

# Ohio Chapter

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## Testimony

March 25, 2026

HB 561

**Amy B. Middleman, MD, MEd, MPH**

Chairwoman Schmidt, Vice Chair Deeter, Ranking Member Dr. Somani and members of the House Health Committee, thank you for the opportunity to provide testimony today on House Bill 561. My name is Dr. Amy Middleman. I am a pediatrician and a board certified Adolescent Medicine specialist, vaccine researcher, and liaison to the Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP) for over 22 years, and I am writing today on behalf of the 2,900 members of the Ohio Chapter of the American Academy of Pediatrics (Ohio AAP), a statewide organization that promotes the health, safety, and well-being of children and adolescents so they reach their full potential.

I am writing this testimony to express my strongest opposition to House Bill 561. This bill is against the best interests of every individual in Ohio. It also reflects some concerning misunderstandings about the role our state government plays to protect the health of the public at large in Ohio.

First and foremost – vaccines save lives. It is estimated that vaccines prevented over 103 million cases of disease in the United States between 1924 and 2011; an estimated 26 million cases were prevented between the years of 2002 and 2011 alone. Vaccines are currently the unfortunate victims of their own immense success. Because vaccines have so effectively controlled life-threatening disease rates, minor side effects of vaccines are now the focus of people's attention. Few people understand that the risk of having a serious adverse event such as a serious allergic reaction to a vaccine is less than the risk of getting struck by lightning. You are much more likely to have a serious adverse reaction from amoxicillin, a commonly *requested* antibiotic. Yet the risk of the deadly diseases the vaccines protect against is so much higher. Of course there is a risk to taking a vaccine – just as there is a risk to taking medications, crossing the street, driving in a car. But the benefit of vaccination FAR outweighs the risk.

Vaccines benefit each *individual* who receives protection. Vaccines are extremely effective, however, they do not protect everyone. Some people do not respond strongly to vaccines and may still be vulnerable to disease; some people may be immunocompromised and cannot receive certain vaccines or cannot respond to vaccines. These members of our community do not have a choice to enjoy the benefits of vaccination, so they rely on the rest of us being vaccinated to keep disease rates in the community low. This protects the public at large – it provides *community immunity*, or what is sometimes referred to as *herd immunity*. You have been presented with survey data that clearly show the vast majority of Ohioans believe in vaccination as a public health strategy to protect themselves, their families, and their communities.

It is critical to maintain high rates of vaccination in the community. Infectious diseases are like weeds in the yard. Vaccines eliminate the majority of disease. But we all know that if we do not remain vigilant with our weeding, the weeds are waiting to return in full force – just like infectious diseases. The weeds are never gone;

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they are just under tight control. If you allow too many weeds to grow, they multiple again exponentially and take over the yard. It is critical that we maintain high rates of vaccination to prevent the return of disease and protect our entire community.

Yet here we are in an era where people have forgotten the scourge of vaccine preventable diseases. The government committee that has most recently made national vaccine recommendations (the newly assembled ACIP) has not followed the science; in fact, at one of their public meetings, the committee incorrectly interpreted the scientific implications of one of the research studies that my team conducted and authored. Yet, as a result of their actions, more parents are declining vaccines for their children. For example, the ill-advised decision to scrap the recommendation for routine use of the birth dose of hepatitis B was projected to result in an additional 482 deaths per year. Rates of the birth dose of hepatitis B vaccination are already falling. This is the first time in my 22 years as a liaison for ACIP that the committee made a recommendation that specifically harms rather than saves children's lives. They eschewed the known, immense benefits of vaccines for contrived and as yet unseen possible harms.

The result of this nonevidence-based recommendation is clear – vaccine confusion has led to documents such as Ohio's proposed House Bill 561, a bill that further impedes the achievement of both individual and community immunity. The most vulnerable in the community deserve protection from disease; and the public deserves policies that keep all of us safe. It is the government's responsibility to be the most informed on evidence-based public health strategies in order to best protect the public that may not have access to the same knowledge. Individual patient choice and the support of public health are not mutually exclusive; when provided with the evidence, individual choice naturally falls to support public health. Individual health comprises the collective public's health. I urge every committee member to follow the science. Please read more about individual protection (all individuals have the ultimate choice regarding vaccines) and community immunity so you can encourage all of our state's citizens to get immunized for their own and their family members' health. If immunization levels fall and allow infectious diseases to overcome our community – it will then be too late.

Let's not go back in time; few people now know that hepatitis B is most likely to cause liver cancer if contracted in infancy, few know that the measles can cause a fatal panencephalitis that kills children long after having the acute disease, few people know that the mumps can render patients sterile, and few people know that bacterial meningitis can kill their baby, their child, their teen, or their grandparent in less than 24 hours. It is too late to vaccinate once someone has a potentially fatal disease. We can prevent these tragedies. I urge the committee to protect Ohio and maintain strong recommendations to keep our vaccination rates high and our community yards devoid of infectious weeds. I urge the committee to enforce the exclusion of unvaccinated children during, hopefully, very rare disease outbreaks to save *their* lives as well as avoid further spread of disease. Study after study has shown the states with high rates of non-medical vaccine exceptions have higher rates of disease and death – please protect Ohio with opt-out policies due to medical concerns only; those opting out should be fully informed by a medical provider of the risks associated with the decision. Protect our babies from hepatitis B – it is a disease that is transmitted in daycares and within households. In many cases, the source of the infection is never discovered. Protect our babies before they get ill. Protect our state's citizens with the

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knowledge you have and help them understand the science. Vaccines save lives; policies to protect the most vulnerable among us save lives. Please vote to save the lives of our Ohio neighbors and friends.

Thank you again for allowing me to respectfully submit this testimony. I am happy to discuss vaccine science or evidence-based vaccine policy with any member of the committee or the Ohio State legislature at your convenience.

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