

2005 DRAFTING REQUEST

Bill

Received: **01/04/2006**

Received By: **rryan**

Wanted: **As time permits**

Identical to LRB:

For: **Barbara Gronemus (608) 266-7015**

By/Representing: **Bill Cross**

This file may be shown to any legislator: **NO**

Drafter: **rryan**

May Contact:

Addl. Drafters: **pkahler**

Subject: **Health - public health**

Extra Copies: **DAK**

Submit via email: **YES**

Requester's email: **Rep.Gronemus@legis.state.wi.us**

Carbon copy (CC:) to:

Pre Topic:

No specific pre topic given

Topic:

Vaccines containing mercury

Instructions:

See Attached

Drafting History:

| <u>Vers.</u> | <u>Drafted</u> | <u>Reviewed</u> | <u>Typed</u> | <u>Proofed</u> | <u>Submitted</u> | <u>Jacketed</u> | <u>Required</u> |
|--------------|--|--|------------------------|----------------|------------------------|-----------------|-----------------|
| /? | | | | _____ | | | S&L |
| /1 | rryan 01/19/2006 rryan 03/01/2006 | jdyer 01/20/2006 jdyer 03/03/2006 | rschluet 01/20/2006 | _____ | mbarman 01/20/2006 | | S&L Crime |
| /2 | | | jfrantze 03/03/2006 | _____ | sbasford 03/03/2006 | | S&L Crime |

| <u>Vers.</u> | <u>Drafted</u> | <u>Reviewed</u> | <u>Typed</u> | <u>Proofed</u> | <u>Submitted</u> | <u>Jacketed</u> | <u>Required</u> |
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| /3 | rryan 03/07/2006 pkahler 03/07/2006 | jdye 03/07/2006 | jfrantze 03/07/2006 | _____ | sbasford 03/07/2006 mbarman 04/10/2006 | lnorthro 04/10/2006 | |

FE Sent For:

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intro -*

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Handwritten signatures and dates:
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03/7

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Handwritten notes and signatures:

- 1/2 3/3 jyd
- 3/3
- <ENDS>
- 3/3
- 3/3

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| /? | rryan | 1/20/06 | | | | | |
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FE Sent For:

1206
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Kennedy, Debora

From: Cross, William
Sent: Thursday, December 29, 2005 10:17 AM
To: Kennedy, Debora
Subject: FW: Bill by Representative Brod, MN

Debora:

Rep. Gronemus would like a bill drafted along the lines of the Minnesota legislation noted. The link will take you to a copy of MN HR1505.

Many Thanks!

BILL CROSS

-----Original Message-----

From: Kathy Dettman [mailto:Kathy.Dettman@house.mn]
Sent: Wednesday, December 28, 2005 3:08 PM
To: Rep.Gronemus
Subject: Bill by Representative Brod, MN

A Mr. Tim Ziegewid said you wanted some information on Representative Laura Brod's Mercury Vaccine Bill * here are a couple of links that will direct you to sites to obtain information:

<http://www.house.leg.state.mn.us/> The bill is house file 1505

http://www.mepartnership.org/sites/MERCURYFREEMN/sub_whatsnew.asp?new_id=1203

If you have further questions, please have one of your staff contact me for further information.

Regards,

Kathy

Kathy Dettman
Legislative Assistant
Room 597A State Office Building
100 Rev. Dr. Martin Luther Jr. King Boulevard St. Paul, MN 55155 651/296-9194, FAX
651/296-4307
Email: kathy.dettman@house.mn

2.20 reporting system (VAERS), the federal vaccine information
 2.21 statements (VIS), and medical precautions and contraindications
 2.22 to immunizations.

2.23 (d) The commissioner ~~will~~ shall encourage providers to
 2.24 provide the vaccine information statements at multiple visits
 2.25 and in anticipation of subsequent immunizations.

2.26 (e) The commissioner ~~will~~ shall encourage providers to use
 2.27 existing screening for immunization precautions and
 2.28 contraindication materials and make proper use of the vaccine
 2.29 adverse events reporting system (VAERS).

2.30 (f) In consultation with groups and people identified in
 2.31 subdivision 12, paragraph (a), clause (1), the commissioner ~~will~~
 2.32 shall continue to develop and make available patient education
 2.33 materials on immunizations including, but not limited to,
 2.34 contraindications and precautions regarding vaccines.

2.35 (g) ~~The commissioner will encourage health care providers~~
 2.36 ~~to use thimerosal-free vaccines when available. Immunization~~
 3.1 providers shall comply with section 145.929.

3.2 Sec. 2. [145.929] [ELIMINATION OF MERCURY IN VACCINES.]

3.3 Subdivision 1. [CITATION.] This section may be cited as
 3.4 the Minnesota Elimination of Mercury in Vaccines Act of 2005.

3.5 Subd. 2. [ELIMINATION OF MERCURY.] (a) Effective July 1,
 3.6 2005, vaccines administered in the state shall not contain any
 3.7 mercury or mercury compounds, including but not limited to
 3.8 thimerosal, unless:

3.9 (1) a vaccine containing no mercury is not manufactured; or

3.10 (2) the provider finds that the mercury-free vaccine is not
 3.11 obtainable by utilizing best efforts, because the vaccine is not
 3.12 on the market for sale.

3.13 (b) If a mercury-free vaccine is not available according to
 3.14 paragraph (a), then a vaccine containing a trace amount of
 3.15 mercury as defined by the United States Food and Drug
 3.16 Administration may be administered. If neither a mercury-free
 3.17 vaccine nor a vaccine containing a trace amount of mercury is
 3.18 available, then the vaccine containing the least amount of
 3.19 mercury may be administered.

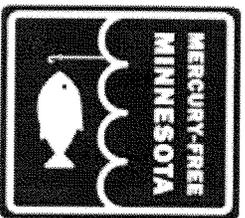
3.20 Sec. 3. [EFFECTIVE DATE.]

3.21 Sections 1 and 2 are effective July 1, 2005.

Please direct all comments concerning issues or legislation
 to your House Member or State Senator.

For Legislative Staff or for directions to the Capitol, visit the Contact Us page.

General questions or comments.



Mercury-Free Minnesota

Clean Water, Safe Fish, Healthy Kids

Act Now
Mercury In the News

Mercury In the News

Sources of Mercury

Op-ed: Err on the side of caution: Get mercury out of vaccines

Mercury in MN Water

Saturday, April 30, 2005

Fish Consumption

Health Effects

Resources/Links

Minneapolis Star Tribune

About Us

Events Calendar

April 30, 2005

2005 Policy Agenda

<http://www.startribune.com/stories/1519/5377453.html>

Home



One side of an important debate was printed in the April 19 Star Tribune article, "Parents lobby against mercury." Contrary to what was presented, the bills in the Legislature to eliminate mercury in vaccines are about creating further confidence and public trust in our immunization program by assuring parents that the vaccines mandated for their children and available to family members are as safe as possible.

The Star Tribune article discussed an Institute of Medicine report that concluded there is no evidence of harm from mercury in vaccines. However, the story failed to mention a key acknowledgment by the IOM: "the committee cannot rule out, based on the epidemiological evidence, the possibility that vaccines contribute to autism in some small subset or very unusual circumstance."

It is precisely this "small subset" of people that has been the focus of important biological studies that raise concern about mercury.

Dr. Mady Horning of Columbia University found that giving mercury (thimerosal) to mice in the proportion given to infants in vaccines resulted in some strains of mice developing significant neurological symptoms. Dr. Jill James of the University of Arkansas for Medical Sciences found that autistic children have a severe deficiency in glutathione, the body's most important detoxifier of heavy metals such as mercury.

Dr. James Bradstreet, founder of the International Child Development Resource Center, tested autistic children with a substance that binds with heavy metals and pulls them out of the body through the urine. He found that autistic children excrete six times as much mercury as healthy children.

These studies help us to understand that a "small subset" of people are more vulnerable to mercury because they can not detoxify it well. Some parents of autistic children are seeing great improvement in their children from treatment that helps them detoxify mercury.

An epidemiological study published by Dr. Mark Geier and David Geier this month used the federal VAERS database (Vaccine Adverse Events Reporting System) and the CDC Vaccine Safety Datalink Database to compare children who had received mercury-free vaccines with children who had received vaccines containing mercury. They found higher incidences of neurodevelopmental disorders of all kinds in the children exposed to mercury in vaccines.

Rates of autism in our country started climbing in the early 1990s, after several mercury-containing vaccines were added to the immunization schedule. However, rates are now beginning to drop in some areas. In California, four out of the last five quarters noted a drop in new diagnoses of autism. Given scientists' hypothesis that the autism epidemic could be related to mercury in vaccines, this drop was predicted because many vaccines have had mercury completely or partially removed.

Proponents of removing mercury from vaccines are willing to participate in this scientific debate. However, while the scientists debate, our kids cannot wait. Through legislation, Minnesota would be making a public policy statement that, as much as possible, we should use vaccines without mercury. That is the common-sense approach.

Laura Brod, R-New Prague, is a state representative.

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From FSIT website
"Thimerosal in Vaccines"

1/17/06

Guidelines on Exposure to Organomercurials

Mercury is an element that is dispersed widely around the earth. Most of the mercury in the water, soil, plants and animals is found as inorganic mercury salts. Mercury accumulates in the aquatic food chain, primarily in the form of the methylmercury, an organomercurial. Organic forms of mercury are more easily absorbed when ingested and are less readily eliminated from the body than are inorganic forms of mercury. Humans are exposed to methylmercury primarily from the consumption of seafood (Mahaffey et al. 1997).

Methylmercury is a neurotoxin. The toxicity of methylmercury was first recognized during the late 1950s and early 1960s when industrial discharge of mercury into Minimata Bay, Japan led to the widespread consumption of mercury-contaminated fish (Harada 1995). Epidemics of methylmercury poisoning also occurred in Iraq during the 1970s when seed grain treated with a methylmercury fungicide was accidentally used to make bread (Bakir et al. 1973). During these epidemics, fetuses were found to be more sensitive to the effects of methylmercury than adults. Maternal exposure to high levels of methylmercury resulted in infants exhibiting severe neurologic injury including a condition resembling cerebral palsy, while their mothers showed little or no symptoms. Sensory and motor neurologic dysfunction and developmental delays were observed among some children who were exposed *in utero* to lower levels of methylmercury.

More recently, several epidemiological studies have examined the effect of low dose dietary exposure to methylmercury, with inconsistent results. Studies from the Faroe Islands reported that subtle cognitive deficits (e.g., performance on attention, language, and memory tests), detectable by sophisticated neuropsychometric testing, were associated with methylmercury levels previously thought to be safe (Grandjean et al 1997). Studies in the Seychelles, evaluating more global developmental outcomes, did not reveal any correlation between abnormalities and methylmercury levels (Davidson et al. 1998).

Various agencies have developed guidelines for safe exposure to methylmercury, including the U.S. Environmental Protection Agency (Mahaffey et al. 1997), U.S. Agency for Toxic Substances and Disease Registry (ATSDR 1999), the FDA (Federal Register 1979)¹, and the World Health Organization (WHO 1996). These exposure levels range from 0.1 µg/kg body weight/day (EPA) to 0.47 µg/kg body weight/day (WHO)². The range of recommendations is due to varying safety margins, differing emphasis placed on various sources of data, the different missions of the agencies and the population that the guideline is intended to protect. All guidelines, however, fall within the same order of magnitude. While these guidelines may be used as screening tools in risk assessment to evaluate the "safety" of mercury exposures, they are not meant to be bright lines above which toxicity will occur. However, as exposure levels increase in multiples of these guidelines, there is increasing concern on the part of the public health community that adverse health consequences may occur (Mahaffey 1999).

To address the issue of conflicting methylmercury exposure guidelines, Congress asked the National Academy of Sciences to study the toxicological effects of methylmercury and provide recommendations on the establishment of a scientifically appropriate methylmercury reference dose (RfD) (National Research Council 2000; <http://www.nap.edu/catalog/9899.html>). Their report concluded that the EPA's current reference dose, the RfD, for methylmercury, 0.1 µg/kg/day is a scientifically justifiable level for the protection of human health. The FDA is considering this and other data relevant to its exposure guideline for methylmercury.

Table of Contents

From FDI website
"Thimerosal in vaccines"

1/17/06

Why are some vaccines noted to be "thimerosal-free" while some are "thimerosal-reduced"? What is the difference between "thimerosal-free" and "preservative-free"?

Thimerosal may be added at the end of the manufacturing process to act as a preservative to prevent bacterial or fungal growth in the event that the vaccine is accidentally contaminated, as might occur with repeated puncture of multi-dose vials. When thimerosal is used as preservative in vaccines, it is present in concentrations up to 0.01% (50 micrograms thimerosal per 0.5 mL dose or 25 micrograms mercury per 0.5 mL dose). In some cases, preservatives are added during manufacture to prevent microbial growth. Use of thimerosal during the manufacturing process contributes considerably less to the final content of vaccines (less than 0.5 micrograms mercury per 0.5 mL dose).

Vaccines may be termed "thimerosal-free" if no thimerosal can be measured; i.e., thimerosal content is below the limit of detection. The term "thimerosal-reduced" usually indicates that thimerosal is not added as a vaccine preservative, but trace amounts (less than 0.5 micrograms mercury per 0.5 mL dose) may remain from use in the manufacturing process. Such trace amounts are not felt to be clinically significant, nor would they result in exposure exceeding any federal guideline for mercury exposure. The term "preservative-free" indicates that no preservative (thimerosal or otherwise) is used in the vaccine; however, traces used during the manufacturing process may be present in the final formulation. For example, some vaccines may be preservative-free but may contain traces of thimerosal (less than 0.5 micrograms mercury per 0.5 mL dose); in such settings, this information is noted in the package insert.

[Back to top](#)

Call to Bill 1/19/06
① OK to use
this to specify trace amount?
(yes)

② Eff. date?
6 months



State of Wisconsin
2005 - 2006 LEGISLATURE

LRB-4321/??

RLR:.....

In 1/19/06

JLD

~~PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION~~

RMR

Gen Cat.

1 AN ACT ...; relating to: mercury in vaccines. ✓

Analysis by the Legislative Reference Bureau

Current law requires the Department of Health and Family Services to carry out a statewide immunization program. This bill prohibits administering a vaccine containing mercury. However, if a mercury-free vaccine is not manufactured or is not available for purchase, a vaccine that contains less than a trace amount of mercury (0.5 micrograms of mercury per 0.5 milliliter dose) may be administered. If neither a mercury-free vaccine nor a vaccine containing only a trace amount of mercury is manufactured or if neither is available for purchase, the vaccine containing the least amount of mercury may be administered.

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

2 SECTION 1. 252.04 (12) of the statutes is created to read:

3 252.04 (12) (a) Except as provided in par. (b), no person may administer a
4 vaccine that contains mercury in this state.

5 (b) If a vaccine containing no mercury is not manufactured or is not available
6 for purchase, a vaccine containing less than 0.5 micrograms of mercury per 0.5

1 milliliter dose may be administered, and if a vaccine containing less than 0.5
2 micrograms of mercury per 0.5 milliliter dose is not manufactured or is not available
3 for purchase, the vaccine with the least amount of mercury may be administered. ✓

4 **SECTION 2. Effective date.**

5 (1) This act takes effect on the first day of the 7th month beginning after ✓
6 publication.

7 (END)

Cross, William

From: Lujene [lgclark@nomercury.org]
Sent: Tuesday, January 31, 2006 12:35 AM
To: rdurano@usfamily.net; Cross, William
Cc: 'bobbie manning'
Subject: RE: Representative Gronemus may be drawing up a mercury-ban bill this wednesday.
Attachments: Nebraska_LB790-2006.pdf

Tim & Mr. Cross,

Nebraska (see attached) introduced a bill (LB 790) on January 5, 2006 to ban mercury in vaccines. It is a fairly comprehensive bill but easy to understand. The language may need to be adjusted to conform to your state but overall it is an excellent bill. It contains language to discourage the nefarious tactics such as those by the Illinois Department of Public Health to abuse the exemption provision. The language is below:

Sec. 5. The Director of Health and Human Services may exempt a vaccine or other drug that contains mercury from the requirements of section 3 of this act if he or she finds, and the Governor concurs in writing, that an actual or potential incident or public health emergency, including an epidemic or medical supply shortage, makes necessary the administration of such vaccine or other drug. Such exemption shall meet the following conditions: (1) The exemption shall not be issued for an effective period of more than twelve months; (2) Within forty-eight hours after the issuance of the exemption, the director shall provide written notification of the exemption, which shall include an explanation of the findings giving rise to the exemption, to both the Legislature and any other party who requests the exemption in writing; (3) Subsequent exemptions, not to exceed effective periods of twelve months each, may be issued for the same incident or public health emergency if the director determines, and the Governor concurs in writing, that such incident or emergency requires an extension or renewal of the prior exemption. Such extended or renewed exemption shall meet all of the conditions of this section; and (4) The use of the vaccine or drug under the exemption is subject to the requirements of section 4 of this act.

This is excellent language to provide a "safety net" for public health in the event of a TRUE "pandemic" yet strongly discourages the type of abuse seen in Illinois.

If I can be of assistance, please contact me at (417) 358-2331.

Lujene G. Clark
 President
 NoMercury

PS - Some advice to help get the bill passed: First and foremost stay away from the "autism" word...it is too controversial. Your message should be simple - Mercury is toxic; some vaccines and biologics contain mercury; children should not be injected with mercury.

The numerous scientific studies (and their explanation in layman's terms) needed to strengthen your case for passage of this legislation can be found at <http://www.nomercury.org/science.htm>

The reason that NoMercury has stuck with the "mercury is poison and should not be in vaccines" message is because it works. The rule of thumb that has been used successfully in passing thimerosal legislation is to stay away from the word "autism" and stick to the message that mercury causes mercury poisoning. There is a plethora of peer-reviewed scientific studies published over the last 50 years that mercury and specifically, Thimerosal (49.6% ethyl mercury by weight) is genotoxic (damages DNA), nephrotoxic (damages kidneys), immunotoxic (damages the immune system), cytotoxic (causes cell death), cardiotoxic (damages the heart), thyrotoxic (damages the thyroid) and neurotoxic (damages the neurological system).

The second part of our message has been that children deserve ALL vaccines and biologics to be free of a known & proven toxic substance.

The third part of our message has been that parents deserve an immunization program they can trust or the immunization program/public health policy WILL fail.

02/06/2006

Use the KISS principle...it is proven and it works! Every state that stuck to THAT formula passed the bill. Every state that got into the mercury=autism debate got their bill killed by pharmaceutical lobbyists and the Department of Health (on orders from the CDC).

Yes, it IS that simple. One of the reasons we have been so successful is because we went after mercury causing neurodevelopmental damage. People get hung up on the "Autism" word and we lose them. You can literally watch their eyes glaze over while lobbying if someone talks about "autism" but the very next testimony can be about mercury being dangerous and causing neurodevelopmental harm and you see that same legislator (who previously tuned out) nod and agree. It really is amazing and until you see it first-hand it is hard to comprehend that mental disconnect they have with the "autism" word.

"Autism" is a psychiatric diagnosis. Our children are not psychotic; they have REAL medical problems and can be treated if medical professionals acknowledge the physical symptoms. If you use the "autism" word you have given them permission to write us off as "wacko" parents because they will claim "the IOM has settled THAT debate" without ever reading in-depth the numerous qualifiers or caveats that surrounded the report.

Even legislators, pharmaceutical lobbyists and public health personnel have a difficult, if not impossible time, defending mercury. Their arguments are weak and the science against mercury (even Thimerosal) is STRONG. Many of the biological mechanisms for the damage caused by Thimerosal have been identified. Thanks to numerous studies published within the last few years, we have a better understanding of why some children are more susceptible to the harmful effects of Thimerosal than others. They are hard pressed to find a study that states mercury is not harmful. If you use "mercury is poisonous and should not be given to children" then you have REALLY backed pharma, CDC, FDA, EPA, AMA, AAP, State Legislators and Congress into a corner. NO ONE wants to go on record saying mercury is not harmful (even **Kathleen Stratton and Marie McCormick of the IOM** have given public statements that giving mercury to children is not a good idea). Public health officials will testify that mercury does not cause "autism" yet these SAME individuals refuse to state that mercury is not harmful to children (even admitting that small amounts of mercury causes neurodevelopmental disorders). Case in point, an employee from Missouri State Department of Health ACTUALLY testified that "thimerosal does not cause autism" but this same gentleman testified that "mercury is harmful to children" even in small amounts when questioned by Missouri State Representative Kevin Threlkeld (who is also a "mainstream" physician as well as a State Representative).

The inherent dangers of mercury in medicine is a factor that legislators, educators, environmentalist, physicians, etc. can easily understand...**MERCURY IS DANGEROUS AND IS CAUSING NEUROLOGICAL HARM TO THOSE EXPOSED TO IT IN ANY FORM, INCLUDING THE MERCURY FOUND IN THE FLU SHOT. CHILDREN WHO HAVE MERCURY POISONING, LIKE LEAD POISONING, NEED IMMEDIATE AND EXTENSIVE MEDICAL TREATMENT!** The government needs to intervene on these children's behalf, just as they did with lead. Keep hitting that message with the lead comparison and you have a much better chance at success.

In my opinion, that should be your message.

Thanks,

Lujene G. Clark
President & Co-Founder
NoMercury

Post Office Box 585
Carthage, Missouri 64836
(417) 358-2331 home
(417) 434-4928 cell

www.NoMercury.org

- NoMercury is a philanthropic based venture whose mission is to educate policy makers, physicians and the public regarding the dangers associated with the use of Thimerosal, a mercury containing preservative used in vaccines intended for pregnant women, infants, children and senior citizens.
- We do **not** solicit funds **nor** do we accept donations. NoMercury does **not** endorse any products or services. It is a labor of love in honor of our mercury poisoned child.
- We have **not** filed a lawsuit against any vaccine manufacturer or physician.
- We are **not** "anti-vaccine" rather we advocate for safer vaccines.

02/06/2006

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From: Tim Ziegeweid [mailto:rdurano@usfamily.net]

Sent: Monday, January 30, 2006 9:22 PM

To: william.Cross@legis.state.wi.us; Lujene G. Clark; bobbie manning

Subject: Representative Gronemus may be drawing up a mercury-ban bill this wednesday.

Hi Bobbie and Lujene. I just spoke with Brabara Gronemus's assistant William Cross and he tells me that Barbara and her staff may attempt to author a mercury-ban bill sometime later this week. William or another staffer may get in touch with you Lujene in order to get the best possible bill. Best wishes to all. Tim

LB 790

LB 790

LEGISLATURE OF NEBRASKA

NINETY-NINTH LEGISLATURE

SECOND SESSION

LEGISLATIVE BILL 790

Introduced by Hudkins, 21; Stuthman, 22

Read first time January 4, 2006

Committee: Health and Human Services

A BILL

- 1 FOR AN ACT relating to public health; to adopt the Mercury Vaccine
- 2 and Drug Act; to provide a penalty; and to declare an
- 3 emergency.
- 4 Be it enacted by the people of the State of Nebraska,

1 Section 1. Sections 1 to 8 of this act shall be known and
2 may be cited as the Mercury Vaccine and Drug Act.

3 Sec. 2. For purposes of the Mercury Vaccine and Drug Act:

4 (1) Drug means: (a) Substances listed in the United
5 States Pharmacopoeia and National Formulary, the Homeopathic
6 Pharmacopoeia of the United States, and any supplement to such
7 documents, as such documents existed on January 1, 2006; (b)
8 substances intended for use in the diagnosis, cure, mitigation,
9 treatment, or prevention of disease in humans or animals; (c)
10 substances, other than food, intended to affect the structure or
11 function of the body of humans or animals; and (d) substances
12 intended for use as a component of any substance specified in
13 subdivision (1)(a), (b), or (c) of this subdivision, not including
14 devices or device components, parts, or accessories that are not
15 otherwise drugs;

16 (2) Person means an individual, partnership, limited
17 liability company, corporation, or other association; and

18 (3) Trace amount of mercury means no more than 0.5
19 micrograms of mercury per 0.25 milliliter or 0.25 gram of vaccine
20 or drug. The mercury may be in the form of a mercury-containing
21 component, including, but not limited to, thimerosal.

22 Sec. 3. Except as provided in sections 4 and 5 of this
23 act:

24 (1) On and after July 1, 2006, no vaccine or other drug
25 administered in the State of Nebraska shall contain more than a

450.01 (10)

Per Bill
Cross -
just cover
drugs for
people

1 trace amount of mercury; and

2 (2) On and after July 1, 2008, no vaccine or other drug
3 administered in the State of Nebraska shall contain any level of
4 mercury.

5 Sec. 4. (1) No vaccine or other drug containing any
6 amount of mercury, including a trace amount of mercury, shall be
7 administered unless the recipient, or his or her legal guardian,
8 has signed a consent form as provided in subsection (2) of this
9 section prior to receiving such vaccine or other drug. The person
10 administering such vaccine or drug shall retain the signed consent
11 form, or a copy thereof, in the recipient's permanent medical
12 record.

13 (2) The Department of Health and Human Services shall
14 create and make available for use a standardized consent form
15 stating that the patient or patient's parent or guardian (a) has
16 been made aware that the vaccine or other drug to be administered
17 to the patient contains mercury, (b) has been advised that (i) all
18 forms of mercury are dangerous toxins, (ii) exposure to even low
19 levels of mercury may result in irreversible systemic damage to the
20 brain, nervous system, and other organs and systems in humans and
21 animals, and (iii) mercury ingestion may cause adverse behavioral
22 and other changes, and (c) consents to the administration of such
23 vaccine or other drug.

24 Sec. 5. The Director of Health and Human Services may
25 exempt a vaccine or other drug that contains mercury from the

1 requirements of section 3 of this act if he or she finds, and the
2 Governor concurs in writing, that an actual or potential incident
3 or public health emergency, including an epidemic or medical supply
4 shortage, makes necessary the administration of such vaccine or
5 other drug. Such exemption shall meet the following conditions:

6 (1) The exemption shall not be issued for an effective
7 period of more than twelve months;

8 (2) Within forty-eight hours after the issuance of the
9 exemption, the director shall provide written notification of the
10 exemption, which shall include an explanation of the findings
11 giving rise to the exemption, to both the Legislature and any other
12 party who requests the exemption in writing;

13 (3) Subsequent exemptions, not to exceed effective
14 periods of twelve months each, may be issued for the same incident
15 or public health emergency if the director determines, and the
16 Governor concurs in writing, that such incident or emergency
17 requires an extension or renewal of the prior exemption. Such
18 extended or renewed exemption shall meet all of the conditions of
19 this section; and

20 (4) The use of the vaccine or drug under the exemption is
21 subject to the requirements of section 4 of this act.

22 Sec. 6. Any insurer authorized to transact the business
23 of insurance in the State of Nebraska that provides insurance
24 coverage for early childhood immunizations pursuant to a fee
25 schedule or on a percentage reimbursement basis shall reimburse

1 for vaccines which do not contain mercury or a mercury-containing
2 additive or preservative on the same fee schedule or at the same
3 percentage rate as for vaccines containing mercury.

4 Sec. 7. The Department of Health and Human Services shall
5 establish procedures for the random testing of vaccines and other
6 drugs in this state to determine the amount of mercury contained
7 therein. The department shall semiannually report its findings, by
8 manufacturer, product name, lot number, lot expiration date, and in
9 micrograms of mercury per milliliter or gram of vaccine or other
10 drug, to the citizens of this state by posting such findings on its
11 web site.

12 Sec. 8. A person who knowingly administers a vaccine
13 or other drug in violation of the Mercury Vaccine and Drug Act
14 is guilty of a Class III misdemeanor. Such person may also be
15 civilly liable under the act. Any person awarded damages in a civil
16 action arising from a violation of the act shall be entitled to
17 reimbursement for reasonable attorney fees and court costs.

18 Sec. 9. Since an emergency exists, this act takes effect
19 when passed and approved according to law.

*Per Bill Cross,
Class C misd ex*