

Testimony before the House Health and Government Operations Committee

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HB 86: Public Health - Children and Pregnant Women - Mercury and Heavy Metal-Free Vaccines and Injections

Thank you Mr. Chairman and members of the committee for the opportunity to talk with you today. I am here to speak as a concerned pediatrician on behalf of the Institute for Vaccine Safety at Johns Hopkins University Bloomberg School of Public Health. My comments are not the official position of the school, or of the Johns Hopkins University.

Since this issue was brought to public attention in 1999 I have been a strong advocate for the removal of thimerosal as a preservative in vaccines administered to young children. A great deal has been accomplished toward this goal.

I am certain that the authors of House Bill 86 have the best of intentions; that is to reduce unnecessary exposure of young children and pregnant women to mercury. However, this bill will result in unintended harm for both young children and pregnant women, and the bill is unnecessary. Therefore, I oppose this bill.

I will not read the letter that I and two other Johns Hopkins University faculty sent the committee on February 9, 2005 because of the limited time available, but I am happy to answer any questions about the content of that letter. Instead, I will focus on five misunderstandings regarding thimerosal and vaccines that I see in the materials that other interested parties have submitted to the committee.

1. Preservative free does not mean completely thimerosal free.
2. We do not have any completely thimerosal free influenza and tetanus vaccines for administration to children under 3 years of age and pregnant women.

The influenza preparation mentioned by Congressman Dave Weldon is thimerosal reduced and contains less than one half microgram per dose. This product is labeled as preservative free because the trace amounts of thimerosal that remain are not sufficient to be active as a preservative. Similarly, there is a limited supply of thimerosal reduced tetanus toxoid for administration to pregnant women. This preparation is not totally thimerosal free. Also, some DTaP preparations are thimerosal reduced. Expert groups at the American Academy of pediatrics, the Centers for Disease Control and Prevention, the Institute of Medicine, and the Food and Drug Administration have reviewed these products and consider them safe for administration to infants, children and pregnant women. I agree with these assessments. House bill 86 prohibits the administration of any amount of thimerosal and would have the unintentional effect of preventing health care providers from administering vaccines that are needed to protect against these serious illnesses.

3. Several vaccines that once contained thimerosal as a preservative are still listed on the FDA website as licensed products, but these products are no longer being produced or

sold in this country. This bill is not needed to prevent children and pregnant women from receiving these vaccines.

4. Mercury toxicity is related to the dose administered, the size of the recipient and the age of the person exposed. The situation we have today is far different than the situation in 1999 when the concern about thimerosal was raised. At that time, a 6 week old infant could have received 62.5 micrograms of ethylmercury from 3 vaccines that contained thimerosal as a preservative on a single day. If it is necessary to administer influenza vaccine that contains thimerosal as a preservative to children over 6 months of age, a single dose contains 12.5 micrograms of ethylmercury. This is less than 1/5th the dose that that could have been administered to 6 week old infants in 1999; also, influenza vaccine is administered only to children over 6 months of age when their nervous systems are more mature and they weigh 2-4 times more than 6 week old infants. Therefore, the exposure is less than 1/10th the exposure that could have occurred in 1999.

You must know that we might face another major epidemic or pandemic of influenza sometime in the next few years. If this occurs, there undoubtedly will be a shortage of influenza vaccine and we definitely will not have enough influenza vaccine with reduced thimerosal for all children and pregnant women. Some of the new bird influenza viruses kill more than 1/2 of infected people. Health-care providers should be allowed to engage in decision making with informed pregnant women and parents to balance any theoretical risks from vaccines against the known risks of contracting influenza if they remain unvaccinated. Legislation should not prohibit this type of shared decision making on the part of health care providers and their patients.

5. Thimerosal does not cause autism. Methylmercury from fish consumption has been shown to cause speech and language delay in children exposed prior to birth, but it has not been shown to cause autism, a much more severe and complex disorder. Some of us were concerned in 1999 that ethylmercury exposures from thimerosal might be capable of causing the same mild delayed speech and language seen with methylmercury, especially if the exposure to ethylmercury is additive to methylmercury for infants born to women who consumed large amounts of fish. Data should become available from a long-term followup study coordinated by CDC later this year to answer this question. The Institute of Medicine vaccine safety committee has reviewed the objective scientific data on autism and they have concluded that the evidence favors rejection of the hypothesis that thimerosal causes autism. A copy of the executive summary from that committee is in your packet.

The desire to completely eliminate all mercury exposure for pregnant women and young children is understandable, but unfortunately, impossible. As I believe all committee members know, many food products contain mercury. There are important guidelines from state and federal authorities for limiting exposure of pregnant women and young children to food products that are high in mercury, but public health experts know that it's impossible to completely eliminate all exposure.

I encourage you to vote against the bill as it is not necessary and could be harmful.

Thank you for your time and attention.