Docket: CDC-2025-0024

June 20, 2025

Public Comment for the June 25-27, 2025 CDC ACIP Committee Meeting

To the CDC ACIP committee:

I have no conflicts of interest to disclose. I am writing to express my grave concerns about the recent termination of all 17 existing CDC ACIP committee members, announced on June 9 by Robert F. Kennedy, Jr. Independent expert scientific and medical input from the ACIP committee is crucial to inform access to safe and effective FDA-approved and authorized vaccines and also to guide insurance coverage and coverage for uninsured children through the Vaccines for Children program. Vaccination rates for many diseases are far too low, and our communities are impacted by outbreaks of vaccine-preventable diseases such as measles, pertussis, and COVID. Many of these infections cause serious and potentially lifelong consequences in unvaccinated children and adults. Children should not die because of a lack of access to affordable vaccines. We need strong support for effective vaccination campaigns, including COVID, HPV, influenza, meningococcal, and RSV vaccines.

The recent restrictions on COVID vaccinations are a serious concern. All of us must have regular access to updated COVID vaccines, which must be made available widely and must be covered by health insurance. The scientific evidence is clear: COVID vaccination within the last year reduces the risk of symptoms, severe disease, disability, and death for people of all ages, including previously healthy people. The new policies impose harmful restrictions on COVID vaccines, which limit vaccine access for children, pregnant people, and adults under age 65. These restrictions also sow uncertainty and doubt about COVID vaccines, while there is no scientific basis for the restrictions. Please take action to reinstate universal COVID vaccine recommendations for people of all ages, at least once a year, for all COVID vaccine formulations.

Vaccine policy changes must be undertaken in a science-based, open, and transparent process that prioritizes public health. The COVID vaccine policy updates were done in a top-down fashion, without appropriate expert advisory committee input. FDA's VRBPAC committee members were not allowed to discuss the COVID vaccine policy changes at the May 22 meeting. There was no opportunity to provide public comment on the new policies before they were implemented. Influenza vaccine strain selection also occurred in a closed-door meeting without input from the FDA VRBPAC committee and with no opportunity for public comment. Please ensure that all vaccine policy decisions are made using appropriate open and transparent processes, which are essential to our democracy.

Thank you for your time.

Sincerely, Melissa East