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TO: Texas Legislature  
Austin, Texas

RE: Bills pertaining to immunizations

Honorable Texas Legislators:

I am a nationally recognized legal expert on vaccine exemption and waiver law. I have advised clients, attorneys, legislators, and legislative committees on vaccine policy and law nationally as they pertain to vaccines required at birth; for school, daycare and college enrollment; for healthcare workers and other employees; for military members, families and civilian contractors; for immigrants, including foreign adopted children; for children of parents in child custody disputes; for international travel; and various other contexts. I host two weekly radio shows that explore vaccine science, politics and law; am published internationally on vaccine politics and law; have seen my lay research on vaccines used in medical schools in three different countries; and am regularly published in the U.S. on vaccine policy and law. From this experience and perspective, I respectfully report information below with respect to over a dozen bills pending in the Texas legislature concerning vaccines.

Numerous bills in Texas and around the U.S. are in response to a measles outbreak at Disneyland. However, critical facts have been omitted from the discussion. For example, according to the CDC, no one in the U.S. has died from measles in the past 12 years, but the federal Vaccine Adverse Event Reporting System (VAERS) has received reports of over 100 deaths from measles vaccines in that same time period.<sup>1</sup> These vaccine deaths are not a necessary by-product of a successful vaccine policy, because childhood infectious disease deaths in the 1900's declined 90-95% *before* vaccines were introduced—97% with measles.<sup>2</sup> Vaccines are not the reason we have low childhood infectious disease death rates today.

The CDC has stated that vaccines work 85 – 95% of the time, and that the median exemption rate nationally is 1.8%, and that this is why most outbreaks occur in *vaccinated* children.<sup>3</sup> There are five times more *non-immune vaccinated* children than exempt children. Moreover, the National Vaccine Injury Compensation Program pays out over \$220 million/year for vaccine injuries and deaths (5 year average 2009-2014).<sup>4</sup> So, if there is a problem with childhood infectious disease in Texas, it is that the vaccine manufacturers—who have no liability

<sup>1</sup> NVIC MedAlerts Home, Search the VAERS Database, <http://www.medalerts.org/vaersdb/index.php>

<sup>2</sup> Immunization Graphs prepared by Raymond Obamsawin, M.Sc., Ph.D., 2009, <http://www.theoneclickgroup.co.uk/documents/vaccines/Immunization%20Graphs%20PPT%20-%20RO%202009.pdf>

<sup>3</sup> Centers for Disease Control and Prevention, Vaccines and Immunizations, Misconception #2. The majority of people who get disease have been vaccinated. The original CDC page stating this can be viewed here: <http://web.archive.org/web/20150120055820/http://www.cdc.gov/vaccines/vac-gen/6mishome.htm>

<sup>4</sup> NVICP Statistics Report, February 2015, <http://www.hrsa.gov/vaccinecompensation/statisticsreport.pdf>

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for the harm caused by their vaccines, and thus no financial incentive to improve vaccine safety and effectiveness—are not held to a strict enough standard for vaccine safety and effectiveness.

Claims that “herd immunity” is threatened by non-medical exemptions are contradicted by medical science. The majority of residents in Texas and across nation are adults who were last vaccinated as children. Their vaccine protection, which is temporary, wore off decades ago. The majority of the U.S. population consists of adults with no vaccine immunity to childhood infectious diseases, but this has not led to massive outbreaks in adults. Clearly, lack of immunization does *not* necessarily lead to outbreaks. To the contrary, numerous peer-reviewed, published medical studies document disease outbreaks in highly and even fully vaccinated populations.<sup>5</sup> A 1994 meta-study reviewing measles outbreaks in highly and fully vaccinated populations concluded: “The apparent paradox is that as measles immunization rates rise to high levels in a population, measles becomes a disease of immunized persons.”<sup>6</sup> Herd immunity may apply to wild diseases, but it does not apply reliably to vaccinated populations.

Why is the above information not common knowledge? Money. The pharmaceutical industry may have given us many wonderful things, but its marketing is out of control. It has become the biggest defrauder under the federal False Claims Act.<sup>7</sup> In the last 5 years, it returned \$19.2 billion from attempts to defraud federal health programs, more than double the previous 5 years.<sup>8</sup> Over a recent 8 year period, there were twenty pharmaceutical company settlements ranging from \$345 million to \$3 billion. *Criminal* fines in the \$100’s of millions are common, and have been as high as \$1 billion (Pfiser 2009, Glaxo 2012, Johnson & Johnson 2013).<sup>9</sup> This behavior has become routine business practice, as the profits have taken priority over ethical, moral, and even criminal boundaries.

Texas’ non-medical vaccine exemptions provide a necessary “check and balance” against the vaccine industry’s overreaching marketing. We who support vaccine freedom of choice respect the choice to vaccinate. Given the above and the information attached below, we are compelled to establish and maintain the choice to refuse vaccines, and that choice must be equally respected.

Regarding specific bills:

**H.B. 2006:** Would require persons exercising a religious exemption to belong to a recognized religion or church. This would violate exemption applicants’ First Amendment Constitutional

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<sup>5</sup> A list of some of these studies are available at <http://www.vaccinerights.com/herdimmunity.html>.

<sup>6</sup> Failure to reach the goal of measles elimination. Apparent paradox of measles infections in immunized persons. Review article: 50 REFS. Dept. of Internal Medicine, Mayo Vaccine Research Group, Mayo Clinic and Foundation, Rochester, MN. Archives of Internal Medicine. 154(16):1815-20, 1994 Aug 22.

<sup>7</sup> “Public Citizen Study: Pharmaceutical Industry Is Biggest Defrauder of the Federal Government Under the False Claims Act,” Dec. 20, 2010, <http://www.pharmpro.com/news/2010/12/public-citizen-study-pharmaceutical-industry-biggest-defrauder-federal-government-under-false-claims-act>

<sup>8</sup> False Claims Act Whistleblowing Blog, February 2014 archive, <http://www.fraudwhistleblowersblog.com/2014/02/>

<sup>9</sup> See, e.g., (a) “Public Citizen Study: Pharmaceutical Industry Is Biggest Defrauder of the Federal Government Under the False Claims Act,” <http://www.pharmpro.com/news/2010/12/public-citizen-study-pharmaceutical-industry-biggest-defrauder-federal-government-under-false-claims-act>, (b) “GlaxoSmithKline to pay \$3 billion fine after pleading guilty to healthcare fraud - the biggest in U.S. history,” MailOnline, <http://www.dailymail.co.uk/news/article-2167742/GlaxoSmithKline-pay-3b-fine-pleading-guilty-healthcare-fraud.html> and (c) “Johnson & Johnson to pay \$2 billion for false marketing,” CNN Money, <http://money.cnn.com/2013/11/04/news/companies/johnson-and-johnson-settlement/>

rights. According to federal courts, the First Amendment protects religious objections to immunizations, regardless of whether or not the exemption applicant is a member of any organized religion, and regardless of which church the applicant belongs to if s/he does belong to one. (analysis below)

**H.B. 1674:** Would require physician counseling on vaccine risks and benefits for non-medical exemptions.

This violates exemption applicants' 14<sup>th</sup> Amendment due process rights. According to the U.S. Supreme Court, parents have a Constitutional right to the care, custody and control of their children, and are presumed to make decisions in their children's best interests (not unlike a criminal suspect being considered innocent until proven guilty), unless there is evidence on a case-by-case basis that any given parent is unfit. By requiring physician counseling of all exemption applicants, the State of Texas would be unlawfully declaring all parents to be unfit, without the Constitutionally required showing of evidence for each one.

This violates First Amendment rights of parents with religious objections to immunizations. Federal courts have held that there are only two requirements for a vaccine religious exemption: the belief opposed to vaccines must be religious in nature, and it must be sincerely held. The State of Texas cannot lawfully add additional substantive requirements above and beyond what is required by the Constitution.

This also violates exemption applicants' First Amendment free speech rights. Free speech includes not only the right to have and speak our own views, but also the right to be free from being compelled to speak. When the State imposes its view on citizens, it is compelling those citizens to speak in violation of their free speech rights.

In common sense terms, a physician counseling requirement doesn't pass the sniff test. Physician counseling is proposed only as a means to maximize pharmaceutical profits by trying to persuade citizens to violate their conscientious beliefs, to disobey God in many cases, or to punish them with guilt if they should stick to their beliefs despite the attempted persuasion. We may rest assured that Physicians would counsel parents with incomplete information that would not include critical facts such as the number of reported deaths and disabilities caused by vaccines each year, the \$220 million/year paid out each year from taxpayer dollars for vaccine injuries and deaths, the fact that disease mortality declines preceded the introduction of vaccines, or the fact that the pharmaceutical industry routinely engages in massive criminal behavior. In short, the physician counseling requirement is nothing more than a shameless attempt by the pharmaceutical industry to co-opt the Texas legislature, making it a public arm of this private industry's marketing departments.

**S.B. 1114, H.B. 3875:** Would require school employees to be vaccinated, and would allow no non-medical exemptions.

For the reasons discussed above, and those referenced in the Vaccine Fact Summary Below, this bill should not go forward. But if it were to go forward, it must include both personal belief and religious exemptions as are currently available for students, to avoid confusion with federal law. Public and private employers with 15 or more employees must allow employees to opt out of vaccines on religious grounds under Title VII of the Federal Civil Rights Act of 1964. Passage of a similar bill in Colorado caused much confusion there. Employers tell their employees that there are no religious exemptions; yet, employees may opt out of flu shots under federal

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civil rights law on religious grounds. Employees' federal civil rights are being violated because of a state immunization law that does not allow non-medical exemptions.

**H.B. 212:** Allows children in some circumstances to consent to vaccines. The U.S. Supreme Court has stated: "Most children, even in adolescence, simply are not able to make sound judgments concerning many decisions, including their need for medical care or treatment. Parents can and must make those judgments." *Parham v. J.R.*, 442 U.S. 584, 604 (1979).

Conclusions:

1. Since vaccine manufacturers have no liability, Texas citizens should be allowed to freely refuse vaccines, without having to justify their refusal.
2. Since vaccines cause severe injuries and deaths, and no one can tell you whether or not you or your child will be the next victim, Texas citizens should be allowed to freely refuse vaccines, without having to justify their refusal.
3. No one should ever have to take a product from an industry that routinely engages in massive criminal behavior. Since the pharmaceutical industry routinely engages in massive criminal behavior, Texas citizens should be allowed to freely refuse vaccines, without having to justify their refusal.
4. The Texas legislature should not partner with an industry that routinely engages in criminal behavior, it should protect citizens from this industry. Let the pharmaceutical industry market their products in the same free market system as everyone else. Don't allow the Texas legislature to become a public marketing division of the private pharmaceutical industry. Texas citizens should have the right to freely refuse vaccines, without having to justify their refusal.
5. When language in a bill is clearly unconstitutional, the bill must die.
6. When you hear supporters of these bills say that parents who opt out of vaccines put children at risk, that unvaccinated children cause disease outbreaks, that parents of unvaccinated children should be liable or put in jail, or any of the many other emotional attacks, you need to ask yourself: "Is this objective, science-based health information, or is it a pharmaceutical marketing campaign for the multi-billion dollar international vaccine industry?" This is a fundamental question. Citizen safety must take priority over pharmaceutical profits. In a world where vaccine deaths outnumber disease deaths, there is not a problem to be fixed by requiring more vaccines or by limiting vaccine freedom of choice. That is a decision that must be left to each individual, in consultation with their healthcare professional.
7. A copy of what everything I've said with references and legal analyses is available on my website, or by request from [attorney@vaccinerights.com](mailto:attorney@vaccinerights.com).

Respectfully Offered,



Alan G. Phillips  
NC State Bar No. 30436

\*Legal analyses and referenced Vaccine Fact Summary are provided below.

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## LEGAL ANALYSIS

### I. H.B. No. 2006.<sup>10</sup>

This bill, relating to exemptions from immunizations requirements for public school students and students at public institutions of higher education, would require “an affidavit signed by the applicant or, if a minor, by the applicant's parent or guardian stating that the applicant declines immunization for a specified and verifiable religious-based reason and that the immunization conflicts with the tenets and practices of a recognized church or religious denomination of which the applicant is an adherent or member.”

Federal courts have consistently held that a requirement of membership in an organized religion for a vaccine religious exemption violates the First Amendment of the U.S. Constitution. For example:

- 1987: The “limitation of the availability of a religiously-based exemption from immunization to ‘bona fide members of a recognized religious organization’ whose doctrines oppose such vaccinations violates both the establishment and free exercise clauses of the First Amendment to the United States Constitution.” Sherr and Levy vs. Northport East-Northport Union Free School District, 672 F. Supp. 81, 99 (E.D.N.Y., 1987)
- 1988: “[I]t is sufficient if the belief ‘occupies a place in the life of its possessor parallel to that filled by the orthodox belief in God.’” Mason v. General Brown Cent. School Dist., 851 F.2d 47, 51 (2nd Cir. 1988) (quoting United States v. Seeger, 380 U.S. 163, 166, 85 S.Ct. 850, 854).
- 1989: A federal court upheld a religious exemption for a child whose parents’ personal religious beliefs sprung from their past membership in a community of people from the Chumash, Navaho and Hopi tribes. In Lewis v. Sobel, 710 F. Supp. 506, 508 (S.D.N.Y. 1989), The court in *Lewis* “awarded damages . . . [for the] violation of [the parents’] First Amendment right to free exercise of their religion,” and underscored the fact that the plaintiffs’ lack of membership in “an organized religion does not preclude them from protection under the Free Exercise clause if their beliefs are in fact religious.” The *Lewis* court stated that the plaintiff’s beliefs, “upon which their opposition to immunization is based, stem from ‘ultimate concerns’ that are clearly more than intellectual in nature.”
- 1994: A federal court upheld a vaccine religious exemption for Jewish parents, despite the testimony of a Rabbi that “there is nothing in the teaching of the Jewish religion that would proscribe immunization for children.” Berg v. Glen Cove City School Dist., 853 F. Supp. 651, 654 (E.D.N.Y. 1994)
- 2000: “The beliefs need not be consistent with the dogma of any organized religion, whether or not the plaintiffs belong to any recognized religious organization.” Farina v. The Board of Education, 116 F. Supp.2d 503, 507 (S.D.N.Y. 2000) held: (citing Sherr, 672 F. Supp. at 91).

State and federal courts have been largely consistent in holding that vaccine religious exemption statutes requiring church membership are unconstitutional.

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<sup>10</sup> <http://www.capitol.state.tx.us/tlodocs/84R/billtext/html/HB020061.htm>

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- 1987: A New York federal court ordered the state to revise its statute to make it Constitutional. Sherr and Levy vs. Northport East-Northport Union Free School District, 672 F. Supp. 81, 99 (E.D.N.Y., 1987)
  - 2002: An Arkansas federal court held that such a statute violated both the First and Fourteenth Amendments. McCarthy v. Boozman, 212 F.Supp.2d 945 (W.D.Ark. 2002).
  - State courts in Massachusetts in 1971 and Maryland in 1982 held that similar statutes in those states were unconstitutional. Dalli v. Board of Education, 358 Mass. 753, 267 N.E.2d 219 (1971), and Davis v. State, 294 Md. 370, 451 A.2d 107 (1982).

There are two anomalous rulings: The Mississippi State Supreme Court ruled in 1979 that vaccine religious exemptions violate the U.S. Constitution (the only state to ever do so), Brown v. Stone, 378 So.2d 219 (Miss. 1979). Kentucky's exemption requirement that applicants be members of a "nationally recognized and established church or religious denomination" was held not to violate the First Amendment's Establishment Clause in Kleid v. Board of Educ., 406 F.Supp. 902 (W.D. Ky. 1976). However, the Kentucky exemption has since been changed to remove the organized religion requirement.

Given the above, H.B. 2006 (1)(B) should not go forward.

## II. H.B. 1674

This bill would require physician counseling as a condition for obtaining a non-medical vaccine exemption.

A. This bill violates parents' 14<sup>th</sup> Amendment due process rights. Parents have a 14<sup>th</sup> Amendment due process right to parent their children that includes the right to make medical decisions. In *Troxel v. Granville*, 530 U.S. 57 (2000), the U.S. Supreme Court stated:

The Fourteenth Amendment's Due Process Clause also has a substantive component that "provides heightened protection against government interference with certain fundamental rights and liberty interests," *Washington v. Glucksberg*, 521 U.S. 702, 720, including parents' fundamental right to make decisions concerning the care, custody, and control of their children, *see, e. g., Stanley v. Illinois*, 405 U.S. 645, 651. Pp. 63-66.

The *Troxel* Court further explained:

There is a presumption that fit parents act in their children's best interests, *Parham v. J. R.*, 442 U.S. 584, 602; there is normally no reason for the State to inject itself into the private realm of the family to further question fit parents' ability to make the best decisions regarding their children, *see, e. g., Reno v. Flores*, 507 U.S. 292, 304.

The *Troxel* "fit parents" presumption may be rebutted by a showing (evidence) that a parent is unfit, but such a showing requires a case-by-case analysis for each parent suspected of being unfit. By requiring parents to first be counseled about vaccines as a condition of exercising the exemption, the State unlawfully presumes that all parents wishing to exercise the exemption are unfit, without the required case-by-case showing.

B. This bill violates parents' First Amendment "free exercise" rights. Federal courts have clarified that all the First Amendment requires for a vaccine religious exemption is a belief that is "religious in nature" and "sincerely held." *See, e.g., Sherr and Levy vs. Northport East-Northport Union Free School District*, 672 F. Supp. 81, (E.D.N.Y., 1987); *Mason v. General Brown Cent. School Dist.*, 851 F.2d 47 (2nd Cir. 1988), *Lewis v. Sobel*, 710 F. Supp. 506, 512 (S.D.N.Y. 1989); and *Farina v. The Board of Education*, 116 F. Supp.2d 503 (S.D.N.Y. 2000) (which cases cite *United States v. Seeger*, 380 U.S. 163, 85 S.Ct. 850 and other U.S. Supreme Court cases). While States are free to be more lenient in their exemption requirements than the First Amendment requires, States may not lawfully be more restrictive than the First Amendment by adding further substantive requirements beyond those established by the courts—in this instance, the "religious in nature" and "sincerely held" requirements.

C. This bill may violate parents' First Amendment free speech rights. If the State requires exemption applicants to agree with the State's view or opinion on these matters, that would violate exemption applicants' First Amendment "free speech" rights. The U.S. Supreme Court has held that the right to free speech includes the right to be free from being compelled to speak, and requiring exemption applicants to agree with the State's views on vaccine risks and benefits would constitute compelling the exemption applicants to speak, thereby violating their First Amendment rights. *See, e.g., Wooley v. Maynard*, 430 U.S. 705 (1977). However, if the State requires instead that exemption applicants merely acknowledge the State's views, without the applicants having to agree with the State's views, then that may not violate the applicants' free speech rights.

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## Vaccine Fact Summary

1. In 2011, the U.S. Supreme Court ruled that vaccines are “unavoidably unsafe.” *Bruesewitz v. Wyeth LLC*, 131 S. Ct. 1068, 179 L.Ed.2d 1 (2011).<sup>1</sup>

2. National Vaccine Injury Compensation Program (NVICP) vaccine injury and death payouts<sup>2</sup>:

- a. Total to date (1989-2015): \$ 3.1 Billion
- b. Average annual payout 2005-2009: \$ 75,630,051 per year
- c. Average annual payout 2010-2014: \$221,822,386 per year
- d. Cases pending: 1,943

3. There is vast underreporting of vaccine adverse events. FDA: As few as 1% of serious adverse reactions are reported.<sup>3</sup> CDC: Only about 10% are reported.<sup>4</sup> Congress: Has heard testimony that medical students are told not to report suspected adverse events,<sup>5</sup> yet, federal law requires doctors to do so.<sup>6</sup> National Vaccine Information Center (NVIC) survey: 1 out of 40 doctor's offices (2.5%) in New York report a death or injury following vaccination.<sup>7</sup> Association of American Physicians and Surgeons (AAPS): Only 10% of serious vaccine adverse events are reported.<sup>8</sup>

4. The Federal Court of Claims lists about 140 attorneys that accept vaccine injury and death cases.<sup>9</sup> This number has been steadily increasing in recent years.

5. The National Childhood Vaccine Injury Act of 1986 (NCVIA) shields vaccine manufacturers from liability for the death and disability caused by their vaccines. There is no financial incentive for manufacturers to produce safer vaccines.<sup>10</sup>

6. 90-95% of 1900's infectious disease decline preceded the vaccines.<sup>11</sup> Absence of vaccination will not bring back infectious disease rates of pre-vaccine days.

7. According to the CDC:

- a. Vaccines are 85 – 95% effective (5 - 15% of children do not develop immunity from their vaccines), and most outbreaks start in vaccinated children.<sup>12</sup>
- b. The median vaccine exemption rate in the U.S. is 1.8%.<sup>13</sup> There are more than 5+ times more non-immune \*vaccinated\* children than exempt children.
- c. Exempt children can get natural immunity, without even developing symptoms.<sup>14</sup> You can't tell a child's immune status based on their immunization status.

8. The American Medical Association Code of Medical Ethics recommends “medical, religious, or philosophic” exemptions to immunizations for medical doctors.<sup>15</sup>

9. The pharmaceutical industry is the biggest defrauder of the federal government under the False Claims Act.<sup>16</sup> In the last 5 years, \$19.2 billion were returned from attempts to defraud federal health programs, more than double that of the previous 5 years (as of February 2014).<sup>17</sup>

10. In 8 years (2004-2012), there were twenty pharmaceutical company settlements in the \$345 million to \$3 billion range.<sup>18</sup> Criminal fines in the \$100's of millions are common, and have been as high as \$1 billion (Pfizer 2009, GlaxoSmithKline 2012). This is routine business practice.

11. Merck, manufacturer of the mumps vaccine, is going to trial in two separate lawsuits for allegedly falsifying the efficacy rate of its mumps vaccine. One suit was filed by former employee-whistleblowers, the other by pharmaceutical competitors.<sup>19</sup>

Conclusions:

1. Childhood infectious diseases have extremely low mortality rates in developed nations. Vaccines kill and permanently disable far more children than the diseases, and the mortality decline from the diseases preceded the introduction of vaccines.

2. There is insufficient data available to determine whether or not vaccines provide a net benefit, and no way to determine the risk of vaccine injury or death for any given child or adult.



3. Individual freedom of choice provides a necessary “check and balance” to the pharmaceutical industry’s overreaching, no-liability, marketing influence over vaccine policy and law.

4. Young adults are not required to risk their lives with mandatory military service, but newborn infants are required to risk their lives with a Hep B vaccine, for a disease they are not at risk of acquiring or spreading unless the mother is a carrier. This is unconscionable!

5. Parents for their kids, and adults for themselves, must be allowed to make vaccine decisions, in consultation with the healthcare professional of their choice. No one should ever be required to take a product from an industry that routinely engages in large-scale criminal behavior.

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<sup>1</sup> *Bruesewitz v. Wyeth LLC*, <http://www.supremecourt.gov/opinions/10pdf/09-152.pdf>

<sup>2</sup> NVICP Statistics Report, February 2015, <http://www.hrsa.gov/vaccinecompensation/statisticsreport.pdf>

<sup>3</sup> Less than 1%, according to Barbara Fisher, citing former FDA Commissioner David Kessler, 1993, JAMA, Statement of the National Vaccine Information Center (NVIC), Hearing of the House Subcommittee on Criminal Justice, Drug Policy and Human Resources, "Compensating Vaccine Injuries: Are Reforms Needed?" September 28, 1999.

<sup>4</sup> American Association of Physicians and Surgeons, Fact Sheet on Mandatory Vaccines at <http://www.aapsonline.org/>.

<sup>5</sup> Jane Orient, M.D., Director of the American Association of Physicians and Surgeons, “Mandating Vaccines: Government Practicing Medicine Without a License?” 1999.

<sup>6</sup> 42 U.S.C. § 300aa-25.

<sup>7</sup> National Vaccine Information Center (NVIC), 512 Maple Ave. W. #206, Vienna, VA 22180, 703-938-0342; "Investigative Report on the Vaccine Adverse Event Reporting System."

<sup>8</sup> Statement of the AAPS to the Subcommittee on Criminal Justice, Drug Policy and Human Resources of the Committee on Government Reform U.S. House of Representatives, Re: Hepatitis B Vaccine, Jane Orient, MD, June 14, 1999, <http://www.aapsonline.org/testimony/hepbcom.htm>

<sup>9</sup> <http://www.uscfc.uscourts.gov/sites/default/files/20141208%20Vaccine%20Attorneys.pdf>

<sup>10</sup> See the National Childhood Vaccine Injury Act of 1986, 42 U.S.C. § 300aa-1 *et seq.*, and *Bruesewitz v. Wyeth, LLC*, *supra*.

<sup>11</sup> See, e.g., graphs here: <http://www.theoneclickgroup.co.uk/documents/vaccines/Immunization%20Graphs%20PPT%20-%20RO%202009.pdf>, <https://childhealthsafety.wordpress.com/graphs/>

<sup>12</sup> Centers for Disease Control and Prevention, Vaccines and Immunizations, Misconception #2. The majority of people who get disease have been vaccinated. The original link, <http://www.cdc.gov/vaccines/vac-gen/6mishome.htm>, is now directed to a new CDC page that does not state these facts (but does not state contrary facts). The original CDC page can be viewed here: <http://web.archive.org/web/20150120055820/http://www.cdc.gov/vaccines/vac-gen/6mishome.htm>

<sup>13</sup> Vaccination Coverage Among Children in Kindergarten – United States 2012-2013 School Year, Morbidity and Mortality Weekly Report (MMWR), CDC, [http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6230a3.htm?s\\_cid=mm6230a3\\_eThe](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6230a3.htm?s_cid=mm6230a3_eThe)

<sup>14</sup> Centers for Disease Control and Prevention, Vaccines and Immunizations, Glossary, “Asymptomatic infection: The presence of an infection without symptoms. Also known as inapparent or subclinical infection.” <http://www.cdc.gov/vaccines/about/terms/glossary.htm>

<sup>15</sup> American Medical Association, Opinion 9.133 Routine Universal Immunization of Physicians, <http://www.ama-assn.org/ama/pub/physician-resources/medical-ethics/code-medical-ethics/opinion9133.page>

<sup>16</sup> “Public Citizen Study: Pharmaceutical Industry Is Biggest Defrauder of the Federal Government Under the False Claims Act,” Dec. 20, 2010, <http://www.pharmpro.com/news/2010/12/public-citizen-study-pharmaceutical-industry-biggest-defrauder-federal-government-under-false-claims-act>

<sup>17</sup> False Claims Act Whistleblowing Blog, February 2014 archive, <http://www.fraudwhistleblowersblog.com/2014/02/>

<sup>18</sup> List of largest pharmaceutical settlements (2004 – 2012), Wikipedia, [http://en.wikipedia.org/wiki/List\\_of\\_largest\\_pharmaceutical\\_settlements](http://en.wikipedia.org/wiki/List_of_largest_pharmaceutical_settlements)

<sup>19</sup> Lawsuits claiming Merck lied about mumps vaccine efficacy headed to trial, Fierce Vaccines, September 9, 2014, <http://www.fiercevaccines.com/story/lawsuits-claiming-merck-lied-about-mumps-vaccine-efficacy-headed-trial/2014-09-09>