

# Mayo Clinic Podcast - Dr. Gregory Poland YouTube Audio Expor...





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## SUMMARY KEYWORDS

vaccine, mayo clinic, greg, questions, people, listeners, immunized, mask, vaccinated, wear, data, continue, variant, cdc, immune response, travel, groceries, protected, risk, acute illness

## SPEAKERS

Dr. Halena Gazelka, Dr. Gregory Poland, Narrator

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-  **Narrator** 00:02  
Coming up on Mayo Clinic Q&A: It's the listeners mailbag.
  -  **Dr. Gregory Poland** 00:06  
So, it really is on us as individuals to get the vaccine that's offered to us, wear a mask where wearing a mask is appropriate, and we will get out of this. We're seeing very encouraging signs.
  -  **Narrator** 00:21  
From updated masking recommendations to vaccines, variants and travel, we answer your COVID-19 questions.
  -  **Dr. Gregory Poland** 00:28  
Somewhere between fall to next Christmas, we're going to be able to offer the vaccine to everybody, every age group, and that's good news indeed.

- D** Dr. Halena Gazelka 00:42  
Welcome everyone to Mayo Clinic Q&A. I'm Dr. Halena, Gazelka. We're recording this podcast on Monday, April 5th, 2021. Well our mail bags are filling up again with your questions. So, here with us today to answer them is Dr. Greg Poland, vaccine, virology and infectious disease expert from Mayo Clinic. Thanks for being here again, Greg.
- D** Dr. Gregory Poland 01:04  
Good to be here, and Happy Easter to everybody.
- D** Dr. Halena Gazelka 01:07  
Yes, thank you. What lovely weather we had in Minnesota. It was just gorgeous out.
- D** Dr. Gregory Poland 01:12  
Yes.
- D** Dr. Halena Gazelka 01:13  
It finally felt like spring, but you know, it's going to snow on us again.
- D** Dr. Gregory Poland 01:17  
Inevitably.
- D** Dr. Halena Gazelka 01:19  
My husband wanted to put the snow blower away and I said no.
- D** Dr. Gregory Poland 01:22  
It's a bad sign.
- D** Dr. Halena Gazelka 01:25  
Well, Greg, we've got a whole bunch of listener questions. And so I think we'll just jump right in. One of the first ones is, if I have had COVID. Do I need to have a vaccine?

D

Dr. Gregory Poland 01:37

Yeah, that's a very good question. We get it a lot. You know, one of the things to contrast and then I'll answer the question, when you get the disease, you have a broad, but fairly shallow immune response. When you get the vaccine, you have a narrow, but very deep immune response. So, we have seen examples of people who have gotten infected, who become susceptible and reinfected. We have not seen that with people who have gotten the vaccine. So, the recommendation because of that observation, is that everybody get a dose of vaccine, including people who have had COVID, we usually wait 90 or more days after that infection before we give the vaccine, because they're pretty well protected for the first 90 days unless they're immunocompromised. The controversy has been do we give one dose or two. Right now, the recommendation is two doses, which I agree with. But there is some ongoing research looking at maybe they only need one. I think that research was initiated when there was a shortage of vaccine, we're no longer in that position. So, we'll see.

D

Dr. Halena Gazelka 02:56

So Greg, does that apply to individuals who have this long COVID or long haulers disease? And has there been any progress in managing those patients?

D

Dr. Gregory Poland 03:05

Well, I'm glad you asked that question, actually, because I did a lot of additional reading about this. And the numbers are holding up somewhere around 30% of people, even who had mild disease, are continuing to have chronic symptoms of COVID-19. So, this is a real hit to the quality of their life. So, when they have those symptoms, simply as we would for anybody, we do give the vaccine to them. And here's the interesting observation. These are observational data. So, we don't have scientific data yet. But somewhere around 30 to 50% of them report a dramatic improvement in their long hauler COVID symptoms.

D

Dr. Halena Gazelka 03:56

Isn't that interesting.

D

Dr. Gregory Poland 03:57

This was unexpected to us. So, some studies have been initiated. We at Mayo Clinic have applied for one a for funding to do one of these studies in order to examine this phenomena.

**D** Dr. Halena Gazelka 04:11  
Wow, that's really fascinating. Now, Greg, I think when we were chatting beforehand, you were telling me that we are vaccinating over 3 million individuals a day is that true.

**D** Dr. Gregory Poland 04:22  
Yes, I mean, this is really nothing short of a miracle.

**D** Dr. Halena Gazelka 04:26  
That is just amazing. So, I had my second vaccine early in February, and I and many of our listeners want to know, how long is it good for? Will I have to have it again? How will I know?

**D** Dr. Gregory Poland 04:39  
Like you Halena, that's when I got my second dose, and I have that same question. Being a little funny about it, but by definition, the longest anybody has been immunized would be the first person entered into the clinical trial. So, what are we talking about seven, eight months. Something like that. So, we know through six to seven months where we have a large amount of data, immunity solid. We're not problems with the vaccine I'm talking about. But what will it be at a year, two years. Again, by definition, we don't know. By then, I think we will have something of what we call a correlative protection, in other words, something we could measure in the blood to say you're protected or you're not protected. And we don't have that yet. So, we're going to have to watch and wait and continue the research to know. Now I think that duration is going to be different for different people. It may be different for people who are immunocompromised, perhaps for people that are very elderly. Different again in a positive sense for very young, healthy people. So, a lot of work yet to be done to define that.

**D** Dr. Halena Gazelka 05:57  
Next, Greg, we have a listener who would like to know if someone is taking an antibiotic, may they get the vaccine or should they wait,

**D** Dr. Gregory Poland 06:05  
They can absolutely get the vaccine. Now, our only precaution is this. Generally speaking, the reason somebody is taking an antibiotic is for an acute illness. That's not always the

case. But we generally defer all vaccines in the setting of an acute illness because we don't want to confuse potential side effects that might occur. It's not a safety issue, it's more a wanting to distinguish between side effects potentially happening from an antibiotic versus a vaccine.

D

Dr. Halena Gazelka 06:44

Now, we've just had Easter and many schools were on spring break, including here in Rochester, Minnesota. Greg, this listener is brave enough to ask the question, what are the current guidelines? What can we do now that we've been vaccinated? Do we need to wear masks when we gather? What are the CDC guidelines about travel? What can you tell us?

D

Dr. Gregory Poland 07:04

Yeah, well, though, they are evolving. And that's a good thing, because they recognize science. They recognize what's happening in terms of the quality of immunity being produced by these vaccines. I mean, it's stunning, the level of efficacy. So, several weeks ago, CDC said, alright, you can have if you're fully vaccinated, you can have other fully vaccinated people into your home without having to wear mass. If somebody is unvaccinated and at risk, then you're better off outdoors, or at least wearing masks. What about travel? So, over the weekend, the CDC released some new interim guidelines saying that if you're fully vaccinated, you can travel domestically and where you can internationally, but continue to wear a mask, continue to distance and sanitize your hands. Now, there's one part about that guideline that I'm not entirely happy with. That's true for you and me, and for most of our listeners. But let's say you're somebody who got your vaccine, maybe while you were getting chemotherapy, or you're taking an immunosuppressive drug, because of a chronic illness you have, or you've gotten an organ transplant, the odds are that your antibody level or your immune response wouldn't be the same as if you didn't have that condition, and were otherwise healthy. So, in those instances, I would be more circumspect. And the CDC kind of covered it by saying the recommendation is still don't travel unless it's essential. But they also are conceding that the data showed the vaccine to be so good in otherwise healthy people that they could travel safely. So, I think that's, that's happy news in many ways. Now, we've talked a lot about building the airplane while we're flying. We don't know what's going to happen yet. We can predict what's going to happen after what happened in spring break. We've seen it happen in other countries right now, in the areas of the US primarily the North Eastern corridor where two thirds of Americans live, the new B-117 virus, the so-called UK strain, just as you and I talked about is now predominating. Now, the vaccine protects you against that. But if you haven't gotten the vaccine, you are at risk now for a variant virus that has a greater risk of transmissibility, and risk of illness.

**D** Dr. Halena Gazelka 09:57  
Greg, what about in our homes when we have people over? Should we be masking if everyone is vaccinated?

**D** Dr. Gregory Poland 10:02  
You know, if everybody is vaccinated, the CDC acknowledges that you don't have to mask now and you can gather indoors. That makes sense, until and if new variants arise that the vaccine wouldn't protect well against. And the longer we wait to get people immunized and get them to accept the vaccine, the greater that risk, but at least right now, you would be safe in doing so.

**D** Dr. Halena Gazelka 10:30  
We talked last week, Greg, about how the vaccine and eligibility has been extended to those 16 and over in many places. What's the latest on kids receiving the vaccine?

**D** Dr. Gregory Poland 10:42  
Yeah, so now several of the vaccine manufacturers have done trials, and they're going to do them down to birth age, just like when we give hepatitis B vaccine at birth. So, they're working their way down, you know, age group by age group. The studies right now involve 12 to 16, or 15 year olds, depending on which vaccine we're talking about. The early data show equal safety. And of course, they produce an immune response better than yours and mine, well better than mine, you're so healthy. You probably have the same immune responses as a healthy teenager, but they did really, really well. So, I think we're going to see the EUA expand to them, and then down to the next group and group by group. So, this is good news, because I think this is going to imply that somewhere between fall to next Christmas, we're going to be able to offer the vaccine to everybody, every age group. And that's good news indeed.

**D** Dr. Halena Gazelka 11:50  
Oh, it's wonderful. I'm still stuck on you comparing me to a teenager because that hasn't happened in decades, so I'll make of that.

**D** Dr. Gregory Poland 11:57  
But it's because you do all the right things. Right diet, right? You exercise regularly, and I'm

serious that makes all the difference in the world for a healthy immune response.

**D** Dr. Halena Gazelka 12:11  
Yep. And every everyone that I interview says no tobacco, no smoking.

**D** Dr. Gregory Poland 12:15  
That's right. And I adhere to those same things. Though again, in the interest of radical honesty, I did have a little bit of extra chocolate this weekend.

**D** Dr. Halena Gazelka 12:26  
Well, who could blame you those bunny ears are just irresistible,

**D** Dr. Gregory Poland 12:30  
Irresistible.

**D** Dr. Halena Gazelka 12:31  
Greg, we have a number of listeners who have children or who have grandchildren and spring is upon us. Can children play outside without masks on? Or do they need to wear masks when they're interacting with kids in the neighborhood or at school?

**D** Dr. Gregory Poland 12:46  
Yeah, this is a this is a tough one. So, you know, I would take it to be pretty much like the recommendations for school, if they're going to be in a big crowd of kids and they're running around outside, probably wear a mask, just like when they're in school. Now, if they're truly outside, and you know, it's my kid and one of the neighbor kids, I feel less strongly about that. Now, the B-117 variant may change that. When you look back, you know, over the past year, kids tended to not be infected and not get sick. That is not true with this variant that is spreading through the US. So that may well change things.

**D** Dr. Halena Gazelka 13:34  
Greg, at the beginning of this, so many people were wiping down their groceries, any boxes that came in from Amazon, etc. and a listener wants to know how careful do we need to be about that now? Do we need to continue to wipe down everything with

antibacterial and antivirals as we were before?

**D** Dr. Gregory Poland 13:57

Again, a very practical question. I mean, my family did the same thing in the beginning of the pandemic until we understood and had some of the data. What those data show at this point is we don't have any clear example. And you can imagine, it's hard to tell, but we don't have any clear example of people getting infected from groceries or from food for example. Now, I do think the possibility, just like influenza, let's say I had the disease and I didn't know it, but I'm coughing or sneezing. I grabbed the door handle and you come right behind me and grab that same door handle and then rub your eye or eat and put your hand in your mouth or something like that. You know, that seems to me that that could still have risk. But in terms of mail, groceries packages, I just don't see any data to suggest that that is an energy worthwhile issue. And the reason, and it sounds a little funny, the reason I say it that way is we are experiencing COVID fatigue. So, if we ask people to do things that have little or no benefit, then they get fatigued of doing the things that have great benefit, like distancing, hand washing, wearing a mask properly. And that's what I want them to concentrate on, not things that are so theoretical that we have yet to define a case happening that way.

**D** Dr. Halena Gazelka 15:38

That really makes good sense Greg, you still stick to hands, face, space and vaccinate. But some of these other rules, perhaps let go.

**D** Dr. Gregory Poland 15:47

Let them go now.

**D** Dr. Halena Gazelka 15:48

There we go. That's great. How will we know Greg that the pandemic is over? Our listeners want to know, everyone does have COVID fatigue, and how well we know that we can stop all of this?

**D** Dr. Gregory Poland 16:01

Well we'll announce it. We'll announce it first on this show.



**D** Dr. Halena Gazelka 16:06  
That's right, right here.

**D** Dr. Gregory Poland 16:07  
I think the practical answer to that question is monitoring. So, when we are continuing to do testing, when we continue to see case rates fall, hospitalizations fall, death rates fall, even though we're back to more normal activities, then we can be assured. When will we get there? It is so hard to predict that. Part of the reason is human behavior. If honestly, if everybody, let's pretend we had no vaccine, if everybody distanced and wore a mask, our case rate would be nearly zero. How can I say that? Because that's exactly what happened in New Zealand, and Australia. So now add wearing a mask and getting everybody immunized, we'd be free to move around the country again, with no or little risk or fear. So, it really is on us as individuals to get the vaccine that's offered to us, wear a mask where wearing a mask is appropriate. And we will get out of this. We're seeing very encouraging signs. It's just hard to bring along everybody and get them to see the same data that you and I see every day.


**D** Dr. Halena Gazelka 17:30  
Questions about the vaccine in pregnancy have been very popular with our listeners. And I'm wondering if you could share for a couple of interested viewers, what is the latest in vaccinations in pregnancy?

**D** Dr. Gregory Poland 17:45  
So, this is a question very meaningful in my family. We're going to have our first grandchild.

**D** Dr. Halena Gazelka 17:50  
Congratulations, that's wonderful.

**D** Dr. Gregory Poland 17:52  
Thank you. So, we have been navigating this very question. So, I absolutely understand. I mean, you know, mothers and fathers have very high appropriately so, protective levels around that pregnancy and around that child. So that's a good thing. Well, what do we know? Well, we have 60,000 pregnant women that have gotten the vaccine and


registered in the V-safe program. And to date, there have been no issues recorded at all. We just had a study released, wasn't my study, but a study was released in the American Journal of Obstetrics and Gynecology, and they had immunized 84 pregnant women, 31 lactating women, and 18 women who were pregnant but did not get the vaccine. No side effect issues. So, safety was equal. And then what they did is they looked at antibody levels in the mothers, in the umbilical cord blood so what the baby is getting, and in breast milk, and found protective levels of antibody in all of that. So, this is doubly good news. It was safe and effective for the mother, safe and effective in the baby. So, you're actually protecting that baby until such time that they might be able to get the vaccine.

 Dr. Halena Gazelka 19:21

Greg, you are just full of good news today. I think we like it when you eat chocolate. Well, that's the end of our list of questions for the day. Do you have anything else you'd like to share with us this week?

 Dr. Gregory Poland 19:35

You know, I just did a show this morning with my daughter who's been on this show with us. And we really talked, we talked for an hour about this idea of people who are hesitant to get the vaccine. And I know there are a lot of them. I get a lot of questions. I take those questions seriously. They don't have the opportunity to read the medical literature like you and I do. That's our job. We get paid to know those data. So, I would say for people that are hesitant about the vaccine, talk to a trusted healthcare provider, go to trusted sites. And I'll just, I'll just promo our own at Mayo Clinic. There is ample information there. We put that information out, and we stake our reputation on that information. We want people to be empowered to make good decisions to protect their health and the health of their family. So, it's basically a plea that as your turn comes up, and everybody's turn will come up now, get good information so that you can make a good decision about your and your family's health.

 Dr. Halena Gazelka 20:48

Well, thank you, Greg, for being here today again.

 Dr. Gregory Poland 20:51

My pleasure.



Dr. Halena Gazelka 20:52

Our thanks to Dr. Greg Poland for being here with us again today to answer listener and viewer questions about COVID-19. Thanks to you too for sending in your questions. Please feel free to continue that. I hope that you learned something today. I know that I did. We wish all of you a wonderful day.



Narrator 21:10

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