

3 ways physicians can help combat COVID-19 vaccine hesitancy

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More than 10 million people in the United States have received the first dose of their COVID-19 vaccine, but as more Americans receive the preventive measure every day, there is still a large percentage of the population that is reluctant to get the vaccine.

A Pew Research Center survey of nearly 13,000 Americans conducted in mid-November found that 39% said they “probably” or “definitely” would not get the vaccine, though about half said they might choose vaccination after learning more. Among Black Americans, about 58% told Pew researchers they planned to decline vaccination, compared with 39% of whites, 37% of Hispanics and 17% of Asian Americans.

In an effort to help combat this vaccine hesitancy, AMA President Susan R. Bailey, MD, joined a panel of other experts to discuss the long road ahead on COVID-19 vaccination in a panel hosted jointly by the National Association of Black Journalists and the National Association of Hispanic Journalists.

The panelists identified three ways that journalists, physicians and others communicating about COVID-19 vaccination can help offset COVID-19 vaccine hesitancy.

Reassure patients that “no corners were cut”

Operation Warp Speed (OWS) was launched by the federal government to accelerate the timeline of vaccine development in response to COVID-19, and that acceleration has led some patients to be concerned that more emphasis was put on speed than safety in the vaccine development. Dr. Bailey, an allergist and immunologist in Fort Worth, Texas, said it is critical for patients to appreciate that was not the case.

“It’s important to understand that no corners were cut in developing this vaccine,” she said. “Red tape was cut, but no corners were cut scientifically.”

Rather than skipping steps in the development process, OWS made it possible for steps to be done simultaneously. For example, the Pfizer-BioNTech and Moderna vaccines began to be manufactured on a large scale prior to confirmed phase 3 clinical trial findings confirming their safety and efficacy. Traditionally, that mass production would take place only after those results were known.

Learn more with the AMA about COVID-19 and vaccine development., and find out some of the policy changes needed to help overcome COVID-19 vaccine hesitancy among Black patients.

Share findings from diverse trial pool

Dr. Bailey commended both Pfizer and Moderna for working to get a diverse pool of participants involved in their vaccines’ clinical trials. As of Nov. 30, Hispanics made up 20% of those participating in the Moderna vaccine trial and 13% of the Pfizer vaccine trial, while African Americans made up 10% of each trial’s participants.

The National Medical Association—the largest organization for African American physicians and their patients in the country—found those percentages to be large enough to have confidence in the overall health outcomes in the clinical trials. The NMA COVID-19 Task Force on Vaccines and Therapeutics met with clinical scientists from Pfizer and Moderna and reviewed clinical outcome data from the Centers for Disease Control and Prevention and the Food and Drug Administration (FDA) to look for any indications that the Black community might be at higher risk of unfavorable outcomes from the vaccine.

The task force found that efficacy and safety of the vaccine were observed and consistent across age, gender, race and ethnicity in seniors. As a result, the NMA supported the FDA’s granting emergency use authorization for both vaccines.

Ricardo Correa, MD, an AMA member and director for diversity at the University of Arizona College of Medicine and Phoenix Veterans Affairs Medical Center, said the Latino community should also feel confident in the vaccine trial results.

“The pharmaceutical [companies] tried to involve many diverse populations in these trials ... and the data we have right now includes those populations,” said Dr. Correa, who serves on the AMA International Medical Graduates Section governing council.

Read this Q&A with Dr. Correa, an endocrinologist, to learn more about his award-winning efforts to boost physician diversity.

Confront misconceptions

There are misconceptions about the fact that Pfizer and Moderna both developed messenger RNA (mRNA) vaccines, the panelists said. The mRNA vaccines do not contain a live virus, which means they cannot give a person COVID-19. While there are no licensed mRNA vaccines in the United States yet, researchers have studied and worked with this type of vaccine for decades, not just the past 10 months.

“The mechanism has been studied for a long time,” Dr. Correa said. “When I explain that to patients and even health care workers who are afraid of taking it, they start to be more flexible and then accept it.”

For people concerned after hearing stories of patients having side effects serious enough to require medical attention, Dr. Bailey cautioned that those rare instances are a small fraction of the total number of people who receive the vaccine without complications. Additionally, Dr. Bailey addressed the issue of herd immunity and some potential misunderstandings of the concept.

“There's not a definite cutoff point where a switch is [flipped] and all of a sudden, we're all safe,” Dr. Bailey said. “It's a continuum. It's all going to depend on adequate cooperation of the federal government with the state and local authorities ... as well as being able to combat vaccine hesitancy to make sure people feel comfortable getting it in the first place.”

Read more from Dr. Bailey about why the U.S. needs a unified and comprehensive pandemic response.