



# Vaccination for COVID-19: Myths & facts and experiences of medical experts

illness to Wellness

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*Thank you....*

We extend our deepest gratitude for the individuals that contribute to the health of our community and have invested their life in caring for others. Amidst this pandemic our frontline workers are the true heroes, leading the relentless fight to keep us safe.

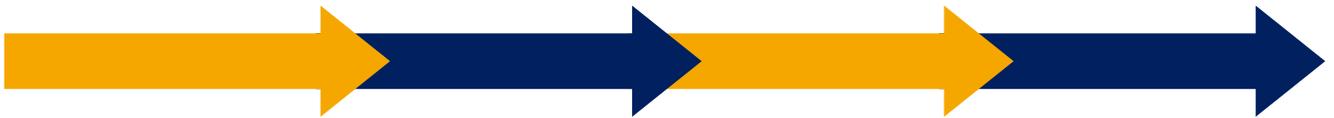


# Vaccination for COVID-19 - Myths & facts and experiences of medical experts

ASSOCHAM Foundation for Corporate Social Responsibility (AFCSR) launched a national awareness programme, 'Illness to Wellness', to promote healthy living in association with SAVLON. The series aimed to educate people across India and abroad about various health-related matters, especially amidst the COVID-19 pandemic. In addition, multiple experts were invited to share insights on precautions, treatments, and related issues.

In March 2021, ASSOCHAM organized webinars discussing Myths and facts of the vaccination, wherein medical experts shared their experiences. Expert panelists also discussed how India could deal with the situation and contain the pandemic and minimize the impact on human life and businesses.

India began the administration of COVID-19 vaccines on January 16, 2021, in the following phases:



The first phase of the rollout focused on the health workers and frontline workers, including police, sanitation workers, paramilitary forces, and disaster management volunteers.

The second phase of the vaccination focused on inoculating:

- All citizens over the age of 60
- People between the ages of 45 and 60 with one or more qualifying comorbidities
- Any health care or frontline worker that did not receive a dose during phase 1

From April 1, 2021, citizens above 45 years (born before January 1, 1977) became eligible to get the COVID-19 vaccine.

From May 1, 2021, all citizens above 18 years became eligible to get the COVID-19 vaccine.



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Efficacy of vaccine is established when it is tried in several phases, first in an experimental setting, i.e., in animals, then it goes to phase 1 trial and is tested on few individuals - usually less than 100 humans. In this phase, when the vaccine is administered, the individual is tested for immunogenicity to check for the formation of antibodies by conducting various experimental tests. Phase 2 is usually conducted on 100 individuals, and phase 3 is conducted on 1000s of people.

Efficacy is usually tested through a blood test to check the formation of antibodies is produced or through a follow up with the individuals for a period of 6 months or one year. The second method assesses the number of vaccinated people developing the infection in comparison to those who have not been inoculated or had suffered the COVID-19 infection.

The efficacy of Pfizer and Moderna is 95 per cent and 94 per cent, respectively. Phase 3 trial of India-developed Covaxin was conducted on 25,800 participants, and it demonstrated interim clinical efficacy of 81 per cent.

Vaccines are made in platforms, such as Whole-Virion Inactivated Vero Cell and messenger RNA (mRNA). mRNA technology has been developed for the last 10-12 years. Moderna and Pfizer are based on the mRNA platform. In this

technology, the body produces spike protein and then produces antibody against it. It must be noted that the COVID-19 virus has reached the mutation stage. Mutations are random, which allow the virus to spread faster. In mRNA-based vaccines, if a variant becomes a 'vaccine escape mutant', then it can beat the vaccine, impacting the efficacy of the vaccine in the case of a new mutant.

Covaxin is developed using Whole-Virion Inactivated Vero Cell-derived platform technology. Such inactivated vaccines do not replicate and are hence unlikely to revert and cause pathological effects. They contain dead virus, incapable of infecting people but still able to instruct the immune system to mount a defensive reaction against an infection. Analysis from the National Institute of Virology indicates that vaccine-induced antibodies are successful in neutralizing the UK variant strains and other heterologous strains.

**MoHFW website provides detailed information - vaccine registration, eligibility criteria, process of vaccination and what to expect before and after vaccination.**

**Aarogya Setu mobile app was developed for tracking the COVID cases. It also includes information related to the virus, help centres, self-assessments tests.**

## Panelist views

Lack of herd immunity in the population and lack of adherence to COVID-19 appropriate behaviour led to the **surge in COVID cases**.

Both **Covishield and Covaxin, are safe**, though mild fever, fatigue and allergic reaction can happen after any vaccination. The Drug Controller General of India (DCGI) approved the Sputnik V COVID-19 vaccine for emergency use on 13th April 2021.

**People suffering from diseases such as cancer should get vaccinated** as they are at high risk of getting infected with the virus. Asthma and eczema patients can also get COVID-19 vaccination without any hesitation.

There is a set **protocol for people taking anticoagulants**, depending on the International Normalized Ratio (INR) level. The INR range should be shared with the doctor on duty, for effective decision on vaccination.

Patients with **comorbidities should share information on their treatment and drugs** with the doctor. Often, such people have a higher change to getting fever post vaccination; hence paracetamol can be taken in advance.

The experts emphasized the **importance of the public health measures being strictly followed**, till India achieves herd immunity.

**Community behaviour would have to be transformed** through targeted campaigns, encouraging people to wear masks and maintain social distance.

All healthcare stakeholders should ensure consistent efforts towards **contact tracing, data analysis, and modelling**, forecasting to better trace and estimate trends that can help mitigate the contagion's exponential spread.

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The Content is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of a physician or other qualified health provider with any questions regarding a medical condition.

## Panel experts

- Shri Anil Rajput, Chairman, ASSOCHAM CSR Council
- Dr. Gopi Chand Khilnani, Chairman, PSRI Institute of Pulmonary Critical Care & Sleep Medicine
- Dr. Padmashri Saumitra Rawat, Chairman and Head Surgical Gastroenterologist & Liver Transplant, Sir Ganga Ram Hospital, New Delhi. Member and Court of Examiner, Royal College of Surgeons of England
- Dr. Rajendra K. Dhamija, Head of Neurology Department, Lady Hardinge Medical College, New Delhi
- Prof T Jacob John, Virologist and Paediatrics, Former Professor at Christian Medical College, Vellore
- Dr Rajesh Kesari, Founder and Director, Total Care Control

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