

Conclusions of chicken pox vaccine report challenged

When the *Journal of the American Medical Association* published an FDA report on adverse events associated with the varicella zoster (chicken pox) vaccine, it was a classic case of "good news/ bad news.

The good news was that the information on the many negative side effects of the vaccine were being given attention at all. But the bad news was that, despite the overwhelming evidence that numerous children are suffering because of the drug, the authors concluded that the vaccine's risks are minimal.

"We have been getting reports from parents that their children are suffering high fevers, chicken pox lesions, shingles (herpes zoster), brain damage and dying after chicken pox vaccination, especially when the vaccine is given at the same time with MMR and other vaccines. This FDA report confirms our concern that the chicken pox vaccine may be more reactive than anticipated in individuals with both known and unknown biological high risk factors," stated Barbara Loe Fisher, president of the National Vaccine Information Center (NVIC).

The Vaccine Adverse Event Reporting System (VAERS) received 6,574 reports. 82% of the adverse event cases occurred in individuals who received <BI>only<BI> chicken pox vaccine.

Admitting that under-reporting made the figures "highly variable fractions of actual event numbers," the authors revealed that approximately four percent of cases (about 1 in 33,000 doses) were serious, including shock, convulsions, encephalitis, thrombocytopenia and 14 deaths.

The VAERS data has led to the addition of 17 adverse events to the manufacturer's product label since the vaccine was licensed for use in 1995, including secondary bacterial infections (cellulitis), secondary transmission (infection of close contacts), transverse myelitis, Guillain Barre syndrome and herpes zoster (shingles).

Based on the published report on chicken pox vaccine, the NVIC is calling for a halt to simultaneous administration of chicken pox vaccine in combination with other vaccines -- particularly MMR -- until the vaccine can be further evaluated for short and long term reactivity, especially in immune compromised individuals such as asthmatics and those sick at the time of vaccination.

"This vaccine should not be mandated," Fisher emphasized. "There are too many questions about the true adverse event and efficacy profile of this relatively new live virus vaccine and it is up to the manufacturer marketing the vaccine and the federal agencies regulating the vaccine to conduct further follow-up of this important VAERS report," she concluded.

The National Vaccine Information Center, a non-profit, educational organization founded in 1982 by parents of vaccine-injured children, hosted the Second International Public Conference on Vaccination in Washington, D.C. in September 2000.

Leading pediatric neurologists, immunologists, epidemiologists, microbiologists, molecular and cell biologists, gastroenterologists, internists, and pediatricians from the U.S., Canada and Europe called for in-depth basic science and epidemiological research into vaccine reactions to better identify and screen out high risk individuals.

For more information on the National Vaccine Information Center, visit its [website](http://www.909shot.com) at www.909shot.com or write to NVIC, 512 W. Maple Ave. #206, Vienna, VA 22180.

SOURCE: "National Vaccine Information Center challenges conclusions of published report on chicken pox vaccine VAERS data," NVIC, Sept. 13, 2000.