

## **Does refusing vaccinations for your children mean you're crazy?**

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Approximately two centuries of clinical experience and scientific research have proven that vaccinations have generally been beneficial to the health of individuals and the public as a whole. They are responsible for dramatic progress in fighting some of the world's most disabling and deadly diseases, perhaps most notably the eradication of smallpox and the prevention of poliomyelitis. Ongoing research continues to develop new vaccines to slow the spread of newly emerging diseases, as well as to battle long-known but ever-evolving pathologic viruses.

Despite the great advances in human health that are widely attributed to vaccines, controversy continues to surround these prophylactic substances—and, in fact, public resistance in the United States is increasingly pushing back against government, medical, and media demands to vaccinate (Blaszczak-Boxe 2016, W.W. 2015, Hotez 2017). A survey conducted by Pew Research Center in 2014 found that 30 percent of Americans believed that the vaccination of children should be a matter for parents to decide rather than being required by government. Among poll respondents aged 18 to 29, 41 percent believed that parents should have the right to make vaccination decisions (Mackey 2017).

The reasons for this substantial public resistance are multiple, including rebellion against what some view as the increasingly excessive power of government, doubts about the honesty and integrity of the medical and scientific establishment, the influence of popular anti-vaccine celebrities, religious motivations, libertarian political motivations, and other factors. And it doesn't matter what respected medical experts and powerful government officials say—some Americans simply do not believe those authorities. Rather, they prefer to follow their own instincts and beliefs and to put trust in their own experiences or in anecdotal evidence that they may have heard from friends, family, or famous people.

So the question arises, should individuals have the right to opt out of medically recommended and legally required vaccination regimens for themselves and their children—for whatever reasons they may have for doing so? Should they be allowed to refuse vaccinations for their children even when to do so might reduce the effectiveness of efforts to protect the overall public health, including the health of other children in school? Moreover, should they be allowed to reject vaccinations even if their rejections are based on scientifically incorrect or questionable ideas?

People opposed to vaccinating their children are widely ridiculed as ignorant “anti-vaxxers.” Yet, various legitimate arguments can be put forth that the answers to the above questions are “Yes.” The goal of the present article is to argue that such a position can be viewed as legitimate, logical, reasonable, and respectable—not necessarily that it is the “correct” position. One can personally support the use of vaccines, while also supporting

the rights of other people do decide if they want to use vaccines for themselves and their children. Such is the stated position of Senator (and ophthalmologist) Rand Paul (W.W. 2015).

### **Freedom of choice, freedom from risk**

Perhaps the most important arguments in favor of the right to refuse vaccinations are based on the concept of individual freedom of choice in regard to life, liberty, and the pursuit of happiness—a concept enshrined in the U.S. Declaration of Independence. Part of freedom of choice is freedom to avoid potential risks for oneself and one's children—no matter how vanishingly small those risks may apparently be. Each of us has a different tolerance for risk. Some people jump out of airplanes wearing fabric wings on their arms and legs, other people refuse to even get into an airplane. The risk of flying on a five-mile-high jumbo jet might be easier for an individual to judge than the risk of an invisible microbe and the mysterious substance injected into the body to fight it. Nevertheless, pharmaceutical companies must admit that any vaccine and any other pharmaceutical product does indeed carry *some* risk of adverse health effects, though they usually make those admissions in tiny lettering or rapidly spoken dialogue. It is not entirely illogical for a mother to decide she does not want to take a chance that her child will be one of those tiny statistics of serious adverse effects.

Adding to the logic and legitimacy of such a decision is the fact that government officials recommend about twice as many vaccines today, in 2017, as they did three decades ago. The greater number of vaccines means a greater chance of rare, adverse vaccine reactions actually happening. The recommended childhood vaccine schedule advocated by the U.S. Centers for Disease Control and Prevention (CDC) in 2017 includes 16 different vaccines administered in 69 doses through age 18 (Parpia 2017). More shots are surely to come eventually. No physician or scientist can predict with accuracy which individual will be the unlucky rarity who becomes harmed by a vaccine, so how can an individual legitimately give his or her informed consent to turn his or her child over to the state for vaccination?

The risk-to-benefit ratio of vaccines is diluted if vaccines are not 100-percent effective, which they are not. No vaccine can be fully guaranteed to prevent the designated disease, because vaccines are imperfect products as soon as they leave the pharmaceutical manufacturing facility. Furthermore, research published in the *Journal of the American Medical Association* in 2012 found an association between reduced childhood vaccine efficacy and exposure to the environmental chemicals known as perfluorinated compounds (PFCs), which are in non-stick pans, water-proof clothing, stain-proof carpeting, and many other commonly encountered materials (Grandjean et al 2012). The efficacy of vaccines is also weakened by their widespread use, because the more they are used, the more evolutionary pressure is placed on the targeted viruses to develop genetic mutations that render the vaccines useless and the microbes more dangerous. This situation is similar to the antibiotic resistance currently creating serious problems for the medical community (Should Parents Be Allowed to Decide About Vaccines? 2014).

## **Personal experience vs. scientific evidence**

Although it is reasonable that everyone deserves to exercise their freedom of choice regarding manufactured chemical combinations that are put into their bodies and their children's bodies, perhaps the most deserving of having their views respected are parents who have observed their children experiencing adverse effects after vaccination. No amount of expert testimony denying any link between the diphtheria, tetanus, and pertussis (DPT) vaccine and encephalopathy or the measles, mumps, and rubella (MMR) vaccine and autism is going to convince a mother who personally observed such a link that it didn't happen. It doesn't help the medical establishment's argument that numerous pharmaceuticals approved for use by the government later had to be withdrawn from the market because of safety or efficacy problems that ultimately became apparent during clinical use. Examples of vaccines withdrawn from the U.S. market include Wyeth Laboratories' rotavirus vaccine in 1999 and GlaxoSmithKline's Lyme disease vaccine in 2002 (U.S. Centers for Disease Control and Prevention 1999, Nigrovic and Thompson 2007).

The CDC acknowledges vaccine withdrawals with the following wording, which is probably not going to reassure many vaccine skeptics:

“There have been only a few vaccine recalls or withdrawals due to concerns about either how well the vaccine was working or about its safety. Several vaccine lots have been recalled in recent years because of a possible safety concern before anyone reported any injury.” (Vaccine Recalls 2015)

Although vaccine advocates frequently belittle parents who are outspoken vaccine skeptics, such as actress and activist Jenny McCarthy (Frontline 2015), what is more logical and understandable for a mother to believe? Her own eyes and her own personal experience, or profit-conscious pharmaceutical companies and government regulators who have been proven wrong before?

## **Solution to dilemma?**

The most obvious argument against allowing personal choice on childhood vaccines is that the threat to other students' health is increased when unvaccinated children are present in school. Surgeon Jeffrey A. Singer, who supports parent choice, has proposed a solution to this dilemma:

“...allow a public school to require that parents keep their children out of school in the event of an outbreak of a contagious disease for which they refused vaccination, and not allow the children back into school until the threat has been deemed to have ended by public health authorities.” (Singer 2015)

That idea would strike a reasonable balance between protecting public health and preserving freedom of choice.

## **Populist rebellion**

The current popular rebellion against vaccines might be viewed as part of the general populist trend against big government, big business, big media, big authority, and big establishment, which has been evident in such developments as the United Kingdom's Brexit referendum in June 2016 and the U.S. election of Donald Trump as president in November 2016. Trump himself has sometimes expressed skepticism about vaccines (Mackey 2017). These developments seem to be reactions against giant government establishments that are always expanding their own power and that of their corporate donors, while reducing the personal choices of regular, common people. Authorities in Brussels set economic rules that people in England had to follow even though they had no say about it. Authorities in Washington ruled that all Americans had to purchase certain types of health insurance and use only certain doctors or else pay a tax penalty...

State laws requiring Americans to inject numerous laboratory-made chemicals into their children in order for their children to attend school—and recent moves by states to clamp down on personal-belief waivers to those requirements (Should Parents be Allowed to Choose Whether to Vaccinate Their Kids? 2015, Fisher 2017)—are seen by many people as yet more excessive, undemocratic, and even tyrannical rules. They resent these rules being foisted on them by faceless and distant bureaucrats, so-called “experts,” and corporate profiteers who they feel cannot be trusted. In the times we live in today, such a view is not illogical.

The rejection of vaccines might also be considered part of another trend—that of seizing control of one's own health and body, rather than automatically obeying establishment medical dogma. Other aspects of this trend include moves to drink raw milk, remove fluoride from public drinking water, eat GMO-free foods, and use drug-free holistic and alternative modes of healthcare. All such efforts to increase personal healthcare freedom are deserving of respect rather than ridicule.

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