What are COVID-19 mRNA vaccines?

COVID-19 mRNA vaccines are used to prevent COVID-19. mRNA vaccines teach our cells how to make a protein that will trigger an immune response without using the live virus that causes COVID-19. Once triggered, our body then makes antibodies. Antibodies protect us from being infected if the real virus does enter our body in the future.

‘RNA’ stands for ribonucleic acid, which is a molecule that gives cells instructions for making proteins. Messenger RNA (mRNA) vaccines contain the genetic instructions for making the SARS-CoV-2 spike protein. This protein is found on the surface of the virus that causes COVID-19.

mRNA vaccines cannot change a person's DNA.

When a person is given the vaccine, their cells will read the genetic instructions like a recipe and produce the spike protein. After the protein piece is made, the cell breaks down the instructions and gets rid of them. The cell then displays the protein piece on its surface. Our immune system recognizes that the protein doesn't belong there and begins to build an immune response by making antibodies. You cannot get COVID-19 from the vaccine.

Scientists and pharmaceutical companies have developed these vaccines because of the urgent need to combat the worldwide spread of COVID-19. The Pfizer-BioNTech COVID-19 vaccine (Tozinameran or BNT162b2) and the Moderna COVID-19 vaccine (mRNA-1273) are the first two COVID-19 vaccines to receive Health Canada approval.

Health Canada has issued both the Pfizer-BioNTech and Moderna vaccines a market authorization with conditions to support early access to the COVID-19 vaccines. These conditions support the continued use of the vaccine during a public health emergency. The approval of the vaccine is supported by evidence that it is safe, effective and of good quality. Early results from clinical trial data suggest that the Pfizer-BioNTech and the Moderna vaccines have been demonstrated to be 95 per cent and 94 per cent effective, in the short term in preventing individuals from getting lab-confirmed COVID-19.

The COVID-19 vaccine cannot offer protection against the flu or other viruses or bacteria.

Who should get the COVID-19 vaccine?

The COVID-19 vaccines will eventually be available to all Manitobans. While supplies are limited, Manitoba has identified priority populations to have access to the initial doses based on recommendations made by the National Advisory Committee on Immunization (NACI) and working with public health experts across the country through the Pan-Canadian Special Advisory Committee on COVID-19. These priority populations include:

- health care workers most directly involved in the COVID-19 response,
- people in congregate living settings such as long-term care facilities, assisted living facilities, retirement homes, and chronic care hospitals,
- older adults starting at 80 years of age and older, and
- adults at risk in Indigenous communities.


People who have gotten sick with COVID-19 and have recovered may still benefit from getting the vaccine. Currently there is limited data on the use of COVID-19 vaccines in people who have gotten sick with COVID-19 and recovered. In the context of limited vaccine supplies, NACI recommends waiting three months before being immunized. Speak with your health care provider about when is the best time for you to get vaccinated.

1 The Public Health Agency of Canada
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For information about Manitoba’s COVID-19 vaccine eligibility criteria, please visit https://www.gov.mb.ca/covid19/vaccine/eligibility-criteria.html.

Should individuals who have an autoimmune condition, such as Rheumatoid Arthritis or Multiple Sclerosis (MS), get the COVID-19 vaccine?

NACI recommends that the COVID-19 vaccine may be given to people who have an autoimmune condition after they have reviewed the risks and benefits with their immunizer or health care provider, and considering the following:

• Although there is limited evidence that having an autoimmune condition is an independent risk factor for severe COVID-19, having an autoimmune condition has been identified as an independent risk factor for severe outcomes from other infectious diseases (e.g., influenza).
• There is very limited data on COVID-19 vaccination in individuals who have an autoimmune condition.
• An individual’s response to the vaccine depends on their underlying autoimmune condition, the progression of disease and use of medications.
• Individuals with autoimmune conditions are known to benefit from other vaccinations (e.g., seasonal influenza vaccine).
• It is possible that COVID-19 vaccine could make an autoimmune condition worse although there is limited information on this.

Should individuals who are immunosuppressed due to a disease, like certain cancers, or treatment, such as being on high-dose steroids, get the COVID-19 vaccine?

NACI recommends that the COVID-19 vaccine may be offered to people who are immunosuppressed due to disease or treatment after they have reviewed the risks and benefits with their immunizer or health care provider, and considering the following:

• Although there is limited evidence that immunosuppression is an independent risk factor for severe COVID-19, being immunosuppressed has been identified as being an independent risk factor for severe outcomes from other infectious diseases (e.g., influenza).
• There is very limited data on COVID-19 vaccination in individuals who are immunosuppressed.
• An individual’s response to the vaccine depends on their underlying immunocompromising condition, the progression of disease and use of medications.

Individuals who are living with human immunodeficiency virus (HIV) that are considered immunocompetent may be vaccinated; speak with your health care provider.

Should pregnant and/or breastfeeding individuals get the COVID-19 vaccine?

According to NACI and the Society of Obstetricians and Gynecologists (SOGC), the COVID-19 vaccine may be offered to people who are pregnant and/or breastfeeding after they have reviewed the risks and benefits with their immunizer or health care provider, and considering the following:

• There is limited evidence that pregnancy alone is an independent risk factor for severe COVID-19. However, age (≥ 35 years old), asthma, obesity, pre-existing diabetes, pre-existing hypertension and heart disease are independent risk factors for severe COVID-19.
• There is very limited data on the use of COVID-19 vaccine in pregnant and/or breastfeeding women.
• There is no evidence to determine whether vaccination poses a risk or provides benefit to the fetus and/or breastfed baby.
• There is currently no evidence to guide the time interval between the completion of the COVID-19 vaccine series and conception. NACI recommends delaying pregnancy by 28 days or more after the administration of the complete COVID-19 vaccine series.

Living with a medical condition not listed above (e.g., heart failure, liver disease, chronic kidney disease) does not mean you can’t get the vaccine. Talk to your health care provider if you have any questions.

Who should NOT get the COVID-19 vaccine?

Infants and children under the age of 16 should not be given the Pfizer-BioNTech vaccine. Individuals under the age of 18 should not be given the Moderna vaccine.

This information is subject to change. It is accurate as of January 13, 2021.
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Currently there is no data on COVID-19 vaccination in children less than 12 years of age, and only limited data on the Pfizer-BioNTech vaccine in those 12 to 15 years of age. According to NACI, the Pfizer-BioNTech vaccine should not be routinely offered to children 12 to 15 years of age. Clinical trials and post-marketing studies are ongoing and NACI is monitoring the evidence as it evolves.

The COVID-19 vaccine should not be given to people who are allergic to the active substance or any of the other ingredients of this vaccine, or if you have had a severe allergic reaction after the first dose. An allergic reaction can be life-threatening. For information about any of the COVID-19 vaccine's ingredients, please review the vaccine manufacturer's product monograph, which is available at: www.manitoba.ca/vaccine or speak with your health care provider.

Polyethylene glycol (PEG) is an ingredient of mRNA vaccines and is a potential allergen known to cause possible allergic reactions, including serious reactions. Polyethylene glycol may be found in a multitude of products including bowel preparation products for colonoscopy, laxatives, cough syrup, cosmetics, contact lens care solutions, skin care products, and as an additive in some food and drinks. If you are allergic to PEG or polysorbate, regardless of the severity of reaction, speak with your health care provider before immunization.

If you have a history of severe allergies to food, medicine, environmental agents or other known allergens, talk to your health care provider before immunization.

NACI recommends that COVID-19 vaccines should not be given at the same time as other (live or inactivated) vaccines. Wait 14 days after any other vaccine before receiving your COVID-19 vaccine. After receiving your COVID-19 vaccine series, wait 28 days before receiving any other vaccine, unless a vaccine is required urgently due to an exposure to a virus such as Hepatitis B. If you previously had a dose of COVID-19 vaccine, finish the COVID-19 vaccine series with the same vaccine.

If you have a fever or any symptoms that could be due to COVID-19, you should not be vaccinated at that time. Talk with your health care provider about your symptoms and getting a COVID-19 test. Your health care provider will advise you when you are able to receive the vaccine.

Possible side effects from the COVID-19 vaccine

In general, the side effects observed during the clinical trials were similar to other vaccines, were mild or moderate, and went away a few days after vaccination. They included things like pain, redness and swelling at the site of injection, body chills, feeling tired and feverish, headache, muscle and joint pain as well as nausea and vomiting. Over-the-counter medicines like acetaminophen (e.g., Tylenol®) or ibuprofen (e.g., Advil®) may be considered to help manage these adverse events (like pain or fever, respectively), if they occur after vaccination.

These are common side effects of vaccines and are not a risk to your health.

For a full list of possible side effects, please review the vaccine manufacturer's product monograph, which is available at: www.manitoba.ca/vaccine or speak with your health care provider.

As with all vaccines, more serious side effects such as allergic reactions are possible. However, these are rare.

Health Canada has conducted a rigorous scientific review of the available medical evidence to assess the safety of the COVID-19 mRNA vaccines. Health Canada did not identify any major safety concerns. Health Canada will continue to monitor post-marketing studies, additional research and clinical trial data to identify potential safety signals as quickly as possible.

It is important to stay in the vaccination venue for 15 minutes (or longer for some people, including people who have had serious allergic reactions in the past) after getting any vaccine in the unlikely event of a severe allergic reaction. This can include hives, difficulty breathing, or swelling of the throat, tongue or lips. This can happen up to an hour after you get vaccinated. If this happens after you leave the immunization clinic, call 911 or go to the nearest emergency department or health centre for immediate attention.

Report any serious or unexpected adverse reactions to a health care provider, or call Health Links-Info Santé at 204-788-8200 or 1-888-315-9257 (toll free).

Preparing for your vaccination

Be sure to follow the signs and instructions at the immunization clinic (e.g., staying two metres away from other people), and remember to stay home if you are sick.
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- Wear a short-sleeve shirt or shirt with sleeves that are easy to roll up.
- Be sure you have eaten regularly that day.
- Bring and wear your mask.
- Bring any personal identification required by the immunization clinic, such as your Manitoba health card.
- Bring your immunization record with you.

After getting vaccinated, continue to focus on the fundamentals to help prevent the spread of COVID-19. For more information, visit https://www.gov.mb.ca/covid19/updates/prepareandprevent.html#fundamentals.

Your record of protection
All immunizations, including the COVID-19 vaccine, are recorded on your immunization record in Manitoba’s immunization registry. This registry:

- allows health care providers to find out which immunizations you (or the people you care for) have received or need to have.
- may be used to produce immunization records or notify you or your health care provider if a particular immunization has been missed.
- allows Manitoba Health, Seniors and Active Living and public health officials to monitor how well vaccines work in preventing disease.

The Personal Health Information Act protects your information and/or any people you provide care for. You can choose to have this personal health information hidden from health care providers. For additional information, please contact your local public health office or speak with a health care provider.

If you need information on the immunizations that you or the people you care for have received, contact your health care provider. Contact your local public health office for a copy of your immunization records.

For a listing of public health offices, visit: www.manitoba.ca/health/publichealth/offices.html.

For more information
For more information about COVID-19 or the COVID-19 vaccines, talk to your health care provider. You can also call Health Links–Info Santé in Winnipeg at 204-788-8200 or 1-888-315-9257 (toll free in Manitoba).

Province of Manitoba:
www.manitoba.ca/covid19/index.html

Government of Canada:

This information is subject to change. It is accurate as of December 23, 2020.