



COVID-19 Vaccines: Addressing Concerns, Offering Counsel

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Seventh-day Adventists look to the coming of Christ as the great culmination of history and an end of all disease, suffering, and death. At the same time, we have been entrusted with the Adventist health message embodied in and expanded upon by the writings of Ellen White, summarizing healthful living through practical and wholistic healthy lifestyle behaviors.

We advocate all of these practices to maintain a healthy immune system, and in the pandemic, even more is needed. Ellen White was not only an inspired conduit of health information much ahead of her time, but she modeled practical prevention in the face of the lethal disease in her era, smallpox, and took the immunization herself, as did those close to her.¹ Today, smallpox has been globally eradicated.

We hope that this article will answer questions, allay fears, and resolve some of the prevalent myths and rumors, thereby bringing peace to the hearts of our members as they make health decisions guided by their health-care providers.

There are rumors and conspiracy theories that use the COVID-19 vaccine as an interpretation and/or fulfillment of prophecy. We asked the General Conference Biblical Research Institute for comments in this regard, and the response is as follows:

“The global upheaval caused by the COVID-19 pandemic has generated considerable speculations related to end-time events and misinterpretations of the Bible. One recent view, propagated through social media and some internet websites, has put forward the theory that the upcoming vaccines produced to combat COVID-19 belong to a process of control that will lead to the application of the mark of the beast.

It should be noted, however, that Adventists hold to the conviction that the end-time controversy will center on the law of God, and particularly on the fourth commandment (Rev 14:12). Moreover, the third angel’s message will warn against the reception of the mark (Rev 14:9–11) and will enlighten humankind as to the issues involved.

For this reason, it should be made clear that Seventh-day Adventists understand the “mark of the beast” to be not a literal mark but a sign of allegiance that identifies the bearer as loyal to the power represented by the beast.

From a distinct perspective, another speculative view argues that vaccines make those who take them unclean because, supposedly, unclean substances are used to produce them. In this regard, it should be clarified that the abiding biblical instructions forbidding the consumption of

unclean food and blood (Lev 11:1–20; 17:11–12; Acts 15:20) do not apply to vaccines for the obvious reason that vaccines are produced as medication to save lives, not to serve as food.

Speculations such as these bring the Word of God into disrepute and cause confusion among sincere but less-informed believers. Using the introduction of a vaccine to stir up an eschatological scenario of spiritual and cosmic proportions, or to oppose it on the basis of a faulty interpretation of Scripture, only distracts sincere believers from the real prophetic issues and the Adventist Church's commitment to proclaim the gospel.

Hopefully an effective vaccine will help to bring the current pandemic to a halt. This will protect the lives of those who still need to know about the gospel, as well as those who have already accepted the gospel and are thus charged with the proclamation of God's infinite love to a suffering world (John 3:16)."²

Adventist Health Ministries is firmly based on the Bible, the instruction of the Spirit of Prophecy through Ellen White, and is consonant with peer-reviewed, evidence-based health science. We rely on these foundations in formulating health approaches and advice. With millions infected, and many dead, and global infections on the increase, a number of vaccines have been developed in record time. There are numerous questions people are asking regarding the COVID-19 vaccine.

As a church, while we support evidence-based public health recommendations, we are also careful not to make pronouncements that may be construed as replacing national and international public health guidelines. For this reason, it is important for our comments to be understood within the framework of our [official church position on immunization](#):

"The Seventh-day Adventist Church places strong emphasis on health and well-being. The Adventist health emphasis is based on biblical revelation, the inspired writing of E. G. White (co-founder of the Church), and on peer-reviewed scientific literature. As such, we encourage responsible immunization/vaccination, and have no religious or faith-based reason not to encourage our adherents to responsibly participate in protective and preventive immunization programs. We value the health and safety of the population, which includes the maintenance of 'herd immunity.'

"We are not the conscience of the individual church member, and recognize individual choices. These are exercised by the individual. The choice not to be immunized is not and should not be seen as the dogma nor the doctrine of the Seventh-day Adventist Church."

There have been efforts to establish a reliable evidence-based approach to treatment of COVID-19. Additionally, and within record time, vaccines have been produced which are now being used to help bring the pandemic under control. However, people do have concerns and questions regarding COVID-19 vaccines.

Emergency use authorization (EUA) for the Pfizer/BioNtech vaccine was granted on December 2, 2020, in the United Kingdom, and on December 9 in Canada. In the U.S., the Pfizer vaccine

was reviewed by the U.S. Food and Drug Administration (FDA) and provisionally authorized on December 11. The Moderna vaccine will follow.

In conversation with the Loma Linda University School of Public Health (LLUSPH), Michael Hogue, dean of the Loma Linda School of Pharmacy, who serves on the U.S. Centers for Disease Control (CDC) Advisory Committee on Immunization Practices Workgroup on COVID-19 Vaccines and on the San Bernardino County COVID-19 Vaccine Taskforce in California, shared the following insights regarding frequently asked questions on the Pfizer/BioNtech and Moderna vaccines. His insights and explanations of common questions appear below.

Questions and Facts about the Vaccine

Question: Does the mRNA (messenger Ribonucleic Acid) vaccine change your DNA?

FACT: Both referenced vaccines are based on mRNA, which is a first for vaccines, but the technology has been used in medical treatments for the past 15 years. The vaccine enters into a cell's cytoplasm (the fluid within the cell), where it stimulates the production of antibodies to fight the SARS-CoV-2's spike protein. Since it does not enter the nucleus of the host cell, it does not change the DNA or genetic structure/function.

Question: Can it be safe and effective, as it was developed so quickly?

FACT: Due to current technology, the SARS-CoV-2 virus was sequenced within days of its being identified, and work on a vaccine was started right away. The sample size for the large study is 40,000 people (the average FDA vaccine study sample size is usually only 27,000). We are two months into a two-year study. Data is being carefully monitored.

The first dose showed a 50-percent immune response protection. The second dose reached 95 percent protection! (Only Hepatitis A vaccine is higher, at just about 100 percent protection.) The study was well designed and represented U.S. demographics very closely, with the exception of Native Americans (and the ongoing study is working to rectify that). Efficacy and side effects were similar in all ethnic groups.

Question: Are the ingredients and preservatives in the vaccine dangerous?

FACT: There are no preservatives in these two COVID-19 vaccines, which is why they require deep freeze/freezer facilities for storage and transport. The vaccine is carefully purified.

Question: What are the side effects?

FACT: So far, 10 percent of subjects have reported fever by the second day, and in 24 hours, 50-60 percent reported feeling "achy." There have so far been very few serious side effects with the Pfizer/BioNtech vaccine, including three cases of significant allergic reactions (unusually low; probably due to the non-use of preservatives).

Dr. Hogue further commented that if a person has already tested COVID-19 positive in the past, that person can still get the vaccine; it will simply increase the person's antibody levels. He also pointed out that taking the vaccine in the USA is voluntary, not mandatory.

The efficacy of the Pfizer/BioNtech and Moderna vaccines is similar, but they are not interchangeable (if a person starts with one, the second dose has to be from the same brand). For the Pfizer vaccine, there is 21-day interval between the two doses; it is reported that for the Moderna vaccine, the interval will be 28 days between doses. The vaccine is not authorized for use during pregnancy or in those under 16 years of age.

Conclusion

Immunization, along with sanitation and clean water, has been foundational to the improved longevity seen around the world where these interventions have been applied. Vaccines have long been used by Adventist church members throughout the world. Along with good health practices, they have provided protection against many infections and prevented illness and death.

As we witness the global magnitude of the pandemic, the deaths, disability, and long-term COVID-19 effects that are emerging in all age groups, we are encouraging our members to consider responsible immunization and the promotion and facilitation of the development of what is commonly termed *herd immunity* (pre-existing community immunity of approximately 80 percent of individuals as a result of previous infection and/or vaccination).

We reiterate: *THE DECISION TO BE IMMUNIZED OR NOT IS THE CHOICE OF EACH INDIVIDUAL, AND SHOULD BE TAKEN IN CONSULTATION WITH ONE'S HEALTH-CARE PROVIDER. PERSONAL RESEARCH ON THE SUBJECT IS IMPORTANT. WE ULTIMATELY RELY ON FOLLOWING BIBLICAL HEALTH PRACTICES AND THE SPIRIT OF PROPHECY, AND FOLLOWING GOD'S LEADING IN OUR LIVES, WHICH WILL BRING US PEACE AND ASSURANCE IN OUR DECISION-MAKING.*

1. Concerning vaccination against smallpox, D. E. Robinson, one of Ellen White's secretaries, under the date of June 12, 1931, wrote as follows concerning Mrs. White's attitude toward vaccination:

"You ask for definite and concise information regarding what Sister White wrote about vaccination and serum.

"This question can be answered very briefly for so far as we have any record, she did not refer to them in any of her writings.

"You will be interested to know, however, that at a time when there was an epidemic of smallpox in the vicinity, she herself was vaccinated and urged her helpers, those connected with her, to be vaccinated. In taking this step, Sister White recognized the fact that it has been proven that vaccination either renders one immune from smallpox or greatly lightens its effects if one does come down with it. She also recognized the danger of their exposing others if they failed to take this precaution. [Signed] D. E. Robinson" (*Selected Messages*, bk. 2, p. 303).

2. Biblical Research Institute of the General Conference of Seventh-day Adventists, December 2020.