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Kathy Cooper

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IRPC

From: lauralshanahan@comcast.net

Sent: Monday, May 09, 2016 11:58 PM 2016 MAY 10 AM 8: 46

To: IRRC

Subject: Proposed Changes to School-Aged Vaccinations in the Commonwealth of PA

To all legislative representatives throughout the Commonwealth of Pennsylvania, including the Health Advisory Board and Secretary of Health, Karen Murphy,

My name is Laura Shanahan and I am a physical therapist and mother to 3 school-aged children living in Manheim Township, Lancaster County. I am not against vaccines and believe that they can be of great benefit to society at large if they are used wisely. The decision to vaccinate should be based on heavy consideration of factors such as the severity of different illnesses, their speed of transmission, and the number of people sickened when weighing their benefits versus their adverse reactions and potential permanent injury. In the current society we are living in, it seems that vaccines are being over-used with mandated legislation being passed very quickly, removing a parent's/guardian's right to make informed decisions regarding their own children's vaccine schedules and health. I just turned 40 years old this year and I bring up my age to illustrate the fact that when I was a child, the vaccine schedule for school-aged children was much shorter than it is now and spaced out so that combinations of different antigens to various diseases were not administered all at one. In addition, more and more childhood vaccines, including Hep B, rotavirus, and HPV, contain genetically engineered components with foreign DNA segments and adjuvants, such as aluminum, capable of triggering autoimmune responses which can contribute to multiple disabilities later on in life such as allergies and autism. Due to these many uncertainties, I am against the proposed changes to required school-aged vaccinations to attend school in the state of Pennsylvania (IRRC# 3146 and 3147).

Each year there are thousands of adverse reactions and permanent injuries recorded after children receive routine vaccines. Unfortunately, legislation passed in 1986 (National Childhood Vaccine Injury Act) grants drug companies immunity from lawsuits involving such side effects. Many of our government officials also have heavy ties to the major pharmaceutical companies demonstrating a major conflict of interest to the American people. It comes as no surprise that our children are required to receive an ever-increasing amount of immunizations in order to attend school. In 1983, a 6 year-old child received 10 vaccines during his/her lifetime, while in 2013 the same child would have received 36-38 vaccines, nearly 4x the amount.

It is also very common for these vaccines to be given in combination and not spaced out as previously practiced. The safety and efficacy of these combination immunizations has not been studied either and it is quite possible that lifetime immunity is not being established as a result which is the intended goal of vaccination in the first place. Vaccines need to be changed periodically for the goal of herd immunity to take place over a period of several decades. Since most of our vaccines are only created by one manufacturer, essentially we have a monopoly where fair competition does not exist and possibly a superior vaccine product is not being delivered to the public. A suit was brought against Merck in 2010 by two of its former scientists who allege that the company falsified claims that its product was 95% effective precluding any competitors from the market. Is this why children must now get 2 doses of the MMR vaccine since the company claims that 20% of the population will not be properly immunized with just one dose anymore? If children's titers are not routinely checked after routine vaccination, how can we hold these pharmaceutical companies accountable for failing

products? My youngest daughter was tested a couple of years after her first MMR and had no immunity to rubella afterwards. How likely is it that she is just one of the supposed 20% that will not respond and will need a second booster? Is the same phenomenon occurring with the combination diphtheria/tetanus/pertussis vaccine where now it is being proposed that all 12th graders receive a 3rd dose of this combination vaccine? Where do we draw the line and actually prove the efficacy of these immunizations? How many times should we risk adverse reactions and permanent injury in our children? Who is checking to see if our children actually possess the titers to these diseases in their blood stream? Are they really safe to be given all at once?

As a physical therapist working recently with school-aged children, I was able to witness first-hand the epidemic of autism that now plagues our nation. Since our government deregulated the field of biotechnology back in the 80's, we have had no long-term studies measuring the effects of GMO's and adjuvants such as aluminum on human tissues located throughout various places of the body, especially the nervous system. Since GMO's have been introduced, we have seen a steady upward trend of not only autism, but also various autoimmune diseases, Alzheimer's disease, and cancers throughout our population. It is completely out of control at this point, and the various health and environmental changes brought about by the biotechnology field need to be examined before even more potential harm is done.

In the literature concerning the proposed changes, it states that there are no costs to the public due to vaccination which is simply not true when you examine the amount of disease which now exists in our nation after vaccines rates have increased with much fuller schedules. Please consider holding pharmaceutical companies more accountable for possible failing products than to take more and more rights from parents and guardians. Please demand that titers are routinely tested in children following vaccination, for example. It is my hope that all children one day can be vaccinated safely for the sake of their health only and not for a drug company to prosper.

Sincerely, Laura Shanahan