

Transcript Details

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How to Talk to Patients About the Delta Variant & COVID-19 Vaccines

Announcer:

Welcome to *VacciNation* on ReachMD, sponsored by Moderna. Here's your host, Dr. Jennifer Caudle.

Dr. Caudle:

I'm your host Dr. Jennifer Caudle, and joining me to talk about the Delta variant and what our patients need to know is primary care physician and fellow ReachMD host, Dr. John Russell. Dr. Russell, thanks so much for being here with me today.

Dr. Russell:

Dr. Caudle, it's always great to work with you. We always have great conversations about things, so looking forward to this.

Dr. Caudle:

We do, and I'm so excited too. You're one of my favorite people to chat with, so I am thrilled. There's lots to go over, so let's just start! I'm sure you have a lot of patients who have questions about the Delta variant. So how do you explain it to them, and what's the most important information you want them to know about this virus strain?

Dr. Russell:

Certainly all of us have learned lots about COVID in the last 18 to 20 months. But what I'd really impart to patients is this is a little bit different in regards to infectivity. Whereas the original COVID strain was probably about as infectious as flu, this one's about as infectious as chickenpox. So it's far more infectious. You probably need less time around someone, and you are more contagious. You're going to have kind of more virus in your nose, and the other thing I'm really talking about it is even though we're hearing about these Delta numbers, the people in the hospital for the most part are unvaccinated.

So, Jen, that's been my approach. What are you saying to patients?

Dr. Caudle:

I agree with you on all those points, and I also start with what you just mentioned, which is the infectivity of the Delta variant. As you so appropriately mentioned, it's more contagious. It's two times more contagious than previous variants that we've had. You sort of likened it to chicken pox and that is totally accurate, and I think sometimes when people hear that, it surprises them. I mean we know Delta is bad, or rather, it can be. But I don't know that people always understand and truly appreciate how much it can impact us. There's also some evidence that it may be more dangerous as well. And as you mentioned, I also talk about the importance of getting vaccinated, which I know we're going to get into, but unvaccinated people really are at the greatest risk right now. Where I start, though, when I'm talking about COVID in general, is I like to ask patients what they know, what they don't know, or rather what they have questions about. And I'll be honest, usually that starts from me asking the patient, "Okay, so have you had your COVID vaccine?" And if they say no, I will say, "What are your thoughts? Do you plan to get it or not?" And if the answer is still no, I then try to ask, "Well, are there any questions I can help answer for you?" So starting there for me usually leads us down that road of talking about the really key points about Delta, which you also mentioned.

But I'd like to go back to you because with all this being said, let's take a step back for a moment, and I'd love to ask you what you think about all these recent developments for the current state of the pandemic. What's your assessment of where we're at?

Dr. Russell:

I think everyone in the country is completely burned out with regard to dealing with COVID. And everyone wants their lives back. So if you look at an article that was in last week's *MMWR*, and it looked at people who have had breakthrough cases – people who were vaccinated and developed some disease, it's a lot of people who are 18 to 49. You see the pictures, you know, you and I live in the

Philadelphia area, you see full beaches at the New Jersey shore, and you see people filling the ball field, going to baseball games and going to concerts because everyone wants their life back. And it's not people en masse. So everyone has gotten to that point that they're not cautious like they were in March of 2020. So I think we are spending a lot more time a lot closer to each other, and one of the things I think is real remarkable about Delta, and I talk about when I'm talking to our staff about being vaccinated is Iceland. So Iceland is the most vaccinated country in the world, so they have vaccination rates in the 90s. And they have a Delta upswing right now. They have not had a death from COVID since May.

Dr. Caudle:

That's amazing. And I think you really bring up important points, and that underscores the importance of getting vaccinated, and the problem with us getting tired, you know? You're right. When you say we're burned out, we are burned out. I mean everyone's burned out, not just health care providers, but everyone.

For those of you who are just joining us, you're listening to *COVID-19: On The Frontlines*, on ReachMD. I'm your host Dr. Jennifer Caudle, and together with my fellow ReachMD host, Dr. John Russell, we're talking about the Delta variant. So Dr. Russell, let's switch gears a bit and talk about the vaccines. How are the vaccines doing against the Delta variant?

Dr. Russell:

So the vaccines are doing an amazing job. And I really described the mRNA vaccines as the moon landing. You couldn't imagine that they could have come up with two vaccines that were so good, so quickly, with new technology. And the vaccines are in the 90% for keeping people out of the hospital and keeping people alive, so you are 29 times more likely to be hospitalized if you're not vaccinated than vaccinated. But there are breakthroughs. So you and I are both vaccinated. We could get a breakthrough case of COVID. But probably it's going to mean a more sniffly cold-type thing. It doesn't mean we shouldn't stay away from people and socially isolate and do all the things to protect others, but it's probably not gonna put our lives in peril as it would if you and I had acquired COVID in March or April of 2020, long before we were vaccinated.

So, Jen, based on what just talked about and breakthrough infections, what are you saying to your patients about this?

Dr. Caudle:

I think breakthrough infections seem a little scary to a lot of people. And I understand why. I think people have said and they're saying, "Well, if I get the vaccine, why is it that I could still get infected? And if I can still get infected, why should I get the vaccine? Or does the vaccine even work?" And it kind of goes back to your points Dr. Russell, you're right. These vaccines are some of the most effective vaccines that we have, and it is a blessing that we have been able to create these vaccines so quickly. I mean, thank goodness for that. I think we often forget that. But the thing about it is, what we know as physicians is we know that nothing is 100% in medicine and in life, really. And vaccines are not 100% either. So we know that out of every 100 people there are going to be some who get breakthrough infections. That's simply going to happen, just based on the statistical nature and how vaccines work. But the most important thing, as you mentioned, is that these vaccines are remarkably effective at keeping us alive and keeping us off ventilators and keeping us from getting severe illness, which is what they do.

So that's what I talk to patients about; don't be alarmed when you hear that people have breakthrough infections because we expected it all along. What's most important is what you and I both just said, which is that these vaccines keep you alive, and as you also said, if you were to get a breakthrough infection, you likely would have maybe a mild headache, a sniffly nose, things like that. Now I think something that's important to remember is that what we have learned recently is that fully vaccinated people with Delta breakthrough infections can spread the virus to others, maybe in ways that we didn't think was possible, because we've learned that we now have similar amounts of viral genetic material in our nasal passages, etc., as those who are unvaccinated. This is something that we have learned, which is why masks right now are very important. But not to belabor the point, I just don't want people to be afraid of this, and I also don't want them to assume it means that the vaccines are not working because that is not the deal. But, we're almost out of time for today, but I do want to get your thoughts before we close. Any final thoughts or takeaways you'd really like to leave with our listeners?

Dr. Russell:

I think it's really important and we talked about a lot of people not getting the vaccine, but now a whole population is "When can I get a booster?" And for people who were immunosuppressed, which is about 2.7% of the population – about seven million people – they should get a third dose. And if you look at who's hospitalized with breakthrough infections in the United States, 44% of them were people who fall into that category. So if you have a patient who has an organ transplant, who's getting treated for cancer, or is on immunosuppressants – even if they're vaccinated, they should get a third dose right now, probably the same vaccine that they got before if it's one of the mRNAs. Are you getting lots of booster questions as well?

Dr. Caudle:

I am. I'm getting more booster questions on social media than I am by my own patients. But regardless, yes, I think people are

wondering – what does “booster” mean exactly? Is it the same formulation? How does it work, etc. So people have a lot of questions about this.

But I would say those who are getting the vaccine I feel are also excited and eager and willing to get a booster, another dose.

Dr. Russell:

Absolutely. So, the people who got two are very eager to get a third, but people kind of say, when and where? Tell me and I'll show up. But Dr. Caudle, it's always great to talk about something that you and I are both so passionate about.

Dr. Caudle:

I couldn't agree more. I'd like to thank you officially, Dr. Russell, for joining me to talk about what physicians, clinicians, and patients should know about the Delta variant. As always, Dr. Russell, it was a pleasure speaking with you.

Dr. Russell:

Dr. Caudle, always a pleasure. See you soon.

Announcer:

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