

To members of the House Committee On Health Care, re. HB3063:

Dear Senator,

I am writing to you about the proposed bill HB3063. I am an Oregon parent and scientist, am strongly opposed to this bill, and urge you to not allow it out of committee.

As a parent, I am not anti-vaccine, however I believe strongly that mandating any medical procedure is unconstitutional. I am concerned with preserving the right to self-determination, particularly where individual health is concerned. It is hypocritical for doctors to try to remove a philosophical exemption for vaccine mandates for school children when The American Medical Association, in section 9.133 Routine Universal Immunization of Physicians of the AMA Code of Ethics, affirm the right to both religious and philosophical exceptions for themselves to decline vaccination. [1]

According to the Centers for Disease Control, this year's measles outbreak nationwide so far is only 159 cases but 2011 saw 220 cases, 2014 had 667 and last year there were 372 reported cases. There is no emergency.

Our current laws, and allowances for there to be philosophical and religious exemptions, are rooted in the fact that early vaccine experimentation was enacted on prisoners in concentration camps in Nazi occupied Europe. Following that time, it was clearly understood that individual liberty was an important consideration in any medical procedure, and that encroaching on that "in the name of science" or "the good of society" was a slippery slope. After the Nuremberg war trials, the so-called Code of Nuremberg was published that laid down the groundwork for ethical conduct in research on humans that we have today. Later on, this led to the so-called Declaration of Helsinki, which has been amended and clarified ever since. Part of the first amendment from 1975 clearly states: "concern for the interests of the subject must always prevail over the interests of science and society."

I urge you strongly to keep this in mind as you weigh your decision in this matter.

Vaccine injury does happen. The CDC website on MMR vaccine states that studies have shown that for children younger than 7 years old, there is an increased risk of febrile seizures approximately 6 to 14 days after MMR vaccination; this happens in about 1 in 3,000 to 4,000 children. My background in research related to epilepsy tells me that febrile seizures can cause permanent brain damage. This is no matter to be taken lightly. The site also states that severe brain swelling caused by the measles virus is a complication of getting infected with the wild-type measles virus. There have been three published reports of this complication happening to vaccinated people. In these cases, encephalitis developed between 4 and 9 months after MMR vaccination. In one case, the measles vaccine strain was identified as the cause. [2]

I personally think it is likely that this type of reaction happens much more often than documented in the medical literature because most doctors order lab tests for neither wild type nor vaccine strain activity in cases of adverse health events within 9 months of vaccination. To me, it looks like the CDC's own data suggest value in routinely monitoring potential vaccine reactions for almost an entire year post vaccination!

As a scientist, I urge the committee members to consider the following two questions, if they have not done so already:

(a) Are health officials testing cases of measles in the current outbreak(s) to determine if the measles strain in each case is the wild strain or the vaccine strain? - The vaccine strain has been found in measles outbreaks before. Knowing whether or not this is happening in the current outbreak might be important to finding an appropriate response. [3,4]

For example, in recent years there has been a shortage of measles vaccines in Ukraine. Vaccination rates had dropped to 31% in 2016 and were the lowest in Europe and, yet, there were hardly any cases of measles. In 2017, sufficient vaccines became available for a 'catch-up campaign' and 90% of the children in Ukraine received the MMR. Since then, there has been an explosion of reported cases of measles. The number has already surpassed 12,000. Why is the media ignoring the current outbreak of measles in Ukraine? And what is really going on? [5]

(b) Are committee members aware that a vaccine's reported efficacy may indicate the rate at which the vaccine protects against the vaccine strain of the disease, not the wild strain it is meant to protect against? - The efficacy of a vaccine against the wild strain disease can be much lower than its efficacy against the vaccine strain, and this may make it impossible for such a vaccine to ever achieve herd immunity against the wild strain disease in a population. [6]

All of this points to the value of some measure of flexibility in laws concerning vaccination.

Thank you for your time and service,  
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references:

[1] - [https://journalofethics.ama-assn.org/article/ama-code-medical-ethics-opinion-physicians-responsibility-be-vaccinated/2012-01?fbclid=IwAR2VDITfkeZwJ\\_3n2FI-esXEhtOtWSu162zC\\_by3tLcpLzX\\_Td-aan3m\\_Y8](https://journalofethics.ama-assn.org/article/ama-code-medical-ethics-opinion-physicians-responsibility-be-vaccinated/2012-01?fbclid=IwAR2VDITfkeZwJ_3n2FI-esXEhtOtWSu162zC_by3tLcpLzX_Td-aan3m_Y8)

[2] - <https://www.cdc.gov/vaccinesafety/vaccines/mmr-vaccine.html>

[3] - <https://vaccineimpact.com/2015/dr-suzanne-humphries-m-d-vaccine-strain-of-measles-virus-found-in-measles-outbreaks/>

[4] - [https://www.naturalnews.com/048914\\_measles\\_vaccine\\_strain\\_genetic\\_testing.html](https://www.naturalnews.com/048914_measles_vaccine_strain_genetic_testing.html)

[5] - <https://thevaccinereaction.org/2018/07/is-recent-mmr-vaccine-campaign-linked-to-reported-measles-outbreak-in-ukraine/>

[6] - <https://childrenshealthdefense.org/news/natural-vs-artificial-herd-immunity-failed-vaccination-programs-taught-us/>