

Q&A about the Moderna COVID-19 vaccine

Q1. What kind of vaccination is the Moderna COVID-19 vaccine?

A1. The Moderna COVID-19 vaccine is a mRNA (messenger RNA) vaccine as the Pfizer vaccine. By the administration of the genetic code (mRNA) to a protein causing the formation of the virus, the protein of the virus will be produced within the body. Immunity is acquired by developing antibodies against the protein.

Q2. How effective is it? How long is the duration of the effect?

A2. For the benefit in reducing incidence, an exceedingly high effectiveness of 94% has been known. Furthermore, high efficacy in preventing increase in severity has been confirmed. In addition, the effectiveness of preventing infection have been validated. It has been announced that the benefit in reducing incidence at 6 months after the 2nd dose is 90% or more. The persistence of the effect requires the analysis of various amassed data.

Q3. Is it good for the variant strains, too?

A3. A change in the effectiveness against the Alpha variant that was first detected in the United Kingdom had not been recognized. While the rate of effectiveness against the Beta variant detected in South Africa and Delta variant detected in India declined slightly, a high degree of effectiveness remains.

Q4. Can pregnant or lactating women or those planning for pregnancy be vaccinated?

A4. Pregnant or lactating women or those planning for pregnancy can be vaccinated. There is no report of mRNA (messenger RNA) vaccines adversely affecting pregnancy, the fetus, breast milk, and reproductive organs.

Q5. I have a history of previous allergic reaction and anaphylaxis and I fear experiencing an allergic reaction again so is it ok to be vaccinated?

A5. It is not a reason not to be vaccinated simply because of having a food allergy, bee sting allergy, bronchial asthma, atopic dermatitis, allergic rhinitis, pollen allergy, hives, allergic constitution, etc. Furthermore, it is possible to be vaccinated for those who have allergies to those not related to the vaccine component; provided however, that those who have a history of previous serious allergic reaction including anaphylaxis with substances of some kind including drugs and food should wait longer than usual (30 minutes) after the vaccination at the vaccination site to be able to take swift countermeasures when one feels ill immediately following the vaccination.

Q6. Depending on a pre-existing condition (illness), is there a difference in the vaccine effect or adverse reaction?

A6. It is known to have a high preventive effect for those with a pre-existing condition including high blood pressure, diabetes, etc. It is possible for those who have a history of previous serious symptoms of allergy including anaphylaxis to be kind of susceptible to anaphylaxis which is a rare adverse reaction. For those who have a history of previous serious symptoms of allergy, wait for about 30 minutes at the vaccination site after the vaccination. For adverse reactions other than anaphylaxis, there is no report of a difference in frequency depend on the presence or absence of a pre-existing condition.

Q7. I am taking “blood thinner medication”, can I be vaccinated?

A7. You can be vaccinated. Anticlotting drugs may cause uncontrolled bleeding so for those taking them apply pressure for 2 minutes or more after the vaccination. You do not have to stop taking medication before the vaccination.

Drugs

Anticlotting drugs Drugs often prescribed to those with abnormal cardiac rhythm, thrombosis, and after heart operation.	
Trade name	Generic name
Warfarin	Warfarin potassium
Prazaxa	Dabigatran etexilate
Xarelto	Rivaroxaban
Eliquis	Apixaban
Lixiana	Edoxaban tosilate hydrate

Q8. Can those who were infected with COVID-19 be vaccinated?

A8. Those who were infected with COVID-19 can be receive 2 doses as usual at this time. If one was infected with COVID-19 once, it is possible for one to be infected once again and because it is reported that the level of circulating antibody against COVID-19 is higher for those vaccinated than for those who were naturally infected.

Q9. Is it true that there are people who suffered from myocarditis and pericarditis when vaccinated?

A9. The frequency is extremely rare overseas, however, cases of myocarditis and pericarditis after vaccination are reported. If there are symptoms including chest pain, palpitation, breathlessness, edema, etc. within a few days after vaccination, convey that you were vaccinated. It has been reported that the tendency has been for young people especially men to develop symptoms within a few days after the 2nd dose. A diagnosis of myocarditis results in the need for hospitalization in general, however, it is assumed that many will recover spontaneously with rest. Mild conditions are often the case and even though there is a risk of myocarditis and pericarditis, it is thought that vaccination is at much greater advantage.

Q10. By the administration of mRNA, I am worried about genetic mutation and genetic consequences to my children, etc.

A10. The mechanism is the formation of mRNA from genetic code (DNA) in the body and the flow of information is a one-way street so DNA does not get made from the mRNA. Furthermore, the mRNA is in no way embedded in a person’s genetic code (DNA). It is thought that it will not become incorporated into the genetic code of the sperm and egg. The mRNA will last from minutes to days and be broken down.

Q11. Will I get a positive for a PCR test when vaccinated?

A11. For the vaccine, immunity is created by administering some genetic code of the protein engaged in the construction of the virus. The virus itself is not administered in the body so you could not become positive for a PCR test by vaccination.