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Joint Commission on Health Care
P.O. Box 1322
Richmond, VA 23218

Re: Comments of the Center for Medical Freedom on
Joint Commission on Health Care Staff Report on
School Vaccination Requirements in the Commonwealth

Dear Members of the Joint Commission on Health Care:

These comments are submitted on behalf of the Center for Medical Freedom on the Staff Report on School Vaccination Requirements in the Commonwealth of Virginia.¹ These comments address two broad aspects of the Staff Report:

First, the proposal to remove the religious exemption from Virginia law is contrary to the Virginia Constitution, and must be rejected.

Second, the Staff Report's reliance on supposedly scientific pro-vaccine studies is misplaced.

I. The Religious Exemption Should Not Be Removed.

The proposal to restrict or abolish the right of religious exemption to vaccine mandates is contrary to the Constitution and rich history of religious liberty in the Commonwealth of Virginia. Perhaps more than any state, our Commonwealth guards and protects religious freedom and personal liberty. The proposal being discussed would erase that legacy and replace it with a draconian and totalitarian medical police state, and would remove parents' ability to protect their children in accordance with their constitutionally protected religious convictions. We strongly support Option 1 of the "School Vaccination Requirements in the Commonwealth" report that states "take no action."

¹ The report is [available here](#).

Thomas Jefferson ranked three of his accomplishments worthy of being placed on his tombstone: the Declaration of Independence, the Virginia Statute for Religious Freedom, and his founding of the University of Virginia. The Virginia Statute for Religious Freedom begins:

Whereas, Almighty God hath created the mind free;

That all attempts to influence it by temporal punishments or burthens, or by civil incapacitations tend only to beget habits of hypocrisy and meanness, and therefore are a departure from the plan of the holy author of our religion, who being Lord, both of body and mind yet chose not to propagate it by coercions on either, as was in his Almighty power to do....

Likewise, the Virginia Constitution protects the free exercise of religion:

That religion or the duty which we owe to our Creator, and the manner of discharging it, can be directed only by reason and conviction, not by force or violence; and, therefore, **all men are equally entitled to the free exercise of religion, according to the dictates of conscience**; and that it is the mutual duty of all to practice Christian forbearance, love, and charity towards each other. No man shall be compelled to frequent or support any religious worship, place, or ministry whatsoever, **nor shall be enforced, restrained, molested, or burthened in his body** or goods, nor shall otherwise suffer on account of his religious opinions or belief.... [Virginia Constitution, Article I, Section 16 (emphasis added).]

Jefferson considered it ridiculous that government would ever try to mandate the medical choices of individual citizens: “Was the government to prescribe to us our medicine and diet, our bodies would be in such keeping as our souls are now.” T. Jefferson, Notes on the State of Virginia, p. 266 (1787 ed.).

One of the reasons that Christians and many others are opposed to the administration of many common vaccines is that they were developed using cell lines that originally were cells taken from electively aborted babies. The vaccines themselves do not contain fetal cells, but there are significant “residual” biological components from the fetal cells that have been assimilated into the vaccine, including cell proteins and measurable portions of fetal DNA.

There are two particular fetal cell lines that have been heavily used in vaccine development. They are named according to the laboratory facilities where they were developed.

One cell line is known as WI-38, developed at the Wistar Institute in Philadelphia, PA. The other is MRC-5, developed for the Medical Research Council in England. WI-38 was developed by Dr. Leonard Hayflick in 1962, by taking lung cells from an aborted female baby at approximately the end of the third month of pregnancy. Dr. Hayflick’s article published in

the journal *Experimental Cell Research* states that three cell lines, WI-26, WI-38, WI-44 were obtained from surgical abortions and were of approximately three months' gestation.² Dr. Stanley Plotkin, who developed a Rubella vaccine using WI-38, addressed a question at an international conference as to the origin of WI-38. Dr. Plotkin stated:

This fetus was chosen by Dr. Sven Gard, specifically for this purpose. Both parents are known, and unfortunately for the story, they are married to each other, still alive and well, and living in Stockholm, presumably. The abortion was done because they felt they had too many children. There were no familial diseases in the history of either parent, and no history of cancer specifically in the families.”³

There are many among us who would never allow the taint of such a product to enter the bloodstream of our children. Residual cell parts from murdered unborn children may be rationalized as a scientific necessity by pharmaceutical companies, for the purposes of growing their antigen, but you can never remove the devastating spiritual consequences of such ingredients. To attempt to force someone morally and religiously opposed to abortion to inject the cell proteins derived from a fetus (*i.e.*, baby), aborted for social convenience purposes, directly into the bloodstream of their own children is morally repugnant, utterly un-American, and should be understood to be evil. *See, e.g.*, Isaiah 44:2; Jeremiah 1:5; Psalm 139:13, 16; Job 10: 8-12; and Galatians 1:15.

Beyond the abortion issue, many religious exemptions are also based on the parent's concern that not enough is done to make vaccines as safe as they could be and that they, the parent, and not the state, are ultimately responsible to God, for the utmost protection of their child's well being.

These parent's know that **mercury** and **aluminum** are among the most potent neurotoxic agents in nature. They wonder why it is not presumed that these agents will have neurotoxic effects when introduced directly into the bloodstream of infants and toddlers. They are skeptical of safety studies that leave the controversial aluminum adjuvants in the control vaccine, and feel this is not good science.

These informed parents also know **formaldehyde** is carcinogenic to humans and question its presence in vaccines offered to our kids. They presume this naturally will result in some developing cancer in future.

² L. Hayflick, *et al.*, “The Limited In Vitro Lifetime of Human Diploid Cell Strains,” *Experimental Cell Research* 37, (1965): 615.

³ “Gamma Globulin Prophylaxis; Inactivated Rubella Virus; Production and Biological Control of Live Attenuated Rubella Virus Vaccines,” *American Journal of Diseases of Childhood* 118, no. 2 (1969): 378.

Many are aware that the FDA has issued a warning that **phenoxyethanol**, a glycol ether used as a preservative in cosmetics and medicines, is toxic to infants and can shut down the central nervous system if ingested. They ponder why is it used as a preservative in vaccines directly injected into infants as they are aware that this poses even more danger than ingestion of the toxin.

These parents question the inclusion of an adjuvant such as **squalene**, an oil molecule found natively in our brain and spine, in vaccines, and wonder why physicians and researchers do not presuppose that this will result in the body building antibodies to it as well as the antigen in the vaccine, and thus create an autoimmune condition affecting the nervous system.

These parents also question why, when **chicken egg** is used as a medium for vaccine production and the egg protein enters the bloodstream via vaccination, do we not presuppose the resultant egg antibodies will lead to life-long allergies.

The same goes for the use of excipients of **peanut oil** in vaccines, which the government does not require to be listed as an ingredient. These parents question why the sudden unexplained rise in severe peanut allergies. Could they possibly be related?

The use of **monkey kidney cells** as culture medium has in the past, with the polio vaccine, included simian retroviruses known to cause cancer and more recently a rotavirus vaccine, RotaTeq, has been shown to be contaminated with DNA from two porcine circoviruses. Is the science and safety due diligence really being done here?

Many with deeply held religious convictions are not naive in their assessment of the landscape on this issue and how profoundly it can affect the health of their children. They are aware that the pharmaceutical industry has arranged for governmental protections, the likes of which are afforded no other, effectively absolving the industry from financial loss from any harm their vaccines do cause. If such damage were unlikely or likely not to be devastating, why the need for such unprecedented governmental protection over what should be part of free market enterprise?

With Big Pharma being shielded by the government who awards our tax dollars to families of vaccine injured children, government has removed risk from the corporations, thus disincentivizing expensive due diligence on safety and further encouraging fast tracking and up-selling new and possibly dangerous vaccines as it is very profitable, with no possible downside to the companies that produce them. As such, inadequate allocations towards analysis of risk and accurate accounting for injury and research on safety renders our understanding of the risk side of any risk/benefit analysis woefully under-reported and virtually unknowable. Even if the benefit side was adequately studied and established, and it is not, no viable risk/benefit ratios can be scientifically proven or statistically suggested in such a scenario as we have currently. The statement that the benefit outweighs the risk is a favorite of the medical authorities, but they have absolutely nothing but rhetoric to back this up. Again, the risk is real, but its extent is unknown.

Families with deep convictions do their research these days. They see this issue for what it is, a move to force them to allow their children to be injected with substances containing aborted fetal cell parts and multitudes of known toxins, many shown to cross the blood brain barrier, directly into the bloodstreams of infants and children, at critical periods of brain development, at ever increasing doses in an ever expanding schedule by corporations that have no skin in the game.

As well, the very notion of mandated vaccination is collectivism. It is based on the notion that personal concerns and religious convictions are irrelevant, even at substantial personal risk, so long as the good of the collective is invoked. However, when one is damaged in the current system, the costs of medical and other care for the individual is often astronomical. Most are unable to obtain awards from the National Vaccine Injury Compensation Program, even though, since 1989 this program has awarded over \$2.6 billion to families of vaccine injured children. The costs for most victims are borne solely by them, who the risk was forced upon and who now also suffer the tragedy of raising a child with great difficulties and little hope of a better future. And they suffer in silence, with the authorities and media deaf to their stories and struggles. These are the issues known by many with strong religious convictions and it is a currently broken and incomplete system that many feel bound by the will of their God to protect their precious children from vaccinations.

II. Scientific Studies Are Unreliable as the Vast Majority Are Based on False or Biased Information.

The Staff Report points out the balancing act of vaccination policies, and one of the competing interests is science, noting:

Disease science explains in detail why vaccination policies are important public policy and good for promoting public health. [Staff Report at 6.]

Indeed, it provided the results of a survey of members of the American Association for the Advancement of Science on their beliefs about whether all children should be required to be vaccinated, as if those members had insight on the principles upon which such policies should depend. *Id.* at 8.

With respect to certain ingredients which are used in vaccines and current concerns, the Staff Report concedes that “The nature of science requires that there be active ongoing research projects on many topics and issues.” *Id.* at 25.

In the Staff Report’s conclusions, it both dismisses and relies on science in the same paragraph:

No public or website says vaccines are 100% safe or effective. But, as the information in this presentation indicates, the preponderance of evidence is that vaccines are safer than the diseases they are intended to protect children from

and the link between vaccines and the host of other illnesses they have been associated with are not supported by science. [*Id.* at 57.]

The Staff Report throughout relies on various scientific beliefs, which it presumes to be irrefutable knowledge. However, there is a problem with this reliance, as well as the General Assembly's reliance on proffered scientific knowledge. As the body of scientific knowledge grows at a frenetic pace, a healthy skepticism should accompany it. Instead, a belief system based on science continues to exist which fails to question anything which claims to be based on scientific research.

The science on vaccines is far from "settled." The very nature of science is that it can never be settled. It must always evolve, utilizing new technologies and methods to retest the hypothesis proved by older science as well as progress forward with new novel hypotheses. There is an expiration date on much of the scientific tenants we hang our hats on at any given time. Research has shown the half-life of scientific knowledge to be around 45 years. That means that statistically speaking, 50 percent of medical science we adhere to as proven and sound today, will be proven otherwise or obsolete in just 45 years.

Then there is the question of the quality of science that we are currently basing our policy decisions on. It has been sculpted by monied interests into something hardly reliable. Dr. Richard Horton, current editor-in-chief of the highly respected, peer reviewed British medical journal, the Lancet, recently published the statement:

The case against science is straightforward: **much of the scientific literature, perhaps half, may simply be untrue.** Afflicted by studies with small sample sizes, tiny effects, invalid exploratory analyses, and flagrant conflicts of interest, together with an obsession for pursuing fashionable trends of dubious importance, science has taken a turn towards darkness. [Richard Horton, Editor-in-Chief, The Lancet, "[Offline: What is medicine's 5 sigma?](#)" The Lancet, vol. 385, April 11, 2015 (emphasis added).]

If you prefer an opinion from the U.S. medical establishment, Dr. Marcia Angell, physician, author and longtime editor of the New England Journal of Medicine has stated:

It is simply **no longer possible to believe much of the clinical research** that is published, or to rely on the judgment of trusted physicians or authoritative medical guidelines. I take no pleasure in this conclusion, which I reached slowly and reluctantly over my two decades as an editor of the New England Journal of Medicine. [Marcia Angell, former Editor-in-Chief of The New England Journal of Medicine, "[Drug Companies & Doctors: A Story of Corruption](#)" The New York Review of Books, January 15, 2009 (emphasis added).]

One can easily see how the omission of quality risk information applied to today's vaccine science might lead to some major revisions in thinking over the next 45 years. To lend a touch of lethal context, recall the consequences of **Vioxx**, a drug the authorities claimed was a safe way to manage inflammation. This is a fairly recent example, as Vioxx was taken off the market in 2004. It killed at least 55,000 and possibly as many as 500,000 people, the research is ongoing. One drug, so many thousands of lives lost in just 5 years. And the company, Merck & Co., Inc., knew they had a problem before they even released the drug for sale.⁴ Whose medical science was trusted in that case? How was the risk-to-benefit ratio established to be acceptable, especially in light of the benefit being just a little less bother from arthritis pain?

The talk of mandates for vaccines from such a flawed system with so much still unknown about real safety is unsound. Evolving science is likely to show that for many, subtle genetic variations, not otherwise dangerous, not terribly infrequent but never currently tested for, are responsible for the susceptibility of some to have major adverse reactions, including autism-type disorders, as a result of receiving the minutest of doses of the toxins mentioned above and the others contained in today's vaccines.

In reality, the Joint Commission must look behind the scientific curtain to determine who is behind the studies relied on, who pays for the studies, etc. The following quotations from leading scientists provide a necessary perspective for evaluating scientific claims, and making science-based policy decisions.

John P. A. Ioannidis, "[An Epidemic of False Claims](#)" [scientificamerican.com](#), June 1, 2011 (emphasis added):

"False positives and exaggerated results in peer-reviewed scientific studies have reached epidemic proportions in recent years. The problem is ... particularly egregious in biomedicine. Many studies that claim some drug or treatment is beneficial have turned out not to be true."

Katie Thomas, "[Document Claims Drug Makers Deceived a Top Medical Journal](#)" [nytimes.com](#), March 1, 2016 (emphasis added):

"Massaging numbers is raised to an art form by the pharmaceutical companies who will engage in numerical gymnastics to shine a favorable light on their product"

⁴ Just today, Merck ceased development of an osteoporosis drug because of increased risk of stroke, of which Merck was aware two years ago. *See* Reuters, "Merck scraps development of osteoporosis drug due to stroke risk" (Sept. 2, 2016), <http://www.reuters.com/article/us-merck-co-study-idUSKCN1181E6>.

Daniel Sarewitz, “[Saving Science](#),” *The New Atlantis* (Spring/Summer 2016) (emphasis added):

Science, pride of modernity, our one source of objective knowledge, is in deep trouble. Stoked by fifty years of growing public investments, scientists are more productive than ever, pouring out millions of articles in thousands of journals covering an ever-expanding array of fields and phenomena. **But much of this supposed knowledge is turning out to be contestable, unreliable, unusable, or flat-out wrong.**

Michael Kirsch, M.D., “[Watch out for sleight of hand in deceptive medical statistics](#)” medcitynews.com, June 13, 2016:

“[T]he claim — that industry influence led to the concealing of data — carries echoes, some experts said, of an earlier era of drug marketing, when crucial clinical data went missing from journal articles, leading to high-profile corrections and a wave of ethics policies to limit the influence of drug companies on medical literature.”

Marcus R. Munafò, Jonathan Flint, “[How reliable are scientific studies?](#)” repsych.org, September, 2010 (emphasis added):

“There is growing concern that a **substantial proportion of scientific research may in fact be false**. A number of factors have been proposed as contributing to the presence of a large number of false-positive results in the literature, one of which is publication bias.”

Daniele Fanelli, “[How Many Scientists Fabricate and Falsify Research? A Systematic Review and Meta-Analysis of Survey Data](#)” plos.org, May 29, 2009 (emphasis added):

“Increasing evidence ... suggests that **known frauds are just the “tip of the iceberg”**, and that many cases are never discovered. The debate, therefore, has moved on to defining the forms, causes and frequency of scientific misconduct.”

Dr. Joseph Mercola, “[A New Low in Drug Research: 21 Fabricated Studies](#)” mercola.com, April 4, 2009 (emphasis added):

“Scott S. Reuben, a prominent Massachusetts anesthesiologist, allegedly **fabricated 21 medical studies** that claimed to show benefits from painkillers like Vioxx and Celebrex.”

Marcia Angell, former Editor-in-Chief of *The New England Journal of Medicine*, “[Drug Companies & Doctors: A Story of Corruption](#)” *The New York Review of Books*, January 15, 2009 (emphasis added):

“Breaking the dependence of the medical profession on the **pharmaceutical industry** ... will take a sharp break from an extremely **lucrative** pattern of behavior. But if the medical profession does not put an end to this corruption voluntarily, it will lose the confidence of the public, and the government”

John P. A. Ioannidis, “[Why Most Published Research Findings are False](#)” PLOS, August 30, 2005 (emphasis added):

“There is increasing concern that in modern research, **false findings may be the majority or even the vast majority of published research claims**. However, this should not be surprising. It can be proven that most claimed research findings are false.”

Conclusion

Surely, as liberty loving Virginians, the Joint Commission on Health Care must continue to honor and protect the religious freedom of the people of our Commonwealth in matters of their own health, and the health of their children.

For the foregoing reasons, in the strongest terms possible, we urge the Joint Commission to adopt policy option 1 of the Staff Report, and leave the religious exemption in the law.

Sincerely yours,



William J. Olson
General Counsel

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cc: Members of the Joint Commission on Health Care