

HEALTH CHOICE

C O N N E C T I C U T

PROTECT YOUR RIGHT TO A HEALTHY LIFE

February 25, 2019

Dear Distinguished Public Health Committee Chairs and Members,

I am writing to strongly oppose SB94 AN ACT ALLOWING PHARMACISTS TO ADMINISTER THE INFLUENZA VACCINE TO CHILDREN TWELVE YEARS OF AGE AND OLDER

This bill has come up before as there is a countrywide push to get all vaccines in pharmacies to reduce cost, but is this really an appropriate and better option?

The current most frequently [compensated vaccine injury claim](#) through the government vaccine court is for shoulder injury resulting from vaccine administration (SIRVA), following flu shots.

These reports and claims have been escalating as more people have been receiving vaccines in pharmacies and supermarkets.

The issue with minors 12+ is far more complicated, as they have vastly different anatomy that varies widely.

Pharmacists do not have the years of clinical practice that doctors, nurses and frontline health providers do, and may not all consistently have a feel for proper anatomy in administering vaccines.

It is now routinely part of their job description to administer and push vaccines, and while profitable for the pharmacy, many pharmacists were never looking for this role of active clinical care.

Over 50% of our pediatric population in this country are managing a chronic health issue. Taking a medical procedure outside of the pediatric office can potentially be very dangerous. As the statute appears to be written, administration should be subsequent to a health providers order, but it is not clear who the provider may be. A pharmacy would not have access to a teen's health history, and every pharmacy I have contacted does not require any type of prescription prior to giving vaccines to adults. The CDC's vaccine adverse events reporting

system (VAERS), which is a passive system, estimated to capture only 1% to 10% of adverse events, has received over 1800 reports of ER visits following flu shots in 12 to 18 year olds, along with [433 hospitalizations](#), and [17 reported deaths](#). My greatest concern is not only for appropriate administration, but because of limited clinical experience, pharmacists may not be trained to recognize and manage reactions.

If a prescription is to be required to ensure that a child's health history and current condition is assessed, then going to a pharmacy is an unnecessary extra step.

Please vote to oppose this bill keep our kids' care where it belongs - with their providers.
Thank you very much for your consideration in this important matter.

Respectfully,

Dr. Elissa Diamond-Fields
Executive director of advocacy
Health Choice CT