

June 22, 2021

Comment to CDC–2021–0034

Mass COVID-19 Vaccination of Adolescents and Children must be Halted or Paused

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The tiny trial of Pfizer vaccine in children has shown its danger, rather than its safety. Millions of children have been vaccinated since May 12, 2021. The common sense demands observing the effects of the vaccination over a few months, at least. That requires halting most vaccinations of children now and observing for two months until the end of August. The same applies, with somewhat lower power, to adolescents.

Summer is a relatively safe season with low incidence of coronaviruses including SARS-COV-2. Coronavirus season starts in the late October. There is no harm in pausing mass vaccination of children and adolescents for two months. If necessary, it can be resumed in late August – early September. Further, Pfizer admits the lower effectiveness after 7 months, especially against variants of concern. To ensure effectiveness of vaccination over the whole coronaviruses season (November – February), it is better to halt it now and to resume it in September.

Even when infected, children and adolescents carry and shed only a tiny amount of the coronavirus compared to adults. Thus, they play almost no role in the coronavirus spread. Continuous vaccination of children cannot be justified, when almost a quarter of people above 65 (~10 million) are not vaccinated (<https://covid.cdc.gov/covid-data-tracker/#vaccination-demographics-trends>). Also, the justified pushback against vaccination of children spills over and raises doubts about COVID-19 vaccination in general, even among population groups that need it.

It is not necessary to remind you, that the guiding principle of healthcare is “do not harm”.

British **Joint Committee on Vaccination and Immunisation (JCVI)** is expected to advise against COVID-19 vaccination of healthy young people below 18, (<https://www.reuters.com/world/uk/uk-ministers-be-advised-against-mass-vaccination-children-telegraph-2021-06-15/> , <https://www.bbc.com/news/health-57496074>) despite the emergency authorization of the vaccine and much larger percentage of vaccinated adults in the UK than in the US.

The same is the position of the German advisory commission **STIKO** (<https://www.reuters.com/world/europe/german-panel-gives-limited-approval-covid-19-shot-adolescents-2021-06-10/>):

*“STIKO said in a statement that it recommends a vaccination only for those youngsters with an illness that raises their risk of a serious case of coronavirus. It **said it was not currently recommending the use of the vaccine for those aged 12-17 without pre-existing conditions**, although noted doctors were allowed to give the shot if the individual accepts the risk.”*

Serious questions have surfaced about the trial and the process through which Pfizer received the vaccine authorization for children: <https://www.covil.co.il/en/this-is-how-pfizer-managed-to-obtain-the-fdas-emergency-authorization-for-children/>

The current Pfizer vaccine is half-obsolete because it targeted the original Wuhan variant. The current variants of concern, such as Delta, are half-way to escape vaccine immunity. If vaccination of adolescents becomes necessary, it is better to be done later with an updated vaccine or improved protocols of administration.

Attached are PDF version of this comment and of another comment supporting halting vaccination of children and adolescents for the canceled June 18 meeting, which is include here by reference.

Thank you in advance for making the right decision.