

# Health experts condemn US vaccine recommendations

The Advisory Committee on Vaccine Practices' recommendations for COVID-19 vaccination prompt questions and concern. Washington Correspondent Susan Jaffe reports.



The first meeting of a vaccine advisory committee with all 12 of Health and Human Services (HHS) Secretary Robert F Kennedy's handpicked members—bypassing the usual vetting process—produced confusing recommendations, condemned by medical associations and public health experts. Even some members were puzzled at times: they decided to delay a vote on one proposal and approved another after earlier rejecting it.

Although the recommendations of the Advisory Committee on Vaccine Practices (ACIP), which reports to the US Centers for Disease Control and Prevention (CDC), are not mandates, federal law requires commercial and government insurers to pay the full cost of recommended vaccines for recipients.

The ACIP agreed that Americans should still receive an initial vaccination or booster to prevent serious complications of COVID-19, but added that they should first discuss the benefits and risks with a health-care provider. Physician groups and public health advocates say the prerequisite is unnecessary and will restrict access.

Patients already give informed consent and discuss any concerns with their provider before receiving medical care, said Jason Goldman, President of the American College of Physicians. "I can't pull the patient down and stick them with a needle and give them a vaccine. That's assault. That's illegal", he said. Another provider consultation "will prevent patients, especially in lower socioeconomic levels and areas without enough physicians, from getting their vaccines", he said.

Another ACIP recommendation advises the CDC to add "at least six risks and uncertainties" to a COVID-19 vaccine information statement for patients and providers. One item says

that evidence that the vaccine prevents serious illness is of "low quality", despite the statement's first sentence saying that vaccination lowers the "risk of severe illness, hospitalization, and death from COVID-19". Others warn that the vaccine may cause effects that are "not well understood", such as immune system damage and death due to myocarditis or pericarditis.

"It is out of step with the rest of the world", said Robert Califf, Commissioner of the US Food and Drug Administration under Biden. "There's been analysis by many consortia across the world, always getting the same answer, about a 40% reduction in death and hospitalisation compared to not getting the booster."

Another proposal asked state governments to consider requiring a prescription for the vaccine. It failed by one vote. Committee members appeared unaware that the measure would be superseded in 43 states that allow pharmacists to provide the vaccine without a prescription.

The ACIP also considered whether to change the 34-year practice of providing the hepatitis B vaccine at birth, to waiting at least 1 month after. Some committee members argued that if the mother tested negative for the virus, there was no need to vaccinate her child, although some mothers are not tested. Some medical association representatives, whose roles as ACIP liaisons have been sidelined, wondered what prompted the proposal.

Usually, the agenda is driven by the time of year, such as the approaching influenza season, or new data or vaccines, said Margot Savoy, Chief Medical Officer at the American Academy of Family Physicians. She has attended ACIP meetings for a decade. "We're no longer a part of those conversations in the [ACIP] working

groups so I don't know how they decided what to put on the agenda."

Flor Munoz, a paediatrician representing the National Foundation for Infectious Diseases at the ACIP meeting, was also puzzled. "A question I've had all along through these discussions is: why?" she asked the committee. "Why are we addressing this hepatitis B vaccine recommendation? Is there really a reason?" Along with Sandra Adamson Fryhofer, representing the American Medical Association, Munoz strongly argued against any change. The committee backed down and postponed a vote.

Another reversal came when the committee initially agreed to allow the federal Vaccines for Children programme to cover the combined measles, mumps, rubella, and chickenpox vaccine without restrictions that they had earlier approved. After a second vote, the committee agreed to apply the restrictions to the programme.

The recommendations are not final until approved by acting CDC Director Jim O'Neill, who is also Kennedy's deputy secretary. Susan Monarez, the previous CDC Director, said Kennedy dismissed her because she would not "pre-approve" the recommendations before they were adopted. HHS spokesperson Andrew Nixon told *The Lancet* that Monarez "verbally approved" the agenda. Her lawyers did not respond to a request for comment.

Nixon told *The Lancet*: "Kennedy supports bringing back the doctor-patient relationship and informed consent. Secretary Kennedy wants to make sure that people across our country have the information that they need to make an informed decision regarding their health care."

Susan Jaffe

For more on changes to the ACIP see [World Report Lancet](#) 2025; 405: e28

For the CDC's COVID-19 vaccination statement see <https://www.cdc.gov/vaccines/hcp/current-vis/downloads/covid-19.pdf>

For more on Monarez's dismissal see [World Report Lancet](#) 2025; 406: 1074-75