Dr. David Weldon (Member of Congress, R-FL) letter to Julie Gerberding (Released Jan. 21, 2004)

Dear Dr. Gerberding: I am writing to ask that you post-pone the February 9, 2004, Institute of Medicine (IOM) Immunization Safety Review Committee meeting. Pressing forward with this meeting at this time, I believe, will further undermine the credibility of the Centers for Disease Control (CDC) on matters of vaccine safety and do damage to the reputation of the IOM. I believe the proposed date of this meeting, which you have the ability to change, is in the best interests of no one who is seeking the truth about a possible association between vaccines and neurodevelopmental disorders, including autism.

Recent actions and statements by officials within the CDC's National Immunization Program (NIP) office, the timing of the IOM meeting, and the agenda for the IOM meeting raise serious questions about the purpose, value and objectives of this meeting.

Presently, the NIP is engaged in what amounts to an investigation of their own actions, which does not create an air of confidence.

The actions of the CDC regarding their November 3, 2003, article in Pediatrics raise serious concerns about the objectivity of the CDC's top vaccine safety officials and the value of their input on this issue. They are the very ones driving the IOM meeting and agenda.

On the day the Pediatrics study was released, a top CDC researcher and a coauthor of the study was quick to declare in news articles that appeared across this nation, "The final results of the study show no statistical association between thimerosal vaccines and harmful health outcomes in children, in particular autism and attention-deficit disorder." Unfortunately, the study does nothing of the sort, and when called to account eight weeks later, this CDC official was forced to recant. When asked if the children in the study were too young to have received an autism diagnosis, this coauthor stated that yes they were too young. He went on to admit that the study also likely mislabeled young autistic children as having other disabilities thus masking the number of children with autism. There are a host of other flaws in the study that are raised in the attached articles and letters to Pediatrics, which I urge you to personally review.

The CDC's top vaccine officials spent four years developing this study, and it is a seriously flawed study by their own admission. The fact that the CDC's top vaccine safety research officials produced such a seriously flawed study does not build confidence in the ability of the CDC to conduct proper vaccine safety monitoring or investigations of past decisions. Even worse, some critics have leveled serious charges that perhaps officials within the NIP manipulated data to "disprove" a theory they find objectionable. A review of the NIP's July 2000 Simpsonwood meeting, the various iterations of the Pediatrics study, and internal e-mails appear to give support to this claim.

In his December 17, 2003, letter to Pediatrics, Dr. Neal Halsey outlined a number of concerns about the study. Furthermore, in extensive discussions my staff has held with the CDC, your staff made it clear that the CDC will not

hand over - to already approved independent researchers - the raw data used by CDC in developing the Pediatrics study. CDC is providing only limited access to the altered data. The NIP's failure to provide the raw data for reviewing only raises further suspicions.

It appears to me not only as a Member of Congress but also as a physician that some officials within the CDC's NIP may be more interested in a public relations campaign than getting to the truth about thimerosal. At present, I have lost confidence in the ability of officials at the CDC to give an honest evaluation of the matters at hand. It is not just me raising these concerns about public confidence, but also Dr. Neal Halsey who in his letter conveys his concerns about loss of confidence in the NIP.

Further eroding the CDC's objectivity is the apparent bias in the information shared with the public on the CDC's NIP website. A review of the information on the website regarding possible associations between thimerosal and autism and the MMR and autism demonstrates a clear bias towards building confidence in the safety of vaccines rather than providing an objective presentation of the data. The CDC's website presents a very selective reporting of the science. The information provided to the public generally ignores and discounts studies raising safety concerns while focusing instead on highlighting epidemiology studies favoring their position.

Given these concerns, the CDC's contributions to the IOM discussion would be viewed as suspect and non-objective. Furthermore, the fact that this meeting is being held at this time and according to the parameters put forth by the NIP officials is disturbing. I have already heard concerns expressed by those in the general public that the timing of this meeting is being driven by a desire to short-circuit important research and draw premature conclusions. If the purpose of this meeting is to seriously consider and address these concerns, then this will not be accomplished.

I have reviewed the research recommendations set forth in the IOM's earlier reports on these issues. The federal government has invested very few resources into examining these areas of research. Furthermore, the research that has been conducted to date by the NIP seems to be tainted by a desire to disprove a theory that they find objectionable.

Additionally, I am concerned that the agenda set forth in the meeting is inadequate and incomplete. With respect to the MMR/autism concerns, the IOM is dedicating one hour. Two witnesses are woefully inadequate to update the committee on the research to date. The time set aside for a discussion of epidemiology relating to thimerosal and autism is heavily biased against those who have raised these concerns and will not allow for a fair and balanced discussion of the literature. The time set aside for a discussion of the biological mechanisms of thimerosal and autism is inadequate to allow a full discussion of the issue. To consider two issues of such significance in only seven hours does not serve the public interest. To the outside observer it does not appear to be a serious effort to examine these critical issues. Any conclusions drawn from this meeting, including any report issued, will be viewed as suspect given the very limited time dedicated to examining very incomplete information.

Again, I am very concerned that the drive to conduct this meeting at this time and force a report by this summer may not only further undermine confidence in the CDC, but it may also harm the IOM's very good reputation.

I ask that you give these concerns your highest consideration and that you postpone the meeting until after additional research has been conducted. Given the slow pace of research and lack of federal support for this research, conducting this meeting prior to late 2004 to early 2005 is premature. The value of any such report at this time would be very limited. We must give the research time to progress if the report is to give meaningful insight into this matter.