100 candidate vaccines are in clinical trials or preclinical evaluation (8). WHO is working with all stakeholders to ensure that once a safe and effective vaccine becomes available it will be equitably distributed. Now more than ever, all health-care workers should ensure that they are up to date with the recommended vaccinations according to their national schedules (9).



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How many days after a negative COVID-19 test can vaccines be administered?

At the moment, there is no specific evidence of a potential impact of COVID-19 on vaccination response or vice versa. Systematic COVID-19 testing before routine vaccination is not currently required or recommended. Any patient with a negative COVID-19 test can be vaccinated at any time if their clinical condition allows.



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How many days after a negative COVID-19 test can the tuberculin test be administered?

There is no known interference between the COVID-19 test or COVID-19 and the tuberculin test.

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Does the BCG vaccine protect against COVID-19?

In addition to preventing tuberculosis infection, the bacille Calmette–Guérin (BCG) vaccine has beneficial effects on the immune system that protect against a wide range of other infections, and the vaccine is used routinely to treat bladder cancer. Two clinical trials are underway to look at whether the BCG vaccine could have a role in protecting health-care workers and other vulnerable individuals against severe COVID-19, but so far there is no evidence that the BCG vaccine protects people against infection with the novel coronavirus. WHO therefore does not recommend BCG vaccination for the prevention of COVID-19. WHO continues to recommend neonatal BCG vaccination in countries or settings with a high incidence of tuberculosis.

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References

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