Summary:
The Recommended Immunization Schedule is developed and approved by experts at the Centers for Disease Control and Prevention (CDC), the American Academy of Pediatrics (AAP) and the American Academy of Family Physicians. These experts determine the schedule based on scientific studies that determine the safety and effectiveness of these vaccines, given at these ages, along with the other recommended vaccines. Despite this method, some parents are hesitant to vaccinate their children. Some are concerned about vaccine safety in general, and some believe that too many vaccines are given when a child is too young. In 2007, Dr Robert Sears drafted a schedule to accommodate these parents. The schedule was published along with other information about vaccines in his book “The Vaccine Book: Making the Right Decision for Your Child” This article describes some of the concerns with his schedule and assertions about vaccines.

Article Details:
Authors of this article tackle some of Sears’ arguments about vaccines. Sears argued in his book that diseases that can be prevented by vaccines are not all that bad. In this article authors discuss one particular case Sears mentioned, where a 6 month old baby had an ear infection cause by pneumococcus (for which experts recommended getting a vaccine). This infection spread to the skull bones, and the baby required IV antibiotics, and surgery. Sears seems to consider this not serious, and also fails to discuss the 200 deaths that would occur from this disease each year before the vaccine, and many more cases of serious illness.

Dr Sears also made the argument that natural immunity, which one gets from having a disease is better than immunity from a shot. This argument is poor because the diseases can be very dangerous to the children who get them, and potentially even more dangerous if they are aren’t gotten in childhood but rather when someone is an adult. While natural immunity may be better than shot-induced immunity, the risk you’re taking with your child’s health and life are not worth that small difference. Finally, a recent study has come out showing that children who get the measles (disease) are more likely to become sick with or even die from other causes, after they have measles because their immune system is damaged from fighting the disease.

Sears also asserted that testing for vaccines was not adequate. He pointed out that medications are tested for longer periods of time than vaccines. He did not discuss that vaccines are tested in far more individuals (often tens of thousands), and then continue to be monitored through the Vaccine Adverse Event Reporting System and the Vaccine Safety Datalink Project. These systems track all reported potential issues from receiving vaccines and look for patterns or potential problems. There are no medications with a similar system.

Sears also discusses concerns about specific ingredients in vaccines, such as thimerosal and aluminum. Since thimerosal has been removed from childhood vaccines this is no longer an issue, and other studies have not seen a rise in any problems in connection with its use. He also discusses how much aluminum vaccines contain, but doesn’t point out that there is much more in breast milk and formula than vaccines.

Finally authors of this article point out that the schedule Sears developed has greatly increased the amount of time that babies and children are left unprotected against very serious and potentially deadly diseases.