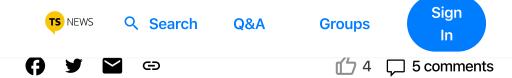
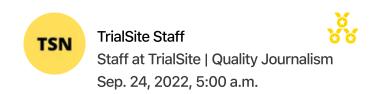
Concomitant Administration of Flu & SARS-CoV-2 Vaccines Lowers Antibody Titers Against Covid-19





The recent White House guidance for people to take the bivalent BA.5 Covid-19 booster vaccine concurrently with the influenza shot was clearly not based on evidence. It's immunology 101 that introducing multiple antigens simultaneously will generally reduce the immune response to each antigen. However, that didn't stop the current heads of the executive branch of government from issuing their flippant comment that God gave us two arms so we could be vaccinated in each one simultaneously. A truly insensitive, frankly bizarre, and definitely inappropriate comment made by Biden's Coronavirus Response Coordinator Dr. Ashish Jha.

Are we Following Science?

This media has expressed concern about the questionable commitment to science associated with this current administration (to be fair, we were just as critical with the last one). A confluence of socio-economic, political, and even cultural interests at the top of American society could be influencing ongoing pandemic-related decision-making, unfortunately, possibly even more than what should be driving such decision-making: the data from new studies often reported by this platform.

Sometimes it seems like for every positive step forward based on real science, the administration does something based on junk science, taking us a step back. See "Junk Science Now Drives Government Policy While Biased Media Outlets Offer No Real Objectivity."

What happened to following science wherever it takes us? One

relevant study published in the peer review journal *Vaccine* involves a 480-participant randomized, open-label, controlled study conducted in Zhejiang Province, China, led by investigators affiliated with the provincial Center for Disease Control and Prevention and Xiamen University as well as vaccine producer Sinovac Biotech.

Involving the Sinovac Covid-19 vaccine and the influenza vaccine, the results of this published study indicate that administering a SARS-CoV-2 vaccine concurrently with an influenza vaccine causes a significant reduction in immune response to the SARS-CoV-2 antibody titers. This study was published last month, weeks before the incorrect White House guidance.

The net takeaway of the formal, randomized clinical trial underwritten by the Key Research and Development Program of Zhejiang Province and China's Science Foundation of National Health Commission shows a significant reduction in antibody titers when the influenza vaccine was co-administered with the second dose of the SARS-CoV-2 vaccine.

But There's More...

In a major Anglo-American-sponsored study, vaccine producer Novavax collaborated with a large team of scientists employed at several prominent, UK-based academic medical centers in a randomized investigation into the co-administration of influenza vaccine and the Novavax SARS-CoV-2 protein subunit vaccine.

Represented by corresponding author Professor Paul T. Heath, FRCPCH, affiliated with the Vaccine Institute of St. George's University of London as well as St. George's University Hospitals NHS Foundation Trust, the study data leads us to another materially important observation: while it appears safe to administer concomitantly seasonal influenza vaccines and the

observed, as well as importantly, a reduction in SARS-CoV-2 antibody titers in the co-administration group.

The authors, led by Professor Health, went on the record, first discussing side effects:

"Reactogenicity events were more common in the coadministration group than in the NVX-CoV2373 alone group: tenderness (113 [64.9%] of 174 vs 592 [53.3%] of 1111) or pain (69 [39.7%] vs 325 [29.3%]) at injection site, fatigue (48 [27.7%] vs 215 [19.4%]), and muscle pain (49 [28.3%] vs 237 [21.4%])."

Importantly, the author's relay:

"A reduction in antibody responses to the NVX-CoV2373 vaccine was noted."

This study was published back in Feb 2022 in the peer-reviewed journal *The Lancet: Respiratory Medicine*.

One would think that the top scientists and doctors under the employ of the White House (like Dr. Jha) or Dr. Anthony Fauci, for that matter, or importantly, other prominent contributors under the employ of Health and Human Services--whether that be under the National Institutes of Health, the Centers for Disease Control and Prevention or the Food and Drug Administration-would have time by now to read up on the literature to provide informed guidance to the public.

So much for following the science. Maybe God gave us two arms for something other than vaccine receptacles.

TrialSite contributor Paul Elkins.