The COVID-19 Vaccine and Your Child’s Health: Answers to common questions

The Pfizer [FYE-zer] and Moderna COVID-19 vaccines are now available for children between 6 months and 17 years old. This is a big step in the fight against the disease, but it also raises questions for many parents. Here you will find answers to many of the most commonly-asked questions from the children’s health experts at Primary Children’s Hospital. Be sure to talk with your child’s healthcare provider about your decision and any other questions you may have.

Why does my child need the COVID-19 vaccine?

The biggest benefit of your child getting the COVID-19 vaccine is to protect them from the disease. Other benefits include:

• Being able to participate safely in school, sports and activities, and play dates with friends
• Traveling with family
• Protecting others around them, like grandparents, infants, and toddlers
• Preventing the spread of COVID-19 in the community

Children have a lower risk of getting severely sick from COVID-19. However, low risk does not mean no risk. In Utah in 2021, more than 100 children in Utah developed Multisystem Inflammatory Syndrome in Children (MIS-C). This can cause dangerous inflammation of the heart, lungs, kidneys, brain, skin, eyes, and gastrointestinal organs.

Some children who got COVID continued to have symptoms that last 12 weeks or more after the infection was over. The informal name for this condition is long-COVID. Symptoms of long-COVID include fatigue (extreme tiredness), difficulty concentrating, muscle and joint pain, sleeplessness, headache, and uneven heartbeat.

How many doses does my child need?

For the Pfizer vaccine:
• Children 6 months to 5 years old will need 3 doses given 3 to 8 weeks apart. Boosters are not recommended for this age group.
• Children between 5 and 17 years old should get 2 doses at least 3 weeks apart. They may need a single booster 5 months after the 3rd dose.

For the Moderna vaccine:
• Children 6 months through 17 years old should get 2 doses at least 3 weeks apart.
• Moderna boosters are not recommended for any age group at this time.
Are the vaccines effective for children?

Yes. The vaccine reduces the risk of COVID-19, including the risk of severe illness and death for those who are fully vaccinated. Studies show that protection from the vaccine goes down over time, so a booster shot may be needed for those who are 5 years or older.

What are the side effects?

Your child may have redness and soreness at the injection site. Most side effects happen within 7 days of getting the vaccine and are mild. Most side effects happen after the second dose and include headache, fever, chills, tiredness, or swollen lymph nodes. These symptoms are a sign that your child’s immune (disease fighting) system is responding well to the vaccine. You may treat these symptoms with acetaminophen [ah-see-uhn-MIN-eh-fen] (Tylenol or others) or ibuprofen [eye-byoo-PRO-fen] (Motrin, Advil, or others) to relieve the symptoms. No cases of severe allergic reactions or heart problems were reported during the trial period.

This does not mean they will not be some very rare complications that are detected after several million children are vaccinated. The US has extensive surveillance for rare complications so we will continue to watch and learn in real time.

What if my child has a medical condition?

It is important that children who have a medical condition (cancer, diabetes, obesity, lung or heart disease, organ transplant, etc.) get a vaccine. This is because they are more likely to develop severe illness if they get COVID-19.

Children whose immune systems don’t work as well because of medications or disease may need more doses of the vaccine. Check with your healthcare provider about the dosing schedules for these children.

What else can I do to protect my child from COVID-19?

To protect your child, encourage family members and others who are around your child to get a COVID vaccine. Follow other best practices to protect against the disease, such as wearing a mask, washing or sanitizing your hands often, and avoiding crowds.

When and where can children get the vaccine?

As of June 21, 2022, The Pfizer and Moderna COVID vaccines are available to children who are 6 months and older. You can find them in select Intermountain Medical Group clinics, at the Primary Children's Hospital's Community Pharmacy, and at other locations through vaccines.gov. You can also check the vaccine locations here: intermountainhealthcare.org/Health-Wellness-Promotion/Vaccines/COVID/

Will my child need to wear a mask if they are fully vaccinated?

There’s still a chance your child can become infected so it’s always best to follow the recommendations to avoid infection:

- Wash their hands regularly
- Avoid crowded places
- Wear masks if you are ill or around others who are ill.

Remember, the vaccines are very good at preventing serious illness and hospitalization, but a mild case is still possible. People with mild cases can still spread the disease.
What are some common myths and disinformation about the vaccine?

There is a lot of false information being spread about the vaccines. Here is some information on the most common myths and concerns:

- **Heart problems.** This is a concern, but the risk may be exaggerated. Studies show an increased risk of **myocarditis** (inflammation of the heart muscle) and **pericarditis** (inflammation of tissue surrounding the heart) after vaccination with mRNA vaccines. These complications are rare. They happen most often after getting the 2nd dose, and in males 12 to 39 year old. Most children who were treated for myocarditis or pericarditis responded well to medicine and rest and felt better within a couple days. The risk of developing similar heart conditions from getting COVID is much higher than from the rare vaccine reaction. Studies show that the benefits of the vaccine outweigh its risks for children. This rare risk may be further reduced with a longer interval between the first and second dose.

- **Allergies.** Some parents worry that their children may have an allergic reaction to the vaccine. Most children have already received many vaccines. Families will likely know if their child is likely to have a serious reaction to a vaccine.

- **Infertility.** There is no evidence that the vaccines cause problems with fertility. The idea that the vaccine causes infertility is a myth based on false information shared when the COVID-19 vaccines were first given and has since been disproven.

- **Pregnancy.** COVID-19 vaccines are safe and recommended for those who are pregnant or breastfeeding. Getting COVID-19 itself increases the risk of hospitalization, having a preterm (early) birth, and even death.

- **Puberty.** There is nothing in the vaccine that can affect your child’s hormones, brains, or puberty.

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Does the vaccine protect against variants of the virus?

Studies show that the vaccines provide some protection against severe disease and hospitalization, but some of the newer variants can still spread even in those who are vaccinated. Protection from having an infection from an older variant of the COVID-19 vaccine does not provide much protection against the new variants.

Do kids really spread the disease?

Yes. Children spread COVID-19 and play a big role in community spread. Current trends show that when there are high case counts in schools, higher rates in the rest of the population show up 1 or 2 weeks later. Children and teenagers often spend time in groups. This means they are more likely to spread and infection to many people at once.

Can my child get the COVID-19 vaccine when they get other needed vaccines?

Yes. Children between 6 months and 17 years need several vaccinations, including diphtheria, tetanus, whooping cough, polio, measles, chickenpox, flu, HPV, and more. Those vaccines can be safely given with the COVID-19 vaccine.
**How were the vaccines tested in children and adolescents?**

The vaccines were tested in children and adolescents once it became clear that they were safe and effective for adults. Of the children who were tested, some got 2 doses of the vaccine and others got a placebo (fake shot). Blood samples were taken before and after they got the vaccine. The children were followed very closely for 2 to 3 months. The results of the study showed that 10 unvaccinated children were infected with COVID compared to only 1 vaccinated child.

**Should my child wait a while, until there are more studies available?**

There is not a reason to wait, given how COVID is impacting children in Utah. However, the most important thing is for families to speak with their healthcare team about the safety of the vaccine, it’s effectiveness, and what it means for their children.

**What if I still have concerns about my child being vaccinated?**

We encourage you to make an appointment with your child’s healthcare provider and ask questions.

**Where can I learn more?**

You can find more information about the vaccine at these links:

- Intermountain Healthcare [intermountainhealthcare.org/Health-Wellness-Promotion/Vaccines/COVID/](https://intermountainhealthcare.org/Health-Wellness-Promotion/Vaccines/COVID/)
- Utah Department of Health [coronavirus.utah.gov/vaccine](https://coronavirus.utah.gov/vaccine)

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