

Are We Ready for the COVID-19 Vaccine?

Boo Woi Hon^{1*} and Yong Kui Choon²

¹Ampang Baru Community Clinic, Ipoh, Perak, Malaysia

²Chemor Health Clinic, Chemor, Perak, Malaysia

ARTICLE INFO

Article history:

Received: 1 December 2020

Accepted: 2 December 2020

ONLINE:

DOI 10.5001/omj.2021.92

Dear Editor,

We read with interest the recent November 2020 editorial by Al Awaidy and Khamis.¹ The call to prepare the global community for the imminent COVID-19 vaccine could not be more timely as November also marked a pivotal milestone in the race to roll out COVID-19 vaccine. There are promising reports from interim analysis of phase 3 trials from the leading vaccine candidates Pfizer and Moderna with over 90% effectiveness, and an average 70% from AstraZeneca.² As the world embraces the good news, the question of equitable access arises particularly over the concern that wealthier countries may have a monopoly over future vaccines.³ This is indeed alarming for lower and middle income economies. The question of if humanity will prevail against the free market economy amidst this trying time of a global pandemic remains to be seen.

With potential vaccines on the horizon, the focus should now be on preparing the local community for the looming mass vaccination program. A global acceptance study conducted in June 2020 that covered 19 countries and comprised approximately 55% of the world's adult population reported that only 46.8% of the respondents completely agree to take the vaccine should it be generally available.⁴ This result is similar to a Malaysian survey in which 48% of the adults responded that they would definitely get themselves vaccinated.⁵ On the other hand, even against the backdrop of a prospective vaccine that is free of charge, only 58% of Australian adults expressed a definite intention to get vaccinated.⁶ This corresponds to a Canadian survey where 57.5% respondents indicated that they are very likely to accept vaccination.⁷ A survey of seven European countries found overall acceptance to vaccine at

73.9% with considerable heterogeneity from 62% (France) to 80% (Denmark).⁸

These results are hardly reassuring and are evidently short of the projected ideal vaccine coverage for herd immunity to be achieved.^{6,9} It is therefore due time for policymakers to adopt a multi-pronged strategy which incorporates effort to promote awareness and acceptance of the imminent vaccines, on top of the current aggressive containment measures. Primary care providers undeniably have got their work cut out to get the local community ready for the vaccine. Health care frontliners have got to rise to the upcoming challenge of dealing with vaccine hesitators and refusers by arming themselves with the necessary knowledge and counselling skills: a foreseeable daunting task in the current digital age thriving with vaccine misinformation and disinformation.

Nevertheless, the hope for return to normalcy hinges greatly on the success of future mass vaccination against the virus. As such, the siren call to prepare the local community for the coming mass vaccination should be heeded right now. The pandemic leaves no room for complacency with the latest global death toll of > 1.4 million¹⁰ and soaring.

REFERENCES

1. Al Awaidy ST, Khamis F. Preparing the community for a vaccine against COVID-19. *Oman Med J* 2020 Oct;35(6):e193.
2. Callaway E. Why Oxford's positive COVID vaccine results are puzzling scientists. *Nature*. 2020 [cited 2020 Nov 27]. Available from: <https://www.nature.com/articles/d41586-020-03326-w>.
3. Lovett S. Pfizer vaccine: over 80% of doses already sold to world's richest countries. *The Independent*. 2020 [cited 2020 Nov 25]. Available from: <https://www.independent.co.uk/news/health/covid-pfizer-vaccine-doses-latest-uk-supplies-b1721162.html?amp>.

*Corresponding author: wwoihon@hotmail.com

4. Lazarus JV, Ratzan SC, Palayew A, Gostin LO, Larson HJ, Rabin K, et al. A global survey of potential acceptance of a COVID-19 vaccine. *Nat Med* 2021;27(2):225-228.
5. Wong LP, Alias H, Wong P-F, Lee HY, AbuBakar S. The use of the health belief model to assess predictors of intent to receive the COVID-19 vaccine and willingness to pay. *Hum Vaccin Immunother* 2020 Sep;16(9):2204-2214.
6. Edwards B, Biddle N, Gray M, Sollis K. COVID-19 vaccine hesitancy and resistance: correlates in a nationally representative longitudinal survey of the Australian population. *PloS one* 2021 Mar;16(3):e0248892.
7. Frank K, Arim R. Canadians' willingness to get a COVID-19 vaccine: group differences and reasons for vaccine hesitancy. *Statistics Canada Catalogue*; 2020.
8. Neumann-Böhme S, Varghese NE, Sabat I, Barros PP, Brouwer W, van Exel J, et al. Once we have it, will we use it? A European survey on willingness to be vaccinated against COVID-19. *Eur J Health Econ* 2020 Sep;21(7):977-982.
9. Anderson RM, Vegvari C, Truscott J, Collyer BS. Challenges in creating herd immunity to SARS-CoV-2 infection by mass vaccination. *Lancet* 2020 Nov;396(10263):1614-1616.
10. World Health Organization. WHO coronavirus disease (COVID-19) dashboard. 2020 [cited 2020 Dec 1]. Available from: <https://covid19.who.int/>.