

More on the Model Emergency Health Powers Act

By Jane M. Orient, M.D.

AAPS is a national association of thousands of physicians in all specialties, founded in 1943 to preserve and promote private medicine, in which physicians are bound by the Oath of Hippocrates to prescribe for the good of their patients, according to the best of their ability and judgment-and to do no harm.

We agree entirely with the excellent statement submitted by Jennifer King of the American Legislative Exchange Council concerning the effects of this Act. Many of these concerns are also echoed in our analysis of the original and revised Model Act, Emergency Dictatorial Powers (<http://www.aapsonline.org/testimony/emerpind.htm>)

Here we would like to focus on the provisions of the Act that would force physicians to administer, and patients to submit to, vaccines and treatments ordered by state authorities without informed consent and/or contrary to the physician's own best judgment.

We also object to the provisions for mass quarantine, which could result in serious assaults on civil liberties despite the evidence from history that less extreme measures would be more effective and less harmful (Barbera et al, JAMA 2001;286: 2711-2717).

Medical issues that legislators need to consider include the following:

1. **The only contagious disease that is a credible biological warfare threat and for which a reasonably effective vaccine exists is smallpox.** (Anthrax is not very contagious from person to person.)

Yet this disease is not mentioned by name in the Model Act; public health officials could use emergency powers to force any vaccine on people.

In an outbreak of measles or whooping cough, with several dozen cases, is an unvaccinated child a "danger to public health"?

The answer could be dictated by bureaucratic fiat, invalidating all vaccine exemptions, including medical and religious ones, overriding all the checks and balances of representative government legislative, executive, and judicial.

2. There are many scientifically valid arguments against mass smallpox immunization campaigns. **The vaccine is known to cause serious adverse effects, including death.**

3. The strain of smallpox chosen for a biological attack might be resistant to the vaccine. Inspectors visiting a Biopreparat facility in the former Soviet Union in 1991 were not allowed to don space suits and enter a bioweapons explosion test chamber because their smallpox vaccination might not have been protective. Thus, an entire population could be subjected to the dangers of mass vaccination while reaping no benefit at all.

4. Public health officials are not omniscient. They were silent as the World Health Organization destroyed tens of millions of doses of smallpox vaccine in the 1990s for want of \$25,000 per year to buy electricity for the storage freezers.

They were in denial for decades about the intensive ongoing research on the weaponization of smallpox. While 100 tons of weaponized smallpox was being manufactured annually in the Soviet Union, they discontinued vaccination entirely, congratulating themselves on the eradication of this plague.

"What was then considered a triumph has now become our problem," writes Anthony S. Fauci of the National Institute of Allergy and Infectious Disease in an article to be published in the April 25, 2002, issue of the New England Journal of Medicine.

5. While herd immunity may be cited as the compelling reason for mass immunizations, it is achieved without vaccinating 100% of a population.

Fallible human beings should not be imposing medical treatments on unwilling citizens at gunpoint, or with threats of taking children from their parents, or with other coercive measures; obliterating informed consent and due process of law. Medical consequences, as well as the consequences for the American system of government, could be disastrous.

We believe that forced treatment or immunization should not be included in any emergency powers act. Moreover, any declaration of a state of emergency should be voided unless ratified by the state legislature as soon as it can be called into session.

In improving emergency preparedness, States should emphasize abilities to mitigate the situation, not powers to seize, commandeer, coerce, punish, and disrupt.

Better laboratories with surge capacity; stockpiles of vaccines, drugs, medical equipment and supplies, protective gear; and decontamination equipment; and improved training of both officials and citizens would all be very helpful, but are not part of the Emergency Health Powers Act.

Jane M. Orient, M.D.
Executive Director

Association of American Physicians and Surgeons
1601 N. Tucson Blvd. Suite 9
Tucson, AZ 85716 (800) 635-1196
www.aapsonline.org

Statement to the Committee on Civil Practices Texas House of Representatives by Jane Orient, MD April 3, 2002

DR. MERCOLA'S COMMENT:

It appears some very dangerous legislation is being prepared to be implemented in the US.

For an update on the status of this legislation in your own state please go to [AAPS State MEHPA Information Page](#).

If this legislation passes, in brief:

- 1. You will have a mandatory vaccination or you will be charged with a crime**
- 2. You will get a mandatory medical exam, or you will be charged with a crime**

3. Doctors will give the exam or you will be charged with a crime

4. Your property can be seized if there is 'REASONABLE CAUSE TO BELIEVE' that it may pose a public health hazard... it can be burned or destroyed and you will NOT have recourse or compensation.

Related Articles:

[Update on Model Emergency Health Powers Act](#)

[Model Emergency Health Powers Act \(MEHPA\) Turns Governors into Dictators](#)