Statement of Henry A. Waxman
Ranking Minority Member
June 19, 2002

Mr. Chairman, today you have convened a hearing about the safety of vaccines. This is an important topic, and also a familiar one to the committee. Over the last several years, you have held a series of hearings raising questions about the safety of vaccines -- questions that undoubtedly have caused real concern among some parents and clinicians.

These hearings have had some positive effects. Your interest over the years has led to unprecedented attention to vaccine safety. Since your first hearing on the topic, many respected researchers have chosen to investigate whether vaccines are associated with inflammatory bowel disease, autism, diabetes, and other assorted conditions among children. While rare side effects from vaccines are always possible, these studies have not found that vaccines are associated with any of these serious health problems.

Since your first vaccine safety hearing, a blue-ribbon panel of scientists convened by the Institute of Medicine has reviewed many of the most widely disseminated theories alleging harm from vaccines. This esteemed panel evaluated the allegation that the MMR vaccine causes autism. It studied the claim that thimerosal, a vaccine preservative, causes developmental delay. It reviewed whether the hepatitis B vaccine causes neurological injury. It assessed the theory that multiple vaccinations cause allergies and asthma. In each case, the Institute of Medicine panel has found that the scientific evidence does not validate the theories. Expert panels in other nations have reached similar conclusions.

Mr. Chairman, you have challenged the public health system to defend itself against numerous allegations that vaccines cause a wide variety of problems. I am not aware of an allegation about the safety of vaccines that you have not pursued. So far, the subsequent investigations and expert reviews have found vaccines to be safe. Because of your efforts in this area, Americans can have more confidence today in the safety of the vaccine supply than ever before.

But there has also been negative consequences to your approach. You have repeatedly provided a forum for unsubstantiated allegations about vaccine safety that have alarmed and confused parents. Although the scientific evidence for vaccine safety has grown stronger, parental concerns about vaccine safety have also increased since you started these hearings. This is a potentially dangerous development because it can lead to lower immunization rates and more disease.

I recently asked CDC to describe what could happen if MMR immunization rates dropped. According to CDC, if immunization rates dropped to the levels they were in 1989 we could see over 26,000 hospitalizations from measles, 8500 cases of pneumonia, 135 cases of encephalitis, and 224 deaths.

According to CDC, even a drop in immunization rates of 10% could result in an additional 2 million kids being susceptible to measles. It would also significantly increase susceptibility to rubella and Congenital Rubella Syndrome, which can cause serious birth defects such as blindness, deafness, and stillbirths.

Congenital Rubella Syndrome is also a well-known cause of autism, a disease that we all want to prevent. How tragic it would be if an unjustified vaccine scare caused some children to die, others to have permanent brain deficits, and still others to suffer from autism. I ask that this information from CDC be placed in the record.

While I am strongly opposed to reckless allegations about vaccine risks that scare parents and are not supported by the science, I also recognize that questions about vaccines will always arise. That's why I support efforts to fund additional research on vaccine safety. Some of the theories on the agenda for today do require additional research, and I am pleased that the government is supporting such studies.

I also support making sure that the government does not lose the ability to conduct valid vaccine safety studies. We must assure the future of initiatives like the Vaccine Safety Datalink Project. This is a unique collaboration between CDC and several large HMOs that allows for valid and timely research on vaccine safety. Indeed, this research that has led to many important policy changes over the years.

Today, we will hear from scientists at CDC who work closely with the Vaccine Safety Datalink project. These scientists are quite concerned about your threats to subpoena the raw data from this database to pursue a vaccine-related allegation. Because the raw data contain identifiable information from the medical records of more than 6 million Americans, a Congressional subpoena would constitute a serious violation of medical privacy. According to CDC, a subpoena could have the effect of driving HMOs from the program and "destroying CDC's ability to scientifically test hypotheses relating to adverse events potentially associated with vaccines."

You have an alternative to a subpoena. CDC has worked with the HMOs to create a process for allowing independennt researchers access to the data. I continue to urge you to accept this solution and renounce your subpoena threat.

Finally, I would like to address some allegations that Dr. Wakefield makes in his written testimony. Dr. Wakefield implies that a witness who testified here last year, Dr. Michael Gershon, either perjured himself or was guilty of sloppy science by noting problems in the lab that Dr. Wakefield used in his research. Dr. Gershon did not lie to this committee and this portion of his testimony did not involve his scientific expertise and thus was not sloppy. Dr. Gershon related what he was told by Dr. Michael Oldstone of the Scripps Institute, who had performed an evaluation of this lab. Dr. Gershon continues to stand by his testimony. Dr. Wakefield also is planning to make a needless attack on Dr. Gershon's wife, who he alleges may have a financial interest in the chickenpox vaccine. In fact, according to Dr. Gershon, while his wife did conduct research relevant to a chickenpox vaccine patent, neither he nor his wife has

any financial interest in the vaccine or its manufacturer. Dr. Wakefield's allegation is therefore groundless as well as gratuitous. Dr. Gershon's testimony last year was quite lengthy and he raised many scientific issues, but Dr. Wakefield has not refuted any of them. Instead, he resorts to name-calling, which does not move these scientific issues along and is unproductive.

I ask unanimous consent that the written testimony of Dr. Elizabeth Miller of the Public Health Laboratory Service of the United Kingdom be entered into the record.

I thank the witnesses for coming today, and I look forward to their testimony.