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Vaccine-preventable diseases return

Measles, whooping cough, and polio are on the rise, thanks to the "free market" approach to public health.

Amid the tumult and shouting over AIDS, especially since the certification of the Acquired Immune Deficiency Disease Initiative statute on the California ballot, another ominous threat to public health is becoming evident. This is the comeback of a number of vaccination preventable diseases, such as measles and whooping cough, in the United States and a number of other Western countries.

The most striking example is whooping cough, which has doubled over the last three years, from 1,895 cases in 1982 to 3,275 cases in 1985. So far this year there have been 1,223 cases compared to 807 reported at this time last year. This situation has come about as a result of a combination of factors which exemplify the effect of the "free market" approach to public health.

The most significant of these factors is a series of lawsuits against manufacturers of the Diphtheria-Pertussis-Tetanus (DPT) vaccine, which have driven all but one manufacturer. Lederle Laboratories of Wayne, New Jersey, out of the market. Lederle announced this June that it was raising the price of the vaccine to \$11.40 a shot! This compares with a price of \$0.45 in 1982, \$0.65 in 1983, \$0.98 in 1984, and \$2.80 in 1985. Over this same period of time, the Centers for Disease Control (CDC) budget for purchase of vaccines for distribution to state and local health departments has remained unchanged at approximately \$40 million a year.

In addition to the problem of

shortage of the vaccine is the fear of rare, but severe and sometimes fatal side effects. This has led many parents to refuse to have their children inoculated and has provided a basis for a resurgence of various and sundry antivaccination groups here and abroad. The consequences of this fear have been tragic. Japan banned the vaccine for two months, after two children died from side effects in 1974 and 1975. As a result many parents refused to inoculate their children after the ban was lifted, and from 1977 to 1979, 28,000 Japanese children developed whooping cough and 93 died of the disease. By comparison, Japan reported only 1,024 cases and 6 deaths between 1972 and 1974. Similarly, in Britain between 1977 and 1979, there were over 100,000 cases and 36 deaths from pertussis (whooping cough) after television broadcasts about side ef-

Measles is another preventable disease, which is now on the increase. This disease which used to affect 500,000 to 800,000 persons a year and which left a number of them deaf and brain damaged, had declined sharply after the licensing of an effective vaccine in 1963. In 1983 the number of cases had declined to 1,497. Since that time there has been a steady increase from 2,587 cases in 1984 to 2,813 cases in 1985 and, as of June 14, 1986, 3,340 had already been reported this year, an increase of over 50% from last year!

Another vaccine which has been the subject of numerous lawsuits is the

live poliovirus vaccine. In this case the problem has been cases of polio caused by the vaccine itself. These cases were the first large suits against vaccine manufacturers, predating the subsequent suits against other vaccines.

The common denominator of suits against these and other vaccines is in fact the success of vaccination for these diseases. The success of vaccination for polio, for example, has made the small number of vaccine-associated cases unacceptable precisely because they represent almost all, if not all, new cases of paralytic polio arising in the United States since 1972.

The real problem is the present "free market" approach to health care, which has succeeded in making vaccination, which has to be the most costeffective health care practice in terms of benefit/risk ratio, economically unfeasible. This has been accomplished by the same "quality control by litigation" philosophy which has driven medical costs through the roof, while enriching malpractice lawyers. All that is required is a couple of six or seven figure liability awards to raise vaccine costs to a point at which mass vaccination ceases to be a viable approach to protecting the nation's health.

The rare side effects of the pertussis vaccine can be reduced by an improved vaccine, available in Japan, but not in the United States. The problems of vaccine-caused polio could be eliminated by the use of killed vaccine, which is just as effective as the live vaccine for routine immunization and carries none of the risks of causing the disease it was supposed to prevent. All of the so-called vaccine problems are eminently manageable by a society which is committed to a rational concept of public health. It takes the "magic of the marketplace" to change one of the greatest benefits of medical science into a liability.

EIR July 18, 1986 Economics 19