

Date: October 27, 2022  
To: Health Care Professionals (HCPs)  
From: Canadian Covid Care Alliance (CCCA)  
Re: The precautionary principle and mRNA vaccines in children

Dear Healthcare Professional,

Thank you for your faithful service over these last 2 and a half difficult years. The COVID-19 crisis has placed unprecedented pressure on our health system and on the many health care providers who have cared for their sick patients while navigating the unprecedented disruptions to their work and personal lives. Our Health Officials have sought to minimize the harms of SARS-CoV-2 by implementing numerous health care measures including masking, virtual work and learning, and use of COVID-19 vaccines, in the general population, and more recently in children as young as 6 months of age.

Our association, which includes over 600 scientists and medical professionals in Canada, is dedicated to providing balanced, independent evidence-based information on COVID-19. Recently, a group of our specialists including paediatricians, immunologists, and vaccinologists conducted a clinical risk benefit analysis on use of COVID-19 vaccines in children. Our analysis, which we have sent to [Canadian Health Officials](#), concluded that given:

- 1) children's [very low risk of severe outcomes](#) from COVID-19
- 2) the high levels of population-wide immunity more than 2.5 years into this crisis
- 3) the fact that none of the randomized trials in [adolescents](#), children [5-11 years-old](#), and [younger children](#) demonstrated a clinically or statistically significant reduction in either long-COVID or severe COVID-19 with the vaccine compared to placebo
- 4) the lack of effectiveness data for the [BA.1](#) and [BA.4/5](#) bivalent vaccines on currently circulating BA.4/5 variants and lack of safety data on use of these boosters in children 18 years of age or younger
- 5) the yet to be fully elucidated concerns regarding myocarditis as evidenced by the vaccine-associated [increase in rates of myocarditis most notable in young males](#), concerning [histopathological changes](#) upon autopsy as well as [lingering morphological changes](#) in 54% of affected adolescents and young adults
- 6) the lack of overall long-term safety data

the precautionary principle should be exercised at this time and use of the COVID-19 vaccines in healthy children halted until further data is available.

Our analysis was heavily shaped by recent revisions to [CDC guidance](#) which state that the primary series of COVID-19 vaccines “provide minimal protection against infection and transmission” and that boosters “provide only a transient period of increased protection.” Our conclusions are in line with a growing number of countries which have adopted a risk-mitigated approach and limited use of these agents in healthy children including [Denmark](#), [Sweden](#), [Norway](#), [Finland](#), [Australia](#) and the [UK](#).

We encourage you to take the time to engage more deeply with the data prior to recommending use of these vaccines in healthy children. Should you desire additional information, want to leave a comment or enter into a dialogue with a growing number of health care practitioners seeking to independently evaluate this data, please reach out to us at [discourse@canadiancovidcarealliance.org](mailto:discourse@canadiancovidcarealliance.org).

Sincerely,

The Specialists at the CCCA



Canadian Covid Care Alliance  
Alliance canadienne pour la prévention  
et prise-en-charge de la covid