

Blue Ridge Children's Center PLC
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Dockets Management Branch
Food and Drug Administration
Department of Health and Human Services
5630 Fishers Lane
Room 1061
Rockville, MD 20852

August 31, 2004

The following letter is in reference to Public Docket: 2004P-0349.

I am writing in support of the petition filed by CoMeD.



Julia D. Whiting, MD, FACEP, FAAEM

2004P-0349

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To Whom It May Concern:

I write as the medical director of a practice that is solely devoted to the treatment of autistic children. Additionally, my opinions are shaped by eight years of toxicology experience as a practicing emergency physician.

All of the children in my autism practice show objective evidence of heavy metal toxicity, and in most cases, the vaccines are the obvious culprit.

It is clear to most any lay person, that the presence of mercury in vaccines is a very bad idea. As one emergency nurse recently told me, when I informed her about thimerosal in the Td vaccine, "that's the best they could come up with?" with respect to choice of preservatives. In my experience, most patients who are informed choose to delay getting the Td, if it is at all possible to do so. Unfortunately, children and fetuses certainly do not have that luxury.

It is outrageous that today medical practitioners and consumers still have to think about this. Certainly 5 years after the AAP, the AAFP, and the US Public Health Service recommended that thimerosal be removed from vaccines, it is still there. Dangerous mercury-containing medical products include far more than vaccines. When I treat children and adults with otitis externa, I am conscious to write for Cortisporin Otic solution, rather than suspension, to avoid exposing the patient to mercury. However, if there is a perforation of the tympanic membrane, I cannot use the solution. There are many other prescription medicines which contain thimerosal in the US other than vaccines. To say nothing about the over-the-counter medications (various nasal preparations, ie Bayer's Neo-Synephrine; multiple hemorrhoid preparations; etc.)

Well-known recent events in the news have made it clear that politics have played an inappropriate role in legislation, protecting those who have manufactured thimerosal. Likewise, interests other than public safety are clearly behind the national regulatory agencies' failure to protect consumers from thimerosal.

I urge the FDA to take a stand for common sense safety, and scientific consistency. If the EPA recommends a limit of .1mcg/kg/day, than the FDA should be consistent and remove products which vastly exceed these limits.

Sincerely,



Julia D. Whiting, MD, FACEP, FAAEM
Medical Director, Blue Ridge Children's Center