

Donna Tatsapaugh #1128

3/25/13

To Whom it May Concern:

I am writing to state that I am opposed to mandating the flu vaccine as a condition of employment for health-care workers.

The flu shot is proving to be only minimally effective in preventing the flu as a 2012 NY Times article states:

*In October 2012 "scientists at the Center for Infectious Disease Research and Policy at the University of Minnesota released a report saying that influenza vaccinations provide only modest protection for healthy young and middle-age adults, and little if any protection for those 65 and older, who are most likely to succumb to the illness or its complications. Moreover, the report's authors concluded, federal vaccination recommendations, which have expanded in recent years, are based on inadequate evidence and poorly executed studies. We have overpromoted and overhyped this vaccine," said Michael T. Osterholm, director of the Center for Infectious Disease Research and Policy, as well as its Center of Excellence for Influenza Research and Surveillance. "It does not protect as promoted. It's all a sales job: it's all public relations."*

Also, per the CDC website, the flu shot still contains the mercury based preservative thimerosal in multi-dose vials, which has already been removed from other vaccines in the United States for safety reasons. The ingredients list of the flu vaccine is very alarming as the vaccine also contains other toxins such as aluminum, formaldehyde and other drugs such as antibiotics. Listed below is a high level list of the ingredients per the CDC website. The manufactures ingredients package inserts lists the many other ingredients that are of concern as well such as detergents, Octoxynol-10 (TRITON X-100), MSG and Polysorbate 80.

<http://www.cdc.gov/vaccines/parents/vaccine-decision/ingredients.html>

Type of Ingredient	Examples	Purpose
<b>Preservatives</b>	Thimerosal (only in multi-dose vials of flu vaccine)	To prevent contamination
<b>Adjuvants</b>	Aluminum salts	To help stimulate the body's response to the antigens
<b>Stabilizers</b>	Sugars, gelatin	To keep the vaccine potent during transportation and

		storage
<b>Residual cell culture materials</b>	Egg protein	To grow enough of the virus or bacteria to make the vaccine
<b>Residual inactivating ingredients</b>	Formaldehyde	To kill viruses or inactivate toxins during the manufacturing process
<b>Residual antibiotics</b>	Penicillin, sulfa drugs	To prevent contamination by bacteria during the vaccine manufacturing process

Here is OSHA's Position Statement, as submitted by Mr. Borwegen, representative of the Service Employees International Union as noted on page 25 of the

**National Vaccine Advisory Committee (NVAC) September 13-14, 2011, Meeting Minutes:**

**[http://www.hhs.gov/nvpo/nvac/meetings/pastmeetings/nvac\\_meeting201109\\_certified-minutes.pdf](http://www.hhs.gov/nvpo/nvac/meetings/pastmeetings/nvac_meeting201109_certified-minutes.pdf)**

*"The Occupational Safety and Health Administration (OSHA) is strongly supportive of efforts to increase influenza vaccination rates among healthcare workers in accordance with the Healthy People 2020 goals. However, at this time, OSHA believes there is insufficient scientific evidence for the federal government to promote mandatory influenza vaccination programs that do not have an option for the HCP to decline for medical, religious and/or personal philosophical reasons.*

*While we are supportive of the Healthy People 2020 goal of a 90% vaccination rate, we have seen no evidence that demonstrates that such a high rate is in fact necessary. Furthermore, the current influenza vaccine is no magic bullet. The current state of influenza vaccine technology requires annual reformulation and revaccination and the efficacy is quite variable. Every year there are numerous circulating strains of influenza that are not included in the vaccine. In years where the antigenic match is good, the vaccine only provides protection against the 3 strains in the formulation. In years when the antigenic match is poor, the vaccine may provide no protection at all. The limits of current influenza vaccine technology are especially problematic in the context of a mandatory influenza vaccination program that results in job loss. Lastly, reliance on a mandatory influenza vaccination policy may provide healthcare workers, health care facility management and patients with an unwarranted sense of security and result in poor adherence to other infection control practices that prevent all types of infections, not just influenza. Influenza vaccination has always been just one part of a comprehensive multi-layered infection control program."*

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As stated below, the AAPS (Association of American Physicians and Surgeons) objects to the mandatory immunization of health care workers (HCWs).

*"In the age of "evidence-based medicine," it is shocking that there is so little evidence that the influenza vaccination program is effective. Indeed, there is evidence that it may be ineffective (<http://www.jpands.org/vol11no3/geier.pdf>). Safety data are reported in very few studies: only five randomized studies with 2,963 observations extending only one week after the injection. In fact, the coordinator of the vaccines section of the Cochrane Collaboration called for an urgent reevaluation of the UK's influenza vaccination program (Jefferson T, *Influenza vaccination: policy versus evidence. BMJ 2006;333:912-915*). In particular, the safety of many repeated similar vaccinations is not addressed. Allergic, anaphylactic, hyperimmune, and dysimmune reactions are possible. AAPS recommends that vaccine and relevant information be made conveniently available to all who wish to receive it, and that the right of Americans to make their own medical decisions should be respected."*

[http://www.aapsonline.org/index.php/site/article/colorado\\_influenza\\_letter/](http://www.aapsonline.org/index.php/site/article/colorado_influenza_letter/)

With all this said, I am very concerned about the lack of scientific evidence that the flu vaccine is necessary, safe or effective. I believe it is unacceptable for there to be a law that mandates employees to be injected against their will especially when the injections contain toxins such as thimerosal, formaldehyde and a host of other toxic ingredients. I also believe it is unacceptable that this proposed bill dismisses the option for religious, medical or personal belief exemptions.

I urge you to oppose SB1128.

Thank you in advance for your consideration.  
Donna Tatsapaugh