

114TH CONGRESS  
1ST SESSION

# H. R. 1636

To direct the Secretary of Health and Human Services to conduct or support a comprehensive study comparing total health outcomes, including risk of autism, in vaccinated populations in the United States with such outcomes in unvaccinated populations in the United States, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

MARCH 25, 2015

Mr. POSEY (for himself and Mrs. CAROLYN B. MALONEY of New York) introduced the following bill; which was referred to the Committee on Energy and Commerce

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## A BILL

To direct the Secretary of Health and Human Services to conduct or support a comprehensive study comparing total health outcomes, including risk of autism, in vaccinated populations in the United States with such outcomes in unvaccinated populations in the United States, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Vaccine Safety Study  
5 Act”.

1 **SEC. 2. FINDINGS.**

2 The Congress finds as follows:

3 (1) Securing the health of the Nation's children  
4 is our most important concern as parents and stew-  
5 ards of the Nation's future.

6 (2) The Nation's vaccine program has greatly  
7 reduced human suffering from infectious disease by  
8 preventing and reducing the outbreak of vaccine-pre-  
9 ventable diseases.

10 (3) Total health outcomes are the best measure  
11 of the success of any public health effort, including  
12 security from both chronic and infectious disease.

13 (4) Childhood immunizations are an important  
14 tool in protecting children from infectious disease.

15 (5) The number of immunizations administered  
16 to infants, pregnant women, children, teenagers, and  
17 adults has grown dramatically over recent years.

18 (6) The incidence of chronic, unexplained dis-  
19 eases such as autism, learning disabilities, and other  
20 neurological disorders appears to have increased dra-  
21 matically in recent years.

22 (7) Individual vaccines are tested for safety, but  
23 little safety testing has been conducted for inter-  
24 action effects of multiple vaccines.

25 (8) The strategy of aggressive, early childhood  
26 immunization against a large number of infectious

1 diseases has never been tested in its entirety against  
2 alternative strategies, either for safety or for total  
3 health outcomes.

4 (9) Childhood immunizations are the only  
5 health interventions that are required by States of  
6 all citizens in order to participate in civic society.

7 (10) Public confidence in the management of  
8 public health can only be maintained if these State  
9 government-mandated, mass vaccination programs—

10 (A) are tested rigorously and in their en-  
11 tirety against all reasonable safety concerns;  
12 and

13 (B) are verified in their entirety to produce  
14 superior health outcomes.

15 (11) There are numerous United States popu-  
16 lations in which a practice of no vaccination is fol-  
17 lowed and which therefore provide a natural com-  
18 parison group for comparing total health outcomes.

19 (12) No comparative study of such health out-  
20 comes has ever been conducted.

21 (13) Given rising concern over the high rates of  
22 childhood neurodevelopmental disorders such as au-  
23 tism and other chronic conditions, the need for such  
24 studies is becoming urgent.

1 **SEC. 3. STUDY ON HEALTH OUTCOMES IN VACCINATED**  
2 **AND UNVACCINATED AMERICAN POPU-**  
3 **LATIONS.**

4 (a) IN GENERAL.—The Secretary of Health and  
5 Human Services (in this Act referred to as the “Sec-  
6 retary”), acting through the Director of the National In-  
7 stitutes of Health, shall conduct or support a comprehen-  
8 sive study—

9 (1) to compare total health outcomes, including  
10 the incidence and risk of autism, in vaccinated popu-  
11 lations in the United States with such outcomes in  
12 unvaccinated populations in the United States; and

13 (2) to determine whether exposure to vaccines  
14 or vaccine components is associated with autism  
15 spectrum disorders, chronic conditions, or other neu-  
16 rological conditions.

17 (b) RULE OF CONSTRUCTION.—Nothing in this Act  
18 shall be construed to authorize the conduct or support of  
19 any study in which an individual or population is encour-  
20 aged or incentivized to remain unvaccinated.

21 (c) QUALIFICATIONS.—With respect to each investi-  
22 gator carrying out the study under this section, the Sec-  
23 retary shall ensure that the investigator—

24 (1) is objective;

1           (2) is qualified to carry out such study, as evi-  
2           denced by training experiences and demonstrated  
3           skill;

4           (3) is not currently employed by any Federal,  
5           State, or local public health agency;

6           (4) is not currently a member of a board, com-  
7           mittee, or other entity responsible for formulating  
8           immunization policy on behalf of any Federal, State,  
9           or local public health agency or any component  
10          thereof;

11          (5) has no history of a strong position on the  
12          thimerosal or vaccine safety controversy; and

13          (6) is not currently an employee of, or other-  
14          wise directly or indirectly receiving funds from, a  
15          pharmaceutical company or the Centers for Disease  
16          Control.

17          (d) TARGET POPULATIONS.—The Secretary shall  
18          seek to include in the study under this section populations  
19          in the United States that have traditionally remained  
20          unvaccinated for religious or other reasons, which popu-  
21          lations may include Old Order Amish, members of clinical  
22          practices (such as the Homefirst practice in Chicago) who  
23          choose alternative medical practices, practitioners of  
24          anthroposophic lifestyles, and others who have chosen not  
25          to be vaccinated.

1       (e) TIMING.—Not later than 120 days after the date  
2 of the enactment of this Act, the Secretary shall issue a  
3 request for proposals to conduct the study required by this  
4 section. Not later than 120 days after receipt of any such  
5 proposal, the Secretary shall approve or disapprove the  
6 proposal. If the Secretary disapproves the proposal, the  
7 Secretary shall provide the applicant involved with a writ-  
8 ten explanation of the reasons for the disapproval.

9       (f) TRANSPARENCY.—To facilitate further research  
10 by the Secretary or others, the Secretary shall ensure the  
11 preservation of all data, including all data sets, collected  
12 or used for purposes of the study under this section.

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