

[REDACTED]

From: Jodie Wirth <[REDACTED]>
Sent: Monday, 28 September 2015 12:53 PM
To: SARC
Subject: Submission re No Jab No Play policy

I would like to express my objection to the Victorian Government's No Jab No Play legislation recently introduced to parliament. This is a clear breach of the human rights of individuals, something that Ms Hennessy suggests is justifiable.

I would specifically like to respond to Ms Hennessy's override declaration by providing credible information that gives examples of when the vaccinated pose a risk to the community, including vaccinated children attending child care and kindergarten. Many of these risks seem to be unknown to the public and government representatives.

The US Food and Drug Administration (FDA) posted a news release on their website in November 2013. This news release states that research suggests that although individuals immunised with the acellular pertussis(whooping cough) vaccine may be protected from disease, they may still become infected with the bacteria without always getting sick and are able to spread infection to others, including young infants who are susceptible to pertussis disease. A link to the FDA website and the press release in question is listed below. The US Centers for Disease Control and Prevention (CDC) posted a discussion about the resurgence of pertussis(whooping cough) in minutes of their December 2013 meeting. This information shows that a mutant strain of pertussis has been identified that targets the vaccinated and was responsible for 85% of cases of infection in the areas under surveillance.

<http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm376937.htm>
http://www.cdc.gov/maso/facm/pdfs/BSCOID/2013121112_BSCOID_Minutes.pdf

I personally contacted Professor Robert Booy of Australia's National Centre for Immunisation Research and Surveillance (NCIRS) by telephone on 23rd Sep 2015 as I was concerned that this current knowledge about asymptomatic infection and transmission of whooping cough in the vaccinated is not reflected openly in the information available to the Australian public. The NCIRS play a dominant role in vaccination research and the provision of vaccination information in Australia. I was particularly concerned that families involved in the campaign to increase vaccination who have sadly lost a baby to whooping cough, may be unaware of this current knowledge and therefore unknowingly giving information to the public that is a potential danger to newborns. Professor Booy assured me that the NCIRS are aware of this current information as are the families promoting whooping cough vaccination and The Minister for Health, Susan Ley. He advised that whooping cough vaccination during pregnancy is now the recommendation rather than the cocooning of newborns by vaccinating all close contacts. It remains a concern that the wider community are largely unaware of these risks despite the information becoming available close to two years ago. Pertussis(whooping cough) vaccine boosters are still being recommended without full disclosure of the risks of asymptomatic pertussis transmission and the increased risk of infection with a mutant strain of pertussis. It is clear that the No Jab No Play policy may result in fewer identifiable cases of whooping cough within child care centres and kindergartens if the unvaccinated are excluded due to the vaccinated not showing symptoms of infection, but it will not stop the asymptomatic spread of whooping cough within these settings.

It is well recognised that those recently vaccinated with a live viral vaccine also have the potential to transmit. The rotavirus vaccine administered at two, four and six months of age, along with the MMRV vaccine administered at 18 months fall within this category. No measures are being taken to exclude children recently vaccinated with a live viral vaccine from child care centres and kindergartens. Children of conscientious objectors are not the only children within child care centres and kindergartens that are unvaccinated. Children under the recommended age for

vaccination are also unvaccinated, therefore it is possible for those recently vaccinated with a live viral vaccine to transmit to these children and to those who have failed to seroconvert following vaccination. Product information supplied by the makers of the MMRV, Rotarix and Rotateq vaccines explaining the possibility of transmission are linked below.

http://au.gsk.com/media/217228/priorix_tetra_pi_008_approved.pdf

http://au.gsk.com/media/217231/rotarix_liquid_pi_clean.pdf

https://www.merck.com/product/usa/pi_circulars/r/rotateq/rotateq_pi.pdf

Kind regards

Jodie Miers

