

Vaccine

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timelines, regulations, etc., we do not have a set date for when that will start.”

Lindsay said the Centers for Disease Control and Prevention’s vaccine advisory board would be meeting on Dec. 10 and the state will “quickly” communicate additional details following the meeting.

“We anticipate that most of the health care workers will take it, but when I say most, I’m giving myself a lot of latitudes, greater than 50%,” she said. “But I don’t know what the refusal rate will be. I think that is a big question mark.”

She said, when she talks to people, some say they are eager to take the vaccine, but others have told her they do not want to be the “guinea pig.”

It will be interesting, she

said, to see what the refusal rate will be in the U.S. A state-by-state comparison, she said, or a comparison to other countries that have had a more “uniform” response to the pandemic would be revealing.

Lindsay said she understands the public’s hesitation to the vaccine. Still, she also believes the CDC’s recommendations are based on the country’s best interest.

Lindsay said the public must remember that public measures for fighting the virus will not go away until most are immunized, roughly 75%, she said.

“People can take it for what they will,” Lindsay said, “but there is a relationship between the number of people getting vaccinated and the public health measures going away.”

Dr. Michele Andrasik, the director of social and behavioral sciences and community engagement at the COVID-

19 Prevention Network at the Fred Hutchinson Cancer Research Center, said in marginalized communities, underlying mistrust of the health care system is legitimate.

She said there are “safeguards” in place to ensure ethics.

“There have been instances where scientists have been unethical,” she said. “And now there are safeguards in place to really limit the ability of any scientist of being unethical.”

Experts have found that any chance of benefiting from the herd immunity that comes with vaccines diminishes if not enough people are immunized and protected from infection.

Researchers at CUNY Graduate School of Public Health and Health Policy used a computer simulation to calculate that, if 75% of the world’s population

were immunized, the vaccine would need to be 70% effective in preventing infection to get the pandemic to a manageable level. If vaccine efficacy dips to 60%, then 80% would need to take the vaccine.

Lindsay said the side effects she has read about with Pfizer’s vaccine are similar to the flu vaccine’s side effects.

She said there has been “injection-site” issues, sensitivity and soreness.

According to an article in Science Magazine, participants in both Pfizer’s and Moderna’s vaccine trials have said they experienced symptoms including fever, muscle aches, bad headaches and fatigue after receiving the shots. Still, the side effects generally did not last more than a day.

Early on, Dr. Margaret Hamburg, a former Food and Drug Administration commissioner, said the FDA set clear

efficacy standards. The administration required the vaccine to be at least 50% effective. The FDA based this on the criteria it established with the flu vaccine.

The FDA’s rationale is that the vaccine, though not perfect, is better than nothing, and it can reduce the severity of the disease and the length of symptoms.

She said the efficacy rate of both Pfizer and Moderna, 95% and 94.5%, respectively, had exceeded expectations so far. Hamburg emphasized that the FDA’s oversight does not stop once distribution begins.

“As the vaccine is distributed, there has to be some systems in place for tracking it,” she said, “both to make sure that people get their appropriate second dose, but also so that we can continue to collect data about the experience of the vaccine in the real world, in terms of how well it’s work-

ing, for whom and how long does protection last and, very importantly, ongoing information about whether any unexpected safety issues may start to emerge.”

Hamburg said both the Moderna and Pfizer vaccines require two doses of the vaccine to be effective.

Lindsay said the county would use the state’s ALERT tracking system to ensure patients get their second dose.

According to the CDC’s website, Pfizer’s booster is given three weeks after the first one, while Moderna’s is spaced out four weeks later.

Lindsay said Pfizer’s vaccine has “special storage requirements.” The vaccine, according to the CDC website, uses genetic material called mRNA. If providers do not keep mRNA at an extremely cold temperature, it can break down, making the vaccine unusable.

Fallout

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council is willing to assist the tenants pursue their rights and remedies under Oregon landlord and tenant law.

Boring Properties did not respond to messages from the Eagle, and Green said the company has not responded to the city.

Sean McGee, 23, who has lived with his wife in Boring Properties’ faded white cabin on Southwest Brent Drive for about a year, said he has been forced to go down to Canyon Creek near his house to scoop up water so he can flush the toilet.

McGee shared with the Eagle his last text conversation Sept. 23 with Boring Properties owner Darrinn Manuel in which McGee expressed his frustration to Manuel about utility payments and minimal help repairing other problems with the property.

Manuel told McGee, if he had paid rent, Manuel would be able to pay for utilities and other expenses. McGee said he was flawless at paying the rent until recent months when he was frustrated by the lack of help from Manuel and when tenants have been protected from eviction by executive order.

Green said tenants have been given rent forbearance due to the pandemic through the end of the year, which has deprived landlords of expected income, but this does not alleviate a landlord from providing the basic services the law requires from any landlord. He said nobody should have to live in an unlivable property.

“Unfortunately in this case, it’s the tenants that are suffering,” Green said.

The city tried to be flexible with the multi-housing



Sean and Audree McGee use multiple blankets around their rental house to keep warmth during the winter.

developers by giving them time to repair a water leak that caused water bills to increase and to make the past-due payments, but the lack of action from the landlords prompted the city to cut the water off, Green said.

McGee said the water problems with the property go beyond the city: The roof leaks a steady stream of water when it

rains, and mold is spreading on the ceiling panels. He said his relationship with Manuel has deteriorated like the property.

Although the neighboring units are vacant, McGee said he hears people occupying them at night, which worries him because he assumes they are using drugs and may be dangerous.

McGee said he hopes people can empathize with his situation. He said the people who live in the Boring Properties units are not bad people.

“We’re just misunderstood,” he said. “Yeah, a lot of us are recovering addicts, and people



Sagging ceiling tiles caused by leaks at a Boring Properties unit in John Day.

think automatically, ‘Oh, drug addict, you’re a waste of space in society,’ but everyone has skeletons.”

McGee said he and his wife hope to save enough money to move out of the property.



Grant County Health Department staff prepare a COVID-19 test in May during a drive-through testing event. Many rapid tests are not currently being counted by the state after a change in reporting, according to rural county health officials.

Tests

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counties do not have access to in-house labs and send out for them when someone is sick.

Poe said rural Oregonians lacked accessible testing options, and the purpose of bringing rapid tests to the county was to make it easier for people to test.

“Early on, we’re given a rapid test machine,” she said. “Most of our clinics around here, including the hospital, all have rapid test machines, and none of those tests are being counted.”

Poe said, previously, she and her staff had manually converted the formatting so antigen and rapid test results could be submitted to the state’s database with the other results. However, she said the state is now purging the negative rapid test results from its electronic system, which was bogged down with so much data, so those negative tests can no longer be tracked.

She said there were about 600 test results with a 10% positivity rate from drive-through tests in November that would not be counted under the current setup.

The impact

Poe said the problem is Malheur County’s positivity rate is 20%, and the county is conducting drive-through tests en masse using rapid tests with nowhere to send the test results — a large

amount of negative tests that would reduce the rate will not be counted.

“We’ve been fighting an issue with public perceptions since the beginning of this, and items like this don’t help,” Fiumara said.

Poe said ramping up testing amid an outbreak of positive cases is the right thing to do, but it’s difficult when many residents are skeptical of the virus to begin with.

“I have guaranteed my constituents because they are working really closely with us to expand testing, and we’ve had to do a lot of relationship-building in a very conservative county even to get people on board to test,” she said. “I am losing all of the buy-in and the trust that went into increasing testing.”

The positives

The health administrators agreed the change to count all tests, and not just tests from new patients, will eventually benefit rural counties.

Fiumara said, if someone tested negative in May, but then returned for another test in September and was negative, that second test would not have been counted as part of that September daily number of tests administered.

Not counting “serial testers,” such as health care workers, increases the positivity rate of counties, he said.

The positivity rate is important, he said, because it is used to determine when to open schools or when and how to limit businesses.

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