COVID-19 vaccines in Mexico: Should I get vaccinated? Is it safe?



With additional information from Asael Villanueva and José Torres

How do COVID-19 vaccines work? Are they safe? If I get vaccinated, will I no longer get sick or infect others? **When can I get vaccinated?**

Dr. Michel Martínez, head of the Epidemiological Surveillance Unit and leader of the COVID-19 Program at TecSalud, the health system of Tec de Monterrey, answers these and other questions.

Check out this practical information with everything you need to know about COVID-19 vaccines in Mexico:

- Should I get the COVID-19 vaccine? Is it safe to get it?
 - Should I get vaccinated? Why or why not?
 - o Is it safe to get vaccinated?
 - Which vaccine should I get?
- What is getting vaccinated like? Will getting vaccinated make me completely immune?
 - o How is the vaccine administered?
 - Will getting vaccinated make me completely immune?
 - Should I continue to wear a face mask? Will I no longer transmit the virus once I'm vaccinated?

- How does the vaccine work? What does it do in my body?
 - o How does the vaccine work in my body?
 - o How long will the effect of the vaccine last?
- Which are the main COVID-19 vaccines and what are their characteristics?
 - Vaccines with the innovative messenger RNA method
 - Pfizer
 - Moderna
 - Cureback
 - Vaccines using the adenoviral vector method
 - AstraZeneca
 - Sputnik V
 - CanSino Biologics
 - Johnson & Johnson
 - Other vaccines
 - Sinopharma
 - Novavax
- When is it my turn / can I get vaccinated against COVID-19 in Mexico?
 - Vaccination for frontline healthcare personnel
 - Vaccination for those over 60
 - Vaccination for those over 50
 - Vaccination for those over 40
 - Vaccination for the rest of the population
 - Can pregnant women and children be vaccinated?
- Myths and frequently asked questions about vaccination
 - Is it true that the vaccines contain a chip that will be injected into people?
 - Is it true that these vaccines were rushed to approval without sufficient evidence?
 - o Is it true that vaccines cause autism?
 - Do vaccines protect against the new strain of the virus?
 - o If I already had COVID, should I get vaccinated?
 - Can I get vaccinated if I have allergies?
- What can we hope for in the future?



width="900" loading="lazy">

Should I get vaccinated? Is it safe to get it?

- Should I get vaccinated? Why or why not?

Yes. It's strongly recommended and important that you do. By getting vaccinated, you can protect yourself and your family and help end the pandemic.

With additional information from Asael Villanueva and José Torres

How do COVID-19 vaccines work? Are they safe? If I get vaccinated, will I no longer get sick or infect others? **When can I get vaccinated?**

Dr. Michel Martínez, head of the Epidemiological Surveillance Unit and leader of the COVID-19 Program at TecSalud, the health system of Tec de Monterrey, answers these and other questions.

Check out this practical information with everything you need to know about COVID-19 vaccines in Mexico:

- Should I get the COVID-19 vaccine? Is it safe to get it?
 - Should I get vaccinated? Why or why not?
 - o Is it safe to get vaccinated?
 - Which vaccine should I get?

- What is getting vaccinated like? Will getting vaccinated make me completely immune?
 - o How is the vaccine administered?
 - Will getting vaccinated make me completely immune?
 - Should I continue to wear a face mask? Will I no longer transmit the virus once I'm vaccinated?
- How does the vaccine work? What does it do in my body?
 - o How does the vaccine work in my body?
 - o How long will the effect of the vaccine last?
- Which are the main COVID-19 vaccines and what are their characteristics?
 - Vaccines with the innovative messenger RNA method
 - Pfizer
 - Moderna
 - Cureback
 - Vaccines using the adenoviral vector method
 - AstraZeneca
 - Sputnik V
 - CanSino Biologics
 - Johnson & Johnson
 - Other vaccines
 - Sinopharma
 - Novavax
- When is it my turn / can I get vaccinated against COVID-19 in Mexico?
 - Vaccination for frontline healthcare personnel
 - Vaccination for those over 60
 - o Vaccination for those over 50
 - Vaccination for those over 40
 - Vaccination for the rest of the population
 - o Can pregnant women and children be vaccinated?
- Myths and frequently asked questions about vaccination
 - Is it true that the vaccines contain a chip that will be injected into people?
 - Is it true that these vaccines were rushed to approval without sufficient evidence?
 - o Is it true that vaccines cause autism?
 - Do vaccines protect against the new strain of the virus?
 - o If I already had COVID, should I get vaccinated?
 - o Can I get vaccinated if I have allergies?
- What can we hope for in the future?



width="900" loading="lazy">

Should I get vaccinated? Is it safe to get it?

- Should I get vaccinated? Why or why not?

Yes. It's strongly recommended and important that you do. By getting vaccinated, you can protect yourself and your family and help end the pandemic.

"Vaccination will be the only way we're going to be able to open up work, industries, schools, and cultural events. There's no other way," explains Dr. Martínez.

"There's more benefit in vaccinating all of us than in herd immunity (when most people get infected). That's a large risk. In addition, it may take 2 to 3 years, and in the meantime, a stronger and more aggressive strain may appear."

- Is it safe to get vaccinated?

Yes. Tests have shown the safety of vaccines that are already authorized, and there have been very few cases of side effects, as with any medication, explains Dr. Martínez.

He claims that vaccination has generally been a very good thing for humanity and has driven life expectancy in Mexico to rise from 40 to 50 years of age in the 1950s to more than 75 today.

"If there's one tool humans have that has prolonged life expectancy, it's immunization (with vaccines)," Martínez added.

- Which vaccine should I get?

Dr. Martínez clearly says that the important thing is **to get vaccinated with whichever vaccine is available to us** in the official vaccination scheme.

"People ask me, 'Which vaccine should I get?' I tell them to get the one you're given, the one they offer you," he says.

Currently (January 18), in Mexico there are 2 vaccines authorized by COFEPRIS for emergency use: the <u>Pfizer - BioNTech</u> vaccine (which is already being administered) and the <u>AstraZeneca</u> vaccine.

The government has reported that they're also contemplating others, if validated, such as the Russian **Sputnik V** and the Chinese **CanSino** Biologics vaccines.

"If there's one tool humans have that has prolonged life expectancy, it's immunization (with vaccines)."



width="900" loading="lazy">

What is getting vaccinated like? Will getting vaccinated make me completely immune? - How is the

COVID-19 vaccine administered?

The vaccines that have been authorized so far are injected into the arm. They're usually administered in the less dominant arm. For example, in the left arm for right-handed people.

Most COVID-19 vaccines require 2 doses. The second doses of the Pfizer and AstraZeneca vaccines are administered 21 and 28 days later, respectively.

The CanSino vaccine is a single dose.

- Will getting vaccinated make me completely immune?
- No. Getting vaccinated doesn't give you immediate and total immunity to COVID-19. Let's explain:
 - Functional immunity is not necessarily sterilizing immunity. There are 2 types of immunity in vaccines:
 - Sterilizing: Ensures the virus is repelled before infection occurs
 - Functional: Infection is not necessarily avoided, but the immune system prevents severe illness

"We can safely say that what people will have is functional immunity. It's too soon to know about sterilizing immunity," the doctor explains.

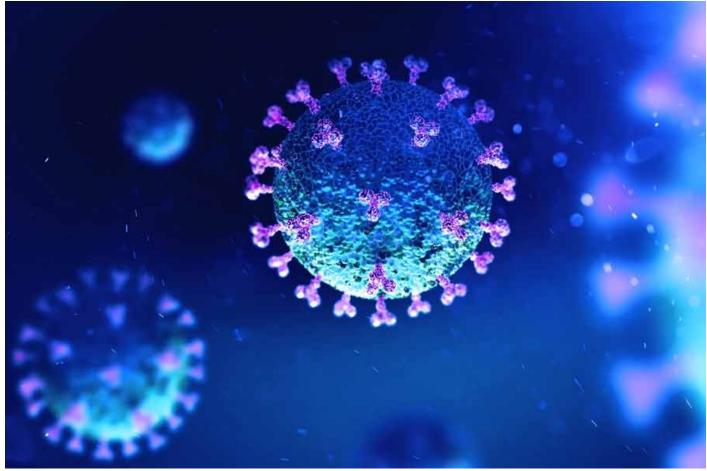
"It won't protect you 100%. That's clear to us. However, it's going to make the illness much milder and quicker."

- More complete immunity for up to days after the second dose. For up to two weeks after the two doses, the body generates more immunity (94% in Pfizer's, for example).
- No vaccine offers 100 percent immunity. This is normal for any drug or vaccine, but the immunity rates of the approved vaccines are quite high.
- Should I continue to wear a face mask? Will I no longer transmit the virus once I'm vaccinated? The answer is yes, you need to continue to wear a face mask and maintain social distancing. And yes, you could still transmit the virus.

For the functional immunity reasons mentioned above, it will be necessary to keep up measures in order to not get infected and not infect others even after getting vaccinated.

"It may be that a vaccinated person still transmits the virus to others who aren't vaccinated, so you should continue to wear a face mask," the doctor explains.

"It may be that a vaccinated person still transmits the virus to others who aren't vaccinated, so you should continue to wear a face mask."



width="900" loading="lazy">

How does the vaccine work? What does it do in my body? - How does the vaccine work in my body?

"A vaccine is a biological product that causes patients to generate immunity against a disease by stimulating the generation of antibodies.

"These are immune system proteins that recognize and neutralize foreign substances such as viruses, bacteria, or toxins," Dr. Martínez explains.

In the case of the COVID-19 vaccines, there are two main methods that are the most commonly used:

- Messenger RNA vaccines: Unlike traditional vaccines, an attenuated or inactive virus isn't
 injected, but rather protein information is transmitted into our system to teach our cells how to
 produce the protein (the "spike protein") that lives on the surface of the virus and helps it
 attach to our cells. Since the body has already produced the protein and has developed
 antibodies against it, when the virus enters our system, it's rejected and cannot latch on.
- Adenovirus vector vaccines: Harmless neutral viruses from either chimpanzees or humans
 are injected that are unable to reproduce. These contain the SARS-CoV2 coronavirus protein
 so that the body similarly generates antibodies and rejects the virus that produces COVID-19
 when it enters the system.

Messenger RNA vaccines are considered very innovative and are predicted to be useful for other diseases, including cancer.

In the words of the dean of TecSalud, Guillermo Torre, they're "one of the most important biotechnological advances of this century."

"This type of vaccine is one of the most important biotechnological advances of this century."

- How long will the effect of the vaccine last? The effect is expected to be long lasting, says Dr. Martínez, although there are still no studies to show this because the vaccines are very new.

So far, **8-month immunity has been documented,** for example, but the effect is estimated to last much longer.

However, it's possible that in the future, people vaccinated will need to get vaccinated again, whether to extend the immunity effect or to adapt to new variants of the virus.



width="900" loading="lazy">

Which are the main vaccines and what are their characteristics? - Messenger RNA or mRNA:

- These require 2 separate doses from 21 to 28 days apart.
- They need to be stored at ultra-cold temperatures (-70 or -80 degrees Celsius).
- Once thawed out for application, their lifespan varies from a few hours to days.

• Their average cost per dose for governments is \$30 to \$40 dollars per dose.

The main and most advanced vaccines are:

- **Pfizer-BioNTech (U.S.)**. This has a 95% efficacy rate. It was the first vaccine in the world authorized for application. Since December, it's being administered in Great Britain, the United States, and Mexico.
- Moderna (U.S.). This has a 94.1% efficacy rate. It's been authorized for use in the United States.
- CureVac (Germany). In phase 3 testing, including in México through TecSalud.

"These are the three leading vaccines using this messenger RNA methodology," said Martínez, highlighting the importance of ultra-cold storage to retain the lipid membrane surrounding the mRNA.

- Non-replicating adenovirus vectors:
 - These can be stored at normal refrigeration levels.
 - They require 1 to 2 doses, depending on the brand.
 - Average cost to governments: \$4 dollars per dose.

The main and most advanced vaccines:

- AstraZeneca Oxford (U.K.), with a <u>70-90% efficacy rate</u>. Already approved in Mexico, Europe, and the United States.
- **SputnikV** (**Russia**), with a <u>91.4% efficacy rate</u>. This was the first publicly announced vaccine. However, at the time, that country's government presented no evidence of having completed all the testing phases. It is currently in the approval process in several countries, including Mexico.
- CanSino Biologics (China and Canada). In the last phase of testing. It's one of the few that requires only a single dose.
- Johnson & Johnson (U.S.). In the last phase of testing.

- Other vaccines:

- Sinopharm (China). Uses the traditional inactive or attenuated virus method. Sinopharma, with a 79% efficacy rate. It's been approved in Peru and is process of being approved in Mexico.
- **Novavax (U.S.)**. It uses the method of protein subunits, which are harmless protein portions of the virus that cause the immune system to react to protect itself.



width="900" loading="lazy">

When is it my turn / can I get vaccinated against COVID-19 in Mexico? The vaccination plan, which will be free and universal for the Mexican population, has been divided into stages according to population groups.

- Stage 1: December 2020 February 2021:
 COVID-19 front-line healthcare personnel
- Stage 2: February April 2021: Remaining healthcare personnel and people over the age of 60
- Stage 3: April May 2021: People between the ages of 50 and 59
- Stage 4: May June 2021: People between the ages of 40 and 49

- Stage 5: June 2021 - March 2022: The rest of the population.

- Can pregnant women and children get vaccinated?

The Mexican government has determined that, for now, pregnant women and children won't be vaccinated until there's more evidence on their use in this population.

Myths and questions about vaccination

- Is it true that a chip is injected into people with the vaccine?

This is false, and it's just one of the conspiracy theories that's been circulated on the Internet.

- Is it true that these vaccines were rushed to approval without sufficient evidence? How is vaccine efficacy tested and measured?

Although the process has been quicker than any before due to the situation and emergency authorizations from the authorities, the vaccines have complied with the phases that need to be carried out.

In addition, laboratories have to report all incidents that occur.

The World Health Organization (WHO) establishes these tests for vaccines to demonstrate safety and efficacy:

Pre-clinical phase: Experimental results on efficacy and tolerance. Tissue or cell cultures and/or testing on animals is done.

Phase 1: Evaluation in a small number of people, usually fewer than 100 adults to initially evaluate safety and effects and determine dosing and method of administration.

Phase 2: Clinical trial with a larger group of people, between 200 and 500, to track safety. Trials to determine the efficacy of the vaccine.

Phase 3: More comprehensive safety and efficacy assessment. Tested on hundreds or thousands of people in one or more countries. Half of these receive a placebo, and the other half receive the actual vaccine.

- Is it true that vaccines cause autism?

This is false, and the story that has spread came from a scientific paper published in The Lancet magazine in 1998 that was later removed and refuted by the publication itself due to inconsistencies, lack of rigor, and fraudulent evidence found in the author's data.

In the original article, which has been discredited by the scientific community, author Andrew Wakefield, whose medical license was revoked in the U.K. as a result, sought to link autism to measles, mumps, and rubella vaccines.

- Do vaccines protect against the new strain of the virus?

Dr. Martínez says that according to tests, vaccines work against B.1.1.7, the **new variant of SARS-COV-2**, originally reported in Europe that has already spread to America and Mexico.

It's common for viruses to have certain variations, he explained, but added that laboratories have indicated that so far current vaccines also cover this new strain.

- If I've already had COVID, should I still get vaccinated? Yes. Even people who have already had COVID-19 should get vaccinated.
- Can I get vaccinated if I have allergies? There have been a few cases of side effects in people with very severe allergies who had allergic reactions to a component of the Pfizer vaccine.

These are not the normal allergies that a large part of the population has but allergies causing some people to have severe reactions. It's recommended that these people get a different vaccine.



width="900" loading="lazy">

What can we hope for in the future?

With mass vaccination, we can expect a high percentage of the population to gain a significant degree of immunity to overcome the pandemic.

Dr. Michel Martínez believes that in the future vaccination against COVID-19 could become regular and frequent, even something repeated annually, like the flu vaccine.

He also believes that new strains and mutations of the virus will continue to appear, and some will require modifications to the vaccines, but the messenger RNA technique will allow the vaccines to be updated very quickly.

"Covid vaccines are going to become an annual vaccine, not because the protective effect won't last more than a year but because there may be changes like what we're seeing in the U.K. with this strain."

"One of the advantages of messenger RNA technology is that it's going to be much faster to adjust and keep up with the virus and generate vaccines against new strains of COVID-19."

"One of the advantages of messenger RNA technology is that it's going to be much faster to adjust and keep up with the virus."

YOU'LL DEFINITELY WANT TO READ:

https://tec.mx/en/news/national/health/tecsalud-begin-testing-german-vaccine-against-covid-19-mexico

we're going to be able to open up work, industries, schools, and cultural events. There's no other way," explains Dr. Martínez.

"There's more benefit in vaccinating all of us than in herd immunity (when most people get infected). That's a large risk. In addition, it may take 2 to 3 years, and in the meantime, a stronger and more aggressive strain may appear."

- Is it safe to get vaccinated?

Yes. Tests have shown the safety of vaccines that are already authorized, and there have been very few cases of side effects, as with any medication, explains Dr. Martínez.

He claims that vaccination has generally been a very good thing for humanity and has driven life expectancy in Mexico to rise from 40 to 50 years of age in the 1950s to more than 75 today.

"If there's one tool humans have that has prolonged life expectancy, it's immunization (with vaccines)," Martínez added.

- Which vaccine should I get?

Dr. Martínez clearly says that the important thing is to get vaccinated with whichever vaccine is available to us in the official vaccination scheme.

"People ask me, 'Which vaccine should I get?' I tell them to get the one you're given, the one they offer you," he says.

Currently (January 18), in Mexico there are 2 vaccines authorized by COFEPRIS for emergency use: the <u>Pfizer - BioNTech</u> vaccine (which is already being administered) and the <u>AstraZeneca</u> vaccine.

The government has reported that they're also contemplating others, if validated, such as the Russian Sputnik V and the Chinese CanSino Biologics vaccines.

"If there's one tool humans have that has prolonged life expectancy, it's immunization (with vaccines)."



width="900" loading="lazy">

What is getting vaccinated like? Will getting vaccinated make me completely immune? - How is the COVID-19 vaccine administered?

The vaccines that have been authorized so far are injected into the arm. They're usually administered in the less dominant arm. For example, in the left arm for right-handed people.

Most COVID-19 vaccines require 2 doses. The second doses of the Pfizer and AstraZeneca vaccines are administered 21 and 28 days later, respectively.

The CanSino vaccine is a single dose.

- Will getting vaccinated make me completely immune? No. Getting vaccinated doesn't give you immediate and total immunity to COVID-19. Let's explain:
 - Functional immunity is not necessarily sterilizing immunity. There are 2 types of immunity in vaccines:
 - Sterilizing: Ensures the virus is repelled before infection occurs
 - Functional: Infection is not necessarily avoided, but the immune system prevents severe illness

"We can safely say that what people will have is functional immunity. It's too soon to know about sterilizing immunity," the doctor explains.

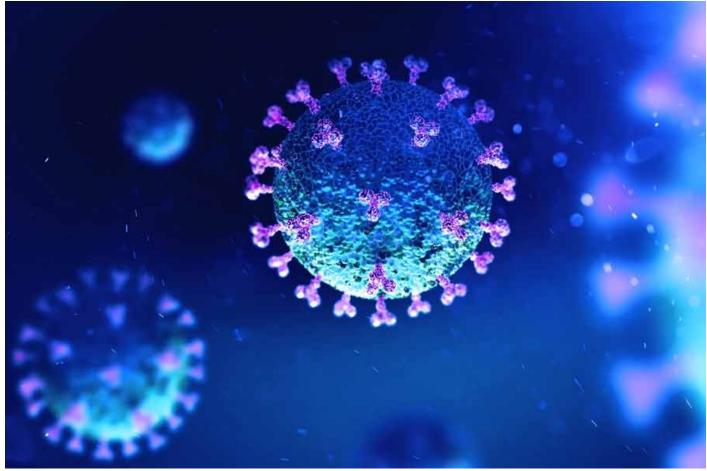
"It won't protect you 100%. That's clear to us. However, it's going to make the illness much milder and quicker."

- More complete immunity for up to days after the second dose. For up to two weeks after the two doses, the body generates more immunity (94% in Pfizer's, for example).
- No vaccine offers 100 percent immunity. This is normal for any drug or vaccine, but the immunity rates of the approved vaccines are quite high.
- Should I continue to wear a face mask? Will I no longer transmit the virus once I'm vaccinated? The answer is yes, you need to continue to wear a face mask and maintain social distancing. And yes, you could still transmit the virus.

For the functional immunity reasons mentioned above, it will be necessary to keep up measures in order to not get infected and not infect others even after getting vaccinated.

"It may be that a vaccinated person still transmits the virus to others who aren't vaccinated, so you should continue to wear a face mask," the doctor explains.

"It may be that a vaccinated person still transmits the virus to others who aren't vaccinated, so you should continue to wear a face mask."



width="900" loading="lazy">

How does the vaccine work? What does it do in my body? - How does the vaccine work in my body?

"A vaccine is a biological product that causes patients to generate immunity against a disease by stimulating the generation of antibodies.

"These are immune system proteins that recognize and neutralize foreign substances such as viruses, bacteria, or toxins," Dr. Martínez explains.

In the case of the COVID-19 vaccines, there are two main methods that are the most commonly used:

- Messenger RNA vaccines: Unlike traditional vaccines, an attenuated or inactive virus isn't injected, but rather protein information is transmitted into our system to teach our cells how to produce the protein (the "spike protein") that lives on the surface of the virus and helps it attach to our cells. Since the body has already produced the protein and has developed antibodies against it, when the virus enters our system, it's rejected and cannot latch on.
- Adenovirus vector vaccines: Harmless neutral viruses from either chimpanzees or humans are injected that are unable to reproduce. These contain the SARS-CoV2 coronavirus protein so that the body similarly generates antibodies and rejects the virus that produces COVID-19 when it enters the system.

Messenger RNA vaccines are considered very innovative and are predicted to be useful for other diseases, including cancer.

In the words of the dean of TecSalud, Guillermo Torre, they're "one of the most important biotechnological advances of this century."

"This type of vaccine is one of the most important biotechnological advances of this century."

- How long will the effect of the vaccine last? The effect is expected to be long lasting, says Dr. Martínez, although there are still no studies to show this because the vaccines are very new.

So far, 8-month immunity has been documented, for example, but the effect is estimated to last much longer.

However, it's possible that in the future, people vaccinated will need to get vaccinated again, whether to extend the immunity effect or to adapt to new variants of the virus.



width="900" loading="lazy">

Which are the main vaccines and what are their characteristics? - Messenger RNA or mRNA:

- These require 2 separate doses from 21 to 28 days apart.
- They need to be stored at ultra-cold temperatures (-70 or -80 degrees Celsius).
- Once thawed out for application, their lifespan varies from a few hours to days.
- Their average cost per dose for governments is \$30 to \$40 dollars per dose.

The main and most advanced vaccines are:

- Pfizer-BioNTech (U.S.). This has a 95% efficacy rate. It was the first vaccine in the world authorized for application. Since December, it's being administered in Great Britain, the United States, and Mexico.
- Moderna (U.S.). This has a 94.1% efficacy rate. It's been authorized for use in the United States.
- CureVac (Germany). In phase 3 testing, including in México through TecSalud.

"These are the three leading vaccines using this messenger RNA methodology," said Martínez, highlighting the importance of ultra-cold storage to retain the lipid membrane surrounding the mRNA.

- Non-replicating adenovirus vectors:
 - These can be stored at normal refrigeration levels.
 - They require 1 to 2 doses, depending on the brand.
 - Average cost to governments: \$4 dollars per dose.

The main and most advanced vaccines:

- AstraZeneca Oxford (U.K.), with a <u>70-90% efficacy rate</u>. Already approved in Mexico, Europe, and the United States.
- SputnikV (Russia), with a <u>91.4% efficacy rate</u>. This was the first publicly announced vaccine. However, at the time, that country's government presented no evidence of having completed all the testing phases. It is currently in the approval process in several countries, including Mexico.
- CanSino Biologics (China and Canada). In the last phase of testing. It's one of the few that requires only a single dose.
- Johnson & Johnson (U.S.). In the last phase of testing.

- Other vaccines:

- Sinopharm (China). Uses the traditional inactive or attenuated virus method. Sinopharma, with a <u>79% efficacy</u> rate. It's been approved in Peru and is process of being approved in Mexico.
- Novavax (U.S.). It uses the method of protein subunits, which are harmless protein portions
 of the virus that cause the immune system to react to protect itself.



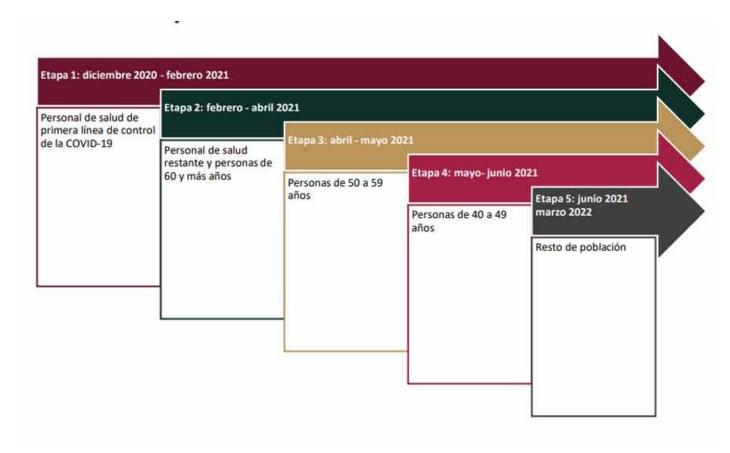
width="900" loading="lazy">

When is it my turn / can I get vaccinated against COVID-19 in Mexico?

The vaccination plan, which will be free and universal for the Mexican population, has been divided into stages according to population groups.

- Stage 1: December 2020 February 2021: COVID-19 front-line healthcare personnel
- Stage 2: February April 2021: Remaining healthcare personnel and people over the age of 60
- Stage 3: April May 2021: People between the ages of 50 and 59
- Stage 4: May June 2021:

- Stage 5: June 2021 - March 2022: The rest of the population.



width="900" loading="lazy">

- Can pregnant women and children get vaccinated?

The Mexican government has determined that, for now, pregnant women and children won't be vaccinated until there's more evidence on their use in this population.

Myths and questions about vaccination

- Is it true that a chip is injected into people with the vaccine?

This is false, and it's just one of the conspiracy theories that's been circulated on the Internet.

- Is it true that these vaccines were rushed to approval without sufficient evidence? How is vaccine efficacy tested and measured?

Although the process has been quicker than any before due to the situation and emergency authorizations from the authorities, the vaccines have complied with the phases that need to be

carried out.

In addition, laboratories have to report all incidents that occur.

The World Health Organization (WHO) establishes these tests for vaccines to demonstrate safety and efficacy:

Pre-clinical phase: Experimental results on efficacy and tolerance. Tissue or cell cultures and/or testing on animals is done.

Phase 1: Evaluation in a small number of people, usually fewer than 100 adults to initially evaluate safety and effects and determine dosing and method of administration.

Phase 2: Clinical trial with a larger group of people, between 200 and 500, to track safety. Trials to determine the efficacy of the vaccine.

Phase 3: More comprehensive safety and efficacy assessment. Tested on hundreds or thousands of people in one or more countries. Half of these receive a placebo, and the other half receive the actual vaccine.

- Is it true that vaccines cause autism?

This is false, and the story that has spread came from a scientific paper published in The Lancet magazine in 1998 that was later removed and refuted by the publication itself due to inconsistencies, lack of rigor, and fraudulent evidence found in the author's data.

In the original article, which has been discredited by the scientific community, author Andrew Wakefield, whose medical license was revoked in the U.K. as a result, sought to link autism to measles, mumps, and rubella vaccines.

- Do vaccines protect against the new strain of the virus?

Dr. Martínez says that according to tests, vaccines work against B.1.1.7, the new variant of SARS-COV-2, originally reported in Europe that has already spread to America and Mexico.

It's common for viruses to have certain variations, he explained, but added that laboratories have indicated that so far current vaccines also cover this new strain.

- If I've already had COVID, should I still get vaccinated?

Yes. Even people who have already had COVID-19 should get vaccinated.

- Can I get vaccinated if I have allergies?

There have been a few cases of side effects in people with very severe allergies who had allergic reactions to a component of the Pfizer vaccine.

These are not the normal allergies that a large part of the population has but allergies causing some people to have severe reactions. It's recommended that these people get a different vaccine.



width="900" loading="lazy">

What can we hope for in the future?

With mass vaccination, we can expect a high percentage of the population to gain a significant degree of immunity to overcome the pandemic.

Dr. Michel Martínez believes that in the future vaccination against COVID-19 could become regular and frequent, even something repeated annually, like the flu vaccine.

He also believes that new strains and mutations of the virus will continue to appear, and some will require modifications to the vaccines, but the messenger RNA technique will allow the vaccines to be updated very quickly.

"Covid vaccines are going to become an annual vaccine, not because the protective effect won't last more than a year but because there may be changes like what we're seeing in the U.K. with this strain."

"One of the advantages of messenger RNA technology is that it's going to be much faster to adjust and keep up with the virus and generate vaccines against new strains of COVID-19."

"One of the advantages of messenger RNA technology is that it's going to be much faster to adjust and keep up with the virus."

YOU'LL DEFINITELY WANT TO READ:

https://tec.mx/en/news/national/health/tecsalud-begin-testing-german-vaccine-against-covid-19-mexico