Addressing Parent Questions About COVID Vaccines in Children

• Are the COVID vaccines SAFE for children?
  o COVID vaccines are subject to the most intensive safety monitoring of vaccines in US history.
  o The mRNA technology behind the Pfizer vaccine is not new and has been under development for decades (since 1961 with the first clinical trial in 2001).
  o Over 400 million doses of the Pfizer-BioNTec vaccine have been given in the US to date.
  o In the clinical trials with children 5-11 years old, no vaccine related serious safety events were reported.
  o Due to the robust immune response we see in children, the dose of the vaccine for children is lower but is just as effective as the larger dose in adult vaccines.

• Do children even NEED the COVID vaccine?
  o Only about 43% of our children have natural immunity to COVID.
  o Natural immunity can wane over time and getting the vaccine even after COVID-19 infection can strengthen the immune response.
  o Hospitalization rates for COVID are higher than the flu.
  o 30% of children hospitalized for COVID were previously healthy and had no underlying medical conditions.
  o There have been over 600 pediatric deaths reported with nearly 100 of those in the 5-11 years old population, making COVID-19 one of the 10 leading causes of death in this age group.
  o There have been over 5,200 cases of MIS-C, a life-threatening condition in children that is due to COVID. The highest number of cases of MIS-C occur in the school age population.
  o Long COVID occurs in 7-8% of children.
  o Children carry and transmit the virus to others in the home and/or school settings at the same rates of older teens and adults.

• What are the vaccine SIDE EFFECTS in children?
  o Your child may experience side effects like other childhood vaccinations including pain at the injection site, headache, muscle or joint pain, and/or tiredness, especially after the second shot. This is a sign that their immune system is working. Additional side effects reported include swollen lymph nodes and rash.
  o In the clinical trials, kids experienced fever and chills following the vaccine much less often than adults and teens.
To minimize side effects, you may consider giving your child Tylenol (acetaminophen) 30 minutes prior to the vaccination and may continue every 4-6 hours if needed following the vaccine. Please refer to dosing guidelines and follow any recommendations from your child’s doctor.

- The vaccine does not cause infertility in males or females and many women have become pregnant after receiving the vaccine.

**What about the association of the vaccine with the heart condition MYOCARDITIS?**

- Myocarditis (inflammation of the heart muscle) has been linked to mRNA vaccines. It is very rare with an estimated rate of 26 cases per one million vaccines given.
- Myocarditis occurs more commonly in male teens and following the second dose.
- Vaccine associated myocarditis is milder and less frequent than COVID-19 associated myocarditis.
- Cases of myocarditis have had full recovery with NO deaths

**Does the vaccine alter my child’s DNA?**

- It is biologically impossible for the mRNA vaccine to alter yours or your child’s DNA. The vaccine does not contain the necessary enzymes and proteins to allow it to alter or insert into DNA.
- The mRNA doesn’t even enter your cell’s nucleus, but only uses your cell’s protein-making machinery to start the process that leads to antibody production for your protection. Then once it does its job, the mRNA is gone.

**WHERE can I get a vaccine for my child?**

- Start by checking with your child’s doctor or clinic.
- If your child’s doctor’s office does not have the vaccine, you may check at your local health department, other surrounding medical clinics, or retail pharmacies. In addition, some schools may be able to provide vaccines.

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Adapted from Center for Disease Control and Prevention and Your Local Epidemiologist (Dr. Katelyn Jeteling, MPH, PhD)