



February 15, 2024

The Honorable Brad Wenstrup
Chair, Select Subcommittee on
the Coronavirus Pandemic
Committee on Oversight and Accountability
United States House of Representatives
Washington, D.C. 20515

The Honorable Raul Ruiz
Ranking Member, Select Subcommittee on
the Coronavirus Pandemic
Committee on Oversight and Accountability
United States House of Representatives
Washington, D.C. 20515

Dear Chairman Wenstrup and Ranking Member Ruiz,

We, the undersigned immunization, public health, and medical organizations and individuals write to express our strong support for the United States' vaccine safety systems. Indeed, we believe the U.S.'s vaccine safety systems are some of the most comprehensive in the world. Public policy that facilitates strong vaccine safety systems is in the best interest of us all. While vaccines are among the most rigorously tested and safest medical products on the market, and COVID-19 vaccines – like all vaccines – continue to be carefully monitored for safety, vaccine safety monitoring would benefit tremendously from sustained increased funding to take advantage of new capacity in big data, understanding the biological mechanisms underlying adverse reactions, and genomics.

During the COVID-19 vaccine rollout, twelve separate U.S. systems monitored the safety of COVID vaccines, namely: V-Safe, Vaccine Adverse Events Reporting System (VAERS), Vaccine Safety Datalink (VSD), Clinical Immunization Safety Assessment Project (CISA), National Healthcare Safety Network, Food and Drug Administration's (FDA's) Biologics Effectiveness and Safety System, FDA's Sentinel Initiative, the Centers for Medicare and Medicaid Services (CMS) Health Records Database, Genesis, and systems utilized by the Department of Veterans Affairs, Department of Defense, and Indian Health Services.

This network of monitoring meant there was tight coordination between the Centers for Disease Control and Prevention (CDC) and government agencies, hospital systems, insurance claims data, and both healthcare provider and patients reports. As a result, public health officials were able to quickly identify any signal that could indicate there was a problem with the safety of COVID vaccines. Just such a signal appeared in the Spring of 2021, when Johnson & Johnson's vaccine was found to cause a rare clotting disorder known as thrombosis with thrombocytopenia, or TTS. This signal was therefore critical in helping healthcare providers identify patients with TTS and treat them more effectively. It also meant that the Johnson & Johnson vaccine was ultimately not considered for full FDA approval.

Another signal occurred just a few months later when it was determined the mRNA vaccines could potentially cause myocarditis and pericarditis in young men. As of January 2022, there were 1,626 reported cases of myocarditis among 192,405,448 vaccinated people. Our safety systems were sensitive enough to detect a condition that occurs in 0.000845 percent of people.

We appreciate that Congress can and should ask probing questions about all aspects of the COVID-19 response, including our vaccine safety monitoring systems. Only through careful oversight can we be better prepared for the next, inevitable pandemic. It is important to remember, however, that if these hearings are not handled carefully they can lead to unintended consequences.

In 2000 and 2002, the House Oversight Committee held hearings to investigate whether childhood vaccines could cause or contribute to the development of autism. There was little scientific evidence available at that time to prove or disprove this hypothesis. Small, single studies had posited two hypotheses, but the scientific community was far from convinced there was a connection. Nevertheless, some Members of Congress gave the small, unduplicated studies more weight than other government and independent experts.

Unfortunately, the media then reduced these hearings to a handful of soundbites. While the scientific community worked to determine whether there was any truth to these claims, people simply remembered the concern of Members of Congress as seen on TV. When the Institutes of Medicine released a report in 2004 determining there was no connection between vaccines and autism, there were no further Congressional hearings to clear up the matter. Therefore, the last thing many parents remembered was the initial claim and not the later evidence disproving a connection.

In 2019, prior to the COVID pandemic, the U.S. nearly lost its measles elimination status. Thirty-one states reported a total of 1,274 cases of measles that year. Instead of simply imported cases, people were once again spreading measles in their own communities. Fifty-eight measles cases were reported in 2023 and as of January 25, 2024, we already have nine cases across four states. The CDC has reported that vaccine exemptions have reached an all-time high across the United States. Vaccination coverage rates have fallen in at least 25 states for chickenpox, polio, measles, mumps, rubella, diphtheria, whooping cough, and tetanus vaccines.

Our country is at a tipping point in immunization. Congress is uniquely positioned to assure the public that your oversight of our vaccination safety systems is fair and unbiased, keeping our vaccines as safe and effective as possible. Your approach is critical to not just the current health of our people, but the future health of our country. We urge you to focus your oversight on how we can expand and better support our vaccine safety systems.

Sincerely,

Alliance for Immunizations in Michigan (AIM)
American Academy of Family Physicians
American Academy of Pediatrics
American College Health Association (ACHA)
American College of Obstetricians and Gynecologists
American Diabetes Association
American Heart Association
American Lung Association
American Public Health Association
Association for Professionals in Infection Control and Epidemiology
Association of American Indian Physicians
Association of American Medical Colleges
Association of Immunization Managers
Association of State and Territorial Health Officials
AVAC: Advocacy. Access. Equity.
Big Cities Health Coalition
Brighton Collaboration
California Immunization Coalition
Doctors Fighting Covid, LLC
Doctors for America
First Focus on Children
Gerontological Society of America
HealthyWomen
Immunize Colorado
Immunize South Dakota
Immunize.org
Infectious Diseases Society of America
Kansas Action for Children
Louisiana Families for Vaccines
Marked By Covid
Minnesota chapter, American Academy of Pediatrics
National Association of County and City Health Officials
National Association of Pediatric Nurse Practitioners
National Council on Aging (NCOA)
National Foundation for Infectious Diseases
National Hispanic Health Foundation
National Hispanic Medical Association (NHMA)
Oklahoma Caring Foundation
Oregon Families for Vaccines
Pediatric Infectious Diseases Society
Pediatric Nurse Practitioner House Calls
SAFE Communities Coalition

Society for Healthcare Epidemiology of America
South Dakota Families for Vaccines
Southeast Minnesota Immunization Connection
Stanford Medicine
STChealth
Tennessee Families for Vaccines
The Immunization Partnership
The National Alliance to Advance Adolescent Health
The Task Force for Global Health
Trust for America's Health
Vaccinate Your Family
Vaccine Education Center at the Children's Hospital of Philadelphia
Voices for Vaccines

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