



# Oppose

## S. 2707 Skelos/A. 5543 Weisenberg

### AN ACT TO AMEND THE PUBLIC HEALTH LAW, IN RELATION TO THE PROHIBITION OF THE USE OF MERCURY IN VACCINES.

The New York State Association of County Health Officials (NYSACHO), representing all 58 local health departments in New York State, opposes the above referenced legislation, which would add a new section to the public health law to prohibit the administration of any immunization or vaccine containing mercury, or any mercury-based additives, preservatives, or disinfectants.

The Public Health Officials of NYSACHO oppose this bill as both unnecessary and potentially harmful for the following reasons:

1. While recognizing the great public concern regarding the effects of mercury exposure on personal health and the environment, this bill mandating the removal of mercury from vaccines addresses the organic ethyl mercury compound thimerosal. Thimerosal is different from inorganic mercury salts and methyl mercury and extreme caution must be used in generalizing risk assessments based on these other compounds. They are not equivalent. In fact, thimerosal is excreted much more rapidly from the body than methyl mercury and has a different toxicological profile (ATSDR Toxicological Profile on Mercury).
2. Thimerosal has been used as a preservative in multi-dose vaccine vials since the 1930's in order to protect vaccine recipients from the potential harm of bacterial or fungal contamination of multi-dose vaccine vials. Modern manufacturing has allowed the use of other preservatives or the removal of thimerosal to a maximum of trace levels in many vaccines. Over time, more and more vaccines are becoming thimerosal-free as a precautionary measure. No scientific study to date has been able to demonstrate any adverse health effects resulting from the addition of thimerosal to any vaccine.
3. Most importantly, thimerosal is no longer found in any vaccine routinely recommended for routine childhood immunization under the age of 6 years with the exception of influenza vaccine. Influenza vaccine is recommended by the American Academy of Pediatrics for children ages 6-23 months. This recommendation is made to reduce disease morbidity and mortality from influenza in a vulnerable population. Although there is some thimerosal-free influenza vaccine, there is not enough to meet the needs of the population. The intranasal flu vaccine, which is thimerosal-free, is only approved for children ages 5 years and older. Immediate removal of all thimerosal-containing vaccine would severely compromise the influenza vaccine supply. The lack of flu vaccine would have a profound impact on our most vulnerable populations, especially the elderly. In addition, this is particularly important consideration as the public health community works to address the problems of inadequate flu vaccine supply for even our most vulnerable populations and the possibility of an Avian influenza outbreak. Anything that slows or compromises flu vaccine development could have catastrophic results.
4. The American Academy of Pediatrics has stated that all children should continue to be immunized against the diseases indicated in the recommended immunization schedule. The risk of not-vaccinating children far outweighs any theoretical risk of thimerosal-containing vaccine.
5. Finally, the Institute of Medicine issued a report in May 2004 on thimerosal and autism, having considered most recent epidemiological studies and biological mechanism theories. They conclude that "the evidence favors rejection of a causal relationship between thimerosal containing vaccines and autism". Therefore, the fear of a link between autism and thimerosal, which has been a driving force behind some of these legislative efforts, cannot be substantiated.

NYSACHO concludes that this law, while well-intentioned, would cause potential harm from a resulting inadequacy of vaccine supply, particularly influenza vaccine, and therefore strongly opposes the enactment of S. 2707/A. 5543.

Senate Health Committee  
Assembly Health Committee  
3/16/05

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