

Testimony of Maura Urchek, 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 Committee, thank you for the opportunity to speak today.

My name is Maura Urchek, and I am a Registered Nurse. I understand that two physicians testified on May 16th to the committee in hopes of amending HB 49 to increase governmental surveillance of our children's private medical records and inserting a physician in a personal religious or philosophical determination.

I find it ironic that we have physicians proposing to require that a physician be asked permission for a philosophical or religious exemption. Why would a parent have to consult a doctor before making a philosophical or religious decision? Why should anyone have to pay for an office visit to make a philosophical or religious decision? Who actually stands to gain from such an amendment?

If someone declines a vaccine for religious purposes, but is forced to pay a physician to exercise that freedom, then you have designed a discriminatory policy.

I have a clear understanding that vaccination is a medical procedure with known risk and ethically controversial ingredients.

The risks are evident, as the National Vaccine Injury Compensation Program has paid over 3.6 billion dollars in compensation since the program's inception in the mid-1980's.ⁱ

Further evidence of the risks of vaccination can be found on every vaccine insert. Section headings on vaccine inserts include "Contraindications," "Warnings and Precautions," "Adverse Reactions," and "Drug Interactions." Section 13 of vaccine inserts is titled, "Nonclinical Toxicology" and discloses if the potential for Carcinogenesis, Mutagenesis, and Impairment of Fertility are known.

For example, the Hepatitis B vaccine insert Section 13 clearly states:

*RECOMBIVAX HB has not been evaluated for its carcinogenic or mutagenic potential, or its potential to impair fertility.*ⁱⁱ

The pneumococcal 7-valent conjugate vaccine insert reads:

*Prenar® has not been evaluated for any carcinogenic or mutagenic potential, or impairment of fertility.*ⁱⁱⁱ

I encourage you to read all of the vaccine inserts (available per the FDA^{iv}) on the childhood schedule, and try to find any vaccines that have been thoroughly evaluated for carcinogenic or mutagenic potential, or its impact on fertility. This is particularly important as tumorigenic cell lines (tumorigenic meaning: tending to produce tumors) can be used for vaccine manufacture. I have included an FDA briefing document^v on the subject for your review.

I first became aware of vaccine risks while working in the ICU with patients who were affected by Guillain-Barre syndrome, abbreviated as GBS, as a result of the flu vaccine. GBS is characterized by ascending paralysis that, in some cases, can lead to lifelong disability and death.^{vi} It is a tragic vaccine injury. GBS is a known flu vaccine risk and even included on the influenza Vaccine Information Statement (VIS)^{vii} provided at the time of vaccination.

In Ohio, the flu shot is required annually for daycare and preschool admission if an exemption has not been obtained.

GBS is a known risk of other vaccines as well. For example, on page 5 of the TDaP vaccine DAPTACEL, section

5.3 lines 79-83, reads:

A review by the Institute of Medicine found evidence for a causal relation between tetanus toxoid and both brachial neuritis and Guillain-Barre Syndrome.^{viii}

Let this be a reminder, Vaccines are not always safe.

I have included a copy of the comprehensive vaccine excipient list for your review^{ix}, as made available by the FDA. Some ethically controversial ingredients in vaccines include: green monkey kidney cells, fetal bovine serum, formaldehyde, bovine albumin, egg protein, Madin Darby Canine Kidney (MDCK) cell protein, aluminum hydroxide, chick embryo cell culture, WI-38 human diploid lung fibroblasts, MRC-5 cells, human embryonic lung cell cultures, guinea pig cell cultures, human diploid cell cultures, among many others.

As for the MRC-5 cells, MRC-5 stands for Medical Research Council cell strain 5, and it is a diploid human cell culture line of fibroblasts from lung tissue of a 14 week old aborted Caucasian male fetus,^{x xi} isolated by JP and colleagues in 1966.^{xii}

As it may now be apparent, for religious reasons or reasons of conscience, there are many explanations as to why an individual would decline the procedure of penetrating the body with a needle and injecting materials into themselves or their child that include DNA from an aborted fetus, a human of a different gender, a creature of a different species and gender, neurotoxic metals, and whole products that have not been tested for carcinogenic and mutagenic potential.

In summary, mandating costly appointments to obtain religious or philosophical exemptions for vaccination would be a gross governmental overreach.

I oppose this and any measure that compromises current Ohio Revised Code 5104.014^{xiii} and 3313.671^{xiv}, which clearly allow for medical and reason of conscience—including religious convictions—exemptions for enrollment in daycare, preschool, and k-12.

Thank you for your time and consideration.

ⁱ US Department of Health and Human Services (HHS) Health Resources and Services Administration (HRSA). (2017, May 1). National Vaccine Injury Compensation Program Monthly Statistics Report. Retrieved May 23, 2017, from https://www.hrsa.gov/vaccinecompensation/data/vicmonthlyreporttemplate5_1_17.pdf

ⁱⁱ Package Insert for RECOMBIVAX HB. (n.d.). Retrieved May 23, 2017, from <https://www.fda.gov/downloads/BiologicsBloodVaccines/Vaccines/ApprovedProducts/UCM110114.pdf>

ⁱⁱⁱ Package Insert for Prevnar. (n.d.). Retrieved May 23, 2017, from <https://www.fda.gov/downloads/BiologicsBloodVaccines/Vaccines/ApprovedProducts/UCM137038.pdf>

^{iv} Center for Biologics Evaluation and Research. (2017, January 25). Approved Products - Vaccines Licensed for Use in the United States. Retrieved May 23, 2017, from <https://www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm093833.htm>

^v FDA Briefing Document. Vaccines and Related Biological Products Advisory Committee Meeting September 19, 2012: Cell Lines Derived from Human Tumors for Vaccine Manufacture. (2012, September 19). Retrieved May 23, 2017, from <https://ntrl.ntis.gov/NTRL/dashboard/searchResults/titleDetail/PB2013100474.xhtml>

^{vi} Centers for Disease Control and Prevention. (2015, October 16). Guillain-Barré syndrome and Flu Vaccine. Retrieved May 23, 2017, from <https://www.cdc.gov/flu/protect/vaccine/guillainbarre.htm>

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- vii Centers for Disease Control. (2015, August 7). Vaccine Information Statement, Influenza (flu) Vaccine (Inactivated or Recombinant): What you need to know. Retrieved May 23, 2017, from <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/flu.pdf>
- viii Package Insert for Daptacel. (n.d.). Retrieved May 23, 2017, from <https://www.fda.gov/downloads/BiologicsBloodVaccines/Vaccines/ApprovedProducts/UCM103037.pdf>
- ix Vaccine Excipient & Media Summary. (2017, January 6). Retrieved May 23, 2017, from <https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/b/excipient-table-2.pdf>
- x MRC-5 (ATCC® CCL-171™). (n.d.). Retrieved May 23, 2017, from <https://www.atcc.org/Products/All/CCL-171.aspx>
- xi MRC-5 - NORMAL HUMAN FETAL LUNG FIBROBLAST. (n.d.). Retrieved May 23, 2017, from https://catalog.coriell.org/0/Sections/Search/Sample_Detail.aspx?Ref=AG05965-D
- xii Jacobs, J. P.; Jones, C. M.; Baille, J. P. (1970). "Characteristics of a Human Diploid Cell Designated MRC-5". *Nature*. **227**: 168.
- xiii Ohio Rev. Code § 5104.014
- xiv Ohio Rev. Code § 3313.671