

POLICY NOTE

Vaccines are vital to children's health, even for diseases that now seem rare

By Roger Stark, MD, FACS, WPC Health Care Policy Analyst

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Key Findings

1. *Washington state had the seventh lowest vaccination rate in the country for MMR, eighth lowest for DTaP and second lowest for children receiving all recommended vaccines before starting school.*
2. *Washington state has an exemption rate of 4.7 percent, but 75 percent of these exemptions are for non-medical reasons.*
3. *Vaccines, if given at the appropriate age are nearly 99 percent effective in guarding against serious disease.*
4. *Vaccinating children is not only a matter of family choice, it is an important public health issue.*
5. *To increase public health and safety for everyone, policymakers should set a higher bar for immunization exemptions for children.*

Washington state has the questionable honor of being the location of the first measles death in the United States in 12 years. So far this year, 178 U.S. residents have been diagnosed with the disease.

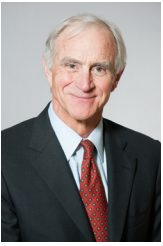
A recent outbreak of measles at Disneyland brought further attention to the issue of vaccination rates among children. With widespread use of the current MMR vaccine (measles, mumps, rubella), contracting measles, once a rite of passage for children, should be a disease relegated to the history books. Unfortunately, the reality is quite different

There are four main reasons children may not receive needed vaccinations. First, the child may have a medical contraindication to vaccines, meaning the injection may be harmful to the child. This exception is non-controversial and is usually the result of an individual's undeveloped immune system. Second, the heart-felt religious beliefs of the parents may preclude vaccines. A third, and related reason, is a general parental philosophy opposing immunization. Last, payment for administering vaccines has historically been low, especially if the doctor or nurse must spend additional time explaining the benefits of immunization to reluctant parents.

Reporting of vaccination rates can be confusing because of various age categories and different types of vaccinations. The federal Center for Disease Control (CDC) reports that in the 2013-2014 cycle, Washington state had the seventh lowest vaccination rate in the country for MMR (10.3 percent unvaccinated), eighth lowest for DTaP (diphtheria, tetanus, pertussis) (9.7 percent unvaccinated) and second lowest for children receiving all recommended vaccines before starting school.

Overall, Washington state has an exemption rate of 4.7 percent, but 75 percent of these exemptions are for non-medical reasons. Even this number does not tell the whole story. There is marked variability in different counties and in different school districts throughout the state. There are geographic areas where non-immunization rates for children are as high as 40 percent.

All states allow medical exemptions, but these represent only 11 percent of all exemptions nationally. Only Mississippi and West Virginia allow just medical exemptions. All states allow legitimate religious exemptions and 20 states allow broader philosophic exemptions.



Dr. Roger Stark is a health care policy analyst at WPC and a retired physician. He is the author of two books including *The Patient-Centered Solution: Our Health Care Crisis, How It Happened, and How We Can Fix It*. He has also authored numerous in-depth studies on health care policy for WPC, including *Health care reform: lowering costs by putting patients in charge*. Over a 12-month period in 2013 and 2014, Dr. Stark testified before three different Congressional committees in Washington DC regarding the Affordable Care Act. He completed his general surgery residency in Seattle and his cardiothoracic residency at the University of Utah. After practicing in Tacoma he moved to Bellevue and was one of the co-founders of the open heart surgery program at Overlake Hospital. He has served on the hospital's governing board.

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Nothing in medicine is 100 percent guaranteed, but vaccines, if given at the appropriate age and in the correct amount, are nearly 99 percent effective in guarding against serious disease. Mild side effects can occur with some vaccines, but serious medical complications are mostly anecdotal and may not be related to the immunization at all.

Parental philosophic concerns should be respected. However, many objections are not founded in reality. For example, the concern of vaccines causing autism has been thoroughly debunked, yet this unfounded belief persists. Andrew Wakefield was a British doctor who linked autism with measles vaccinations in a 1998 article in the *Lancet* medical journal. His research was ultimately discredited, the respected *Lancet* retracted his paper and he lost his medical license. Unfortunately the unproven association of autism with measles vaccine continues.

Another false assumption is that pediatricians, family doctors and drug companies earn a tremendous amount of money administering and manufacturing vaccines; that they cynically want to profit from a procedure that does little for children. Nothing could be further from the truth. The vast majority of physicians do not even cover their expenses with vaccine administration. The federal government sets the price drug companies can charge for vaccines. This price fixing has led to lack of competition and fewer companies producing needed vaccines.

Vaccinating children is not only a matter of family choice, it is an important public health issue. Parents who philosophically oppose vaccinating their children are putting other children at risk, as well as their own. An unvaccinated child is 35 times more likely to contract measles than a child who has received MMR. But vaccinated children are, unfortunately, still at risk because vaccines are not 100 percent effective. Unvaccinated children with medical contraindications are at risk as well.

Parents opposed to vaccinating their children may also argue that the government has no right to force an invasive medical procedure on their kids. This argument has united people across the political spectrum. The tragedy is that this belief puts other children at risk of contracting a life-threatening disease that should have been rendered extinct long ago.

There is no effective way of keeping non-immunized children separated from other kids. Even, when kept close to home, non-immunized children will eventually interact with the public in general.

Immunization is a public health issue that must be put into law. Medical exemptions are understood and they are rare. Philosophical and religious objections must go through a more rigorous process than we have now in Washington state. Although various bills have been proposed in the legislature, our elected officials need to understand that the vast majority of parents and voters favor childhood immunizations. To increase public health and safety for everyone, Washington state policymakers must show the political will to pass legislation that requires a higher bar for immunization exemptions for children.