February 27, 2019

Dear House Committee on Health Care,

This letter is in regard to HB3063 and the dire effects it would have on parental rights to choose whether to vaccinate their children or not. While the debate between the risks and benefits of vaccinations continues to rage on; with robust empirical data demonstrated by both sides of the debate, the issue here is not about the science but about parents' right to choose what is in the best interest of their children.

As a parent to two unvaccinated children, and one child who had an adverse reaction to the Hep B vaccine, I am concerned that the Oregon legislature is making a rash decision to push this bill into law without analyzing and digesting all the necessary and important facts. I am afraid that the media frenzy created by the Washington State Measles outbreak may be clouding the better judgment that is expected from our elected officials, and that the push to pass this bill may be centered on appeasing the masses rather than on a clear understanding of the issue at hand.

Let me be clear on something, my wife and I did not throw caution to the wind when choosing not to vaccinate our children. In fact, to think that those of us who choose not to vaccinate our children do so as a whim of fancy, because it is convenient, or without any consideration, shows the ignorance and rashness with which this bill is laden. A quick look at the statistics of unvaccinated children in the state and in the country will show that most of us that choose not to vaccinate our children are well educated and of higher incomes. We have arrived at these decisions by agonizing over the benefits and the potential risks associated with each and every vaccine. We have consulted with our children's pediatricians, delved into the vaccine product inserts, educated ourselves in the science, and only then arrived at the conclusion that not vaccinating is the best choice for our children. It is up to each one of us as parents to make the choices that are right for our children. I would never ask a parent to make a different choice than the one that they believe and have researched, to be best for their children. Parents who choose not to vaccinate as we have, have done so after educating themselves. There is informed consent that has taken place, not ignorant resistance as some may want to believe. This is not about Pro-Vax against Anti-Vax. This is about preserving a parent's right to choose what is in the best interest of their child.

Many of us have done this with the assistance and support of our children's pediatricians. We are thankful for their guidance and for their own research. We conferred with four pediatricians, all of whom agree that given the adverse reaction our first child had to the Hep B vaccine along with other allergic and medical issues, the risks outweighed the benefits of vaccinations for our children. We know that there are documented adverse effects to all vaccines in the CDC schedule. If there were not, VAERS would not exist and the Federal government would have no reason to protect

the vaccine companies from torts associated with vaccine reactions. And while adverse reactions are rare – reactions that damage children physiologically or neurologically – they do exist. The percentages may be small but no one except a parent should be able to decide if the risk of an adverse reaction is acceptable to them. Passage of this bill would take away a parent's right to choose what is best for their child in this great state. Passage of this bill would put the onus squarely on the State for the possible number of children that could experience severe adverse effects to vaccinations that the State is mandating. I ask you members of the committee, what is an acceptable number of children damaged by the vaccines this bill plans to impose? One, ten, one hundred? Is the collateral damage to one family acceptable for the greater good? It is an easy choice to make when that child is not your own and the laws you are imposing may not have a direct impact on you.

There are a plethora of peer reviewed studies that have shown the risks of vaccinations. Many of these studies have been conducted by respected members of the medical and pharmaceutical community. Let me point you to a couple of these studies, listed here in Appendix A, which I would hope you and members of your staff would look up before pushing this bill to the legislature. It is my sincere hope that after reviewing these studies, you would kill this bill altogether. Each one of these studies is peer reviewed and for those of you members of the committee who may be members of the medical profession, acquiring these studies should not be difficult. Nevertheless, I would be elated to provide you copies of these documents should you have trouble obtaining them.

Additional consequences of this bill include the unintended and unknown monetary effects that may be caused by its passage. Many families may choose to pull their kids from schools, opting to homeschool instead. How much money would the state lose in funding based on numbers of children lost to the school districts as parents choose to homeschool rather than be forced to vaccinate their children? There are currently approximately 16,000 children with exemptions in Oregon. It is believed state funding per child in Oregon to be about \$13,000. If all 16,000 children with exemptions were homeschooled, the state would lose \$208 million dollars in school funding.

How will the Legislature reconcile how removing philosophical exemptions may affect children currently under an IEP in school? Has consideration been given to the Individuals with Disabilities Education Act (IDEA)? The IDEA states that children with disabilities are to be provided with a "free and appropriate public education." This bill would no longer support and abide by the IDEA. Education for individuals with disabilities would no longer be free, but coerced by the removal of vaccine exemptions. The price of education for these children is their being subjected to vaccinations that their parents, and potentially even their physicians, do not agree are in the best interest of the child. How will this Committee reconcile the removal of free and appropriate education from children?

Additionally, some families may choose to uproot altogether and move to a state where parental rights are observed. The loss of hundreds to thousands of families could have a fiscal impact on the State's income and GDP from wages, taxes, and dispensable income lost to the state as families migrate out of the state. That does not take into account other potential effects, such as negative effects in real estate market valuations and the potential negative impacts to businesses who may lose top talent because of this bill.

I trust that after truly researching the benefits and risk associated with vaccination, the committee will reverse course in pushing HB3063 to the legislative floor for vote. I also trust that the legislature will realize the burden that parents have to make the right decisions for their children, especially difficult decisions such as choosing whether to vaccinate or not. Part of the government's role is to uphold the rights and freedoms of its citizens. Passage of HB3063 would remove such rights and freedoms from parents as they choose the best outcomes for their children.

I thank you for taking the time to read this letter and I trust that the legislature of our great state will not create a law based on knee-jerk reaction but rather that an objective review of the scientific evidence would be performed to determine the best course of action that allows parents to make educated, informed choices about vaccinations.

Respectfully yours,

Alex Gonzalez Sherwood, OR

## **Appendix A**

1. Relative trends in hospitalization and mortality among infants by the number of vaccine doses and age, based on the Vaccine Adverse Event Reporting System (VAERS), 1990-2010.

Human and Experimental Toxicology. 2012.

GS Goldman and NZ Miller

Conclusion: Our findings show a positive correlation between the number of vaccine doses administered and the percentage of hospitalizations and deaths reported to VAERS. In addition, younger infants were significantly more likely to be hospitalized or die after receiving vaccines. Since vaccines are administered to millions of infants every year, it is imperative that the health authorities have scientific data from synergistic toxicity studies on all combinations of vaccines that infants are likely to receive; universal vaccine recommendations must be supported by such studies.

2. Increased risk of developmental neurologic impairment after high exposure to thimerosalcontaining vaccine in first month of life.

Division of Epidemiology and Surveillance, Vaccine Safety and Development Branch, National Immunization Program, Centers for Disease Control and Prevention. 1999.

Thomas M. Verstraeten, R. Davies, D. Gu, F. DeStefano

Conclusion: This analysis suggests that high exposure to ethyl mercury from thimerosalcontaining vaccines in the first month of life increases the risk of subsequent development of neurologic development impairment, but not of neurologic degenerative or renal impairment. Further confirmatory studies are needed.

3. Hepatitis B Vaccination of Male Neonates and Autism

Annals of Epidemiology, Vol. 19, No. 9 ABSTRACTS (ACE), September 2009: 651-680, p. 659.

CM Gallagher, MS Goodman, Graduate Program in Public Health, Stony Brook Medical Center, Stonybrook, NY.

Conclusions: Findings suggest that U.S. male neonates vaccinated with Hepatitis B vaccine had a 3-fold greater risk of ASD, risk was greater for non-white boys.

4. Infection, vaccines, and other environmental triggers of autoimmunity.

Autoimmunity. 2005 May; 38(3):235-45

Department of Medicine B and the Center for Autoimmune Diseases, Sheba Medical Center, Tel-Hashomer, Israel.

Molina V., Shoenfeld Y.,

Conclusions: Vaccines, in several reports were found to be temporally followed by a new onset of autoimmune diseases. The same mechanism that act in infectious invasion of the host, apply

equally to the host response to vaccination. It has been accepted for diphtheria and tetanus toxoid, polio and measles vaccines and GBS. Also this theory has been accepted for MMR vaccination and development of autoimmune thrombocytopenia, MS has been associated with HBV vaccination.

5. Aluminum Induced Entropy in Biological Systems: Implications for Neurological Disease

Journal of Toxicology, Volume 2014 (2014), Article ID 491316

Christopher A. Shaw, Stephanie Seneff, Stephen D. Kette, Lucija Tomljenovic, John W. Oller Jr., Robert M. Davidson

Conclusions: All these findings plausibly implicate Al adjuvants in pediatric vaccines as causal factors contributing to increased rates of autism spectrum disorders in countries where multiple doses are almost universally administered.