No, the COVID-19 vaccines don’t affect fertility

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What’s the news: The evidence shows that COVID-19 vaccines are highly safe and effective at reducing the risk of severe disease, hospitalizations and death, according to an AMA-produced column that dispels misinformation and has been posted by news outlets around the country.

“With high levels of community spread of COVID-19, we’re once again fighting a two-front war: against the virus and against rampant misinformation,” said AMA President Gerald E. Harmon, MD, in the column, “COVID-19 Vaccine Myths Busted,” that appeared in the Arizona Daily Star and other media outlets.

Why it’s important: The column debunks six pervasive anti-vaccine myths that have been widely circulated and have contributed to hesitancy that has left over 30% of eligible Americans unvaccinated. Among the myths busted are inaccurate statements on the vaccines’ impact on fertility and pregnancy.

“Risks to fertility or the ability to become pregnant after receiving a COVID-19 vaccine were disproven through clinical trials and real-world data points,” says the AMA column. “Moreover, COVID-19 itself carries significant risks for pregnant women, including higher risks of preterm labor and stillbirth, and higher risks of hypertension and pneumonia for pregnant women.”

Learn more from ob-gyn Denise Jamieson, MD, MPH, on COVID-19 vaccines during pregnancy.

The AMA column also sets the record straight on these other myths and misconceptions related to the safety, efficacy and necessity of COVID-19 vaccination:

- Can vaccinated people “shed” spike proteins, affecting those close to them?
- I’ve already had COVID-19. Do I need the vaccine?
- Why do I need the vaccine if breakthrough infections are possible?
I’m young and healthy.
I have allergies.

Dr. Harmon and other AMA leaders have firmly spoken out against COVID-19 vaccine misinformation and enlisted the media’s help to stop the spread of false narratives.

The news media should “tell the truth about the safety and efficacy of these COVID-19 vaccines, the rigorous research and review process behind them, and to be voices for science and evidence for their audiences,” Dr. Harmon, a family physician in South Carolina, wrote in a previous AMA Leadership Viewpoints column.

“Reporting on unproven and potentially dangerous treatments for this virus, including ivermectin, hydroxychloroquine and other treatments that have not been scientifically validated, confuses the public and puts lives at even greater risk,” he added.

Being a COVID-19 myth buster has been a vital new role for physicians to take on, according to AMA Immediate Past President Susan R. Bailey, MD.

“The COVID-19 vaccines available to us today are grounded in decades of scientific research; they are in no way experimental or unproven,” wrote Dr. Bailey.

“For while the vaccines were made available through an emergency use authorization—a long-standing regulatory path created specifically for a public-health emergency like the one we are experiencing—no steps were skipped nor any shortcuts taken in their development or testing,” added Dr. Bailey, an allergist and immunologist in Fort Worth, Texas.

Recently, the FDA approved the Pfizer-BioNTech COVID-19 vaccine known as Comirnaty for individuals 16 years of age and older.

Learn more: The column is being distributed through StatePoint Media, an online service-journalism company specializing in editorial content with tangible information that readers can turn into action. More than 15,000 newspapers, magazines and radio and television stations have registered to use its content.

The AMA has developed frequently-asked-questions documents on COVID-19 vaccination covering safety, allocation and distribution, administration and more. There are two FAQs, one designed to answer patients’ questions (PDF), and another to address physicians’ COVID-19 vaccine questions (PDF).