

Written Testimony on HB 2094
Vaccinations; exemptions to required vaccinations based upon conscience or personal belief
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House Committee on Health and Human Services
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Chair Landwehr and members of the committee; please accept this written testimony in opposition to HB2094 related to exemptions for required vaccinations for attendance at licensed child care facilities and school. I believe the current statutory exemptions are sufficient and to increase the allowable exemptions would lead to decreased vaccination rates thereby increasing the risk of disease for Kansans

Vaccines provide protection not only to the individual receiving the immunization but also to others in the community who are unable to be fully immunized due to age or medical reasons. In the past year the Lawrence-Douglas County has seen an outbreak of pertussis in a child care facility centered largely within unvaccinated children. When an outbreak of a preventable illness occurs there is a cost to the community including severe illness or death of the affected individuals, loss of productivity when children and parents must miss work or school, the cost of medical care for exposed individuals and increase costs for local health departments charged with responding to disease outbreaks to help limit the spread of disease. These costs are real, as recently as 2006 this Department was challenged to respond to a mumps outbreak at the University of Kansas that required a significant State and local resource commitment.

According to the Centers for Disease Control and Prevention (CDC), vaccinations are one of the ten great public health achievements of the twentieth century and are recognized as one of the most beneficial and cost effective public health measures. Vaccines have reduced or eliminated many diseases that once killed or seriously harmed infants, children, and adults.

However, until a disease is eliminated (e.g. smallpox), it is important to keep immunizing. If we take away the protection given by vaccination, more people will be infected and will spread disease to others. I offer in support of this claim the following example.

In 1974, Japan had a successful pertussis vaccination program, with nearly 80% of children vaccinated. That year only 393 cases of pertussis were reported in Japan, and there were no deaths from pertussis. But then rumors began to spread that pertussis vaccination was no longer needed and that the vaccine was not safe. By 1976 only 10% of infants were getting vaccinated. In 1979 Japan

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suffered a major pertussis epidemic, with more than 13,000 cases of whooping cough and 41 deaths. In 1981 the government began vaccinating with acellular pertussis vaccine, and the number of pertussis cases dropped again.

Thank you for the opportunity to testify and for you thoughtful consideration of the health and welfare of all Kansans.