



April 6, 2005

Representative Fran Bradley
Chair, Health Policy and Finance Committee
Minnesota House of Representatives
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Re: HF 1505 – The “Elimination of Mercury in Vaccines” Bill

Dear Chairman Bradley:

On behalf of the Institute for Vaccine Safety (IVS) at the Johns Hopkins Bloomberg School of Public Health, we would like to voice our opposition to HF 1505. This bill would prohibit the use of vaccines containing any amount of mercury if a product with a lesser amount or no amount was available. We are aware that some of the materials being distributed to committee members include a comment made by me (Neal Halsey) in 1999 which is being used as support for this bill. I would like to clarify my position and provide you with important developments that have occurred in the past 6 years.

In 1999, there was justified concern about the amount of mercury-containing thimerosal preservatives used in the vaccines. IVS worked with other professionals in academia, the American Academy of Pediatrics, and the U.S. Public Health Service to encourage the removal of thimerosal as a preservative from vaccines administered to young children. Our concern was that the administration of multiple doses of vaccines containing this preservative could present a safety issue for very small infants, especially those less than six months of age. At the time, some vaccines, DTaP, hepatitis B and influenza, for example, included thimerosal during the production process and as a preservative. Manufacturers have since addressed this problem by producing vaccines without the use of thimerosal or by extracting the thimerosal in the final stage of production. This extraction process reduces the amount of thimerosal from approximately 50 micrograms (25 micrograms of ethylmercury) per dose to less than 0.5 micrograms per dose. The small amount of residual thimerosal does not constitute a risk to the health of infants, children, pregnant women or persons of any age.

All of us are exposed to low levels of mercury in food product including many of the fish found in Minnesota waters. Public health experts advise women who are pregnant or might get pregnant to restrict consumption of fish that are high in mercury, but they do not advise stopping all fish consumption, even though almost all fish contain some mercury. It is not possible to completely eliminate mercury exposure and the risk of toxicity is dose related. The removal of thimerosal as a preservative from vaccines routinely administered



to children has eliminated the theoretical risk that existed in 1999. The trace amounts in some current vaccines do not constitute a health hazard and prohibiting or restricting the administration of vaccines with these trace amounts would be harmful. Under the proposed law, physicians would be required to be absolutely certain that no possible alternative vaccines were available, resulting in delays in vaccinating people who are in need of immunizations while they're looking for alternative preparations. Although there will be limited supplies of some vaccines without any thimerosal, there will not be an adequate supply to immunize everyone. This bill poses undue restrictions on individual practitioners and State immunization program personnel that will impair the protection of people through the use of vaccines.

Influenza kills approximately 20,000 people a year in this country; in epidemic years more than twice as many people may die. Many of these deaths can be prevented with vaccines. The Legislature should not impose an impediment to the delivery of this much-needed vaccine. You should also consider the fact that we are likely to face another major influenza pandemic in the next few years. Some of the new bird influenza viruses kill more than half of infected people. If a pandemic develops, there will be very little time to develop vaccines and there undoubtedly will be a shortage of influenza vaccine, especially influenza vaccine with reduced or no thimerosal. Instead of prohibiting the use of thimerosal containing vaccines, health-care providers should be encouraged to engage in decision making with informed patients to balance any theoretical risks from vaccines against the known risks of contracting influenza if they remain unvaccinated.

Sincerely,

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