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Dear Colleagues,

Last week, the public health community closely watched the meeting of the Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP). There is traditionally great interest in this June meeting, as ACIP Committee members make immunization recommendations for the fall respiratory season. Coming just weeks after U.S. Health and Human Services (HHS) Secretary Robert F. Kennedy summarily removed all 17 existing members and two days later quickly named eight replacements, the anticipation for this year's summer meeting was high.

As I wrote in my <u>Statement on ACIP Changes on June 13</u>, the Secretary's decisions created confusion and uncertainty in the public health and medical communities. It was unclear if the Committee's deliberations and recommendations would follow the evidence-based, data-driven, and transparent processes that have made ACIP the gold standard for reviewing and assessing vaccination safety and effectiveness.

Now that the initial meeting has concluded, I want to share some reactions and discuss how the Illinois Department of Public Health will be responding.

The reconstituted ACIP made two recommendations and formed two new work groups:

- Flu shots continue to be recommended for everyone 6 months and older. However, flu shots containing thimerosal (approximately 4% of total flu shot supply) are no longer recommended.
- A new Respiratory Syncytial Virus (RSV) monoclonal antibody is recommended for children under 8 months old. This new immunization will be part of the Vaccines for Children (VFC) program that provides access for children who might not otherwise be able to obtain vaccines.
- The ACIP chair announced the creation of two new work groups to examine childhood vaccine schedules, including revisiting vaccines that have not been reviewed in years. These work group proceedings will not be open to the public.

The reconstituted ACIP did **NOT**:

- Provide any guidance on COVID-19 vaccines in advance of the fall respiratory season. The recent conflicting federal statements on COVID-19 vaccines, which were discussed in my <u>Dear</u> <u>Colleague Letter on COVID-19 Vaccines on June 6</u>, were also not addressed.
- Acknowledge that there is no link between thimerosal-containing vaccines and autism spectrum disorder; or that numerous evidence-based studies have shown that thimerosal, an ethyl-mercury-based preservative that keeps vaccines safe from bacterial contamination, is safe at the levels used in vaccines; and that in the U.S., thimerosal is only used in multi-dose vaccine vials.

I welcome ACIP's continued universal recommendations of flu shots, and our infants will benefit from another RSV preventative treatment option. Here in Illinois, under our Mercury-Free Vaccine Act, vaccine providers are already required to use vaccines without any mercury-based ingredients unless exempted by IDPH. The Department recognizes that numerous studies have shown that thimerosal is safe at the level used in vaccines, and these exemptions are allowed when the State experiences supply and access concerns.

Overall, though, the meeting left the Public Health community with continued questions on the credibility and transparency of the process by which the federal government is reviewing and assessing vaccine safety and efficacy. Discussions and deliberations by committee members regularly framed falsehoods as facts. Agenda items were changed last-minute. The Committee removed documents that CDC scientists had posted. Important topics such as COVID-19 and HPV vaccines were not discussed. Decision-making was not guided by a thorough review of the evidence.

I am encouraged that national organizations are raising their voices and working to preserve the credibility and transparency of the vaccine process. <u>The leaders of five major U.S. medical associations</u> <u>are uniting to support the science that vaccines save lives</u>. Additionally, AHIP, a national trade association for the health insurance industry, released a <u>statement reaffirming their commitment to</u> <u>safeguard vaccine coverage and access</u>.

Over the next several months, IDPH will convene our Illinois Immunization Advisory Committee, boosting its ranks to ensure the Committee consists of Illinois's premier experts in pediatrics, immunology, infectious diseases, and epidemiology. IDPH will continue to consult with national and state specialty societies, other states, and international experts to ensure that we are providing and promoting evidence-based recommendations.

These actions, in addition to closely monitoring federal agency activity and ACIP proceedings, will allow IDPH to guide health care providers with updated, detailed vaccine advisories that will help them best serve their patients.

Under Governor Pritzker's leadership, public health leaders, health care providers, and our residents should know that IDPH will continue to be their public health shield. We will be the credible, transparent, and evidence-based voice that our providers and residents need and deserve.

Yours in good health,

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