

The Safest Way to Get Immunity from a Disease

By Lydia Greene, Back to the Vax

All immunity is natural, and our bodies produce it via a natural process. Distinguishing vaccine-acquired immunity from naturally acquired immunity is like distinguishing the cardio benefits from a treadmill versus walking outside. Your heart doesn't know the difference, and it's the same for your immune system. As a former anti-vaxxer, infection was sold as the "right" way to get immunity, and if your children were healthy enough, these diseases would not be a problem for them to overcome. However, even healthy children are prone to suffering the severe consequences of a virus and there is no way to predict if they will be vulnerable at any given time. If you think your healthy child can handle measles, they can certainly handle a vaccine which is the attenuated (weakened) version of the virus.

Vaccines not only prevent death, but they also prevent suffering, and if you have ever taken care of an ill child, you know you hate to see them suffer.

After seeing my own unvaccinated 3-year-old go through a severe case of COVID, I certainly do not want to see him suffer through any other vaccine-preventable disease again.

At the pandemic's beginning, most people hadn't been exposed to COVID-19. People that had been vaccinated prior to contracting COVID-19 did better than their unvaccinated counterparts. They had fewer complications and lower death rates. And, although vaccines don't prevent transmission, they do reduce it - even with Omicron (Tan, S. T. et al., 2022; Lyngse et al., 2022). Infected people also had some immunity but had to go through the disease to get it. Statistically, the chance that a healthy person would be okay was much higher, but healthy people still got sick and even died. Infection-acquired immunity is unpredictable. In some people, immunity can last months and in others a few weeks, so there is no guarantee of protection. The vaccine's protection can also wane with time, but with more predictability. **Booster vaccines can be recommended as needed, providing a much better, lower risk choice than getting the virus.**



**Stay up-to-date on booster
dose recommendations**



We now know that most people in the U.S. have had COVID-19 or will get it in the near future. However, research now shows that hybrid immunity is best.



IS HERD IMMUNITY?

Herd immunity works to control the spread of disease when a specific amount of that population (threshold) becomes immune to the disease through vaccination or infection and recovery.



IS HYBRID IMMUNITY?

Hybrid immunity occurs in those who have been both infected with and vaccinated against the disease.

Ideally, you want to be vaccinated before exposure to reduce the risk of severe outcomes. Even if you were not, you can still get vaccinated after infection to boost your resistance to COVID-19. People who have had both the vaccine and the virus have the best immunity to COVID-19, also known as hybrid immunity (Hammerman et al. 2022).

Multiple studies have now ranked immunity against COVID-19, and they rank as follows: 1) Hybrid, 2) Only vaccinated, and 3) Infection-acquired. So if hybrid immunity is best, and vaccination prevents severe outcomes, the safest way to get hybrid immunity is by getting vaccinated prior to infection. Another study (Zar et al. 2022) in South African mothers showed that mothers with hybrid immunity had better protection against Omicron than mothers that didn't. If infection-acquired immunity is unpredictable, then the best way to ensure lasting protection is to get vaccinated to boost your protection after infection. Either way, it is a good idea to get vaccinated.

Vaccine critics often say that infection-derived immunity is best but often fail to explain the risks that it entails. Many will purposely expose their children to chicken pox over vaccination because they believe the immunity is better.

It actually increases the child's risk for things like scarring, encephalitis, and getting shingles later in life. You can get the same immunity from a vaccine with much less risk (Shapiro et al. 2011). The same goes for COVID vaccines, which lower the risk of severe complications and death.



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