## South Carolina Chapter

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## **South Carolina Chapter**

INCORPORATED IN SOUTH CAROLINA

American Academy of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™

3/13/24

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Dear members of the Senate Medical Affairs subcommittee:

The South Carolina Chapter of the American Academy of Pediatrics aims to attain optimal physical and mental health outcomes for all children. We therefore **oppose** <u>S.975</u> which would severely limit the potential to save lives through evidence-based public health measures. Our concerns include:

- Testing and vaccination allow us to keep our health care workforce safe and functioning so that we have enough physicians, nurses, respiratory therapists, pharmacists, and staff to care for our sickest patients. If our care teams are not protected and thus not able to work, we will enter a crisis staffing situation which is unsafe for patients as we did at the onset of the COVID-19 pandemic before vaccines were available. During the COVID-19 public health emergency, the federal government <u>required COVID-19</u> <u>vaccination</u> of all eligible staff at healthcare facilities that participate in Medicare and Medicaid programs to protect the patients and workforce.
- When our health care workers are not protected and safe, they unknowingly infect patients seeking care for other reasons, leading to unnecessary complications and death. Imagine a child admitted to the hospital for cancer treatment is infected by their unvaccinated nurse and dies of COVID-19. Imagine a child admitted to the hospital for elective surgery with an expected length of stay of 2 days but is infected with COVID-19 by their unvaccinated respiratory therapist and leaves the hospital 6 months later with a feeding tube and tracheostomy. We have cared for these children.
- mRNA vaccines are not gene therapy. The mRNA from the vaccines does not enter the cell nucleus or interact with the DNA at all, thus is not gene therapy. Gene therapy can have long-lasting effects because the effects permanently change cellular DNA, and these changes are inherited by any daughter cells resulting if the cell undergoes mitosis (division). However, mRNA is transitory and not inherited by daughter cells. Gene therapy is used for diseases such as cancer, cystic fibrosis, hemophilia, among others. Vaccines do not use gene therapy.
- Allowing employers to require immunizations for adults allows children to benefit from herd immunity when they are ineligible for vaccination.

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Novel threats may require novel approaches for prevention, testing and treatment. Approval of emergency technologies such as tests or vaccines can require precious time, allowing a very contagious virus to continue spreading, causing death and disease despite the availability of effective options to prevent, test, and treat. Children are often the last to be eligible for a new vaccine or therapy. Employer and school mandates for adults can be a significant public health tool which increases community immunity prior to the availability of the vaccine for children.

- Withholding use or distribution of an effective prevention or treatment measure found to be effective and safe solely because it is under EUA or has been licensed for use for less than 10 years is unethical and against the standard of care. Emergency Use Authorization (EUA) is the pathway by which the FDA and CDC are able to authorize and recommend countermeasures to protect the health of individuals during a public health crisis. In such a situation, it not going to be feasible to wait for a full approval and recommendation of a vaccine or product—health care facilities, schools, businesses, and other entities must have the freedom to require vaccination during such situations of products which receive EUA from FDA and CDC.
- Arbitrary isolation and quarantine rules such as the maximum isolation of 10 days or when asymptomatic do not follow the science. For example, Ebola virus has an incubation period of 2-21 days and thus isolation is recommended 21 days.
- Demanding that any tests required in a workplace must be FDA approved, a process that can take months or years, would result in missed opportunities to identify affected individuals and prevent spread and deaths prior to approval.

On a personal note, I have cared for numerous children with COVID-19 in the ICU, many of whom I have sadly pronounced dead, and I have cared for zero children in the ICU with vaccine complications.

We cannot predict the characteristics of the next pandemic and we are concerned about limiting our state's ability to use cutting edge scientific strategies to provide fast and efficient protection for all of South Carolina's citizens. As frontline healthcare providers, we have observed in real time the safety and efficacy of novel mRNA vaccines in ourselves, our own families, and our patients. These vaccines and public health measures have the potential to save lives, prevent severe illness and death, and facilitate the ability of communities, businesses, and schools to open and begin functioning safely again, a goal we all share. We urge you not to remove our safest and most effective public health tools from our arsenal against life threatening diseases.

Sincerely, elizabeth mack

Elizabeth H. Mack, MD, MS SCAAP, President