

3146

Kathy Cooper

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IRRC

From: Meredith Murphy <meredithgmurphy@gmail.com>
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Subject: Concerns about IRRC #3146 & 3147

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I am writing to you about my concerns on IIRC 3146 and 3147. I am a parent of a school age child and I, myself, have been vaccine injured as an adult. It took 6 years of suffering before realizing that my health struggles were related to the dTAP vaccine I received when my daughter was born. Since then I have done a lot of research and have been tested for the MTHFR mutation which, in research, seems to make people more susceptible to vaccine reactions. Making informed decisions about my child's healthcare is a #1 priority to me. I am a health care provider and with our family doctor we discuss the pros and cons of each decision we make regarding vaccines. No decision is made likely. Here are my concerns regarding 3146 and 3147:

- The decrease in provisional period is SEVERE, 5 days? Maybe a middle ground between 240 and 5 days could be better found for those in this predicament.

- I support the changes in the reporting deadline.

- Addition of Meningococcal vax for students entering 12th grade. This disease is very rare. The addition of this vaccine is not only unnecessary but would significantly raise costs and risks that far outweigh any possible benefit. This is the information I have found regarding this disease: The incidence rate for meningococcal disease, according to the CDC, is 0.3-0.5/100,000

<http://www.cdc.gov/vaccines/pubs/surv-manual/chpt08-mening.html>. According to the CDC Pink Book, the meningococcal bacteria become invasive only rarely. "In a small proportion (less than 1%) of colonized persons, the organism penetrates the mucosal cells and enters the bloodstream." (See reference below.) The CDC states that all serogroups of the disease are on the decline. Serogroup B, not included in the vaccine, declined along with the serogroups included in the vaccine "for reasons that are not known." Also, "The communicability of N. meningitidis is generally limited. In studies of households in which a case of meningococcal disease has occurred, only 3%-4% of households had secondary cases." Furthermore, "In the United States, meningococcal outbreaks account for less than 2% of reported cases (98% of cases are sporadic)." Therefore, transmission in the school setting is very unlikely.

- Inclusion of pertussis vaccine for kindergarten. This is the vaccine that I had a reaction to and it has changed my life and left me a shell of the person I used to be. Only 7 years later am I starting to regain my health. Almost every case of pertussis seen in schools in the area are in FULLY VACCINATED children which leads me to believe that there is a problem with the vaccine, not with unvaccinated children.

Thank you for reading my letter and I hope this can help you understand where I am coming from, which is a place of wanting informed decisions made for my family between our dr and ourselves.

-Meredith Murphy
Chester Springs, PA