A Parent’s Decision on Immunization: Making the Right Choice

abstract

A loving parent faces peer pressure to reject routine vaccination of her children. She begins researching immunizations to make a well-informed health care decision in the best interests of her children. Misleading and frightening information is readily accessible. She simply cannot find answers to her questions and concerns about vaccines. Her poor choice made in ignorance and fear results in her 1-year-old daughter contracting spinal meningitis. Once her daughter is in a pediatric intensive care isolation room suffering from this deadly disease, the mom gains access to accurate information regarding immunizations. All her questions regarding vaccine production, testing, safety, and ethics are answered. She wants accurate information readily available to all parents. *Pediatrics* 2011;127:S5–S8
accounts of how they believed that vaccines had damaged their children. Some were concerned that vaccines caused fevers and seizures. Others claimed that their babies died of sudden infant death syndrome soon after receiving vaccines and attributed the deaths directly to the vaccines. Still others claimed that autism, diabetes, asthma, and myriad other conditions were caused, or at least aggravated, by vaccines. There was no doubt in my mind that these parents posting their stories were sincere. What I needed to know was, were they correct? If vaccines were not really safe, I needed to know.

I have also read claims against the practice of routine immunizations for reasons other than safety concerns. There were alternative health care organizations with postings claiming that the diseases purportedly eradicated or reduced in occurrence because of immunization programs were actually in a natural decline that would have occurred even if no immunizations had ever been developed. Authors of some sites claimed that the risks associated with the vaccines actually are far more dangerous than the diseases and their consequences. Some sites warned against trusting the available scientific information, because it is distributed by medical researchers, pharmaceutical companies, and health care providers. The argument against trusting them was that they all make money from the immunizations. Did I dare trust my children’s health to someone who might profit from my blindly following the standard of care?

Another critical issue for me was the assertion that at least some of the vaccines were being produced at the expense of the lives of aborted babies. Any deliberate abortion is unacceptable to me, and I certainly did not want to blindly consume any portion of the abortion industry. Where could I find accurate, truthful information specifically refuting or verifying a connection between immunizations and the abortion industry?

I decided that I could not just blindly allow my pediatrician to decide what was best for my children. I wanted to become well informed about the immunizations available. I had questions, and I wanted answers. Are vaccines really effective at preventing diseases? How are vaccines made? Are they tested for safety? Are there ongoing clinical trials to rule out the possibility that vaccines cause diseases later in life? Have allegations of adverse reactions been studied and confirmed or refuted? And, last but not least, where can I get truthful, clear answers to my questions?

That last question proved to be a huge stumbling block for me; it nearly cost me the life of my third child. Where could I go for answers? I wanted to talk to my pediatrician, but our health insurance policy had just been changed to exclude well-child care. I could no longer afford appointments to see him without a sick child in tow. Next choice was the Internet. Slow dial-up service and a dinosaur of a home computer kept me from being able to search the Web extensively. My third choice was my obstetrician. He took my concerns seriously enough to recommend that I continue researching and mentioned that my newborn would not have to receive the hepatitis B vaccine at the hospital.

When my third child was born, I had more questions than answers and a huge reluctance to choose immunizations without certainty that the benefits outweigh the risks. I thought I could probably do some more research while I took it easy after childbirth, get the answers I needed, and make an informed decision before it really mattered. One sick-child appointment
later, I had a stack of vaccine information sheets from my pediatrician to study. A thorough reading of the vaccine information sheet for every vaccine currently recommended for children still left many of my questions unanswered. Library books and magazines did not give me any more answers, just more unnerving accusations against vaccines. Not knowing where else to turn, I just about gave up my effort to become an informed parent. My husband and I agreed we would just not have our new baby vaccinated until she was at least 1 year old, which seemed like enough time to continue looking for information. Also, we were not concerned that she was at risk of contracting any serious childhood illnesses.

We were wrong.

A week before our baby girl’s first birthday, she was feverish and listless. When she refused to nurse for 24 hours, I took her to see our pediatrician. She was hurriedly admitted to intensive care with the diagnosis of spinal meningitis caused by Haemophilus influenzae, type B, which is a vaccine-preventable disease. I spent the next several hours wondering if she would die or survive, possibly with severe disabilities.

Parents of children in the Monroe Carell Jr Children’s Hospital at Vanderbilt in Nashville, Tennessee, have access to the medical school library. Finally, I could read real research regarding vaccines. I could study production methods, efficacy, ethics, and adverse-reaction studies. I had immunization experts ready to answer my every question. No more uninformed mommy. Mommy became drenched in every question. No more uninformed experts ready to answer my adverse-reaction studies. I had immunization methods, efficacy, ethics, and regulations against vaccines. I could study professionally, I could read real research regarding vaccines. I could study professionally, I could read real research regarding vaccines. I could study professionally, I could read real research regarding vaccines.

With the resources that have become available to me as a parent of a child with a vaccine-preventable disease, I have become a better parent. I am better equipped to make health care choices for my children. I can seriously weigh the benefits and risks of immunizations. I can attest to the risks of childhood illnesses. Except for vaccines produced at the expense of the lives of unborn babies, currently recommended vaccines are what my children are receiving.

I am still overwhelmed by the difficulty that a conscientious parent faces when seeking accurate, verifiable information regarding vaccines. Over the 18 years that I have been parenting, my children’s pediatricians have been less than adequate at responding to my queries. I have had to rely on experts to whom I have access only as a parent who had a child with a serious disease. That is not good enough. I want all pediatricians to be as well informed as the experts who have informed me, or to at least know where to steer parents with concerns beyond their knowledge base. I want candor from health care professionals. An honest “I don’t know” is better than hemming and hawing. Parents who object to some or all vaccines for various reasons need to be treated with respect by their doctors and others in the health care professions.

Although some parents are simply apathetic about their own children, others of us suffer from ignorance and fear of the unknown. Information cures ignorance and fear of the unknown. I believe that our health care communities would do well to have periodic immunization seminars. These events could draw together the best experts in the health care professions to share the most current and accurate information with parents, give parents opportunities to ask questions, and offer resources for more in-depth information. If these seminars were arranged by regional medical centers, pediatricians and family doctors in the area could advertise the events to their patients’ families. Regional concerns could be discussed.

A question-and-answer format would truly be a huge asset to any large-scale community-education project. One rule should be that no presenter could cop out with the answer, “Go ask your own doctor.” Quite frankly, our primary care physicians are overworked already. They allot little time to patients and parents with incessant questions. I have learned the hard way that pediatricians “go by the book” when it comes to scheduling immunizations. Few health care providers even know the contraindications to most immunizations. They certainly

The most immunizations. They certainly
are not likely to know the answers to ethics questions. Even those who are of the same religion as their patients can be quite comfortable offering vaccines that contradict their professed faith, as if the medical standard of care outranks God Almighty.

Above all, information about immunizations must be presented with great candor. Any sweeping of failures in the immunization industry under the carpet discredits the entire health care community. When a question is posed about sudden infant death syndrome, an expert needs to speak about allegations and responses to concerns.

When a participant claims that they do not see any real risk of their child getting one of the vaccine-preventable diseases, a presenter needs to address the risks that each of us face and be ready to back up what they claim with results from credible studies. When anyone voices ethics concerns, they need to be addressed with respect and given bold, open answers to their questions. Secrecy results in suspicions and possibly in a reluctance to use all vaccines instead of the vaccines that are directly in conflict with an individual patient’s or parent’s situation or concerns.

Can the health care community do a better job? Certainly. Can parents do a better job? Certainly. Will our society continue to benefit from the available immunizations? Certainly. It is up to all of us to work together for the benefit of our own children and other families in our world. No child should have to suffer agony at the sound of an ink pen clicking or the sight of a dim light twinkling nearby. Meningitis is too serious a disease for anyone to face needlessly. No parent should be paralyzed by ignorance and fear when making health care choices for his or her child.

REFERENCES


A Parent's Decision on Immunization: Making the Right Choice
Suzanne Walther

*Pediatrics* 2011;127;S5; originally published online April 18, 2011;
DOI: 10.1542/peds.2010-1722B

<table>
<thead>
<tr>
<th>Updated Information &amp; Services</th>
<th>including high resolution figures, can be found at: /content/127/Supplement_1/S5.full.html</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subspecialty Collections</td>
<td>This article, along with others on similar topics, appears in the following collection(s): Infectious Disease /cgi/collection/infectious_diseases_sub</td>
</tr>
<tr>
<td>Permissions &amp; Licensing</td>
<td>Information about reproducing this article in parts (figures, tables) or in its entirety can be found online at: /site/misc/Permissions.xhtml</td>
</tr>
<tr>
<td>Reprints</td>
<td>Information about ordering reprints can be found online: /site/misc/reprints.xhtml</td>
</tr>
</tbody>
</table>

PEDIATRICS is the official journal of the American Academy of Pediatrics. A monthly publication, it has been published continuously since 1948. PEDIATRICS is owned, published, and trademarked by the American Academy of Pediatrics, 141 Northwest Point Boulevard, Elk Grove Village, Illinois, 60007. Copyright © 2011 by the American Academy of Pediatrics. All rights reserved. Print ISSN: 0031-4005. Online ISSN: 1098-4275.
A Parent's Decision on Immunization: Making the Right Choice
Suzanne Walther

Pediatrics 2011;127;S5; originally published online April 18, 2011;
DOI: 10.1542/peds.2010-1722B

The online version of this article, along with updated information and services, is located on the World Wide Web at:
/content/127/Supplement_1/S5.full.html