

Please understand that ANY medication or medical procedure carries risk with it (including vaccines). I hope to make a compelling case to you regarding the risks of vaccines. I believe that no parent should be legally compelled to expose their child to medical risk. This is foundational to our liberties as Americans and a foundational principle of medicine: first, do no harm. Please consider the following:

1. Legal Classification and Immunity from Liability

Vaccines are legally classified as "unavoidably unsafe". This was originally outlined in the Congressional "National Childhood Vaccine Injury Act, 42 USC 300aa-22" and re-affirmed by the Supreme Court in *Bruesewitz v. Wyeth*. The manufacturers cannot be sued or held accountable for any adverse effects. No other drug is treated this way. The Office of Special Masters – also known as vaccine court – has paid out more than \$4 billion to families for vaccine injuries and an HHS-funded Harvard Medical School study of 715,000 patients estimates that reported vaccine injuries only represent fewer than 1% of total injuries. The injuries we're discussing are not few and far between.

2. Safety Trials

When I initially accepted the CDC vaccine schedule, I did so on the foundation of data I received from my pediatrician. She presented the overwhelming consensus view in the medical community that vaccines are safe and effective. What I later discovered was that there are no safety trials that are double-blind clinical trials that use a placebo. If you can present one, I would LOVE to read it and will absolutely will allow it to inform my decisions. But I have yet to find one that uses a placebo that is an innocuous saline solution. Studies I've read use what they refer to as a placebo, but it's really testing a previous version of the vaccine against the current one. The rationale behind this is that depriving a group of children of a vaccine even for a short period of time would be unethical. I understand where that's coming from, but the result of this decision is that it leaves us with untenable circular reasoning: vaccines must be safe because vaccines are safe. But with no clinical trials comparing unvaccinated and vaccinated populations, I'm not convinced that vaccine safety is an assumption we can make. Any medication on the market goes through rigorous trials to prove safety. We need to demand the same of vaccines.

3. Increases in Number of Vaccines: Not only have we not seen viable studies comparing vaccinated and unvaccinated populations, but the current schedule is untested. In order to be considered fully vaccinated today, 74 vaccine doses are required! Were the 80s considered a dangerous time for infectious disease that required a twelve-fold increase in the number of vaccines? (Source: [CDC.gov](https://www.cdc.gov))

4. Regarding Herd Immunity: One of the main reasons for enforcing vaccine compliance is the theory of herd immunity. Unfortunately, research on herd immunity has only been conducted on natural disease-induced immunity. There is scientific basis to believe that vaccine-induced herd immunity actually exists. The limitations of vaccine induced herd-immunity include the following facts:

- a. vaccine-induced antibodies wane.
- b. Some people are low responders (antibodies made are low).
- c. Even having high antibodies does not mean you can't get infected.
- d. vaccine failure, the vaccine is not as effective as claimed...For example, only 19% effective for the flu shot in 2014.
- e. Some live virus vaccines cause the vaccinated to get the disease they are vaccinated against. Then

they can infect others.

f. Some vaccines give you the virus and you shed that virus after you get vaccinated. An individual vaccinated against a disease can spread the disease when the virus or other microbe in the vaccine sheds.

g. Vaccinated people can infect others while they are asymptomatic as in the case of pertussis. There are outbreaks among highly vaccinated populations and the vaccinated get the disease.

h. Vaccines only activate part of the immune system. Cellular immunity is not activated. Vaccine immunity is not the same immunologically as natural immunity. When vaccines are delivered by injection, the mucous membranes are bypassed and thus blood antibodies are produced but not mucosal antibodies.

i. Viruses mutate and become more virulent...and old vaccines are not effective against the mutated strains. The mutations keep happening even if new vaccines are invented.

Additionally, because most adults do not receive boosters, we already exist in a world where vaccine compliance is nowhere near the 95% compliance proponents argue is required to obtain herd immunity.

5. Regarding the Spread of Disease: I'm a strong proponent of sanitation, isolation and quarantine as tools for preventing the spread of disease. If my children are sick, they stay home and far away from others. I believe as a society, we could do a lot to encourage this (mandated sick leave for all employees, encouraging people to wear masks if they must go out in public when sick, and universal health care among other policy proposals). However, my unvaccinated children who are not sick, carry no imminent danger to anyone else. They cannot spread a disease they do not have. On the contrast however, some vaccines which contain live viruses (measles & varicella) can cause recipients to be asymptomatic carriers who can shed the virus for 30 days without realizing it. I believe this is an unaddressed source of disease outbreak and often unvaccinated individuals are blamed for outbreaks when in some cases, the sick individuals are primarily vaccinated.

6. Death Rates. Autism is not my primary concern. Death is. THE most compelling thing to me is to compare the death rates from vaccines compared to deaths from the diseases [the vaccines](#) are intended to prevent. The chart below is based on publicly available data from the CDC and VAERS that I compiled myself personally. While 2 children have died in the US from Measels in the last 15 years (1 in 2003 and 1 in 2015), 127 have died from the MMR vaccine in that same time period. (Source: CDC & VAERS).

I understand one objection to presenting the data in this way is to say "of course death rates from infections have dropped – because of vaccines". I would then encourage you to consider the death tolls prior to the introduction of these vaccines (chart also attached and based on publicly available CDC data). Death rates had plummeted drastically prior to the introduction of each vaccine. I also feel strongly that my responsibility to my child should be based on the current risk factors today and if my child is more likely to die from the vaccine than the illness, that factors strongly into our decision. Any parent should have the absolute right to determine whether or not to impose risks of medical procedures on their children. It is unconstitutional to require anyone to obtain a medical procedure or medication without their consent.

7. Some People Carry Higher Risks Than Others

The CDC has conceded that some people do bear more risk for vaccine reactions and caution should be taken. Some individuals should not get the MMR vaccine, including individuals with a history of seizures or a parent or sibling with a history of seizures. For this reason, I believe that each parent should have the authority to decide what's best for their family.

Sincerely,

Jessica Rice

Sent from my iPhone