

Anthroposophic Medicine Statement on Vaccination against SARS-CoV-2

12/01/2021 Press Releases, Research, Policy Makers

By the International Federation of Anthroposophic Medical Associations (IVAA) and the Medical Section of the Goetheanum

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www.ivaa.info/latest-news/article/article/anthroposophic-medicine-statement-on-vaccination-against-sars-cov-2/

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IVAA and the Medical Section at the Goetheanum welcome the development of safe and effective vaccines against SARS-CoV-2 in the hope that they will play an important role in overcoming the Covid-19 pandemic. Since the onset of the pandemic, anthroposophic physicians have provided inpatient and outpatient care for patients with Covid-19, integrating both conventional and anthroposophic treatments and considering vaccination in this context.

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Equitable access

SARS-CoV-2 vaccines must be available and accessible worldwide. Despite the international COVAX initiative to equitably distribute and fund SARS-CoV-2 vaccines, rich countries have mostly secured their own supplies with little regard for poorer countries. The logistical challenges of vaccination and the large number of people to be vaccinated is daunting, even for high-income countries. We therefore call for more solidarity and cooperation among countries.

Efficacy

High efficacy has been shown for short-term prevention of mild to severe disease for the first mRNA-vaccines (vaccines that work by triggering production of proteins that train the body's immune system) and a viral vector-based vaccine that have received conditional regulatory approvals. [2] Other vaccines based on different vaccination mechanisms are in development or even used extensively without published scientific data of Phase III clinical studies. Data for high-risk groups are still limited. It is still unclear whether and to what extent the vaccines interrupt or reduce viral transmission – we expect timely research data on this key question for pandemic control as well as further data on efficacy.

Safety

Studies of the two authorized mRNA-vaccines and a viral vector-based vaccine [2] show acceptable safety in short-term follow-up. However, rare, serious side effects cannot be ruled out until very large numbers of people have been vaccinated and followed for longer time. Also, the detection of non-specific effects – which can be positive or negative – requires longer observation periods. We therefore call for sufficiently large long-term studies and anonymized vaccination registers that allow a comparison between populations receiving the different vaccines and non-vaccinated populations. This is all the more important since the mRNA technology used in some SARS-CoV-2 vaccines has not been widely used in humans before.

Voluntary vaccination

We see voluntary vaccination as a fundamental right of democratic societies and a prerequisite for a high level of acceptance among the population, not least given the remaining questions concerning efficacy and safety. [3] A free vaccination decision requires detailed information and the opportunity to ask questions, preferably in a trusting patient-physician relationship but even during mass vaccination. In addition policy makers should prevent scenarios of indirect vaccination obligations, such as by employers, insurers or transport companies.

Strengthening resilience

The worldwide drive to make vaccines available needs to be accompanied by measures that are health-reinforcing and promote individual resilience. Nutrition, psychological and social factors (such as loss of livelihoods) need to be addressed, as the pandemic is not only a virological but also a social challenge.

About IVAA

IVAA, the International Federation of Anthroposophic Medical Associations, promotes the recognition of Anthroposophic Medicine and its implementation in health care systems. www.ivaa.info

About the Medical Section of the Goetheanum

The Medical Section of the Goetheanum in Dornach, Switzerland, is the international center for Anthroposophic Medicine. medsektion-goetheanum.org/en

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1. See IVAA and Medical Section's [general statement on vaccination](#) and a [review of SARS-CoV-2 vaccines](#).
 2. BioNTech/Pfizer and Moderna's vaccines are mRNA; Oxford/AstraZeneca's vaccine is viral vector-based.
 3. In some countries, IVAA member associations do not issue opinions on national vaccine policies.