Questions (and Answers) About Children and Teens and COVID-19 Vaccines









Everyone ages 6 months and older should get a COVID-19 vaccine to protect their health. Extensive research shows the benefits far outweigh the risks. As a parent or caregiver, you probably have questions about how safe the vaccines are for children and how well they work. This fact sheet answers some common questions.

Why should my child get vaccinated against COVID-19?

Children and teens are just as likely as adults to get COVID-19. They can have both short- and long-term complications from COVID-19. In rare cases, the complications from infection can lead to death. Vaccines significantly lower the chances of children becoming seriously ill with COVID-19.

How do I know the vaccine is effective in children?

Clinical trials have shown that vaccines protect both adults and children against COVID-19 and Long COVID. Evidence from the millions of children and teens who have been vaccinated show that COVID-19 vaccines lower the risk of infection and serious illness.

How do I know the vaccine is safe for my child?

COVID-19 vaccines were made available in the U.S. only after evidence showed that their benefits are greater than their risks. After clinical trials showed that vaccines were safe and effective in adults, researchers conducted trials involving thousands of children. These trials found no serious safety concerns. Since the vaccines were authorized, millions of children and teens between the ages of 5 and 17 have been vaccinated against COVID-19. Children ages 6 months to 4 years are now eligible for COVID-19 vaccines, and clinical trials have shown the vaccines to be safe for this age group too.

The evidence is clear: the benefit of increased protection against serious illness or death far outweighs the risk of serious side effects. Scientists at the U.S. Food and Drug Administration (FDA) and the Centers for Disease Control and Prevention (CDC), along with independent safety experts, continue to closely monitor the safety of the vaccines.

Do children get a different dose than adults do?

Young children respond differently to medicines and vaccines than adults. That's because as children grow and change, so do their immune systems. Clinical trials focused on finding the appropriate dose for each age group. The right dose provides the best protection with the fewest side effects. Based on the results of these trials, adolescents ages 12 years and older receive the same dose of the Pfizer-BioNTech vaccine as adults. Children 11 years and younger receive smaller doses based on their age.





Will my child experience side effects?

Possible side effects from the COVID-19 vaccine include soreness at the injection site, headaches, muscle aches, and low fevers. These side effects are normal and should go away in a few days. Some people have no side effects after getting the vaccine.

Rare cases of heart problems have been reported in some children and teens after receiving their vaccine. These cases involve swelling in either the heart muscle (a condition called myocarditis) or the outer sac around the heart (a condition called pericarditis). Most of these cases occurred in male teens. The number of myocarditis cases reported is small but higher than typically expected.

The risk of getting myocarditis after the vaccine is much lower than the risk of getting myocarditis from COVID-19. The risk is especially low for children under 12. Most patients who had these heart issues felt better soon after receiving medical care and getting rest.

Will my child need a booster shot?

COVID-19 vaccines are working well to prevent severe illness, hospitalization, and death. Still, research suggests the protection provided by these vaccines decreases over time. Children 5 and older should receive a booster shot at least five months after their primary series, which will provide longer-lasting protection. Studies on booster doses for children younger than 5 are in progress.

Is it safe to get other vaccines at the same time?

Children can safely get the COVID-19 vaccine at the same time as other routine vaccines.

Should my child get vaccinated if they've already had COVID-19?

Yes. Evidence shows that people are more protected by being fully vaccinated than by just having been infected with COVID-19.

How are COVID-19 vaccine clinical trials for children different from those for adults?

- Fewer volunteers: Child-focused clinical trials for COVID-19 vaccines don't need as many volunteers as adult trials to make sure the vaccine is effective. In adult trials, researchers determine effectiveness by looking at how many vaccinated people go on to develop COVID-19. This requires more participants. Researchers then use this information to study the vaccine in children. They determine how effective the vaccine is by comparing children's immune responses to what we know about immune responses in vaccinated adults.
- **Safety:** In clinical trials with children, researchers make sure they are collecting age-appropriate information. They also watch for health problems that tend to affect children. Pediatric doctors and nurses participate in the process.

Scientists aren't done checking for safety after these trials — once vaccines are authorized, FDA and CDC continue to watch vaccines for any safety problems.

■ Consent and assent: Informed consent means that a research volunteer has clear information about the clinical trial's risks and benefits and can ask questions before signing up. In a trial with children, a child's parent or guardian provides informed consent. Researchers must also explain the trial to any child who will participate. Children ages 7 and up give their own agreement (assent). As with all clinical trials, volunteers can drop out at any time.

More Information

- Learn more about the science of vaccines.
- Find out where to get your child vaccinated at **covid.gov**.
- Learn more about vaccines in children and teens.
- Find more shareable COVID-19 resources.

