Statement of Chair Diana DeGette (as prepared for delivery)
Hearing on "Confronting a Growing Public Health Threat: Measles Outbreaks in the U.S."
Subcommittee on Oversight and Investigations

## February 27, 2019

Today, we will examine a serious public health emergency that's threatening communities across the country.

Since the start of this year alone, more than 159 people across 10 states have been infected by measles.

This is a highly contagious and potentially deadly disease that was once declared eliminated here in the United States – thanks to the development of a successful preventive vaccine.

Yet, despite that previous success, as we sit here today, we have communities across the country scrambling to protect their residents – and we have parents, who are reading daily headlines about an outbreak, worried about how they are going to protect their children and their families.

If there was ever one topic that should transcend politics or party-lines, this should be it.

On behalf of the American people, it is this committee's job to ensure that our public health agencies are doing everything they can to prevent the spread of this disease.

And I can tell you, right now, this committee has serious concerns about how our nation's public health system is responding to this current outbreak.

What we accomplished less than 20 years ago – in eliminating this disease – was truly amazing.

And we want to know exactly what this administration is doing to once again stop the spread of this highly-contagious disease.

We also want to know how we got ourselves back into this situation and what our agencies are doing to prevent another outbreak, such as this one, from happening again.

Before the measles vaccine was developed in 1963, there were half-a-million cases of the measles being reported every year to the CDC. 48,000 people a year were being sent to the hospital and, as a result, as many as 500 people a year died as a result.

It wasn't until the development of the measles, mumps, and rubella vaccine – known as the MMR vaccine – that we, as a country, were able to stop this horrific illness.

But despite that success, here we are again – as I said, less than 20 years later – dealing with the fear associated with yet another outbreak of this disease.

As of now, there have been 159 reported cases of the measles in 10 states, including in my home state of Colorado.

In fact, in my district last month, the Denver Public Health Department was forced to issue a measles exposure warning when an adult acquired the measles after traveling internationally.

Now, that seems to be isolated, but these recent outbreaks are cause for real national concern.

The national measles vaccination rate of children between 19 and 35 months old is currently at 91%.

That may seem high to some, but given the highly contagious nature of measles, it's well below the 95% vaccination rate that's required to protect communities and give it what is known as "herd immunity."

This so-called "herd immunity" is particularly vital to protecting those who cannot be, or are not yet, vaccinated against the measles – such as infants or those with prior medical conditions who are at a higher risk of suffering severe complications from the vaccine.

As our public health agencies have repeatedly emphasized, reaching that 95% vaccination rate is critical to preventing outbreaks such as the one we are experiencing today.

While the overall national rate of MMR vaccinations is currently at 91%, the rate in some communities is much lower – some are as low as 77%.

In fact, my state of Colorado has one of the lowest rates of kindergartners vaccinated for MMR in the country – well below the rate necessary to protect vulnerable children and people from this potentially deadly disease.

Outbreaks, such as the one we are seeing today with measles, remind us of just how interconnected our communities are.

They remind us how the decisions of one community can directly affect other communities across the nation.

We, as a nation, - to stop the spread of these deadly diseases - have to address the root cause of the problem. And we have to identify concrete steps.

We have to provide parents and community leaders with the real, science-based information – not only about how vaccines are safe, but why they are so important.

We need to support additional research into vaccine safety, to further increase consumer-confidence in these vaccines.

And we need to strengthen our public health infrastructure at all levels of our government to better prepare for, and respond to, these outbreaks.

We have to work together to protect the most vulnerable among us, and we have to find ways to ensure that an outbreak of measles once again becomes a rarity in this country.

I want to thank our witnesses who are here to testify today.

Dr. Nancy Messonnier, who is here on behalf of the Centers for Disease Control and Prevention, and is on the frontline of preventing this.

And Dr. Anthony Fauci from the National Institutes of Health – who is no stranger to this committee – is here to talk about his in-depth knowledge of the vaccines and how we can prevent these diseases from spreading in the U.S.

Thank you both for being here.