

Testimony of Ravi Kulasekere, PhD, DABR
House Bill 49—State Operating Budget
May 22nd, 2017

Chairman Hackett, Vice Chair Tavares, and members of the Senate Finance and Medicaid Subcommittee, thank you for the opportunity to provide written testimony **opposing** the Amendment to HB 49 proposed by the Ohio Chapter of the American Academy of Pediatrics (AAP) and presented in testimony provided by pediatric resident Dr. Sean Gallagher on May 16th 2017.

My name is Ravi Kulasekere and I am a board certified medical physicist and the former chief of clinical physics at the Metro Health Medical Center, Department of Radiation Oncology in Cleveland, OH. I have been a resident of Ohio for over 20 years and have been a vocal supporter of individual freedom of choice with respect to medical procedures including vaccines and providing true informed consent with respect to the same.

I am opposing the amendment proposed by the AAP for multiple reasons but first would like to refute some of the data provided by Dr. Gallagher in his testimony. As a pediatric resident I am somewhat surprised that statistics presented were not sufficiently researched. Dr. Gallagher starts off by saying that Ohio ranks 42nd in the country when it comes to kindergarteners vaccinated. However according to the latest CDC MMWR report on the topic there are 17 states that have vaccination exemption rates higher than Ohio which stands at 2.3%, and ranks Ohio at 33rd and not 42nd (<https://www.cdc.gov/mmwr/volumes/65/wr/mm6539a3.htm#T1> down).

Dr. Gallagher also states that Ohio's immunization rates have increased due to state sponsored 'pro-immunization' bills. Citing the same source as above we see that Ohio's exemption rates actually went up by 0.2% from 2015 to 2016 which also does not support his claim. However, Ohio did rank among the top five states for the Measles-Mumps-Rubella vaccination uptake according to the CDC (http://www.cleveland.com/healthfit/index.ssf/2015/08/ohio_mmr_vaccination_rates_jun.html) and yet we continue to see measles cases in fully vaccinated populations in Ohio which Dr. Gallagher erroneously assumes is caused by the small unvaccinated minority. His assumption that there have been many deaths due to measles is also incorrect as the CDC MMWR reports have not logged a single measles death anywhere in the USA since 2003. It is quite obvious that Dr. Gallagher is trying to use unverifiable sources for his unsupported data to create an urgency to promote the agenda of the Healthy Person 2020 goals of 95% vaccine uptake. Which by itself was an arbitrary number that was arrived without much supporting data or evidence based medicine in this instance.

Dr. Gallagher also assumes that parents who opt out of vaccines are anti-science and uneducated when the converse is actually true. He also recently supported via his twitter feed an editorial comment that appeared in the Boston Herald that condoned violence against parents who objected to vaccination. Which shows his obvious biased nature towards the subject and further disqualifies him to propose amendments that supports his bias. A medical school curriculum in the USA does not include an extensive study into vaccine adverse effects and how to recognize them. Many pediatricians are completely unaware that there is a vaccine injury compensation plan and a special masters court system to adjudicate vaccine injuries and therefore do not provide this information to the public causing many vaccine injuries to go unreported. In addition to this, pediatricians are offered bonuses by certain insurance companies to vaccinate according to the CDC schedule and lose the incentive if a certain minimum percentage (63%) of the patient population is not fully vaccinated. This has resulted in pediatricians aggressively pursuing vaccines and removing patients who do not comply from their practice. (<https://wellnessandequality.com/tag/blue-cross-blue-shields-physician-incentive-program/>). This proposed amendment will therefore support financial incentives given to pediatricians and be in total conflict of interest. It will also put undue hardship on parents who wish to exercise the legal right to seek exemption from vaccination.

These exemptions are in place for a reason and once in place parents should not be harassed when exercising these legal rights. Vaccines are inherently not safe for everybody as evidenced by the long list of vaccine injuries and settlements amounting to over 3.5 billion dollars awarded to date and recorded in the Vaccine Adverse Effect Reporting System (VAERS) and are definitely not completely effective and hence should not be a forced procedure. Parents are being bullied by pediatric practices already, without the suggested authority being in their possession, and will most certainly be put in a more difficult position to exercise their religious and philosophical objections to vaccines if this amendment were to pass. A medical doctor should NOT have authority over a person's religious convictions or their objections due to reasons of conscience. This amendment will therefore cause undue hardship and financial burden to the small minority of parents who are exercising their legal rights to object to vaccination. Ohio's vaccine exemption laws are working fine as they are and the CDC finds the reporting requirements adequate for their weekly MMWR reports, therefore this amendment only makes sense to a group of people who will stand to benefit from marginally increased vaccination rates obtained through the harassment and refusal to sign waivers by pediatricians and the financial incentives tied to that increase. I strongly urge this committee to reject this proposal on behalf of the constituents of Ohio. Thank you for your valuable time and consideration.