



House Bill 394  
*Letter of Opposition*

February 10, 2006

615 N. Wolfe Street  
Suite w5041  
Baltimore, Maryland 21205

The Honorable Peter A. Hammen, Chair  
House Health & Government Operations Committee  
Lowe House Office Building, Room 161  
Annapolis, MD 21401-1912

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**RE: House Bill 394**

Dear Chairman Hammen,

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COORDINATOR

On behalf of the Institute for Vaccine Safety at the Johns Hopkins Bloomberg School of Public Health, we would like to voice our **opposition** to House Bill 394. House Bill 394 would prevent the administration of any vaccine that contains any amount of mercury after June 1, 2009. Although this bill is well-intentioned, it could impair our ability to protect Marylanders against influenza, tetanus, pertussis, and diphtheria. In this regard, would like to offer you more information pertaining to the current status of administered vaccines in Maryland.

Several years ago, there was justified concern about the amounts of mercury-containing thimerosal preservatives used in the vaccines of that day. In 1999, at the time when the potential problem with this product was first identified, we worked assiduously with other professionals at the Johns Hopkins Bloomberg School of Public Health, the American Academy of Pediatrics, and the U.S. Public Health Service to encourage the removal of thimerosal as a preservative from vaccines administered to young children. (More information, including manuscripts, slide presentations, and reviews of this topic by the Institute of Medicine can be found on the Institute for Vaccine Safety web site [www.vaccinesafety.edu](http://www.vaccinesafety.edu). ) Our concern was that the administration of multiple doses of vaccines with this preservative could present a safety issue for very small infants, especially those less than six months of age. For some DTaP, hepatitis B and influenza vaccines, the manufacturing process included the use of thimerosal during the production process. Since then, manufacturers have appropriately and effectively addressed this problem by extracting the thimerosal prior to preparation of the final product for sale. This extraction process drastically reduces the amount of thimerosal to 1/100<sup>th</sup> of its previous levels, from approximately 50 micrograms per dose to less than 0.5 micrograms per dose.

Potential danger due to mercury exposure in thimerosal is dose related. In reality, all of us are exposed to low levels of other mercury compounds in everyday food



products. It is not possible to completely eliminate all exposure. The removal of thimerosal as a preservative from vaccines routinely administered to children has removed the theoretical risk that existed in 1999. The trace amounts in some current vaccines used in Maryland at this time do not constitute a health hazard for these children and prohibiting the sale or administration of vaccines with these trace amounts would be harmful for children.

Tetanus toxoid, with a reduced amount of thimerosal, has been introduced during the past few months for administration to adolescents and adults. It is uncertain whether the supply of this vaccine would be sufficient for all women who need tetanus toxoid.

Influenza vaccine with a reduced amount of thimerosal has been available in limited supply for the past two years. However, in a pending influenza pandemic, the supply of the thimerosal-reduced influenza vaccine would most likely not be adequate for all children.

In summary, we cannot support House Bill 394 because it could prevent some citizens of Maryland from receiving needed vaccines.

Sincerely,



Neal Halsey M.D.  
Professor and Director



Lawrence Moulton, PhD  
Professor and Co-Director

Cc: Members, House Health & Government Operations Committee