

SIREN

SARS-CoV2 Immunity & Reinfection Evaluation

SIREN Study Participant Frequently Asked Questions Regarding COVID-19 vaccines

FOR STUDY PARTICIPANTS

1. What is the importance of participating in SIREN at this stage in the pandemic?

SIREN studies the protection offered by antibodies against reinfection with SARS-CoV-2. The roll-out of the vaccines offers a unique opportunity to study the effect of vaccination, too, compared to those with natural infection and those who have not had prior infection. The SIREN study aims to provide vaccine effectiveness estimates at scale. These results will directly inform national policy.

2. Will the vaccine induce antibody production among those who receive it?

All COVID-19 vaccines are expected to generate an antibody response in individuals, although this will not happen immediately. The exact timing that antibodies can be detected among vaccinated individuals will vary from person to person.

3. Will the vaccine protect me?

The vaccines that have been licenced have all been found to be effective against infection with SARS-CoV-2. The large majority of people who receive the vaccine are protected against infection, at least for few months.

4. Will antibody tests detect vaccine-induced antibodies?

This will depend on the type of test (assay) used by your local trust. There are two main types of antibody assays in the NHS, targeting antibodies against either the nucleocapsid (N) or the spike (S) proteins. If the trust uses a N antibody assay, then there will be no change to the antibody response following the vaccine due to the method the vaccine induces immunity; this test would become positive 2-6 weeks after natural infection, if you were exposed to the virus directly. If the trust uses a S antibody assay then we expect that you will become antibody positive using this assay 2-6 weeks after the vaccine. Not everyone may have an antibody response.

5. Will SIREN differentiate between detected antibodies induced by natural infection or vaccination?

We recognise that the assays in use across SIREN sites vary. We recommend you consult the local study team to find out which assay is in use in your Trust by discussing with your local laboratory team.

6. As a SIREN participant, do I need to know my antibody status before I receive a COVID-19 vaccine?

No. Healthcare workers are eligible for COVID-19 vaccination regardless of antibody status, as per national guidance.

7. After I have had the vaccine, will I still need to follow all the infection control advice?

The vaccine cannot give you COVID-19 infection; 2 doses will reduce your chance of becoming seriously ill and a single dose is likely to be effective against severe disease. No vaccine is completely effective and it will take a few weeks for your body to build up protection.

So, you will still need to follow the guidance in your workplace, including wearing the correct personal protection equipment and taking part in any screening programmes.

To continue to protect yourself, your patients, your family, friends and colleagues you should follow the general advice at work, at home and when you are out and about:

- practice social distancing
- wear a face mask
- wash your hands carefully and frequently
- follow the current guidance

8. None of these FAQs address my question

Please contact your organisation's research team or email phe.siren.participants@phe.gov.uk.

FOR PARTICIPATING TRUSTS

9. What is the importance of participating in SIREN at this stage in the pandemic?

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10. Does the roll-out of COVID-19 vaccines affect the frequency of serum sample collections in SIREN?

No. You should follow the serum sample schedule of collection described in the manual of operations for vaccinated participants. We are asking that trusts save all your serology after a vaccine so that we can retest them centrally at a later date.

11. Should serum samples be sent after the first dose of COVID-19 vaccine or only after the two doses have been administered?

All sera samples from vaccinated participants should be sent to SEU after participants receive the first dose of the vaccine, as per the lab manual.

12. Can participants take a swab right after they have received a COVID-19 vaccine or should they postpone it for a certain period?

Participants can have a swab right after they have received a COVID-19 vaccine or at any time afterwards. There is no need to postpone a PCR test just due to the fact they have just received the vaccine. You should also continue to use lateral flow devices and have your regular PCR tests after vaccination to detect individuals who are highly likely to be infectious after vaccination.

Most vaccines reduce the overall risk of infection, but some vaccinated people may get mild or asymptomatic infection and therefore be able to pass the virus on.

It is highly likely that any infection in a vaccinated person will be less severe and that viral shedding will be shortened. We therefore expect that vaccinated health and care staff will be less likely to pass infection to their friends and family and to the vulnerable people that they care for.

13. Is there an ideal time of recruiting vaccinated participants from the date of their vaccination?

No, there is no suggested ideal time point to recruit vaccinated participants.

14. Do we need to be labelling samples with 'VACCINATED' on the sample to let the labs know?

No, you do not need to be labelling samples from vaccinated participants any differently.

15. Are SIREN participants allowed to receive a COVID-19 vaccine if they test PCR positive?

There is no evidence of any safety concerns from vaccinating individuals with a past history of COVID-19 infection, or with a detectable COVID-19 antibody. Vaccination of individuals who may be infected but asymptomatic or incubating COVID-19 infection is unlikely to have a detrimental effect on the illness. Vaccination should be deferred in those with confirmed infection to avoid onward transmission and confusing the differential diagnosis. As clinical deterioration can occur up to two weeks after infection, ideally vaccination should be deferred until clinical recovery to around four weeks after onset of symptoms or four weeks from the first confirmed positive specimen in those who are asymptomatic.

16. Where can I find more information about the COVID-19 vaccination programme?

You can find more information about the vaccination programme for healthcare workers [here](#).