

# Vaccine Policy

We recognize that there is much anti-vaccine rhetoric in the press today that has heightened parents' concerns regarding immunizations. However, there is no scientific link between vaccines and autism or the other issues claimed by the anti-vaccine crowd. Thus, we feel it necessary to take a firm stand on the vaccine policies in our practice.

~We firmly believe in the effectiveness of vaccines to prevent serious illness and to save lives.

~We firmly believe in the safety of our vaccines.

~We firmly believe that all children and young adults should receive all of the recommended vaccines according to the schedule published by the Centers for Disease Control and Prevention and the American Academy of Pediatrics.

~We firmly believe, based on all available literature, evidence, and current studies, that vaccines do not cause autism or other developmental disabilities. We firmly believe that thimerosal, a preservative that has been in vaccines for decades and remains in some vaccines, does not cause autism or other developmental disabilities.

~We firmly believe that vaccinating children and young adults may be the single most important health promoting intervention we perform as health care providers, and that you can support as parents/caregivers. The recommended vaccines and the schedule of administration are the results of years and years of scientific study and data-gathering on millions of children by thousands of our brightest scientists and physicians.

The vaccine campaign is truly a victim of its own success. It is precisely because vaccines are so effective at preventing illness that we are even discussing whether or not they should be given. Because of vaccines, many of you have never seen a child with polio, tetanus, whooping cough, bacterial meningitis, or even chickenpox, or known a friend or family member whose child died of one of these diseases. Such success can make us complacent or even lazy about vaccinating. But such an attitude, if it becomes widespread, can only lead to tragic results.

Over the past several years, many people in Europe have chosen not to vaccinate their children with the MMR (measles, mumps, rubella) vaccine after publication of an unfounded suspicion (later retracted) that the vaccine caused autism. As a result of under-immunization, there have been multiple outbreaks of measles and several deaths from complications of measles in the United States and worldwide over the past several years. The United States experienced a record number of measles cases during 2014, with 667 cases from 27 states reported to CDC's National Center for Immunization and Respiratory Diseases (NCIRD). This is the greatest number of cases since measles elimination was documented in the U.S. in 2000.

Furthermore, we firmly believe that by not vaccinating your child, you are taking advantage of thousands of others who do vaccinate their children, which decreases the likelihood that a child will contract one of these diseases. Even delaying or “breaking up the vaccines” to give one or two at a time over additional visits goes against expert recommendations, is not supported by any scientific data, can lead to unnecessary delays and errors, and can put your child, other children, and adults at risk for serious illness (or even death). It is therefore against our medical advice as professionals at Village Pediatrics.

As medical professionals, we feel very strongly that vaccinating children on schedule with currently available vaccines is absolutely the right thing to do for all children and young adults. We are making you aware of these facts not to scare you or coerce you, but to emphasize the importance of vaccinating your child. We are more than willing to discuss any questions you may have about vaccines, but do require all new patients to our practice to adhere to the vaccination schedule endorsed by the American Academy of Pediatrics (AAP) unless they meet the following criteria:

Severe allergy to one of the components of the vaccine. Minor allergies may require observation after vaccination, but the vaccine may be given.

- Vaccine is unavailable at an office visit.
- Immune suppression in the patient or caregiver that precludes vaccination.
- Fever or significant illness within the previous 24 hours prior to scheduled vaccine. It is recommended to vaccinate with mild illnesses.
- Inability to vaccinate with a live virus due to another live virus vaccine being given in the previous 28 days.
- Chronic high dose steroid of at least 2 weeks duration use might exclude certain vaccines.
- A child is past the age for which the vaccine is approved for use.
- Chronic illness that precludes vaccination.

### **What if we've missed doses of vaccine, but are willing to vaccinate?**

If a newborn did not get the Hepatitis B vaccine in the hospital for whatever reason, we will give it at the first office visit and continue on schedule.

If a child transfers in to our office and requires a catch-up schedule, we will catch up according to the CDC catch up schedule.

**Too Many Too Soon?** For those who are worried that there are too many vaccines too soon and they will overwhelm the immune system: This fear is simply unfounded. The schedule has been shown to be safe. We are exposed to a few hundred thousand viruses and bacteria each minute through normal breathing. Children receive about 130 antigens from vaccines. This is not a

significant number compared to the millions upon millions of viral and bacterial antigens that enter a child's lungs daily. The number of antigens has dropped over the same years that the number of illnesses being prevented has increased.

**Law of unintended consequences:** Separating vaccines also requires more visits to our office, which can expose children to more illness and unnecessarily increases the cost of healthcare.

**Stress:** Studies have shown that the first injection causes a stress response (measured by elevated heart rate, blood pressure, cortisol levels, cry), but subsequent injections given at the same time do not increase as significantly the stress when compared to returning on different days to get further injections. So children with delayed schedules are actually subjected to more stress.

**Perspective:** We are more likely to suffer death from car accidents than to have an adverse reaction to a vaccine.

As Paul Offit summarized in *Addressing Parents' Concerns: Do Multiple Vaccines Overwhelm or Weaken the Infant's Immune System?*:

Current studies do not support the hypothesis that multiple vaccines overwhelm, weaken, or "use up" the immune system. On the contrary, young infants have an enormous capacity to respond to multiple vaccines, as well as to the many other challenges present in the environment. By providing protection against a number of bacterial and viral pathogens, vaccines prevent the "weakening" of the immune system and consequent secondary bacterial infections occasionally caused by natural infection.