

From: jamie faye <jfaye727@msn.com>
Sent: Tuesday, May 03, 2016 2:29 PM
To: IRRRC@IRRC.STATE.PA.US; Findley, Cynthia; ED, State Board of Ed
Subject: [SUSPICIOUS MESSAGE] IRRRC #3146 & 3147

WARNING: The Commonwealth's email security system has determined the message below may be a potential threat.

It may pose as a legitimate company, tricking victims into revealing personal information. If you do not know the sender or cannot verify the integrity of the message, please do not respond or click on links in the message. Depending on the security settings, clickable URLs may have been modified to provide additional security.

Threat Information:
Category: Phish
Type: Phish
Level: 5

2016 MAY -6 AM 10:09
RECEIVED
IRRC

Hello,

I am writing as a concerned parent of four young children. After reviewing the Regulatory Analysis Form regarding School Immunization Regulations I feel alarmed. Mandating medical procedures that carry risks for ALL Pennsylvania students is not something to be taken lightly. The implications of these regulations will have serious impacts on the majority of PA families as well as the Commonwealth itself. There are many issues that require further clarification and addition review, but this letter will only address the following two issues that I am in most opposition to:

- 1 Addition of Meningococcal vaccine for students entering 12th grade.**
- 2. Inclusion of Pertussis vaccine for kindergarten admission.**

The addition of the Meningococcal vaccine for students entering 12th grade vaccine is not only unnecessary but would significantly raise costs and risks that far outweigh any possible benefit. The disease is extremely rare; the incidence rate for meningococcal disease, according to the CDC, is 0.3-0.5/100,000. According to the PA Department of Health EDDIE database, in 2014, there were only 16 new cases of meningitis. Vaccinating the estimated 147,040 seniors in 2014, would have cost parents and taxpayers over \$16,000,000. The CDC states that all serogroups of the disease are on the decline, including serogroup B, which is not even included in the vaccine. Additionally, earlier this legislative session, a bill was introduced to mandate this vaccine for students entering 12th grade. The legislature did not see the necessity of such a mandate and thus chose not to act. The Department of Health is seeking to circumvent the legislative process in enforcing mandates that are not supported by lawmakers. This vaccine is already available to anyone who wants it.

Regarding the inclusion of the Pertussis vaccination for kindergarten admission we are currently seeing outbreaks of pertussis among fully vaccinated populations. The CDC and top doctors are verifying the lack of efficacy and the early waning of any immunity provided by this vaccine. In February 2016, The American Academy of Pediatrics published that Tdap provided moderate defense against the illness (pertussis) during the first year after vaccination but not much longer. Immunity waned during the second year, and little protection remained 2 to 3 years after vaccination. . It seems hasty to add a vaccine that is currently under scrutiny from the medical community to the requirements.

Meningitis and Tdap vaccines are pharmaceutical products that carry a risk of injury or death, a fact that was acknowledged by the U.S. Congress in 1986 when it passed the National Childhood Vaccine Injury Act. Since 1988, the federal vaccine injury compensation program created under that law has awarded more than \$3.2 billion to children and adults injured by vaccines or to families whose loved ones died from vaccine reactions, although two out of three who apply are denied compensation. The Institute of Medicine in a series of reports on vaccine safety spanning 25 years has acknowledged there is individual susceptibility to vaccine reactions for genetic, biological and environmental reasons that have not been fully defined by science, and doctors often cannot predict ahead of time who will be harmed. Long standing gaps in vaccine safety research and emerging evidence that certain vaccines do not prevent infection or transmission of disease, urgently require legal protection of physician's rights and parental rights regarding medical and religious exemptions to vaccination for minor children.

Vaccine Manufacturers for Meningitis Vaccines Have No Civil Liability. The 1986 law partially shielded drug companies selling vaccines in the U.S. from civil liability and, in 2011, the US Supreme Court completely shielded vaccine manufacturers from liability for FDA licensed and CDC recommended vaccines. There is no product liability or accountability for pharmaceutical companies marketing federally recommended and state mandated vaccines that injure Americans or cause their death, which makes flexible medical and non-medical vaccine exemptions in vaccine policies and laws the only way Americans can protect themselves and their children from vaccine risks and failures.

Please consider these things carefully and do not disregard these concerns. There must be very reasonable evidence to eradicate parents' right to make these decisions.

Thank you for taking the time to read this letter.

God bless.

Sincerely,

Jamie Egbujo