

[https://nationalpost.com/news/canada/boosters-for-all-some-say-canada-is-foot-dragging-third-shots-while-others-say-most-dont-need-them?utm\\_source=hs\\_email&utm\\_medium=email&\\_hsenc=p2ANqtz-nX8VZfcSoMdMj0BPEwLVTepZd38auXB2zt24DyxCvFic\\_knKe2chnMpOht5lx1x7j2wT](https://nationalpost.com/news/canada/boosters-for-all-some-say-canada-is-foot-dragging-third-shots-while-others-say-most-dont-need-them?utm_source=hs_email&utm_medium=email&_hsenc=p2ANqtz-nX8VZfcSoMdMj0BPEwLVTepZd38auXB2zt24DyxCvFic_knKe2chnMpOht5lx1x7j2wT)

NATIONAL POST

## Boosters for all? Some say Canada is foot-dragging third shots while others say most don't need them

*'There's no danger in people getting a third shot — it's not going to do damage. These are safe vaccines,' says one expert*

Author of the article:

**Sharon Kirkey**

Publishing date: Nov 26, 2021



*Some experts are recommending the booster vaccination as extra protection against hospitalization due to the coronavirus. (Photo by ROBIN UTRECHT/ANP/AFP via Getty Images)*

With a hyper-mutated version of the pandemic virus on the horizon , and an uncertain Canadian COVID winter looming, Dr. Andrew Morris is losing patience.

The Toronto infectious diseases doctor is frustrated with what he sees as the country's foot-dragging over a wider rollout of COVID-19 booster doses.

“I don't know why we're waiting,” Morris said this week. “There's no benefit to holding off” giving third doses of COVID vaccines to everyone who received a second dose at least five months ago, he said. “All we have to do is look at Europe — there is no country that looks pretty good at the moment.”

The booster debate is gaining some urgency. Some see boosters for the already double- or fully-vaccinated as “polishing the immune response of the lucky ones.” as one Italian immunologist told JAMA this week. In Canada, a member of a national network tracking SARS-CoV-2 variants said those who are neither elderly nor immunocompromised likely do not need a third dose yet.

“There's no danger in people getting a third shot — it's not going to do damage. These are safe vaccines,” said Simon Fraser University virologist Mark Brockman, a member of the Coronavirus Variants Rapid Response team. A third dose “probably will, at least temporarily, boost the immune response in the blood that we can measure in the laboratory. So, it will look like it's doing something useful. I'm just not sold that it will change the outcome, compared to perhaps waiting another three or six months, and giving an annual booster.”

Morris and others argue that a booster shouldn't be viewed as a mere topping up, but rather the completion of a vaccine series, a necessary third dose, and while federal public health leaders have said there might be a recommendation for everyone to have a third dose “at some point next year,” that timeline is ignoring the risks of waning protection, Morris said.

Health Canada has authorized Pfizer and Moderna vaccines for use as booster shots , but Canada's advisory panel on immunization has resisted recommending boosters be expanded beyond key groups at highest risk of severe illness, such as those 80 and older and adults from First Nations, Inuit and Métis communities.

“There is no evidence to date of waning protection against severe disease in the general Canadian population who have been vaccinated against COVID-19,” the National Advisory Committee on Immunization said in a statement published Oct. 29. While the vaccines appear to lose their effectiveness over time at keeping people from getting infected with COVID, protection against serious outcomes like hospitalizations and deaths appears to be more “durable” and holding up, the panel said.

But while NACI has encouraged the provinces to take a “national approach” to boosters while it continues to monitor the data, the approach has been anything but. Manitoba has opened boosters to anyone 18 and older while Ontario is reserving third doses for the 70 and up, the immunocompromised, people who received two doses of AstraZeneca or one dose of Janssen, and other vulnerable groups. Everyone else 12 and older who received a second dose at least six to eight months earlier will be eligible for a booster sometime in early 2022, the province has promised, “pending clinical recommendation.”

Morris, a professor of infectious diseases at the University of Toronto, argues there are strong, science-based reasons for moving faster. Studies suggest the third dose quickly boosts antibody levels higher and beyond levels achieved after the second shot. Canada's early strategy of

stretching doses out up to four months between shots is believed to have led to a stronger antibody response. Still, Morris estimates the prolonged interval between dose one and two likely only bought us an extra two to eight weeks of immunity.

Between May 24 and July 24, “we essentially gave about 19 million second doses,” he said. For those doubled vaccinated at the end of May, “you add six months and that’s around now,” he said.

“We can boost now or we can say, ‘We’ll wait until cases rise and then try and boost sometime in January,’ and that just makes no sense to me, exposing people needlessly to more virus,” he said.

While he knows several people who have made a conscious decision on moral or ethical grounds not to get a booster, and many others — colleagues, readers of his popular weekly newsletter — who have already foregone third doses given that large swathes of the world remain unvaccinated, “nobody will say, ‘I don’t want to have my cancer chemotherapy because somebody in a low or middle-income country isn’t going to get their chemotherapy if I get mine,’” Morris said. “This is evidence-based care.” (He has encouraged those who want to feel better about getting a third dose to donate to Unicef’s vaccination campaign. Canada’s unused adult doses, including the four million in Ontario, are unlikely to go to Africa, he said.)

A study out of Israel found immunity against the Delta variant waned across all age groups a few months after the second dose. (Most Israelis received their second dose three weeks after their first.)

Another large Israeli study found that a third dose of the Pfizer vaccine, compared to two, was 93 per cent effective in preventing COVID-related admission to a hospital, and 81 per cent in preventing COVID-related deaths. A third found that, 12 days after a booster dose, the rate of severe illness was lower by a factor of 19.5 in a boosted group of people 60 and older, versus a non-boosted group.

The situation in Europe, where a spike in cases has led to new shutdowns and restrictions, and huge and heated protests, in some countries, isn’t reassuring, Morris said. Germany’s health minister this week warned citizens they would be either “vaccinated, cured or dead” from COVID by winter’s end.

“We always tend to lag behind the European experience and there is no reason for me to believe it will be any different here, and will probably be spurned on by holiday gatherings and waning immunity,” Morris said. The U.K., meanwhile, expects to avoid a European-style surge, partly because of its booster campaign (boosters are being offered to people 40 and older).

*We always tend to lag behind the European experience and there is no reason for me to believe it will be any different here*

Canada has a stockpile of 6.5 million doses. At least a million have been thrown away because of expiration dates or other reasons. The Canadian Press reported, and one Edmonton-based doctor said pharmacists have been told to toss doses rather than give boosters to people who aren’t yet eligible.

Some people, worried about their immunity, are paying for antibody tests, even though experts have warned the thresholds for protective antibodies still haven't been worked out.

Toronto physician Dr. Elaine Chin is offering tests for post-vaccination antibodies. The kit, which uses a few drops of blood that's sent to a Vancouver lab for processing, costs \$375.



*Antibody test. Photo credit: Innovation Health*

“I have a client who got two shots in Florida last year, and he has no antibodies,” said Chin, founder of Executive Health Centre. One of her doubly vaccinated staff had a breakthrough infection, and couldn't smell or taste for three months. “She's still tired all the time. Halfway through the day, she's exhausted.”

Selling third doses could be challenging from a public health narrative, she said, because it would mean re-casting what it means to be fully vaxxed. “Can you imagine saying that, to get into a restaurant in January or February or March that you need to show that you have a booster? Or you can't go to a hockey game, or a Toronto Raptors game, or, or, or?”

Chin advises those whose immunity test comes back less than optimal to continue diligent masking and distancing, until they can get a booster.

But others remain on the fence, fearing the push to boost risks rattling confidence in the shots and that the risks over waning immunity are being wildly overstated.

Brockman doesn't think there's strong enough data for a blanket, third-dose strategy beyond immunizing vulnerable groups. It's not clear how long the immunogenicity of the second dose lasts after peaking — six months, eight months? But declining antibodies are a natural part of the immune response. They don't stay elevated forever.

Memory B and T cells that can rapidly churn out new antibodies if the person is re-exposed to SARS-CoV2 are the real workhorses, and they can last a decade or longer.



*Vector Health Labs in Ontario, which is offering \$99 antibody testing. The test can tell the level of COVID-19 antibodies the person possesses, and whether the antibodies have been produced through vaccination or a recent COVID infection. Photo credit Alex Himell*

“There is waning, or declining, of what we can measure in the blood, but it’s not necessarily a decline in the function, or activity, if, or when, someone was to encounter the infection itself,” Brockman said.

The Israeli studies are the strongest ones backing boosters, and perhaps boosters for everyone. Brockman doesn’t dispute that. What’s difficult to tease out is whether different populations of susceptible people might behave differently.

In Canada, the percentage of breakthrough infections in the fully vaccinated has remained more or less steady over the past several months, Brockman said. A greater proportion are occurring among the 60 and older, even more so for the 70-plus who tend not to amount as robust an immune response as otherwise healthy younger people to vaccination, “and where there is evidence to suggest the waning might actually be detrimental,” he said.

“The rationale for having a third dose or booster shot in older people is really to help them maintain a level of immunity that we’re continuing to see in younger adults,” said Brockman, a Canada Research Chair in viral pathogenesis and immunity.

“If we were really seeing waning of the immune response, my expectation is that we would start to see 40-year-olds showing up in hospital sicker and going into ICUs in larger numbers among a vaccinated subset. And I haven’t seen data showing that’s actually the case.”

*National Post*