

Potential coronavirus vaccine: 5 things doctors want patients to know



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Sara Berg, MS

News Editor

Misleading or false information complicates COVID-19 pandemic response efforts, especially as scientists begin to clear a path to a potential coronavirus vaccine. But physicians can help combat misinformation by providing patients with key information they should know about a potential COVID-19 vaccine.

Two AMA members took time to discuss what they want patients to know about a potential COVID-19 vaccine to clear up any misinformation. They are:

- Diana Ramos, MD, an ob-gyn and adjunct associate professor of obstetrics and gynecology at Keck School of Medicine of the University of Southern California.
- Wayne Grody, MD, professor of human genetics, pathology and pediatrics at the University of California, Los Angeles David Geffen School of Medicine.

Drs. Ramos and Grody are also members of the AMA Ambassador Program, which equips individuals with the skills and knowledge to confidently speak to the AMA's initiatives and the value of membership. The program also increases overall awareness about what the AMA does for physicians and their patients.

Here is what these physician experts had to say about a COVID-19 vaccine.

Trust public health leaders on vaccine's timing

"There's a lot happening and many times we are not aware of all of the information that is in the works," said Dr. Ramos. "To know the details for every single vaccine that is occurring is a full-time job."

“That’s where we have to trust our public health leaders who are our trusted voices in medicine to help provide us with the best-informed information,” she added.

Learn more with the AMA about [how the FDA plans to build physician trust for COVID-19 vaccine](#).

Distribution will depend on vaccine production

“We’re hearing preliminary information that it’s going to be first responders who are going to be first in line to receive the vaccine,” said Dr. Ramos. But “nothing is final and it’s going to be dependent upon the production of the vaccine.

“There are two groups most at risk: health care workers and then the otherwise vulnerable elderly in nursing homes,” said Dr. Grody. “I hope it would be both of those groups.”

Learn with the AMA [how ethics and equity will drive who gets the coronavirus vaccine first](#).

A vaccine doesn’t mean full immunity

“You can’t assume that every microorganism is going to give immediate lifelong immunity. People can get reinfected,” said Dr. Grody. “It works for some diseases like hepatitis B, but that doesn’t seem to be working that well for COVID-19.”

“There’s certainly antibodies to the virus, which can be detected in the lab, but they—at least as far as we can tell—don’t necessarily kill the virus or inactivate it,” he said. “That’s why you can get reinfection. The antibodies that are naturally produced by the body may not be uniformly fatal (“neutralizing”) to the virus.”

“Even if they are, they may not last long enough,” said Dr. Grody. “Some studies have shown within weeks the levels are way down and that’s not good for either herd immunity or a vaccine.”

Diverse volunteers are needed for trials

“We want the clinical trials to be reflective of the population in the U.S.,” said Dr. Ramos. “If we look at the data right now with COVID, those who are of color are the ones that are unfortunately getting the hardest consequences of being infected.”

“To have a population of Hispanics in the clinical trials, it just would make it easier to speak to other Hispanic patients and let them know there were other patients that look just like you and I in this clinical trial and they were fine,” she said.

Read this Q&A about [why this Black doctor volunteered for coronavirus vaccine trial](#). Patients and physicians can learn more about volunteering for SARS-CoV-2 vaccine trials at the [COVID-19 Prevention Network](#), a project of the National Institute of Allergy and Infectious Diseases.

Keep taking preventive measures

When a vaccine is available, “there may be some frustration because we’re not all going to be able to get it and you’ll want to get it,” said Dr. Ramos. “It’s just going to be a matter of continuing the public health measures, which are six-foot distancing, wearing a mask and continuous hand-washing.”

“How normal life gets is a matter of government and personal responsibility,” said Dr. Grody. “The countries that have done that have recovered from the initial outbreak. The ones who don’t take responsibility—like us and many others—are still in the thick of it.”

Learn more about [eight coronavirus tips that doctors want patients to follow](#).