



RUMOURS AND FACTS BULLETIN

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We do not need to wear a mask after getting vaccinated.

Although vaccines have been shown to effectively prevent COVID-19 diseases, especially severe disease, data is still not adequate to know whether vaccination will prevent transmission. This means although a person is protected due to vaccination, the person may still transmit the virus to other persons.

Pharmaceutical product such as medicines and vaccines are not 100% effective. This means that some people who have received the vaccine may still have the disease.

Therefore, it is necessary that all public health measures be strictly followed, including wearing of masks, keeping physical distance, and keeping hand hygiene (hand washing or use of hand sanitizers) even after getting vaccinated.

The COVID-19 pandemic is still ongoing. Data from the past 4 to 5 weeks shows that the number of cases globally and in the South-East Asia Region are increasing. As of 14 March, the global increase in COVID-19 cases compared to the previous week was 10% and in the South-East Asia Region was 19%.

Many countries are restricting the use of the AstraZeneca vaccine.

Seventy-one countries globally have been using the AstraZeneca (AZ) vaccine. Currently, AstraZeneca vaccine is the COVID-19 vaccine used by most countries in the world.

Some countries in the European Union (EU), and few beyond the EU, had temporarily stopped the use of the AZ vaccine in their immunization programmes. This was a **precautionary measure** based on reports of rare blood coagulation disorders in persons who had received the vaccine. Other countries in the EU, and countries beyond the EU, having considered the same information, had decided to continue using the AZ vaccine in their immunization programmes.

The AstraZeneca vaccine remains a valuable tool in the fight against severe COVID-19 infections and has been shown to reduce deaths due to COVID-19 by 80%. WHO considers that the benefits outweigh the risks of the vaccine and that vaccinations with the AstraZeneca vaccines should continue.

The European Medicines Agency's safety committee has reviewed the data and confirmed that the benefits of the vaccine in combating the widespread threat of COVID-19 continue to outweigh the risk of side effects, and that the vaccine is not associated with an increase in the overall risk of blood clots in those who receive it.

WHO Global Advisory Committee on Vaccine Safety (GACVS) COVID-19 subcommittee has reviewed the data and concluded that the vaccine continues to have a positive benefit-risk profile, with tremendous potential to prevent infections and reduce deaths across the world.

People below 65 years of age are getting vaccinated if they have connections at vaccination centres.

The Ministry of Health and Population has given strong guidance to provide vaccination to only the targeted groups, which are determined based on high risk to the disease. This is because of vaccine availability and the need to provide vaccination to the most at-risk population first. Vaccination has been provided to health care workers and other front-line workers in January/February. In the past two weeks, vaccination was provided to 65 and above years of age people in all districts, including to 55 and above years people in Himali districts.

There is a shortage of COVISHIELD vaccine in Nepal. The second phase of vaccination is halted due to vaccine shortage.

In Nepal, the vaccination has NOT come to a halt. In the past two weeks, vaccination was provided to people 65 years of age and above in each municipality of all districts in Nepal. Almost all municipalities have now completed vaccination for this target group. Based on vaccine availability, the Government will announce the next target population to be vaccinated.

The second dose of vaccination for the first priority (health care workers and other front-liners) who were given the first dose of the vaccine between 27 January – 22 February 2021, is planned for 20 April – 24 April.

To date Nepal has performed very well and has vaccinated 5.5% of its population with a first dose of the vaccine. This is above the global average of 5.01%. Many countries have still not been able to start vaccination.

There is supply constraint of vaccines around the globe. Due to manufacturing and supply constraints, as the demand is very high globally, large quantities of vaccine will not be available at once to vaccinate large populations.

COVID vaccines have more negative effects than positive. It is better if we do not take the vaccine.

COVID-19 vaccines are a valuable tool in the fight against COVID-19 and has been shown to reduce severe disease and death due to COVID-19.

The COVID-19 vaccines being used in each country globally are reviewed and approved for use in that country by the national regulatory authority of the country based on quality, safety and efficacy data. To date, four COVID-19 vaccines have also received WHO emergency use listing.

The COVID-19 vaccine being used in Nepal is approved for use by the National Regulatory Authority of Nepal and has also received WHO emergency use listing.

After COVISHIELD vaccine, you will feel weak and be unable to go to work or perform well physically for a year.

There has been no reported case of anyone feeling weak and not being able to perform well physically for a year.

Globally, more than 390 million doses of COVID-19 vaccines have been administered. In Nepal, more than 1.65 million doses of COVID-19 vaccines have been provided.

This virus can cause severe disease and death, and vaccination is important to prevent COVID-19 disease, especially severe disease and death.

After vaccination, mild symptoms may be experienced such as having fever or injection site tenderness. These symptoms usually last only few days.

WHO is urging not to make vaccination mandatory for those travelling abroad.

At the present time, it is WHO's position that national authorities and travel operators should not introduce requirements for proof of COVID-19 vaccination for international travel as a condition for departure or entry for a number of reasons. The principal reasons are that the efficacy of vaccines in preventing transmission is not yet clear, and the current limited global vaccine supply.

While many vaccines have been shown to protect against disease, studies are ongoing to determine if they also stop the transmission of the virus, meaning a person who is vaccinated may be able to carry the virus and give it to others. WHO recommends that people who are vaccinated should continue to comply with other risk-reduction measures when travelling.

The limited global supply of vaccines is another factor. Preferential vaccination of travellers could lead to fewer vaccines for those who are considered at-risk.

WHO's recommendations will evolve as supply expands and as evidence about existing and new COVID-19 vaccines is compiled.

The effect of COVISHIELD lasts only 15-20 days, so it is quite useless.

This is not true. Even with the first dose of the vaccine, a high level of efficacy (protection) has been shown to last for 12 weeks. With the second dose of the vaccine, the protection lasts even longer. The total duration of protection provided by COVID-19 vaccines is still being studied as these vaccines have only been used for several months now.

What we know is that SARS-CoV-2 is dangerous and can cause severe disease and death. The available vaccines being used are effective in providing protection from this disease.



Source: Ministry of Health and Population/ World Health Organization

For questions and concern call at:

Hotline numbers:

Ministry of Health and Population (MoHP)

1115, 1133, 1092



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