

June 3, 2021

Re: Proponent testimony for HB248 – Vaccine Choice & Anti-discrimination Bill

Chairman Lipps, Vice Chair Holmes, Ranking Member Russo, and Members of the House Health Committee, thank you for the opportunity to provide proponent written testimony on House Bill 248.

My name is Ashleigh Lantz, I am a mother of two small children and an Administrative Assistant in my working profession. I am writing to tell you why I support HB248.

What does freedom in America mean to you and your family? I believe freedom is the right to choose how to live your life, to make your own daily decisions, to decide what is best medically for you and your children, the right to provide an income, to attend the movies, the right to a free and fair education, to shop at the store, to walk up and down the street, and to just live life in society as you see fit without coercion or any form of government involvement. God put us here on this earth to walk the land as free individuals, not to be slaves to the medical community or any other government agency.

What does discrimination mean to you and your family? A consideration based on class or category, to control over one another, to disallow engagement in society as equal to others, to deny access because of one's status, etc. With mandatory vaccinations or vaccine passports, this will cause for discrimination for those who choose not to receive a pharmaceutical product.

House Bill 248 is a well-thought-out bill that provides protection for Ohioans to remain free & to make our own decisions based on our individual medical needs without tyranny and coercion lurking around the corner.

We have 3 exemptions for vaccinations in Ohio but these only pertain to the K-12 age group. However, even with these exemptions parents of children are being discriminated against and receiving pushback from schools and denied medical treatment by their attending physician also known as being "fired by the doctor". What about protection for the adult in the workforce? Where do we have protection?

At what point do we start focusing on our own health? What about "love thy neighbor" or "we need to do this for the greater good". At what point do we stop sacrificing our children to protect others? We have a lot of family history of vaccine injuries. My uncle was paralyzed from the polio vaccine for several weeks and almost didn't make it. The same vaccine that was supposed to protect him. Several of my other uncles had severe allergic reactions that the doctor told my grandma to no longer vaccinate. A cousin of mine was given the DTAP as a baby and was diagnosed with whooping cough after vaccination. He was admitted to ICU and almost didn't make it from the same vaccination that was supposed to protect him. We have other injuries such as seizures and autistic like behaviors after several vaccinations.

My children are unvaccinated and are amongst some of the healthiest in school and daycare. The only shot we allowed was the vitamin K and at that I wished I would have known more. This is not just a vitamin as my doctor lead me to believe and that I didn't need to worry about that. Little did I know it has a black box warning, increase in liver failure, and leukemia like disease. We carry a genetic disposition in which our bodies do not detox, methylate, or absorb folic acid like they should. My son specifically carries another gene of concern in which he may have a higher risk of complications due to the decrease in ability to detox metals, chemicals, and pesticides. I fear for his health especially if he were to be vaccinated. Our doctor believes vaccines should be a choice for parents, given information to decide what is best. Our doctor is currently not willing to provide a medical exemption for my children given the gene concern and the previous family history of injury. He believes while there are exemptions available such as religious or philosophical, that should be accepting enough at this point. This is fearful and concerning of the unknown because at any point those exemptions can be challenged like we have witnessed in New York, California, etc.

We are the parents of our children and we are the care takers of ourselves. We should not need to provide an exemption to opt out of a medical procedure. Informed should be given and the right to say yes or no. Honestly, we should not even have to have bills to decide what is medically needed or mandated. I am aware of the concern others have such as physicians for this bill however, this changes nothing for the physician. This bill does not stop the ability for physicians to discuss or recommended any of the vaccinations.

I am aware there are concerns of protecting the immunocompromised. I believe there would be nothing different. There will be those that still decline vaccinations and those that will continue to follow the physician's recommendations. It has been known that immunocompromised patients are able to be vaccinated with the recommendation for live virus vaccines to not be administered however, this is not always the case. We have known that immunocompromised patients can and have been vaccinated with live virus vaccines, we have seen this with the measles outbreak in 2019. My mother is a stage 4 breast cancer patient and during her previous treatments she was always asked if she wanted the flu shot and just more recently at the James Cancer Center, she was asked if she wanted the Covid vaccine. While these are not live virus except for the nasal flu mist, it shows that yes vaccines can be administered to the immunocompromised.

But does anyone question, when a patient receives a live virus vaccine, are they told to social distance from an immunocompromised patient? Are they told to avoid school for a period of time? No, they are not. When vaccines are given some return to school or daycare the same day or the next day. According to the Merck Manual - physicians edition, it recommends for the varicella vaccine for example, when getting the varicella (aka chickenpox vaccine) to distance from immunocompromised individuals for fear of spreading a varicella like rash to them if one has developed. So, my question becomes, why are we vaccinating for live virus vaccinations but allowing those individuals to be in proximity of an immunocompromised person? We know as parents that true informed consent and information is not fully disclosed. Isn't this about protecting their health? I have provided a screen shot for this example below from the Merck Manual.

Merck Manual - [Varicella Vaccine - Infectious Diseases - MSD Manual Professional Edition \(msdmanuals.com\)](https://www.msdmanuals.com/professional/infectious-diseases/varicella-zoster-virus/varicella-vaccine)

Adverse Effects of Varicella Vaccine

*Most adverse effects are minimal and include transient pain, tenderness, and redness at the injection site. Occasionally, **within 1 month of vaccination, a mild maculopapular or varicella-like rash develops in 1 to 3% of people who are vaccinated. Vaccine recipients who develop this rash should diligently avoid contact with immunocompromised people until it resolves. Spread of the virus from vaccine recipients to susceptible people is rare but can result in severe problems, including pneumonia, hepatitis, severe rash, and shingles with meningitis.** However, such problems rarely develop. Because Reye syndrome can develop, recipients < 16 years should avoid salicylates for 6 weeks after the vaccine is given.*

Dose and Administration of Varicella Vaccine

Eligible children with HIV infection are given 2 doses of single-antigen varicella vaccine 3 months apart. Because impaired cellular immunity increases the risk of complications after vaccination with a live vaccine, these children should be encouraged to return for evaluation if a varicella-like rash develops after vaccination.

The fear of people not being vaccinated brings to question about the adult vaccine schedule? Once 69+ doses have been administered from birth to age 18, how many of those individuals continue with the booster recommendations after high school or college. Are we not concerned about the lack of immunity from ignoring the adult schedule? Does this not cause concern for those questioning the removal of exemptions or the opposition of this bill?

How many individuals from the baby boomer era for example have the meningitis, hepatitis B, HPV vaccine, etc? Are these individuals not a threat to the immunocompromised? If they have been able to participate in society without causing harm to the immunocompromised or a threat to society, what changes if this bill is passed?

In conclusion, we must allow for our own medical decisions and stop relying on big pharma, legislation, and the government to decide what is best for our own health. Health does not come from a medical product. We must keep our medical freedom and God given rights. I urge you to vote yes on house bill 248! Thank you once again for this opportunity to provide testimony on the need for and urgency of House Bill 248.

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