

MaineHealth

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Maine Behavioral Healthcare Memorial Hospital
Maine Medical Center
NorDx
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Southern Maine Health Care
Synernet
Waldo County General Hospital
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MaineGeneral Health
Mid Coast-Parkview Health
New England Rehabilitation Hospital of Portland
St. Mary's Health System

Testimony of John Bancroft, MD, Chair of Pediatrics Maine Medical Center and The Barbara Bush Children's Hospital

In Support of LD 798

“An Act To Protect Maine Children and Students from Preventable Diseases by Repealing Certain Exemptions from the Laws Governing Immunization Requirements”

March 13, 2019

Senator Millett, Representative Kornfield, and distinguished members of the Joint Standing Committee on Education and Cultural Affairs, I am Dr. John Bancroft, Chair of Pediatrics at Maine Medical Center and The Barbara Bush Children's Hospital. I've provided medical care to children for over 35 years. I am here to testify in support of LD 798 and in opposition to LD 987.

At The Barbara Bush Children's Hospital and our affiliated practices we care for hundreds of children from around the state who, for medical reasons, cannot receive immunizations or whose immune system does not respond to them. Some are born with immune deficiencies while others are at risk because of treatments for other serious conditions like cancer, autoimmune disorders, or Crohn's Disease. Those children must rely on community immunity that limits the risk of exposure when contagious diseases enter the community. When they contract these infections, the results can be devastating.

Thousands of children across Maine are simply too young to receive the series of immunizations for measles, chicken pox or whooping cough. They are also some of the most vulnerable. In the very young, these diseases frequently result in hospitalization and sometimes disability or death.

Measles and chicken pox are exquisitely contagious. During the contagious periods, simply being in the same building or the same school bus, without any physical contact, can result in transmission of the disease to those without immunity. The contagious period, the time when these diseases can be easily transmitted to others, begins before children have obvious symptoms. Thus, isolating children once they have a fever or rash is insufficient to protect others. As reported by the US Centers for Disease Control (CDC), in a recent New York outbreak of measles, a single child without symptoms attending school resulted in the infection of 21 additional children, all unimmunized.

These vaccine-preventable diseases are not child's play. Before immunization for measles became available in the early 1960s, over 45,000 people were hospitalized and 400-500 people died in the United States each year from measles.

Education of patients and families about immunizations is critically important. All health care providers across the U.S. are required to provide adults and children information on the benefits and risks of vaccines before they are administered using documents produced by the US CDC called Vaccine Information Statements. This information is required to be provided to patients and families before every dose of specific vaccines.

Some suggest that these illnesses are rare and the risk of exposure is too low to worry. Recent data show this is incorrect. As reported recently by PBS, there were 349 cases of measles in New York and New Jersey in 2018. An outbreak in Washington State and Oregon this year has affected at least as many and is not yet contained.

The ease of travel today means that these diseases are frequently introduced into communities. Community immunity is critical to keep spread of disease to a minimum. When community immunity for measles falls below 95%, infection spreads more easily among susceptible individuals, including those too young to be immunized and others who for medical reasons cannot be protected with immunizations. Five Maine counties had immunization rates for whooping cough and seven for measles below that threshold at Kindergarten entry in 2018, indicating we are at risk of wide spread of disease when it is introduced into our classrooms. LD 798 would close this gap. None of the Maine counties had a medical exemption rate greater than 1%.

Current Maine Department of Health and Human Services' rules follow the US CDC standards for medical exemptions for vaccines. LD 798 does not change the current process or standards for medical exemptions. I stand opposed to LD 987 because this bill would allow medical exemptions for reasons beyond the standard.

Maine children deserve to attend school and child care without a heightened risk of exposure to vaccine-preventable infections. Consider the children fighting cancer, those with impaired immunity, and the over 12,000 Maine children born each year who are too young to receive some immunizations. They are at particular risk.

For those reasons, I urge the Committee to support LD 798 and to oppose LD 987. Thank you and I would be happy to answer any questions you may have.