



Elizabeth Hart <eliz.hart25@gmail.com>

Re: Query re second MMR vaccine dose

From: **Elizabeth Hart** <eliz.hart25@gmail.com>

Date: Mon, Mar 11, 2013 at 9:39 PM

Subject: Query re second MMR vaccine dose

To: t.nolan@unimelb, atagi.secretariat@health

Cc: Minister.Plibersek@health, Tanya.Plibersek.MP@aph, Peter Collignon, peter.collignon@act, ncirs.schn@health, Peter Charles Doherty, james.wood@unsw, vdemicheli@aslal, vittoriodemicheli@, andrew.kemp1@, katie.allen@mcri, education@allergy, Ron Schultz, "m.j.day", Brian Martin, Teresa Rispoli, Beate Mies, Sandy.Anderson@health, Jessica.Hutchison@health, Monica.Johns@health, Krissa.O'Neil@health

For the attention of:

Professor Terry Nolan

Chair of the Australian Technical Advisory Group on Immunisation (ATAGI)

Professor Nolan

In June 2012 I forwarded [a detailed letter to Federal Health Minister Tanya Plibersek](#) questioning the Government's requirement that children be vaccinated **twice** with the Measles/Mumps/Rubella (MMR) vaccine, **as it is likely most children will already have lifelong immunity after the first dose of this live vaccine**.

Along with others, you were copied on my letter in your position as Chair of the Australian Technical Advisory Group on Immunisation (ATAGI). (For your information, as well as the hyperlink to my letter to Minister Plibersek provided above, a copy of my letter to Minister Plibersek is attached, and the covering email is in the email thread below.)

Minister Plibersek's office has refused to respond to my letter.

Professor Nolan, the Australian Immunisation Handbook (9th Edition) provides [criteria for consent to vaccination to be legally valid](#), i.e.:

- It must be given by a person with legal capacity, and of sufficient intellectual capacity to understand the implications of being vaccinated.
- It must be given voluntarily.
- It can only be given after the relevant vaccine(s) and their potential risks and benefits have been explained to the individual.
- The individual must have sufficient opportunity to seek further details or explanations about the vaccine(s) and /or their administration.

Professor Nolan, bearing in mind the above criteria for legally valid consent to vaccination, **I request that you, in your position as Chair of ATAGI, respond to the questions I originally submitted to Minister Plibersek, i.e.:**

Q1: Is it ethical that government immunisation schedules in countries such as [Australia](#)¹, the [US](#)² and the [UK](#)³ 'recommend' two doses of MMR vaccine, which results in many already immune individuals being needlessly revaccinated?

- Q2: Have safety studies been undertaken in regard to having the second MMR (and MMR + Varicella) vaccine at 18 months, i.e. six months after the first vaccination at 12 months, rather than at four years?**
- Q3: Are the parents of children being informed that one dose of MMR vaccine is likely to confer lifelong immunity, particularly for measles and rubella? Are they being offered the opportunity to sign a consent form that includes this information?**
- Q4: Are people being offered the option of serological testing to verify a response to the vaccine? (I understand the cost for such testing is around \$50 for those cautious parents who may prefer this option rather than arbitrary revaccination.)**
- Q5: Is it ethical for the Australian Government to withhold Family Tax Benefits from families who refuse to have their already immune children revaccinated?**

Professor Nolan I also submit the following additional questions for your response.

The “extract of requirements relating to ATAGI” (document provided to me by Sandy Anderson of the Department of Health and Ageing, in July 2012) notes that all members of ATAGI must complete a Member’s Annual Declaration of Interests form, prior to their appointment to the ATAGI. The extract notes that disclosure of conflicts of interest are also “sought at each meeting as part of routine meeting procedures”. However, looking at recent ATAGI meeting summaries on the Immunise Australia website, I cannot see any notes regarding members’ status as regards conflicts of interest.

- Q.6: Can you please advise if ‘declaration of interests’ information for ATAGI members (i.e. detailing any possible conflicts of interest) is publicly accessible?**

Also, the [ATAGI Bulletin – 48th Meeting](#) notes that the next ATAGI meeting was scheduled to be held on 11-12 October 2012. The minutes of the scheduled ATAGI October 2012 meeting do not appear to be on the Immunise Australia website.

- Q.7: Can you please advise when the minutes of the ATAGI meeting scheduled for 11-12 October 2012 will be publicly available?**

Professor Nolan, I would appreciate your early response to my questions to my email address: eliz.hart25@gmail.com

I also request that this email be circulated to ATAGI Voting Members and Ex-officio Members, as listed below.

Yours sincerely
Elizabeth Hart

cc:

- **ATAGI Secretariat - please circulate this email to ATAGI Voting Members and Ex-officio Members as listed below:**
- **ATAGI Membership at 1 July 2012 – Voting Members:**
 - Assoc. Professor Peter Richmond, Head, School of Population Health, Department of Public Health, University of Melbourne
 - Assoc. Professor Ross Andrews, Senior Lecturer, University of WA School of Paediatrics and Child Health, Princess Margaret Hospital for Children
 - Assoc. Professor Christopher Blyth, Microbiologist, Princess Margaret Hospital for Children
 - Dr Nicole Gilroy, Staff Specialist, Infectious Diseases, Westmead Hospital, Centre for Infectious Diseases and Microbiology, Western Sydney Area Health Service.
 - Ms Madeline Hall, Communicable Diseases Branch, Queensland Health
 - Professor David Isaacs, Clinical Professor, Paediatrics and Child Health, Children’s Hospital Westmead, the University of Sydney
 - Assoc. Professor Jodie McVernon, Program Leader, Vaccine and Immunisation Research Group, Murdoch Children’s Research Institute and Melbourne School of Population Health, University of Melbourne
 - Dr Joanne Molloy, Community Health, General Practitioner

- Ms Debra Petrys, Consumer representative, Consumer Health Forum
 Dr Greg Rowles, General Practice, General Practitioner
 Professor Steven Wesselingh, Executive Director, South Australian Health and Medical Research Institute
- **ATAGI Membership at 1 July 2012 – Ex-officio Members:**
 Dr Ting Lu, Office of Medicines Authorisation, Market Authorisation Group, Therapeutic Goods Administration
 Ms Karen Peterson, Immunisation Manager, Queensland Health
 Professor Peter McIntyre, Director, National Centre for Immunisation Research and Surveillance (NCIRS)
 Ms Julianne Quaine, Assistant Secretary, Health Protection Programs Branch, Department of Health and Ageing
 - **As per letter to Australian Federal Health Minister Tanya Plibersek, dated 28 June 2012:**
 The Hon. Tanya Plibersek, Australian Federal Minister for Health
 Professor Peter Collignon, Director of Infectious Diseases & Microbiology, ACT Government Health
 Professor Robert Booy, Head of Clinical Research, National Centre for Immunisation Research & Surveillance
 Laureate Professor Peter Doherty, Microbiology and Immunology, University of Melbourne
 Dr James Wood, School of Public Health & Community Medicine, University of New South Wales
 Dr Vittorio Demicheli, Cochrane Vaccines Field
 Professor Andrew Kemp, Paediatrics & Child Health, Children's Hospital, Westmead
 A/Professor Katie Allen, Theme Director Environment, Genes & Health Group Leader Gastro & Food Allergy, Murdoch Children's Research Institute
 Dr Raymond Mullins, Immediate Past President, Australasian Society of Clinical Immunology and Allergy
 Professor Ronald Schultz and Professor Michael Day, WSAVA Vaccination Guidelines Group
 Professor Brian Martin, Social Sciences, University of Wollongong

References: (Links current as at 11 March 2013)

- [1] National Immunisation Program Schedule. Immunise Australia Program. Australian Government Department of Health and Ageing: <http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/nips2>
 [2] Birth-18 Years & "Catch-up" Immunization Schedules. United States, 2013: <http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html>
 [3] The NHS vaccination schedule: <http://www.nhs.uk/Conditions/vaccinations/Pages/vaccination-schedule-age-checklist.aspx>

----- Forwarded message -----

From: **Elizabeth Hart** <eliz.hart25@gmail.com>
 Date: Thu, Jun 28, 2012 at 11:44 PM
 Subject: Query re second MMR vaccine dose
 To: Minister.Plibersek@health, Tanya.Plibersek.MP@aph
 Cc: t.nolan@unimelb, peter.collignon@act, ncirs.schn@health, Peter Charles Doherty, james.wood@unsw, vdemicheli@aslal, vittoriodemicheli@, andrew.kemp1@, katie.allen@mcri, education@allergy, Ron Schultz, M.J.Day@bristol, brian_martin@uow

Minister Plibersek

Please find attached a detailed letter which queries the Australian Government's requirement that children be vaccinated twice with the measles/mumps/rubella (MMR) vaccine. Given that it is likely that most children will already have lifelong immunity after the first MMR vaccine dose, arbitrary revaccination of already immune children with a second dose of the controversial MMR vaccine is highly questionable.

In a paper discussing the potential impacts of schedule changes, waning immunity and vaccine uptake on measles elimination in Australia, James Wood et al state:

"One-dose MMR coverage of 96% or greater maintained elimination more effectively than modelled changes in scheduling, **suggesting that maximising one-dose MMR coverage should be the highest priority**". (My emphasis.)

Reference: Wood, JG, Gidding, HF et al. Potential impacts of schedule changes, waning immunity and vaccine uptake on measles elimination in Australia. Vaccine 27 (2009) 313-318.

Surely the emphasis should be on safely and effectively immunising more children with one dose of MMR vaccine, rather than needlessly revaccinating already immune children with a second dose at 18 months or four years?

I am questioning the ethics of the Government's mandated second MMR vaccine dose, particularly in light of the Government's definition of 'fully immunised' for the Family Tax Benefit Part A Supplement, i.e. that children should be vaccinated with measles/mumps/rubella vaccine at 12 months and 4 years from 1 July 2012, and at 12 months and 18 months from 1 July 2013.

This email and letter has also been copied to other people with relevant expertise on this subject, see below, and will be widely circulated elsewhere.

- Professor Terry Nolan, Chair, Australian Technical Advisory Group on Immunisation (ATAGI)
- Professor Peter Collignon, Director of Infectious Diseases & Microbiology, ACT Government Health
- Professor Robert Booy, Head of Clinical Research, National Centre for Immunisation Research & Surveillance
- Laureate Professor Peter Doherty, Microbiology and Immunology, University of Melbourne
- Dr James Wood, School of Public Health & Community Medicine, University of New South Wales
- Dr Vittorio Demicheli, Cochrane Vaccines Field
- Professor Andrew Kemp, Paediatrics & Child Health, Children's Hospital, Westmead
- A/Professor Katie Allen, Theme Director Environment, Genes & Health Group Leader Gastro & Food Allergy, Murdoch Children's Research Institute
- Dr Raymond Mullins, Immediate Past President, Australasian Society of Clinical Immunology and Allergy
- Professor Ronald Schultz and Professor Michael Day, WSAVA Vaccination Guidelines Group
- Professor Brian Martin, Social Sciences, University of Wollongong

I would appreciate your early consideration of my letter and a response to my email address: eliz.hart25@gmail.com

Yours sincerely
Elizabeth Hart