



Re: Reifferscheid et al., “COVID-19 vaccine uptake and intention during pregnancy in Canada”

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Dear Editor:

Reifferscheid et al. (2022) assert that vaccine safety is a major concern for the pregnant population in Canada, and that because disease risk is either poorly understood or poorly valued in this community, safety information should be provided to them when it becomes available, combined with clear messaging on the benefits of vaccination. There are a number of factors that could influence pregnant women's acceptance of the COVID-19 vaccine. According to Blakeway et al. in a recent publication in the *American Journal of Obstetrics & Gynecology* (Blakeway et al., 2022), younger women, non-white ethnicity, and lower socioeconomic level were all linked to lower COVID-19 vaccination uptake. We believe that determining the elements that lead to COVID-19 vaccine fear is crucial. Essential demographic characteristics were shown to be significantly associated with willingness to obtain a COVID-19 vaccine in an Indian study (Khan et al., 2022). In that Indian study, vital demographic variables such as younger female gender, age groups, lack of any personal condition, lower education level, and present employment position were discovered to be significantly connected with desire to acquire a COVID-19 vaccine (Khan et al., 2022).

In addition, various periods of time may have different immunization objectives. The purpose of seeking to vaccinate women alters over time, according to a prior Hong Kong inquiry (Xiao et al., 2022). In a more than 1-year follow-up, the transient changes in variables linked to COVID-19 vaccine aversion were detailed. There was no statistically significant link between chronic medical conditions and vaccination apprehension prior to and during the implementation of the mass immunization campaign, according to a Hong Kong investigation. Residents with chronic illnesses, on the other hand, were

more dubious 2 to 5 months after the program began (Xiao et al., 2022). New vaccine efficacy and safety data, which could lead to increased trust or unbelief in the COVID-19 vaccine, as well as the outbreak's local context, could all play a role. Xiao et al. emphasized the necessity of tracking COVID-19 vaccine reluctance and associated factors over time and changing promotion methods accordingly to increase vaccination uptake. The data in Reifferscheid et al.'s current investigation came from a brief time of observation (Reifferscheid et al., 2022). According to the data described above, a range of factors influence the pattern of reluctance, and the pattern may change over time. As a result, drawing a firm conclusion from a single study may prove difficult.

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