







Frequently Asked Questions

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Answered by Dr. Murji, SCHC's Preventative Health and Wellness Physician Lead

IS THE PANDEMIC OVER OR NOT?

While we have made significant progress in managing COVID-19 through vaccination efforts, treatments, and public health measures the situation is dynamic. Technically the "emergency" phase of the COVID-19 pandemic is over but it's still important to remain vigilant and continue following public health guidelines.

Coronavirus disease (COVID-19) pandemic (who.int)

WHAT IF I DON'T WANT TO TAKE VACCINES? WHAT IS THE RISK?
DO YOU RECOMMEND OTHER NON-VACCINE RELATED
PROTECTION DURING THE FLU SEASON? ARE VACCINES THE ONLY
WAY TO PREVENT ILLNESS?

By not getting vaccinated you expose yourself to a higher risk of contracting and spreading diseases. In the case of COVID-19, you would be at a higher risk for Long-Haul COVID Syndrome, severe disease, and death.

Vaccines are a primary defense but not the only one. You should also practice regular handwashing, maintain good hygiene, avoid close contact with sick individuals, and follow public health guidelines, such as wearing masks in crowded areas.

DOES IT PROTECT AGAINST THE LATEST VARIANT?

Yes! This vaccine has been designed to target the XBB.1.5 variant and thus does a better job at protecting against this recent variant than the previous (bivalent) vaccine.

IS IT MONOVALENT OR BIVALENT? DOES THIS MAKE A DIFFERENCE?

This new XBB.1.5 vaccine is monovalent. This is different than the booster from last year which was bivalent, targeting two strains at once. Right now, given the current context and what we know about COVID, a monovalent vaccine is the most appropriate vaccine.









WHEN SHOULD THE NEXT VACCINE BE TAKEN?

You should take the XBB.1.5 vaccine if it has been more than 6 months since your last booster or COVID infection.

ARE THERE ANY LONG TERM EFFECTS OF TAKING THE VACCINE?

By taking the vaccine, your immune system will produce antibodies that will reduce your risk of COVID in the future. No serious negative side effects.

IS THERE STILL THE RISK OF SERIOUS SIDE EFFECTS FROM THE VACCINE LIKE MYOCARDITIS?

Myocarditis is an inflammation of the muscle of the heart and typically occurs after being infected with a virus. This risk is mainly in young men aged 16-29, and is rare with vaccination. In fact, myocarditis is 16x more likely to occur from a COVID infection than from the vaccine. Thus, vaccination ultimately lowers one's risk for myocarditis in the context of COVID.

DOES THE VACCINE PREVENT POST-COVID SYNDROME (LONG HAUL COVID)?

Similar to how the vaccine lowers risk of severe disease, hospitalization, and death from COVID, the vaccine also lowers the risk of long-haul COVID syndrome. This is important because everyone, especially young and healthy people want to avoid Long-Haul COVID syndrome - it gives people headaches, fatigue, nausea, brain fog, and other symptoms for months.

CAN THE COVID AND FLU VACCINE BE TAKEN TOGETHER?

Yes - they can be taken at the same time! Inject into a different arm if possible.

WHO IS ELIGIBLE? WHEN CAN I GET MY VACCINES?

Anyone 6 months of age or older can get either the COVID and/or the flu vaccine. High risk groups including healthcare workers, immunocompromised, and long term care residents can get the vaccines in early October. The vaccines will be available for the general public around the end of October.

ARE THERE DIFFERENT TYPES OF FLU VACCINE? WHICH ONE SHOULD I TAKE?

Yes – if you are less than 65 years old, take the standard dose quadrivalent vaccine (QIV), also known as FluLaval Tetra and Fluzone Quadrivalent. If you are 65 or older, opt for the high dose quadrivalent vaccine (QIV-HD), also known as Fluzone High-Dose Quadrivalent

