Comments in Opposition

S. 151 - Introduced April 27, 2023 "Minor Consent to Preventive Services and Treatment"

Jennifer Stella, co-Director Health Choice Vermont

§ 1107. CONSENT TO PREVENTIVE SERVICES AND TREATMENT BY MINORS

- (a) A minor 12 years of age or older may consent to medical care by a licensed physician related to the prevention of a sexually transmitted infection.
- (b) Consent under this section shall not be subject to disaffirmance due to minority of the individual consenting. The consent of the parent or legal guardian of a minor consenting under this section shall not be necessary to authorize care as described in this subsection.

VT LEG #374497 v.1 (Draft No. 1.1 – S.151) Page 4 of 14 2/12/2024 - JGC - 11:47 AN

The bill is ... not "just about information"

Preventative services for STIs include HPV and hepatitis B vaccines

(... and many more products under development ...)

to be given to child/teen

Additional Testimony Submitted: Please Read!

- * Letter from Siri/Glimstad, delivered by email on May 10, 2024 http://www.healthchoicevt.com/wp-content/uploads/2024/01/Letter-to-Vermont-State-Assembly-2023_05_10.pdf (also hand-delivered in Jan., Feb. '24 with request to testify in person)
- * Letter from Children's Health Defense (Mary Holland JD and Kim Mack Rosenberg JD), delivered by email on Feb 29, 2024 http://www.healthchoicevt.com/wp-content/uploads/2024/03/2024-02-29-CHD-Written-testimony-in-opposition-to-minor-consent-.pdf, with request to testify in person.

- Parent Concerns
- Lack of liability
- Insufficient testing
- Inadequate risk and warning information
- Injuries reported and piling up but ignored
- Predatory direct to consumer marketing practices
- Every vaccine manufacturer has been found guilty, been fined by the US gov't for fraud pertaining to other products...

VACCINE INFORMATION STATEMENT

HPV (Human Papillomavirus) Vaccine: What You Need to Know

Many vaccine information statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

6. The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines. Claims regarding alleged injury or death due to vaccination have a time limit for filing, which may be as short as two years. Visit the VICP website at www.hrsa.gov/vaccinecompensation or call 1-800-338-2382 to learn about the program and about filing a claim.

7. How can I learn more?

How will the parent be able to help the child/teen make a claim for compensation?

Will the child even get medical care they need if the parent does not know they have been vaccinated??

VACCINE INFORMATION STATEMENT

Hepatitis B Vaccine:

What You Need to Know

Many vaccine information statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

3. Talk with your health care provider

Tell your vaccination provider if the person getting the vaccine:

 Has had an allergic reaction after a previous dose of hepatitis B vaccine, or has any severe, lifethreatening allergies How will the child/teen know this information?

What if they are allergic to a vaccine component and do not know they are about to have an allergic reaction?



Does the child/teen know how to read labels and understand which ingredients might be harmful to their health?

Appendix B

Vaccine Excipient Summary

"The following table lists substances, other than active ingredients (i.e., antigens), shown in the manufacturers' package insert (PI) as being contained in the final formulation of each vaccine. Substances used in the manufacture of a vaccine but not listed as contained in the final product (e.g., culture media) can be found in each PI, but are not shown on this table. Each PI, which can be found on the FDA's website (see below) contains a description of that vaccine's manufacturing process, including the amount and purpose of each substance. In most PIs, this information is found in Section 11: "Description." Please refer to the PI for a complete list of ingredients or excipients.

Hep B (Engerix-B)	01/2021 ^(b)	aluminum hydroxide, yeast protein, sodium chloride, disodium phosphate dihydrate, sodium dihydrogen phosphate dihydrate
Hep B (Recombivax)	12/2018	formaldehyde, potassium aluminum sulfate, amorphous aluminum hydroxyphosphate sulfate, yeast protein
Hep B (Heplisav-B)	05/2020	yeast protein, yeast DNA, deoxycholate, phosphorothioate linked oligodeoxynucleotide, sodium phosphate, dibasic dodecahydrate, sodium chloride, monobasic dehydrate, polysorbate 80
Hep A/Hep B (Twinrix)	01/2021 ^(b)	MRC-5 cellular proteins, formalin, aluminum phosphate, aluminum hydroxide, amino acids, sodium chloride, phosphate buffer, polysorbate 20, neomycin sulfate, yeast protein
HPV (Gardasil 9)	08/2020	amorphous aluminum hydroxyphosphate sulfate, sodium chloride, L-histidine, polysorbate 80, sodium borate, yeast protein

[&]quot;https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/b/excipient-table-2.pdf

Package Insert: Hepatitis B Vaccine

17 PATIENT COUNSELING INFORMATION

Information for Vaccine Recipients and Parents/Guardians

- Inform the patient, parent or guardian of the potential benefits and risks associated with vaccination, as well as the importance of completing the immunization series.
- Question the vaccine recipient, parent or guardian about the occurrence of any symptoms and/or signs of adverse reaction after a previous dose of hepatitis B vaccine.
- Tell the patient, parent or guardian to report adverse events to the physician or clinic where the vaccine was administered.
- Prior to vaccination, give the patient, parent or guardian the Vaccine Information Statements which are required by the National Vaccine Injury Act of 1986. The materials are available free of charge at the Centers for Disease Control and Prevention (CDC) website (www.cdc.gov/vaccines).
- Tell the patient, parent or guardian that the United States Department of Health and Human Services has established a Vaccine Adverse Event Reporting System (VAERS) to accept all reports of suspected adverse events after the administration of any vaccine, including but not limited to the reporting of events by the National Childhood Vaccine Injury Act of 1986. The VAERS toll-free number is 1-800-822-7967. Reporting forms may also be obtained at the VAERS website at (www.vaers.hhs.gov).

Manuf. and Dist. by: Merck Sharp & Dohme Corp., a subsidiary of **MERCK & CO., INC.,** Whitehouse Station, NJ 08889, USA

For patent information: www.merck.com/product/patent/home.html

Package Insert: Hepatitis B Vaccine

6.2 Post-Marketing Experience

The following additional adverse reactions have been reported with use of the marketed vaccine. Because these reactions are reported voluntarily from a population of uncertain size, it is not possible to reliably estimate their frequency or establish a causal relationship to a vaccine exposure.

Immune System Disorders

Hypersensitivity reactions including anaphylactic/anaphylactoid reactions, bronchospasm, and urticaria have been reported within the first few hours after vaccination. An apparent hypersensitivity syndrome (serum-sickness-like) of delayed onset has been reported days to weeks after vaccination, including: arthralgia/arthritis (usually transient), fever, and dermatologic reactions such as urticaria, erythema multiforme, ecchymoses and erythema nodosum [see Warnings and Precautions (5.1)]. Autoimmune diseases including systemic lupus erythematosus (SLE), lupus-like syndrome, vasculitis, and polyarteritis nodosa have also been reported.

Gastrointestinal Disorders

Elevation of liver enzymes; constipation

Nervous System Disorders

Guillain-Barré syndrome; multiple sclerosis; exacerbation of multiple sclerosis; myelitis including transverse myelitis; seizure; febrile seizure; peripheral neuropathy including Bell's Palsy; radiculopathy; herpes zoster; migraine; muscle weakness; hypesthesia; encephalitis

Skin and Subcutaneous Disorders

Stevens-Johnson syndrome; alopecia; petechiae; eczema

Musculoskeletal and Connective Tissue Disorders

Arthritis

Pain in extremity

Blood and Lymphatic System Disorders

Increased erythrocyte sedimentation rate; thrombocytopenia

Psychiatric Disorders

Irritability; agitation; somnolence

Eve Disorders

Optic neuritis; tinnitus; conjunctivitis; visual disturbances; uveitis

Cardiac Disorders

Syncope; tachycardia

While teens need to feel heard and want confidentiality, what would you do if your child or grandchild consented and then suffered death or irreversible harm if they had a reaction? Is that a phone call you'd like to receive?

National Vaccine Injury Compensation Program Monthly Statistics Report

Fiscal Year	Number of Compensated Awards	Petitioners' Award Amount	Attorneys' Fees/Costs Payments	Number of Payments to Attorneys (Dismissed Cases)	Attomeys' Fees/Costs Payments (Dismissed Cases)	Number of Payments to Interim Attorneys'	Interim Attorneys' Fees/Costs Payments	Total Outlays
FY 2020	733	\$186,860,677.55	\$20,165,188.43	114	\$5,774,438.88	76	\$5,090,482.24	\$217,890,787.10
FY 2021	719	\$208,258,401.31	\$24,944,964.77	140	\$6,920,048.74	53	\$4,249,055.37	\$244,372,470.19
FY 2022	927	\$195,693,889.57	\$22,992,062.07	102	\$4,868,964.74	56	\$6,329,886.09	\$229,884,802.47
FY 2023	885	\$123,810,693.81	\$35,827,569.92	126	\$6,760,733.64	61	\$7,443,004.19	\$173,842,001.56
FY 2024	561	\$68,065,462.96	\$14,431,281.67	65	\$4,510,297.90	18	\$1,446,518.10	\$88,453,560.63
Total	→ 10,666	\$4,666,990,418.61	\$324,546,276.26	6,004	\$114,295,946.52	751	\$62,544,549.81	\$5,168,377,191.20

NOTE: Some previous fiscal year data has been updated as a result of the receipt and entry of data from documents issued by the Court and system updates which included petitioners' costs reimbursements in outlay totals.

"Compensated" are petitions that have been paid as a result of a settlement between parties or a decision made by the U.S. Court of Federal Claims (Court). The # of awards is the number of petitioner awards paid, including the attorneys' fees/costs payments, if made during a fiscal year. However, petitioners' awards and attorneys' fees/costs are not necessarily paid in the same fiscal year as when the petitions/petitions are determined compensable. "Dismissed" includes the # of payments to attorneys and the total amount of payments for attorneys' fees/costs per fiscal year. The VICP will pay attorneys' fees/costs related to the petition, whether or not the petition/petition is awarded compensation by the Court, if certain minimal requirements are met. "Total Outlays" are the total amount of funds expended for compensation and attorneys' fees/costs from the Vaccine Injury Compensation Trust Fund by fiscal year.

Since influenza vaccines (vaccines administered to large numbers of adults each year) were added to the VICP in 2005, many adult petitions related to that vaccine have been filed, thus changing the proportion of children to adults receiving compensation.

→ Petitions Filed, Compensated and Dismissed, by Alleged Vaccine, Since the Beginning of VICP, 10/01/1988 through 03/01/2024

Vaccines	Filed Injury	Filed Death	Filed Total	Compensated	Dismissed
DT	69	9	78	26	52
DTaP	497	88	585	261	281
DTaP-Hep B-IPV	105	42	147	50	72
DTaP-HIB	11	1	12	7	4
DTaP-IPV	18	0	18	8	5
DTaP-IPV-HIB	53	22	75	19	44
DTaP-IPV-HIB-HEPB	0	0	0	0	0
DTP	3,289	696	3,985	1,273	2,711
DTP-HIB	20	8	28	7	21
Нер А-Нер В	47	0	47	24	9
Hep B-HIB	10	0	10	5	3
Hepatitis A (Hep A)	147	8	155	76	45
Hepatitis B (Hep B)	762	62	824	309	455
HIB	50	3	53	23	22
HPV	873	23	896	176	520
Influenza	9,741	239	9,980	6,191	1,080
IPV	269	14	283	10	271
Measles	145	19	164	57	107
Meningococcal	136	3	139	70	31
MMR	1,058	63	1,121	434	619
MMR-Varicella	63	2	65	28	22
MR	15	0	15	6	9
Mumps	10	0	10	1	9
Nonqualified ¹	119	13	132	3	128
OPV	282	28	310	158	152
Pertussis	4	3	7	2	5
Pneumococcal Conjugate	358	26	384	154	101
Rotavirus	121	6	127	76	33
Rubella	190	4	194	71	123
Td	245	3	248	143	81
Tdap	1,288	9	1,297	769	165
Tetanus	200	3	203	113	50
Unspecified ²	5,427	9	5,436	11	5,419
Varicella	119	11	130	75	40
Grand Total	25,741	1,417	27,158	10,636	12,689

¹ Nonqualified petitions are those filed for vaccines not covered under the VICP.
² Unspecified petitions are those submitted with insufficient information to make a determination.



Who benefits from direct-to-consumer pharmaceutical advertising?

March 12 2024



A new study co-authored by a University of Massachusetts Amherst

...we can almost certainly expect an advertising blitz aimed at child/teen target age groups... After the U.S. Advisory Committee on Immunization Practices (ACIP) recommended in 2014 that people aged 65 and over receive the pneumococcal vaccine Prevnar 13, Medicare and private insurance plans began covering the vaccine for patients.

Pfizer, the sole manufacturer of the vaccine, then launched an advertising blitz to encourage older Americans to get vaccinated. Over the ensuing five years, the number of seniors who received the vaccine increased by about 10%, or 2.5 million people, and sales of Prevnar 13 grew by roughly \$1 billion annually.

"Our results suggest there is real value to vaccine manufacturers in winning a recommendation from ACIP, and that direct-to-consumer advertising of pharmaceuticals is not the unequivocal boogeyman that some people think it is," says Brandyn Churchill, assistant professor of resource economics at UMass Amherst. "It can be an effective tool to achieve public health objectives—as long as the incentives are aligned."

In this case, the incentives were perfectly aligned: ACIP's policy goal was to encourage more older adults to get vaccinated against <u>bacterial</u> <u>pneumonia</u>, and Pfizer wanted to sell more vaccines. "

https://medicalxpress.com/news/2024-03-benefits-consumer-pharmaceutical-advertising.html

December 14, 2023: PUBLIC CITIZEN

Mapping the PhRMA Grant Universe: An analysis of the \$6 billion in grants distributed by PhRMA and its **member companies**: "The pharmaceutical industry is one of the most powerful industries in the nation. And until recently, with the passage of the Inflation Reduction Act (IRA), the industry had managed to fight off virtually all attempts to rein in outrageous drug prices. The industry's lobbying, campaign contributions, and paid media campaigns are no doubt a major reason they were able to stave off reform for so long. This report delves into another, less scrutinized reason: the billions in grants the industry has given out to the most powerful advocacy organizations in the country."

https://www.citizen.org/article/mapping-the-phrma-grantuniverse/



Mapping the PhRMA Grant Universe

citizen.org/article/mapping-the-phrma-grant-universe





https://kumu.io/mtanglis/phrma#phrma-grant-universe/american

AMERICAN ACADEMY OF PEDIATRICS

TOTAL GRANT AMOUNT

\$10,281,223

DONOR BREAKDOWN

- Pfizer Inc. \$8,060,580
- Johnson & Johnson \$1,717,685
- PhRMA \$360.000
- Sanofi \$108.500
- AstraZeneca Pharmaceuticals LP \$20.000
- Takeda Pharmaceuticals USA, Inc. \$13,943
- Bristol Myers Squibb \$515

YEARLY BREAKDOWN

- **2022** (\$378,872)
- 2021 (\$255,515)
- 2020 (\$76,000)
- 2019 (\$65,500)
- **2018** (\$96,500)
- **2017** (\$801,753)
- **2016** (\$2,163,000)
- **2015** (\$2,385,591)
- **2014** (\$273,943)
- 2013 (\$988.500)
- **2012** (\$1,025,994)
- **2011** (\$852,293)
- **2010** (\$917,762)

TOTAL GRANT FUNDING

\$10,000,000 - \$49,999,999

Questions:

- Who would be the person transporting a minor aged 12+ to acquire preventative care and treatment services?
- Can a minor 12+ receive STI prevention and treatments at school?
- Who is providing these vaccines and treatments to minors 12+?
- Who is covering the costs associated with STI preventative care and treatments, complications from treatments, and vaccine reactions and injuries performed without parental knowledge and consent?
- Who is responsible for the minor aged 12+ if complications and reactions from preventative and treatment services performed without parental knowledge and consent become severe?
- What if the minor is afraid to tell their parents they are experiencing a reaction? to a treatment or vaccine that they received without their parents' knowledge or consent, and end up experiencing more severe complications and injuries as a result of a lack of prompt medical attention?

Colton - HPV vaccine victim



"5 years ago today my oldest son Colton Berrett became paralyzed from the neck down and ventilator dependent due to the Gardasil "HPV" vaccine. Tragically he lost the ability to do EVERYTHING including breathe on his own. He strived so hard to recover but his body failed him over and over. Through it all he maintained a beautiful smile on his face including the day he died Jan 5, 2018.

We miss you Colton! Im sorry i didn't know the vaccines side effects would end up killing you. " ~Kathleen Berrett

RiP Colton 🙏



From the 2/23/2024 release of VAERS data:

Found 75,939 cases where Vaccine is HPV2 or HPV4 or HPV9 or HPVX

Government Disclaimer on use of this data

Table

↓		Λ ψ
Event Outcome	Count	
Death	631	
Life Threatening	1,168	
Permanent Disability	3,711	
Birth Defect	20	
Hospitalized	7,673	
Hospitalized, Prolonged	314	
Emergency Doctor/Room	1,450	
Emergency Room	15,426	
Office Visit	3,590	
Recovered	25,588	
None of the Above	32,751	

VAERS data at medalerts.org

https://medalerts.org/vaersdb/findfield.php?TABLE=ON&GROUP1=CAT&EVENTS=ON&PERPAGE=10000&VAX[]=HPV2&VAX[]=HPV9&VAX[]=HPVVA&VAX[]=HPVA

Sadly, he is one of more than 600 reported deaths. What if her were your son - and you did not even know what happened?

Additional Concerns

- The bill does not require that efforts be made to contact parents prior to vaccination and get written consent.
- The bill does not require the vaccine provider obtain a complete medical history from the minor's primary care provider.
- The bill does not require the nonparental consenting minor to fully read the appropriate CDC Vaccine Information Statement or to be offered the manufacturer's vaccine package insert, prior to being vaccinated.
- The bill does not require that all nonparental consenting minors be vaccinated in a physician's office - and not at a school clinic, mass vaccination site, pharmacy, reproductive care clinic or other location.

- The bill does must ensure the minors cannot be bribed, bullied or coerced to get a vaccination.
- The bill does not require the nonparental consenting minor\'s parent(s) be notified immediately after the vaccination is administered.
- The bill allows minors to consent; they should also have a protected right to refuse vaccination without parental input.
- The vaccine provider should agree to report, document, evaluate, refer and provide for treatment of any adverse reaction following the vaccination for up to 3 years afterward.
- The vaccine provider should be required to get informed, written consent from the child and provide the VIS, the lot number, and the on-call phone number of the administering provider in case of emergency.

Respectful Requests ...We URGE YOU to:

>Withdraw the entire proposal to give access to children without parental consent

>Add: No health care provider or clinic or school or other entity may offer an incentive to a student or parent of a student in exchange for participation in preventative or treatment services provided.

>Add: A student's parent or guardian must provide written informed consent for the student to receive services at a school based health center, and the parent must be present at the time the student receives services at a school based health center.

>Add: Requirement for true informed consent before any shot is administered

- example:

(Amend Sec. 1. 12 V.S.A. § 1909 - LIMITATION OF MEDICAL MALPRACTICE ACTION BASED ON LACK OF INFORMED CONSENT)

With regard to the administration of vaccination, "lack of informed consent" means:

(1) failure to provide a person, or in the case of a minor, the person's parent or guardian with a copy of the relevant vaccination package insert at least 24 hours prior to administering the vaccination;

(2) failure to inform a person, or in the case of a minor, the person's parent or guardian that the person may consent or refuse any vaccination without threat, coercion, or punitive measures resulting; and

(3) failure to obtain prior written consent from a person, or in the case of a minor, the person's parent or guardian prior to administration of an vaccination.

Sec. 2. 18 V.S.A. § 1133 is added to read:

§ 1133. INFORMED CONSENT FOR THE ADMINISTRATION OF VACCINATIONS

The administration of any vaccination shall require obtaining informed WRITTEN consent in accordance with 12 V.S.A. § 1909(f).

