

What heart and stroke patients should know about COVID-19 vaccines

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Experts have a simple answer for heart and stroke patients questioning

whether they need a COVID-19 vaccination. That answer: yes.

"People with all kinds of cardiovascular risk factors and disease should definitely get vaccinated to protect themselves and their families from COVID-19," said Dr. Mitchell Elkind, a professor of neurology and epidemiology at NewYork-Presbyterian Hospital/Columbia University Irving Medical Center in New York City.

The Food and Drug Administration-approved vaccines pose no special problems for such patients, said Elkind, who also is president of the American Heart Association. The AHA issued a statement Friday calling for people with cardiovascular risk factors, [heart](#) disease or a history of heart attack or stroke to get vaccinated "as soon as possible." Getting vaccinated is especially important for them, Elkind said, because people with such underlying conditions have a higher chance of developing complications from COVID-19, the disease caused by the [coronavirus](#).

"People with heart disease or stroke – or for that matter, risk factors for heart disease and stroke – are at much greater risk from the virus than they are from the vaccine," he said.

The vaccines have side effects, but Elkind called the risk of a complication exceedingly small. "The most likely thing that will occur is a sore arm," he said. "I can tell you, I got the vaccine, the first dose of the Moderna vaccine. And my arm hurt for a few days, like somebody had punched me there. But I was still able to use my arm and lift it, and that was it."

People shouldn't be surprised if they hear about other temporary side effects, said Orly Vardeny, associate professor of medicine at the Minneapolis VA Health Care System and University of Minnesota. The FDA's approval of the Pfizer-BioNTech vaccine, for example, listed pain at the injection site, tiredness, headache, muscle pain, chills, joint

pain and fever as common reactions.

Vardeny, who has done extensive research on flu vaccines, said such reactions are a sign the body is developing an immune response, "and that's a good thing. That's what we want to happen in order for our bodies to make antibodies that will prevent us from getting sick if we encounter the virus again."

The vaccines currently approved for use in the U.S. do not have a live virus, so that reduces concerns for [heart disease](#) patients or others with weakened immune systems, Vardeny said.

The vaccines also could be safely administered to people on blood-thinning medications, Elkind said. "The needle is small. To avoid bruising, people on blood thinners should press firmly for a minute or so, just like after getting blood drawn."

In rare cases, the COVID-19 vaccine can cause a severe allergic reaction, which is why people should be monitored for 15 to 30 minutes after the injection. And as the vaccine is administered to millions of people, other rare issues might be reported, Vardeny said. "I think we'll learn a lot more about the tolerability and potential reactions as the vaccine gets rolled out."

Some questions can't be answered yet.

Trials in children, for example, are ongoing, which is why the vaccines have not been approved for them. And data is limited on adults who have congenital heart conditions.

It may take time before everyone has access to a COVID-19 vaccine. But people can protect themselves now by getting a flu shot, Elkind and Vardeny emphasized. The flu vaccine doesn't protect against COVID-19,

but it does reduce the chance of developing symptoms that might be confused with it and hinder a diagnosis. A flu shot also offers protection against heart-related complications of the flu.

But timing matters. Interim guidance from the Centers for Disease Control and Prevention's panel on immunization practices says a [flu vaccine](#) shouldn't be given at the same time as one for COVID-19. "There should be a 14-day separation," Vardeny said.

Misinformation abounds about vaccines, which makes it essential for people to seek trustworthy sources for facts. The best authority will be a primary care provider, cardiologist, pharmacist or other medical professional, Vardeny said. "They're going to have accurate and up-to-date information, and they're going to be able to steer you in the direction of information that's truthful."

The CDC also regularly updates its information on vaccines.

Elkind said he's often asked whether the COVID-19 vaccines are safe, given how quickly they were developed. It's a particular concern in the Black community, he said, where there's a "tragic and inappropriate" history with medical experiments.

The COVID-19 vaccines might have arrived within a year of the pandemic's start, he said, but research into the underlying technology had been going on for more than a decade. So people should see it as a positive that a [vaccine](#) arrived with such speed.

"And again, thousands of people have been vaccinated already, with no evidence of any significant unexpected side effects so far," Elkind said. "I think that's good news for all of us."

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