

Are coronavirus vaccines safe for nursing home residents? Here's what the experts say

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Moldaw resident Phyllis Tuber gets an assist to go outside. Medical experts say despite a lack of research specific to long-term care centers, the benefits of getting vaccinations outweigh the risk for residents.

Beth Roth, a former nurse who lives in a Palo Alto long-term care facility, is looking forward to taking the coronavirus vaccine and has faith in the science behind it.

Her chance may be coming soon.

Roth, 77, lives at Moldaw Residences, which expects to start receiving its first doses of vaccines as soon as this week. Facilities like Moldaw, along with

hospitals, are among the first in line to receive doses because their residents are at the highest risk of dying from COVID-19.

But are these new vaccines safe for elderly patients? Roth is willing to make an educated guess.

“I think nowadays with the vaccine for COVID, we need to believe in our scientists, we need to believe that it is safe and that it’s going to lead us to victory,” Roth said. “I think (the vaccine) is just going to continue to give me that hope to hang in there, to be patient, to follow the rules and pray for the day that we have our entire world vaccinated — so that we reach that herd immunity and can return to the new normal.”

Roth’s hope comes at a time that nursing home and long-care residents across the country will be lining up for vaccinations. While side effects pose some concerns and more research data would be preferable, most experts agree it’s the best course of action for seniors to get inoculated, as the reward far outweighs the risk.

A vaccine from Pfizer, the first to get authorized in the U.S., was 95% effective at preventing COVID-19 in clinical trials and appears to work well across all age groups, including older people. About 21% of the participants of Pfizer’s clinical trials were 65 or older, and 4% were 75 or older. The vaccine was 93% effective among people ages 65 to 75, according to a Food and Drug Administration analysis of Pfizer’s clinical trial data. Older people in the trials had fewer side effects — fever, fatigue, headache and chills — than younger people, which is expected because immune responses weaken with age.

It’s unclear, though, if any of the trial participants were long-term care facility residents, who tend to be older and have comorbidities and cognitive impairment. Pfizer did not respond to a question about whether its trials included long-term care facility residents.

COVID-19 vaccines are being studied in older adults with underlying health conditions, but long-term care facility residents have not been specifically studied, according to the Centers for Disease Control and Prevention’s Morbidity and Mortality Weekly Report, issued in early December. Long-term care residents are often excluded from clinical trials for drugs and vaccines because researchers want to test new drugs under ideal circumstances.

Some medical experts worry there is not enough data showing the vaccine is safe and effective among long-term care residents, specifically. This could mean the approved doses may not work as well or may prompt different side effects in this population.

“(The Pfizer and Moderna vaccine trials) made an effort to include older adults, but the older adult population is really diverse,” said Ashwin Kotwal, a geriatrics and palliative care doctor at UCSF. “And the people they included were generally healthy, with fewer comorbidities, fewer medical conditions and certainly not as medically complex or frail as the people who are residing in long-term care facilities. Some people may respond just fine to the doses that were in the trials and others may actually require a higher dose to be more effective.”

Kotwal said he’d like to see more safety data from long-term care residents so patients and families can have a better idea of what kind of side effects to expect. Still, Kotwal said he would recommend to patients living in long-term care facilities to get the vaccine. The disease has been particularly devastating for nursing homes in the United States, where residents make up about 6% of coronavirus cases but 40% of deaths.

“I do think the benefits outweigh the risks by far,” Kotwal said. “I think we just really need to be careful about, one, monitoring people over time and trying to get a better understanding of the long-term effects of the vaccine. And two, being really open and honest with patients and family members that this is a new vaccine and we’re learning, and to be aware of the potential side effects and how to get people through those periods of uncertainty.”

A key federal committee that advises the CDC on vaccine policy, the Advisory Committee on Immunization Practices, has called for additional efforts to track side effects among long-term care facility residents who get the vaccine. Those must be reported to the federal Vaccine Adverse Event Reporting System, which has long existed to track flu and other vaccines.

“I don’t think there’s any question that we need to vaccinate nursing home staff and nursing home residents,” said Dr. Michael Wasserman, past president of the California Association of Long-Term Care Medicine and a geriatrician. “We’d all love to have seen clinical trials that included nursing home residents, but we practice geriatrics every day without clinical trials on

anything we do. ... Here's the bottom line: If you're an 80-year-old and you get this virus, you have a decent chance of dying. So you'd have to have some really bad side effects not to take the vaccine."

Teresa Palmer, whose mother Berenice Palmer lives at the San Francisco Campus for Jewish Living, said she has examined the safety and efficacy data and believes the potential side effects are worth it. Palmer, a geriatrician who makes medical decisions for her mother, said her mother plans to get vaccinated.

"The risk of COVID is so horrendous, the safety profile is good enough for me to ask that my mom get it," Palmer said. "If she has a fever and feels crappy for a few days, that's the way it goes."

Palmer hopes that if most of the Jewish Living staff get immunized, it will lower infection rates at the facility and loosen visitation restrictions. To date, 28 residents and 24 staff members have tested positive. None have died.

"My feeling is the sooner the better," said Teresa Palmer. "My fear is it won't be effective in elderly people. But they will be protected by herd immunity if the staff gets (vaccinated)."

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