

Elizabeth Hart
Adelaide, South Australia
elizhart@gmail.com

For the attention of:
Professor Ian Olver
Chair, NMHRC Australian Health Ethics Committee (AHEC)

12 April 2014

Professor Olver

RE: Measles/Mumps/Rubella (MMR) vaccination – [refer to my previous letter dated 19 March 2014](#)

Professor Olver, [in my previous letter to you](#), I argued that most children are likely to be immune after the **first** dose of effective live Measles/Mumps/Rubella (MMR) vaccine, and I challenged the Australian government's requirement for children to have a **second** dose of live Measles/Mumps/Rubella (MMR) vaccine, which is linked to obtaining Immunisation Related Payments for Parents.

In my letter I questioned the ethics of coercing parents to have vaccinations of questionable benefit for their children.

In this regard I draw your attention to a 'MEASLES ALERT' letter (see attached), forwarded to 13,117 parents in Queensland by Chief Health Officer Dr Jeannette Young in September 2013, which tells these parents that **"Two doses of measles containing vaccine are needed to provide a high level of protection."** This advice was also included in a Queensland Government media statement¹ and reported in an article published in *The Courier-Mail* on 14 October 2013: ["Vaccination no-shows prompt top-level measles outbreak warning"](#)²

Professor Olver, I suggest it is misleading to tell parents that "two doses of measles containing vaccine are needed to provide a high level of protection". As I argued in [my previous letter](#), it is likely **one** dose of effective GSK PRIORIX live MMR vaccine is likely to provide protection for previously seronegative subjects.

A response to live MMR vaccination can be verified by antibody titre testing. I suggest there may be some cautious parents who would prefer to have an antibody titre test for their child rather than an arbitrary live MMR revaccination, and who might be willing to pay for an antibody titre test themselves. Yet, in contravention of The Australian Immunisation Handbook's criteria for consent to vaccination to be legally valid, i.e. that any alternative options be explained to the individual,³ it appears healthcare providers are not informing parents about the option of antibody titre testing.

In another jurisdiction, the state of New Jersey in the United States, the health department provides information on antibody titre testing. [The Antibody Titer Law \(Holly's Law\)](#)⁴ allows parents to seek testing to determine a child's immunity to measles, mumps and rubella before receiving the second dose of MMR vaccine. The law was enacted in response to the death of five year old Holly Marie Stavola who died of encephalopathy which she developed seven days after receiving her second dose of MMR vaccine.⁵ Holly's family campaigned for this law, wishing they had known about the option of the antibody titre test before Holly's arbitrary revaccination with the second dose of live MMR vaccine.⁶

All parents should be informed about the option of antibody titre testing to verify a response to live MMR vaccination. All parents should be informed of the reportedly high seroconversion rates after live MMR vaccination at the appropriate age. All parents should be properly informed about the risks and benefits of individual vaccine products. This is not happening. Instead, the media is being used as a blunt instrument to bully parents into unquestioning compliance with all vaccination 'requirements' mandated by the government's vaccination bureaucracy and the vaccine industry, see for example:

- [Scientists call for end of handouts to parents who don't vaccinate children](#), The Telegraph, 6 April 2014⁷
- [Doctors want revaccination reforms for childcare centres](#), The Australian, 11 April 2014⁸
- [Peter Dutton considers plan to withhold family tax benefits if children aren't immunised](#), ABC News, 11 April 2014⁹

Professor Olver, we are on a slippery slope when governments dictate questionable medical interventions for citizens (including 'pre-citizens', i.e. children). The arbitrary second dose of the MMR vaccine, often inappropriately described as a 'booster'¹⁰, is a questionable medical intervention. **Vaccination/immunisation is a complex matter that requires thoughtful discussion, not the polarised discourse currently evident in Australia.**¹¹ I request that you and your AHEC colleagues urgently consider this matter.

Sincerely
Elizabeth Hart

***Please note this letter will be circulated to other parties.**

cc: Members of the NHMRC Australian Health Ethics Committee (AHEC)

- Dr Gary Allen
- Professor Vicki Anderson
- Professor Samar Aoun
- Professor Susan Dodds
- Associate Professor Ian Kerridge
- Dr Tammy Kimpton
- Rabbi Aviva Kipen
- Reverend Kevin McGovern
- Professor John McGrath AM
- Dr Eleanor Milligan
- Professor Robin Mortimer
- Ms Kay Oke
- Professor Margaret Otlowski
- Professor Debra Rickwood
- Professor Wendy Rogers
- Professor Loane Skene

and Professor Brian Martin, Social Sciences, University of Wollongong

Attachments:

- Measles Alert. Letter to parents/carers from Dr Jeannette Young, Chief Health Officer, Queensland Government Department of Health, 17 September 2013.
- Antibody Titer Law – Information for Parents pamphlet. The Antibody Titer Law gives parents a choice BEFORE they consent to a second dose of measles, mumps and rubella vaccine.

References: (All links accessible as at 12 April 2014. It may be necessary to copy and paste long links in a web browser.)

¹ Queensland Department of Health Media Statement, 14 October 2013.

² Vaccination no-shows prompt top-level measles outbreak warning. The Courier Mail, 14 October 2013:

<http://www.couriermail.com.au/news/queensland/vaccination-noshows-prompt-tolevel-measles-outbreak-warning/story-fnihsrf2-1226739273248>

³ 2.1.3 Valid Consent. 2.1 Pre-vaccination. The Australian Immunisation Handbook. 10th Edition 2013:

<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/handbook10-2-1>

⁴ Antibody Titer Law – Information for Parents. (Holly's Law) (NJSA 26:2N-8-11), passed on January 14, 2004, concerns vaccination of children with the Measles, Mumps, Rubella (MMR) vaccine. The law allows parents to seek testing to determine a child's immunity to measles, mumps, and rubella, before receiving the second dose of the vaccine. This brochure has been prepared by the New Jersey Department of Health and Senior Services to assist parents in making the decisions related to the MMR vaccine and the test: http://www.state.nj.us/health/cd/documents/antibody_titer_law.pdf

⁵ HopeFromHolly. Providing NJ physicians and pParents with more knowledge about childhood vaccines:

<http://hopefromholly.com/blog/our-purpose/>

⁶ Holly's story – Holly Marie Stavola, January 18, 1995 – February 4, 2000:

<http://hopefromholly.com/blog/category/holly-stavola/>

⁷ Scientists call for end of handouts to parents who don't vaccinate children. The Telegraph, 6 April 2014:

<http://www.dailytelegraph.com.au/news/nsw/scientists-call-for-end-of-handouts-to-parents-who-dont-vaccinate-children/story-fni0cx12-1226874673399>

⁸ Doctors want vaccination reforms for childcare centres. The Australian, 11 April 2014:

<http://www.theaustralian.com.au/news/doctors-want-vaccination-reforms-for-childcare-centres/story-e6frg6n6-1226880381081>

⁹ Peter Dutton considers plan to withhold family tax benefits if children aren't immunised. ABC News, 11 April 2014:

<http://www.abc.net.au/news/2014-04-11/govt-may-withhold-family-tax-benefit-if-children-not-vaccinated/5382054>

¹⁰ For example the NPS Medicinewise website states: "Separate vaccines for measles, mumps and rubella are not available in Australia. So the combined measles, mumps and rubella (MMR) vaccine is given in a single injection with a second booster dose." <http://www.nps.org.au/medicines/immune-system/vaccines-and-immunisation/for-individuals/vaccines-a-z/measles-mumps-and-rubella-mmr>

¹¹ In his article "On the suppression of vaccination dissent", Professor Brian Martin says: "Suppression of dissent, through its chilling effect, can skew public debates, by discouraging participation. In Australia, critics of vaccination have become aware that if they become visible, they are potentially subject to denigration and complaints. **Because of the level of personal abuse by pro-vaccinationists, many of those who might take a middle-of-the road perspective, perhaps being slightly critical of some aspects of vaccine policy, are discouraged from expressing their views. The result is a highly polarized public discourse that is not conducive to the sort of careful deliberation desirable for addressing complex issues.**" (My emphasis.) Source: Science & Engineering Ethics. March 2014, doi 10.1007/s11948-014-95303 <http://www.bmartin.cc/pubs/14see.html>