

December 6, 2012

Chairman Darrell Issa  
U.S. House Committee on Oversight  
and Government Reform  
2157 Rayburn House Office Building  
Washington, D.C. 20515  
FAX: 202-225-3974

Dear Chairman Issa and Members of the House Committee on Oversight and Government Reform:

The co-founders of the nonprofit charity, the National Vaccine Information Center ([NVIC.org](http://www.NVIC.org)), formerly Dissatisfied Parents Together (DPT), worked with Congress on the National Childhood Vaccine Injury Act of 1986 and were responsible for securing the informing, recording and reporting vaccine safety provisions in that historic law. <sup>1</sup> NVIC also initiated and led the 14-year consumer advocacy effort to obtain, in 1996, a less reactive DTaP vaccine for American babies <sup>2</sup> and supported the 1999 replacement of the live oral polio vaccine, which can cause vaccine strain polio infection, with the inactivated polio vaccine, which does not. <sup>3</sup>

Since 1982, NVIC has been dedicated to preventing vaccine injuries and deaths through public education and defending the ethical principle of informed consent to medical risk-taking. <sup>5</sup> Although NVIC is not an autism organization, among our 45,000 active donor supporters are thousands of families, whose previously healthy children received one or more vaccinations and regressed into chronic poor health manifested by brain and immune dysfunction, including a constellation of clinical symptoms eventually diagnosed by pediatricians as “autism.”

We congratulate the Committee on holding a public hearing to examine the potential causes for and federal responses to huge increases in the numbers of children being diagnosed with autism spectrum disorder. Thank you for not excluding examination of the potential multiple biological mechanisms and individual biological high risk factors related to vaccination. <sup>6</sup>

Autism, which now affects at a minimum 1 child in 88 in America, is not the only adverse health outcome involving brain and immune dysfunction that has been increasing among children during the past three decades. Since 1982, NVIC has received reports from parents that their healthy, normally developing children were given one or more vaccines and then experienced an allergic reaction or symptoms of brain inflammation and encephalopathy<sup>7 8</sup> followed by a diagnosis of multiple learning disabilities, ADHD or ADD, uncontrolled seizure disorders, inflammatory bowel disease, asthma, severe food allergies, mental retardation, paralysis and infant death, among other serious health problems.<sup>9</sup>

Often doctors dismiss health deterioration after vaccination as “coincidental” and insist that more vaccinations be given in compliance with one-size-fits-all federal vaccine policies that have been incorporated into state vaccine laws. In many of these cases, vaccine reaction symptoms worsen and further damage is done.<sup>10</sup>

The unprecedented child chronic disease and disability epidemic plaguing children in the 21<sup>st</sup> century takes many forms and is illustrated by the fact that, in America:

- 1 child in 6 is learning disabled or developmentally delayed;<sup>11</sup>
- 1 child in 9 is asthmatic;<sup>12</sup>
- 1 child in 10 has ADHD;<sup>13</sup>
- 1 child in 450 suffers with diabetes.<sup>14</sup>

Because children today are receiving three times as many vaccinations as children were given in the 1970's,<sup>15 16</sup> many more parents today are legitimately questioning whether a growing number of children are not able to handle so many doses of vaccines without developing brain and immune system disorders. However, when educated parents look for evidence that vaccine policies are safe for their child, it becomes clear that the current state of vaccine safety science and vaccine safety regulation is inadequate to truly inform vaccine policymaking.<sup>17 18 19</sup> In particular, there is too little knowledge about and attention paid to the biological, genetic and environmental differences among children and adults, which may increase or decrease risk factors for individual susceptibility to adverse responses to vaccination.<sup>20 21</sup>

During the past 30 years, I have served as a consumer representative on federal vaccine advisory committees and vaccine policy public engagement projects, including the National Vaccine Advisory Committee (1988-1991); Institute of Medicine Vaccine Safety Forum (1995-1998);<sup>22 23</sup> FDA Vaccines & Related Biological Products Advisory Committee (1999-2002); Vaccine Policy Analysis Collaborative (2002-2005)<sup>24 25</sup> and I participated in a 2008-2010 federal public engagement initiative that examined vaccine science research priorities<sup>26</sup> and potential improvements of the vaccine safety system infrastructure.<sup>27</sup> I

encourage your Committee to take a look at the long, credible public consumer advocacy record established by the National Vaccine Information Center as we have tried to work with public health officials for decades to encourage the funding of methodologically sound vaccine safety research and the inclusion of better vaccine safety and informed consent protections in U.S. vaccine policies and laws.

Investigating and addressing the flaws in vaccine regulation and policymaking is of urgent importance because there are more than 1,000 clinical trials involving experimental vaccines<sup>28</sup> being funded by both liability-free drug companies<sup>29</sup> and federal health agencies, which are designed to bring hundreds of new vaccines to market. Many of these new vaccines will be recommended and mandated by federal and state health agencies for universal use by all children and adults and will significantly increase federally funded vaccine programs.<sup>30</sup>

Finally, Congress promised parents of vaccine injured children that the National Childhood Vaccine Injury Act of 1986 would (1) make the vaccine system safer and that (2) the vaccine injured would be provided with a fair, expedited administrative no-fault alternative to highly adversarial and expensive civil court lawsuits. Unfortunately, the vaccine safety informing, recording and reporting provisions of the law are not being consistently implemented by vaccine providers and the Vaccine Injury Compensation System (VICP) process has been turned into a very adversarial, poor imitation of a civil court trial with two out of three vaccine injured plaintiff's turned away empty handed.<sup>31 32</sup> All the while, it is unclear what is being done with the several billions of dollars sitting idle in the Vaccine Injury Trust Fund that parents pay into every time their children get vaccinated.<sup>33</sup>

NVIC represents families with both vaccine injured and healthy children, who are looking to Congress to find out why so many highly vaccinated children are so sick and what can be done to prevent more children from being affected, while finding ways to help those already affected. Thank you for holding the November 29, 2012 hearing, which so many parents hope will be a new beginning to meaningful investigation into a long-standing public health crisis.

Sincerely,

A handwritten signature in black ink that reads "Barbara Loe Fisher". The signature is written in a cursive, flowing style.

Barbara Loe Fisher  
Co-Founder & President

## References:

---

- <sup>1</sup> NVIC. org. [About Us](#).
- <sup>2</sup> Coulter HL, Fisher BL. *DPT: A Shot in the Dark*. Harcourt Brace Jovanovich 1985.
- <sup>3</sup> Williams K. [Polio Vaccines](#). Institute of Medicine Vaccine Safety Forum June 7, 1995.
- <sup>4</sup> NVIC. [Consumer Group Questions Use of Oral Polio Vaccine After Scientist Links Live Viral Vaccine to Sick Gulf War Veterans](#). Press Release March 28, 1996.
- <sup>5</sup> Fisher BL. [The Moral Right to Conscientious, Philosophical and Personal Belief Exemption to Vaccination](#). National Vaccine Advisory Committee May 2, 1997.
- <sup>6</sup> Fisher BL. [Vaccines, Autism & Chronic Inflammation: The New Epidemic](#). 2008. (Book summary in Autism File, 2009.)
- <sup>7</sup> Stratton KR, Howe CJ, Johnston RB, Editors. [Adverse Events Associated with Childhood Vaccines: Evidence Bearing on Causality](#). *Institute of Medicine: National Academy Press* 1994.
- <sup>8</sup> Stratton KR, Howe CJ, Johnston RB, Editors. [DPT Vaccine & Chronic Nervous System Dysfunction: A New Analysis](#). *Institute of Medicine: National Academy Press* 1994.
- <sup>9</sup> NVIC. [Memorial for Vaccine Victims](#).
- <sup>10</sup> NVIC. [Vaccine Freedom Wall](#).
- <sup>11</sup> Boyle CA, Boulet S et al. [Trends in the Prevalence of Developmental Disabilities in US Children 1997-2000](#). *Pediatrics*. Published online May 23, 2011.
- <sup>12</sup> CDC. [Asthma in the U.S.: Growing Every Year](#)
- <sup>13</sup> Mozes A. [Nearly 1 in 10 U.S. Kids Diagnosed with ADHD](#). *HealthDay News*. Aug. 18, 2011.
- <sup>14</sup> CDC. National Diabetes Fact Sheet - U.S. 2003. [http://www.cdc.gov/diabetes/pubs/pdf/ndfs\\_2003.pdf](http://www.cdc.gov/diabetes/pubs/pdf/ndfs_2003.pdf)
- <sup>15</sup> Centers for Disease Control. [1983 Childhood Immunization Schedule](#).
- <sup>16</sup> Centers for Disease Control. [2012 Child & Adolescent Immunization Schedules](#).
- <sup>17</sup> Fisher BL. [A Public Perspective on Assessment of Studies of Health Outcomes Related to the Recommended Childhood Immunization Schedule: The Need for Research Comparing Health Outcomes of Vaccinated and Unvaccinated Children](#). Institute of Medicine Feb. 9, 2012.
- <sup>18</sup> NVIC. [National Vaccine Information Center Calls on FDA to Raise Vaccine Safety Testing and Labeling Standards](#). *NVIC Vaccine E-Newsletter* May 9, 2010.
- <sup>19</sup> Fisher BL. [Public Comment on Licensure Pathways for Pandemic Influenza Vaccines](#). FDA Vaccines & Related Biological Products Advisory Committee Feb. 29, 2012.
- <sup>20</sup> Thomas C, Moridani M. [Interindividual variations in the efficacy and toxicity of vaccines](#). *Toxicology* 2010; 278(2): 204-210.
- <sup>21</sup> Stratton K, Ford A, Rusch E, Clayton EW, editors. [Adverse Effects of Vaccines: Evidence and Causality](#). Chapter 3 – Evaluating Biological Mechanisms of Adverse Events: Increased Susceptibility. Committee to Review Adverse Effects of Vaccines, *Institute of Medicine: National Academies Press*. 2011.
- <sup>22</sup> Fisher BL. [Statement on Vaccine Safety Research Needs – Perspective from Parents](#). Institute of Medicine Vaccine Safety Forum. April 1, 1996.
- <sup>23</sup> Evans G, Bostrom A, Johnston RB, Fisher BL, Stoto MA, Editors. [Risk Communication and Vaccination: Summary of a Workshop](#). Vaccine Safety Forum, *Institute of Medicine: National Academy Press* 1997.
- <sup>24</sup> The Keystone Center. [Vaccine Policy Analysis Collaborative: Final Report](#). 2003.
- <sup>25</sup> The Keystone Center. [A Report of the Public Engagement Pilot Program on Pandemic Influenza](#). 2005.

- 
- <sup>26</sup> Kirby D. [US Health Officials Back Study Idea on Vaccinated vs Unvaccinated Children – Will Media Take Note?](#) *Huffington Post* Mar. 2, 2009. (Also see Reference #17).
- <sup>27</sup> Fisher BL. [Independent Oversight on Vaccine Safety Urgently Needed](#). National Vaccine Advisory Committee Vaccine Safety Working Group Stakeholder Meeting: June 11, 2011.
- <sup>28</sup> National Institutes of Health. [Clinical Trials – New Vaccines \(1,282\)](#). Accessed Dec. 6, 2012.
- <sup>29</sup> Drug Discovery & Development. [Vaccine Market A Refuge for Big Pharma](#). January 13, 2011.
- <sup>30</sup> CDC. [Vaccines for Children Program Vaccine Price List Archives](#).
- <sup>31</sup> Fisher BL. [Compensating Vaccine Injuries: Are Reforms Needed?](#) U.S. House Subcommittee on Criminal Justice, Drug Policy and Human Resources. Sept. 28, 1999.
- <sup>32</sup> Fisher BL. [The Vaccine Injury Compensation Program: A Failed Experiment in Tort Reform?](#) Advisory Commission on Childhood Vaccines Nov. 18, 2008.
- <sup>33</sup> U.S. Department of Treasury (Public Debt). [Vaccine Injury Compensation Reports](#).