

May 27, 2015

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Joint Committee on Education
State House
Boston, MA 02133

Re: S.317, An Act Relative to Childhood Immunizations

Dear xx:

The Massachusetts Chapter, American Academy of Pediatrics (MCAAP), which represents more than 1,800 pediatricians practicing in the Commonwealth, appreciates the Legislature's long standing support of childhood immunization in the Commonwealth.

The purpose of this letter is to express our strong opposition to S.317, a bill that would add a personal belief exemption to the Commonwealth's school vaccination requirements. We have worked to educate parents and providers about the safety and efficacy of vaccines and have made great progress on increasing vaccine confidence. If this bill was to be enacted, the health of the Commonwealth's citizenry would be impacted in many ways, three of which we highlight below:

Providing an additional option to parents to choose not to have their child vaccinated could increase Massachusetts' non-medical exemption rate. Religious exemption rates in Massachusetts among children enrolled in kindergarten have increased over the last ten years from 0.5% in the 2004-05 school year, to 1.5% for the 2013-2014 school year. If parents were given an additional open ended option to forego vaccination due to their personal beliefs, exemptions could increase much more.

An increase in unvaccinated children in the Commonwealth could lead to outbreaks of vaccine-preventable diseases with significant consequences to society. We provide two examples: 1) an analysis of the recent measles outbreak that began in Disneyland in late December 2014 found that 43% of the unvaccinated U.S.-resident cases were due to philosophical or religious objections;ⁱ 2) the total estimated cost of containing one case of measles in Iowa during a 2004 outbreak, which was estimated to be \$142,452.ⁱⁱ

Unvaccinated children would put other vulnerable children and adults at risk of serious disease. While a well-vaccinated population is the best protection against vaccine-preventable diseases, we also are aware that there are many children and adults who cannot be vaccinated due to their medical condition, or who may be vaccinated, but who failed to develop full protection from the vaccine due to a medically-compromised immune system, waning immunity, or other reason. The prevention of disease in these children and adults is highly dependent upon those who surround them being immunized. This community immunity, sometimes referred to as "herd immunity", is critical to protect children and adults who cannot be vaccinated due to a medical condition. Opening up a personal exemption to vaccines will result in a higher number of unvaccinated children and will compromise the community immunity that our universal vaccination program is designed to maintain, which will expose immunocompromised individuals, such as infants and pregnant women, to dangerous contagious diseases.

Compulsory vaccination for children enrolled in schools has been a major contributor to the success of the United States immunization program in preventing disease across the nation. The constitutionality of mandatory vaccination was upheld by the U.S. Supreme Court in 1905, in a Massachusetts case.ⁱⁱⁱ This decision has become the constitutional foundation for state actions limiting individual rights in favor of those of the greater public health^{iv}. Massachusetts has been an active proponent of childhood immunization for over 100 years. Its healthcare providers, along with the Massachusetts Department of Public Health, have been strong advocates for immunizing children to protect themselves and those around them from the harm of infectious diseases. Our state has had for many years one of the highest rates of childhood vaccinations in the country.

The MCAAP is strongly opposed to adding a personal belief exemption to the current immunization law. Doing so could increase rates of unvaccinated children, such as we have seen in other states, and potentially jeopardize the health and safety of all children in Massachusetts. We urge you to oppose such legislation and, instead, support policies that will protect the health and welfare of Massachusetts' citizenry, especially its children.

Respectfully,



Michael McManus, MD, MPH, FAAP
President

ⁱ CDC. Measles -- United States, January 4--April 2, 2015. *MMWR* 2015; 64 (14).

ⁱⁱ Dayan GH, Ortega-Sanches IR, et al. The cost of containing one case of measles: the economic impact on the public health infrastructure--Iowa, 2004. *Pediatrics* 2005; 116:e1--e4.

ⁱⁱⁱ *Jacobson v. Massachusetts*, 197 U.S. 11 (1905).

^{iv} Parmet WE, Goodman RA, Farber A. Individual rights versus the public's health -- 100 years after *Jacobson v. Massachusetts*. *N Engl J Med*. 2005;352:652-654.