National Vaccine Advisory Committee Meeting – June 9, 2015 National Vaccine Information Center Public Comment Theresa Wrangham, NVIC Executive Director

My name is Theresa Wrangham and I am the Executive Director for the National Vaccine Information Center. We would ask that NVAC provide adequate time for oral public comment.

Though NVIC did not submit comments solicited via the Federal Registry for the draft reports HPV and Vaccine Confidence, our comments are a matter of public record, as we have been actively commenting during all NVAC meetings since the inception of these efforts.

We again note that if this committee truly wants to address vaccine confidence, transparency in communication is necessary. It is disappointing that comments by the AAP do not recognize medical informed consent and the fact that individuals have the right to decide how they create health in their lives. Many Americans create health through a combination of health care providers outside the medical home. It is their right to do so, just as it is their right when consulting a physician to delay or decline a medical procedure, treatment or pharmaceutical product like vaccines, which carry the risk for injury and death. Thankfully there are many sources of credible information and one does not have to rely strictly on a physician for information to make health decisions.

The reality is that risks associated with vaccines are not well understood. Many vaccine safety research deficits exist, as acknowledged by the IOM, and there can be no one-size-fits-all schedule because of individual susceptibilities and predispositions that may increase the risk for vaccine injury and death. The informed refusal statements in use today that parents are asked to sign when delaying or declining one or more vaccines are often selectively worded. They do not inform Americans of IOM findings, or the fact that there is no vaccine provider that can predict prior to vaccination who will be protected and not harmed by a vaccine. Parents are not told that for most childhood diseases targeted by a vaccine, the majority of U.S. children who may acquire the disease will heal with no complications and enjoy a long-lasting immunity that vaccines do not confer. Complications due to disease are rare, but parents remain unaware of how to report vaccine reactions, or what vaccine reactions symptoms look like. Coercing parents and adults to sign informed refusal statements will not inspire trust.

We appreciate the comments by the CDC today, which acknowledged that those who choose to exercise their informed consent rights to delay or decline one or more vaccines are a very small minority. Yet, efforts under discussion by the NVAC appear to promote a one-size-fits-all schedule and removal of non-medical vaccine exemptions and use of a very narrowly defined medical exemption. If this is the goal, then the NVAC will be seen as supporting violations of basic human and informed consent rights where medical procedures and pharmaceutical products are concerned.

It is both unreasonable and unethical to expect Americans to vaccinate with confidence in a public health environment that lacks the political will to address the core issues that surround vaccine confidence. Investments in new and improved "communications packages" will not change minds.

The public deserves from you an equal commitment in characterizing vaccine injury risks and preventing vaccine injury and death because the parent who's child is injured or dies as a result a vaccine adverse event is just as aggrieved as the parent who loses their child to a vaccine-targeted disease. They are equal tragedies. The goal of public confidence in vaccines will never reached until legitimate safety concerns and conflicts of interest are resolved and informed consent and the human right to delay or decline vaccines is respected.

Due to time constraints, we can offer no comment on HPV today except to say there is no public emergency, and according to the CDC approximately 90% of those who will contract HPV will resolve it with no complications. We would refer the committee to our prior comments and criticisms of the HPV report efforts.