

Chairman Young, Vice Chair DeVitis, Ranking Member Lepore-Hagan and members of the Economic Development, Commerce and Labor committee, thank you for your time concerning this matter.

My name is Robert Wise. I have been a life-long resident of Ohio. I am dismayed that it is necessary for me to be here today in order to protect a person's basic right against an unwanted medical procedure. According to the National Vaccine Advisory Committee¹ themselves, regarding worker autonomy, "One of the many ways autonomy is protected under the law is the right to refuse medical treatment. Mandatory approaches are coercive and... these policies infringe on an individual's autonomy to make informed choices about their health." So why are we here?

Please allow me to relay some questions and information that come from federal entities. According to the CDC², when the H1N1 flu outbreak occurred in April of 2009, the CDC began tracking and reporting the number of laboratory-confirmed H1N1 cases, hospitalizations and deaths. By July 24th, less than 90 days, this was discontinued due to what was thought to be a "significant undercount." Correcting for under-ascertainment, a CDC-authored study stated that each reported case of laboratory-confirmed influenza represented 79 total cases. This estimated 7800% increase would mean that about 1/4th of the population of the U.S. had a diagnosed H1N1 flu. But yet, also according to them³, "Because colds and flu share many symptoms, it can be difficult (or even impossible) to tell the difference between them based on symptoms alone. Special tests that usually must be done within the first few days of illness can tell if a person has the flu." The CDC also broadened their collected data to include "pneumonia and influenza cases identified from hospital records, most of which will not be laboratory confirmed." So do all of these statistical guesses reflect reality?

According to the CDC's report entitled *Flu Vaccine Safety Information*⁴, "flu vaccines are amongst the safest medical products in use." However, according to the National Vaccine Injury Compensation Program⁵, "influenza vaccine now is named in the majority of all VICP petitions." How many of you are allergic to any ingredients in a flu vaccine? How many of you have had a severe reaction to a flu shot? According to the CDC, these would be reasons to not receive the vaccine. Do any of you know if you are allergic to any ingredients in a flu vaccine? Do any of you know if you'll suffer a severe reaction to a flu shot? And are you willing to take that risk?

I was under the impression that when the flu vaccine was stated to be 60% effective, 60 out of 100 people that received the flu vaccine did not get the flu; however, according to the CDC, flu vaccine effectiveness⁶ "means that the flu vaccine reduces a person's risk of developing flu illness that results in a visit to the doctor's office or urgent care provider," and it does not state that the flu vaccine will prevent someone from getting the flu.

According to the CDC⁷, over the last 12 flu seasons, 60% (2010-11) has been the highest effectiveness rate with most years (8 out of 12 years) having an effectiveness rating below 50%. The lowest effectiveness rate was 10% (2004-05) and the second lowest rate was during the 2014-15 season being 19%.

According to The National Vaccine Advisory Committee Healthy People 2020 Report¹, “Employee requirements for vaccination may be subject to the collective bargaining process for unionized workers.” Do laws protect union workers more than non-union workers? If this is a safety issue, how is it possible that these so called issues do not apply to unionized workers?

To recap, these are the questions and concerns that I have pertaining to mandatory influenza vaccines for Ohio workers.

1. Mandatory approaches are coercive.
2. A 7800% statistical increase in flu cases is in and of itself highly suspect.
3. The flu vaccine reduces a person’s chance of having to seek medical treatment due to the flu, not that the person won’t get the flu.
4. Unionized employees can be excluded from mandatory flu shots solely because of their union status, while all other employees having no recourse.

I appreciate your time and attention regarding this matter.

Robert M. Wise

¹ https://www.hhs.gov/sites/default/files/nvpo/nvac/influenza_subgroup_final_report.pdf

² http://www.cdc.gov/h1n1flu/estimates_2009_h1n1.htm

³ <https://www.cdc.gov/flu/about/qa/coldflu.htm>

⁴ <https://www.cdc.gov/flu/protect/vaccine/general.htm>

⁵ https://www.hrsa.gov/vaccinecompensation/data/vicpmonthlyreporttemplate5_1_17.pdf

⁶ <https://www.cdc.gov/flu/about/qa/vaccineeffect.htm>

⁷ <https://www.cdc.gov/flu/professionals/vaccination/effectiveness-studies.htm>