

Dear Committee Members,

Thank you for taking the time to have this discussion about an important issue. I truly believe that you, like the rest of us, genuinely care about our kids and the public in general.

I don't believe it is by chance that you hold the position that you hold, and it carries great responsibility. The decisions you make will affect the 3.5 million residents of this state, and those should be made wisely.

Much of the argument for vaccinations is based on the theory of vaccine induced herd immunity. Though it is an appealing theory, herd immunity cannot come from a vaccine, whose effects are temporary and not lifelong, and for certain percent of people they have no effect at all. As one of the studies of the American Medical Association states, *"The apparent paradox is that as measles immunization rates rise to high levels in a population, measles becomes a disease of immunized persons"*. *

Both Johns Hopkins and ST. Jude hospitals recommend that their immunocompromised patients avoid contact with people recently vaccinated with a live vaccine for an extended period of time. I think it speaks for itself.

Often children get a rash and fever after being vaccinated with the MMR vaccine, which are typical symptoms of measles. This is conveniently called a normal reaction rather than "the measles" and therefore is not the part of measles statistics. Who is being fooled here?

Before the measles vaccine was manufactured, the mortality from measles was very near zero, and was continuing to decline. The first measles shot promised immunity for life, which did not happen. Then second shot was added to the schedule. And so on.

Contrary to popular belief at the moment, measles is not a deadly disease.

I pray that you take the time to investigate the facts and not just take at face value what the vaccine manufacturers say about the product that they profit from.

Respectfully,

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* Gregory A. Poland, MD; Robert M. Jacobson, MD: Failure to Reach the Goal of Measles Elimination: Apparent Paradox of Measles Infections in Immunized Persons, August 22, 1994. *Arch Intern Med.* 1994;154(16):1815-1820. doi:10.1001/archinte.1994.00420160048006