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Response to the Commission for Gender Equality's warning against mandatory COVID-19 vaccination

The Commission for Gender Equality issued a warning on 16 January 2022 regarding mandatory vaccination for employees and students. Their statement follows the publication "*Association between menstrual cycle length and coronavirus disease 2019 (COVID-19) vaccination*" by Edelman and colleagues.[1]

As clinicians and academics in the field of Obstetrics and Gynaecology, we are concerned that the commission has isolated one particular study to suggest negative implications for women who take the COVID 19 vaccination. If we look at this study in detail, Edelman et al followed the menstrual cycle pattern of 2403 individuals before and after vaccination and compared cycle patterns to 1556 unvaccinated individuals. The cohort of individuals in the vaccinated group received the Pfizer-BioNTech (55%), Moderna (35%) or Johnson &Johnson/Janssen (7%) vaccines. Covid-19 vaccination was associated with a 0.7-day increase in cycle-length following the first vaccine dose and a 0.9-day increase in cycle-length following the second vaccine dose. Individuals who received the Johnson&Johnson/Janssen vaccine received only one vaccine dose. Covid-19 vaccination was not associated with changes in menses length (days of bleeding) but rather a slightly longer time between bleeding. This change was <u>temporary</u> and menses retuned to "normal" in all subjects. There is no correlation or association with a change in ovulation and/or fertility mentioned in this study.

<u>Comment</u>
Women's menstrual cycle pattern typically varies slightly from month-to-month and the observed changes in the study are well within the range of normal variability. Menstrual cycle is regulated by the hypothalamic-pituitary-ovarian axis, which can be affected by many health stressors including physical or emotional stress. Therefore, the results of this study are, in fact, reassuring in that it shows that the effect of Covid-19 vaccination on menstruation is minor and temporary.

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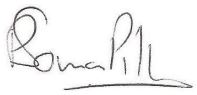
Data from the South African Obstetric Survey Systems shows that one-in-six pregnant women admitted to hospital with covid-19 infection will require mechanical ventilation while one-in-sixteen will die.[2] Vaccination has been shown to be effective in protecting individuals against moderate and severe disease. We believe that the statement from the Commission for Gender Equity may foster vaccine hesitancy and reduce vaccination rates amongst women in South Africa.

At this stage in the pandemic, the benefits of vaccination far outweigh any possible risks.



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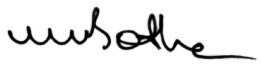

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References

1. Edelman A, Boniface ER, Benhar E, Han L, Matteson KA, Favaro C et al. Association between menstrual cycle length and Corona Disease 2019 (COVID-19) vaccination. Obstet & Gynecol 2022; 00; 1-9
2. Budhram S, Vannevel V, Botha T, Chauke L, Bhoora S, Balie GM et al. Maternal characteristics and pregnancy outcomes of hospitalized pregnant women with SARS-CoV-2 infection in South Africa: an international network of obstetric survey systems-based cohort study. Int J Gynecol Obstet 2021;00:1-11