Testimony of Michelle Cotterman, RN

House Bill 49 - State Operating Budget Opposition to Ohio Chapter AAP proposal on vaccination requirements. *May 24, 2017*

Chairman Hackett, Vice Chair Tavares, and members of the Senate Finance and Medicaid Subcommittee, thank you for your time and attention to this written testimony on a very sensitive matter.

I am providing testimony today in opposition to the proposed amendment by the Ohio Chapter of the AAP, that would require school entry immunization exemptions based on reasons of conscience, including religious, to be signed by a physician or licensed health care provider.

First, I would like to point out that AAP is a 501(c)(3) and receives funds from corporations (including vaccine manufacturing companies) as well as government agencies. It is concerning to me that a nonprofit organization is suggesting fast-tracked legislation changes that would require a physician to sign off on reasons of conscience, including religious, exemptions where the physician directly profits from such practice. Currently, a child is not required to see a physician for a physical examination prior to attending kindergarten, so why should it be required for a non medical exemption to vaccination?

Further, I am not exactly sure what a physician has to do with one's firmly held belief. Article 1, section 7 of the Ohio Constitution provides: "All men have a natural and indefeasible right to worship Almighty God according to the dictates of their own conscience. No person shall be compelled to attend, erect, or support any place of worship, or maintain any form of worship, against his consent; and no preference shall be given, by law, to any religious society; nor shall any interference with the rights of conscience be permitted."

Requiring a physician to sign off on one's reasons of conscience, including religious, exemption to vaccination is absolutely an interference. The Ohio Revised Code regarding daycare, preschool, and public school admission allows for exemption to vaccination based on reasons of conscience, including religious, which is in direct alignment of our State Constitution.

Setting aside religious convictions and firmly held personal beliefs, I am a registered nurse and have been in practice for 10 years. While I was in school I was taught the CDC vaccine schedule, that vaccines are safe and effective, and how to administer a vaccine. I was not taught how to recognize an adverse effect to a vaccine. That education came in 2010 when my own daughter experienced an allergic reaction to 8 vaccines she received in one visit. There is simply no way of knowing which vaccine or which excipients of the vaccine triggered the reaction, as vaccine excipients are many. I have continued to study the various topics surrounding vaccines and am now approaching 7 years of study on the topic.

Of particular concern, is the various human/animal/insect RNA/DNA that is left residual in every vaccine lot that uses human/animal cells in its production. Consider the manufacturer admits through every package insert section 13.1 that the product "has not been tested for carcinogenic, mutagenic effects, or effects on fertility".

Consider, also, the government is well aware of the insertional mutagenic potential of the DNA in these vaccines as evidenced by this FDA briefing document *"Cell Lines Derived from Human Tumors for Vaccine Manufacture"* (1). This document states:

"Small amounts of residual cell substrate DNA unavoidably occur in all viral vaccines as well as other biologics produced using cell substrates. There are several potential ways DNA could be a risk factor. DNA can be oncogenic or infectious; in addition, it can cause insertion mutagenesis through integration into the host genome."

Yet, this is not information provided during the consent process. In fact, it's not common knowledge at all. It certainly isn't being studied during the vaccine approval process.

I am also concerned about vaccine contamination from adventitious agents:

- 1. SV40 virus is a known contaminant in the polio vaccines. This virus was inadvertently administered to millions of adults and children in the 1950's and has been showing up in various tumor cells.
- 2. Bacteriophage from contaminated bovine serum in measles and polio vaccines. A bacteriophage is a virus that infects and replicates within a bacterium. Again, in the 1970's millions of adults and children were injected with contaminated vaccines.
- 3. In 1995 reverse transcriptase was found in all lots of MMR vaccines. Reverse transcriptase is the sign of an active retrovirus and allows viral DNA to be integrated into the host genome and replicated, resulting in the production of more RNA virus. It was found to be of avian origin. Again, we have millions of adults and children injected with potentially infectious materials.
- 4. In 2010 two porcine circovirus and related porcine circovirus DNA sequences were found in rotavirus vaccines. Again, millions of children continue to receive this contaminated vaccine.

"In all four cases, and after consideration of scientific advice, the vaccines concerned were not removed from the market, or were only temporarily suspended, since the benefits of immunization were believed to be much more beneficial than the risk of any potential adverse effects (2)." In 3 out of 4 of these cases this has so far proven to be true, but that doesn't take into consideration unintended consequences or consequences that are not detectable based on current technology. Lessons learned from these cases show that problems are not discovered until after the fact and only until instruments have advanced to detect the presence of an adventitious agent.

The scientific and medical consensus remains firm in its belief that vaccinations are much more beneficial than the risk of any potential adverse effect. However, at the end of the day, it remains an individual choice to accept or decline medical interventions including vaccination by evaluating our own risk/benefit analysis, as well as considering our own reasons of conscience, including religious beliefs.

I thank you for your time and do hope you will take this information into consideration while considering the proposed amendment from the AAP.

Resources:

(1) Cell Lines Derived from Human Tumors for Vaccine Manufacture <u>http://www.fda.gov/downloads/AdvisoryCommittees/CommitteesMeetingMaterials/BloodVaccine</u> <u>sandOtherBiologics/VaccinesandRelatedBiologicalProductsAdvisoryCommittee/UCM319573.pd</u> <u>f</u>

(2) Adventitious agents in viral vaccines: Lessons learned from 4 case studies <u>http://www.sciencedirect.com/science/article/pii/S1045105614000748</u>

(3) CDC list of vaccine ingredients <u>https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf</u>

(4) Comparison of current childhood Vaccine schedule to past schedules https://www.learntherisk.org/wp-content/uploads/2016/03/Doses_v2.pdf