

Messenger

A quarterly publication by the Missouri Catholic Conference



Hope on the horizon

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*With the new availability of COVID-19 vaccines, **there is hope on the horizon for an end to the global pandemic.** In this edition of Messenger, we address your questions about the vaccines from both a Catholic and scientific perspective. Accompanying this printed Messenger is a new episode of our podcast, MCC from the Capitol, in which MCC Executive Director Tyler McClay interviews Bishop W. Shawn McKnight of the Diocese of Jefferson City and Dr. Keith Starke, internist and Senior Advisor in the Office of Clinical Excellence at Mercy.*

A Word from the USCCB: *Can Catholics Take COVID Vaccines?*

The short answer is yes. Some Catholics have expressed concerns about taking COVID-19 vaccines because of reports that the vaccines approved for public use in the U.S. have an association with unethical cell lines from aborted fetal tissue used in either the development, production, or testing of the vaccines. On December 11, 2020, Bishop Kevin C. Rhoades, Chairman of the USCCB Committee on Doctrine, and Archbishop Joseph F. Naumann, Chairman of the USCCB Committee on Pro-Life Activities, prepared a memorandum entitled “*Moral Considerations Regarding the New COVID-19 Vaccines.*” In this memorandum, they state “[g]iven the urgency of the current crisis, the lack of available alternative vaccines, and the fact that the connection between an abortion that occurred decades ago and receiving a vaccine produced today is remote, inoculation with the new COVID-19 vaccines in these circumstances can be morally justified.”

Pfizer and Moderna

The Pfizer and Moderna vaccines do not use morally compromised cell lines in the design, development, or production of the vaccine. Moreover, there are no cells from the unethical cell lines in the vaccines themselves. A confirmatory test employing a commonly-used, but morally compromised, cell line (HEK293) was used to test the effectiveness of both the Pfizer and Moderna vaccines. Bishop Rhoades and Archbishop Naumann stated, however, “[i]n view of the gravity of the current pandemic and the lack of availability of alternative vaccines, the reasons to accept the new COVID-19 vaccines from Pfizer and Moderna are sufficiently serious to justify their use, despite their remote connection to morally compromised cell lines. In addition, receiving the COVID-19 vaccine ought to be understood as an act of charity toward the other members of our community. In this way, being vaccinated safely against the COVID-19 should be considered an act of love of our neighbor and part of our moral responsibility for the common good.”

AstraZeneca

With regard to the AstraZeneca vaccine, Bishop Rhoades and Archbishop Naumann stated “[t]he AstraZeneca vaccine is more morally compromised. The HEK293 cell line was used in the design, development, and production stages of that vaccine, as well as for confirmatory testing.” Thus, they point out, “[t]he AstraZeneca vaccine should be avoided if there are alternatives available.” Like the Pfizer and Moderna vaccines, the AstraZeneca vaccine itself does not include cells taken from an aborted child. Rather, cells from the compromised cell lines are stimulated to produce the chemicals necessary for the vaccine. “It is not as if the making of the vaccine required ever more cells from ever more abortions.”

Some may face a situation in which they are only offered the choice of the AstraZeneca or another morally-compromised vaccine. This should not prevent Catholics, however, from getting vaccinated. Bishop Rhoades and Archbishop Naumann point out, “[i]t may turn out, however, that one does not really have a choice of vaccine, at least, not without a lengthy delay in immunization that may have serious consequences for one’s health and the health of others.” “In such a case,” they state, “it would be permissible to accept the AstraZeneca vaccine.”

Q&A

ANSWERING YOUR COVID-19 VACCINE QUESTIONS.

Medical experts at the Missouri Department of Health and Senior Services have curated a list of some commonly asked questions and answers about the COVID-19 vaccine. The Q&As below are just a segment of that list — to view more information about COVID-19 vaccines, head to covidvaccine.mo.gov/facts.

How do I know that a COVID-19 vaccine will be safe? America's best medical and research professionals have been working for years on coronavirus vaccines for SARS and MERS. SARS and MERS are different than COVID-19 but belong to the coronavirus family. The lessons learned through those developments are being applied today. Specifically, the effort to develop a COVID-19 vaccine began months ago.

Clinical trials are an important part of determining vaccine safety and efficacy. Currently, Pfizer and Moderna have completed Phase 3 clinical trials involving many thousands of participants. The trials determined the safety and efficacy of the vaccines in thousands of participants. The purpose of clinical trials is to generate scientific data and other information for the Food and Drug Administration to review and base their recommendations on.

Vaccine safety monitoring systems are in place to collect side effect data. If an unexpected adverse event is seen, experts quickly study it further to assess whether it is a true safety concern. Experts then decide whether changes are needed in U.S. vaccine recommendations. This monitoring is critical to help ensure that the benefits continue to outweigh the risks for people who receive vaccines.

Do I have to get the same vaccine for the first and second doses?

Yes, patients must receive the same vaccine for both the first and second doses. Your vaccination provider will give you a vaccine card stating the manufacturer name and other critical information you will need for a second dose.

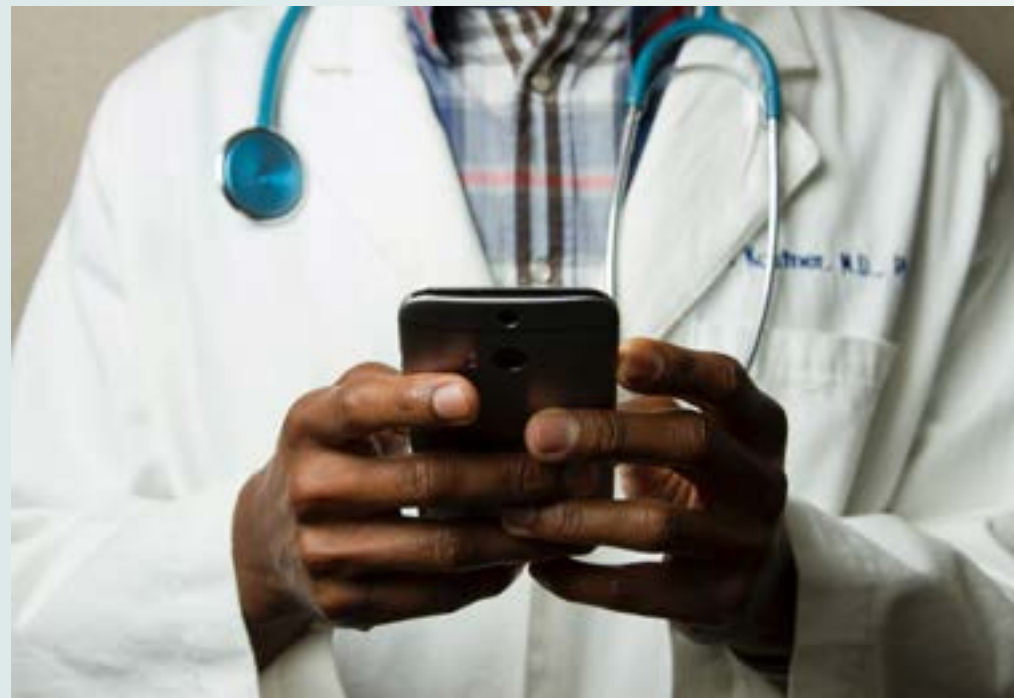
Who is not recommended for the Pfizer and Moderna vaccine?

Pfizer's vaccine was approved for those age 16 and older. Moderna's vaccine has been approved for those 18 and older.

The vaccines are not recommended for individuals who have experienced a serious reaction (e.g., anaphylaxis) to a prior dose of a COVID-19 vaccine or to any of its components. For information on vaccine components, refer to the manufacturers' package inserts from Pfizer and Moderna.

What ingredients are used in the COVID-19 vaccines? The ingredients used in the mRNA vaccines developed by Pfizer and Moderna are simple. They contain mRNA, as well as lipids to ensure safe delivery of the mRNA that will initiate an immune response. Although FDA approved adjuvants (aluminum salts) and preservatives (ethylmercury) have a history of safe use in vaccines, they were not used by Pfizer and Moderna in this vaccine technology. Additionally, the vaccines do not include fetal tissue.

What are the possible side effects of a COVID-19 vaccine? Among vaccine recipients during the Pfizer clinical trials, 8.8% reported



experiencing any reaction they considered to interfere with daily activity; the most common symptoms were fatigue (4.2%), headache (2.4%), muscle pain (1.8%), chills (1.7%), and injection site pain (1.4%). Of note, more people experienced these side effects after the second dose than after the first dose.

Among vaccine recipients during the Moderna clinical trials, 9.1% reported local injection site reaction and 16.5% reported side effects with the most common being fever, headache, fatigue, and muscle aches and pains.

Additionally, no specific safety concerns were identified for the Pfizer and Moderna vaccines in subgroup analyses by age, race, ethnicity, underlying medical conditions, or previous SARS-CoV-2 infection.

Can I get COVID-19 from the vaccine? No. Every day, a healthy immune system successfully fights off thousands of germs. Antigens are parts of germs that cause the body's immune system to go to work to build antibodies, which fight off diseases. The antigens in vaccines come from the germs themselves, but the germs are weakened or killed so they cannot cause serious illness. Even if people receive several vaccinations in one day, vaccines contain only a tiny fraction of the antigens they encounter every day in their environment. Vaccines stimulate the immune system to produce antibodies to fight off serious vaccine-preventable diseases.

Should I continue to wear a mask, social distance, maintain good hygiene, and avoid large gatherings? Yes. At this time, it is recommended that even vaccinated individuals practice an abundance of caution by continuing to wear a mask, social distance, wash their hands and avoid large gatherings (especially indoors). We are also unsure how a vaccine will impact quarantine protocols for close contacts.

Is it safe to get my child vaccinated? The initial clinical trials did not include children. Pfizer's vaccine has been authorized for emergency use to vaccinate those aged 16 and up. Moderna's vaccine has been authorized for emergency use to vaccinate those ages 18 and up.

Is it safe for pregnant women to get vaccinated? Yes, pregnant females are recommended for the vaccines depending on the individual's risk of acquisition due to the level of community transmission, personal risk of contracting COVID-19 due to occupation or other activities, risks of COVID-19 to the mother and potential risks to the fetus, efficacy of the vaccine, known side effects of the vaccine and the lack of data about the vaccine during pregnancy. Special counseling and a 15-minute observation period after vaccination, if chosen, is recommended.

How effective will a COVID-19 vaccine be? Both the Pfizer and Moderna vaccines have an approximate 95% efficacy rate and are highly effective in preventing severe disease. In December, the CDC published that the Pfizer and Moderna vaccines had a constant efficacy rate across age, sex and ethnicity categories, as well as among individuals with underlying medical conditions and those who have been previously infected by SARS-CoV-2. Additionally, initial clinical data showed protection is achieved 28 days after the initiation of the Pfizer vaccine, which consists of a 2 dose schedule.

According to Moderna's website, initial trial data was used to estimate a vaccine efficacy of 94.5%. Initial data from Moderna also shows the vaccine may provide some protection against asymptomatic SARS-CoV-2 infection. AstraZeneca estimates a 90% efficacy rate from a specific 2-dose schedule.

How long will immunity last if I get vaccinated?

There is no definitive data on how long immunity will last with a vaccine. A COVID-19 vaccine will trigger an immune system response to develop active immunity. Active immunity results when exposure to a disease organism triggers the immune system to produce antibodies to that disease. If an immune person comes into contact with that disease in the future, their immune system will recognize it and immediately produce the antibodies needed to fight it. Although we don't know exactly how long immunity will last for the specific vaccines in trial, active immunity can be long-lasting.

Why is a vaccine necessary? A vaccine is necessary to help you and your community shape a new normal. Stopping a pandemic requires using all the tools available. Vaccines boost your immune system so it will be ready to fight the virus if you are exposed. Other steps, like masks and social distancing, help reduce your chance of being exposed to or spreading the virus.

If I've recovered from COVID-19, do I still need to get vaccinated? Yes. We are seeing evidence of reinfection in patients. Early evidence suggests natural immunity from SARS-CoV-2 may not last very long, but more studies are needed to better understand this. Vaccination should not occur until the patient has met criteria to discontinue isolation.

What will be the cost of getting vaccinated?

No person can be billed for the COVID-19 vaccine. Vaccination providers may charge an administration fee to insurance, Medicaid or Medicare, if applicable in your situation. Uninsured Missourians will be able to receive the vaccination regardless of their health insurance status.

If I'm uninsured, can I get vaccinated? No resident may be charged for the COVID-19 vaccine, so uninsured Missourians cannot be denied vaccination based on their health insurance status.


Will vaccinations be mandated? There are no plans at the state level to mandate vaccinations.

Getting vaccinated against COVID-19 will help us reconnect with our families, attend Mass safely, and begin to resume our normal day-to-day activities.



When will a vaccine be made available to the general public? The federal government believes there will be a limited amount of vaccines available in 2020 for the phase 1 priority groups, with supplies increasing substantially throughout the first half of 2021.

MISSOURI'S COVID-19 VACCINATION PLAN

Phase 1A	Phase 1B	Phase 2	Phase 3
Long-Term Care Facility Residents and Staff	Tier 1 First Responders & Emergency	Accelerating Economic Recovery	All Missouri Residents
Healthcare Workers (patient facing)	Tier 2 High Risk Individuals	Disproportionately Affected Populations	 <p>Scan for more*</p>
EMS/EMT/ Paramedics	Tier 3 Critical Infrastructure	Homeless	

*For more details about who is included in each phase, please visit covidvaccine.mo.gov/priority

The COVID-19 vaccines do not alter your DNA.

Rumor: mRNA technology will tamper with your DNA.

Fact: That rumor is baseless. mRNA provides a set of instructions to your cells to create an immune response specific to COVID-19. Medical doctors independent of the vaccine development teams have verified that using mRNA will not alter the DNA of our body's cells. The COVID-19 vaccines were created through mRNA technology. They do not introduce DNA into your body.

The COVID-19 vaccine doesn't cause female sterilization. Rumor: The vaccine contains Syncytin-1, which is vital for the formulation of human placenta in women.

Fact: Medical professionals have called this "an utterly bizarre claim." None of the COVID-19 vaccines contain Syncytin-1. Furthermore, there are no protein-based vaccines among the candidates in phase 3 clinical trials for COVID-19. Scientifically, there is no sequence homology between SARS-CoV-2 and Syncytin-1, so any immune response initiated by the vaccine against SARS-CoV-2 would not affect Syncytin-1.

Working for Abortion-Free Vaccines

While Catholics may accept inoculations for COVID-19 as outlined above, we still have a duty to work toward a future in which vaccines are not associated with aborted fetal tissue or embryonic stem cells. As Bishop Rhoades and Archbishop Naumann stated in their memorandum, “[w]hile having ourselves and our families immunized against COVID-19 with the new vaccines is morally permissible and can be an act of self-love and of charity toward others, we must not allow the gravely immoral nature of abortion to be obscured.”

To that end, the MCC encourages those receiving the currently available vaccines to contact the manufacturer of the vaccine they receive to let that manufacturer know of their objection to the use of morally-compromised cell lines in the development, production, or testing of the vaccine. In this way, we can be sure that **“the new COVID-19 vaccines do not desensitize us or weaken our determination to oppose the evil of abortion itself and the subsequent use of fetal tissue cells in research.”**

A draft letter to the manufacturers in question is to the right. →



New MCC from the Capitol Episode

In an accompanying new episode of our podcast, MCC from the Capitol, MCC Executive Director Tyler McClay interviews Bishop W. Shawn McKnight of the Diocese of Jefferson City, and Dr. Keith Starke, internist and former Chief Clinical Officer at Mercy Hospital in Chesterfield about the COVID-19 vaccine. Scan the QR code to listen right now!*

*to scan a QR code, open the camera app on your phone, and focus the camera on the QR code. A link will appear directing you to the available content.

Letter of objection: Cease use of morally-compromised cell lines in vaccines

The USCCB released two letters of objection to the use of morally-compromised cell lines in COVID-19 vaccines. The letter below is to Pfizer, which conducted clinical trials in St. Louis.

We encourage you to send this letter to the company by either clipping it from the newsletter, or by visiting our website and printing a new copy.

You can find PDF versions of both the Pfizer and Moderna objection letters by following this link:

mccatholic.org/resources/covid-19-resources

Mikael Dolsten, M.D., Ph.D.
Chief Scientific Officer & President, Worldwide Research, Development & Medical
Pfizer, Inc.
235 East 42nd Street
New York, NY 10017

Dear Dr. Dolsten:

I write to thank Pfizer for making its lifesaving COVID-19 vaccine available to the public. It is my understanding, however, that in testing this vaccine, Pfizer made use of a cell line derived from an aborted baby. I am respectfully urging Pfizer to stop relying on such cell lines.

Please understand that as one of your potential customers, I believe it is immoral to use abortion-derived tissues and/or cell lines in the production, testing or manufacture of vaccines and other pharmaceutical products. If I have the opportunity to receive an alternative vaccine that has no connection to abortion, I will choose that vaccine instead of Pfizer's vaccine.

While Pfizer tested the current vaccine using abortion-derived cell lines, it is my understanding that alternative, non-abortion-derived cell sources are available or could be made available. Had Pfizer instead chosen to use a cell line with no connection to abortion, it would have eliminated a significant moral dilemma now faced by substantial numbers of people.

As research and testing continue at Pfizer, I respectfully but strongly urge you to take note of my objections and discontinue the use of abortion-derived cell lines in the development and testing of your products. This is an issue of emerging importance and one about which persons of faith are becoming increasingly knowledgeable. Now and in the future, I will continue to seek out and support those pharmaceutical companies that avoid the use of abortion-derived cell lines.

Sincerely,