

A POX at Your House

Chickenpox parties are an old-school method to expose kids to the disease, but are they safe alternatives to an effective vaccine?

by Sarah McCoy

Chickenpox parties are meant to be unsanitary. Children swap whistles, cups, lollipops and are encouraged to cough without covering their mouths. The goal is to ensure everyone gets some quality time with the guest of honor, the varicella zoster virus, which lives in airborne respiratory droplets and is highly contagious.

Parents who are more afraid of exposing their children to vaccines than the virus hope their children will get sick, recover and enjoy a

SCHOOL DAYS

Before Billy and Suzy begin tallying As and Bs to their academic records, they've got to have DTaP, Hep A and B, and MMR on their shot records.

Each state has its own immunization requirements for school children, but the most common vaccinations include diph-



natural, lifelong immunity.

"Chickenpox is a normal childhood illness and I would rather not vaccinate against a relatively minor sickness that will give permanent immunity," says Jessica DelBalzo, mother of two children, ages 2 and 6, who is desperately seeking a chickenpox party in Flemington, N.J.

Statistics on such parties are difficult to find, but according to a study done by the American Academy of Pediatricians, the chickenpox vaccine is the second most refused by parents, behind only the measles, mumps and rubella. Chickenpox parties have been portrayed on *The Simpsons* and *South Park*, and

Web sites such as diyfather.com or mothering.com give tips on how to host a pox party with as much gusto as a birthday bash.

Parents who choose to enlist their children in such parties claim they've done their homework, weighed the risks and benefits, and made a thoughtful choice.

Still, many in the medical community shake their heads at such ideas.

"If parents came into my office and said they were going to a chickenpox party, I would tell them that they were putting their child's life in danger," says Dr. David Kimberlin, a member of the AAP. "We have a safe and effective alternative in the chickenpox vaccine.

theria, tetanus and pertussis (DTaP); hepatitis A and B; measles, mumps and rubella (MMR); haemophilus influenzae (Hib); polio; and chickenpox (varicella). A few states require the pneumococcal and/or meningococcal for college students.

There are exemptions, however. All states offer medical exemptions for individuals with

allergies to the vaccines or who are immunocompromised. Forty-eight states (excluding Mississippi and West Virginia) allow religious exemption and 15 offer philosophical exemption.

The CDC provides a complete list of requirements and documentation necessary for each state at cdc.gov.



“Chickenpox has associated with it mortality and morbidity. When you have lesions on your skin, you’re more open to skin infections like the flesh-eating bacteria or methicillin-resistant staphylococcus aureus (MRSA). So even if your child doesn’t die, there’s a risk that they might have permanent disfiguration from a bacterial infection of the skin that was made vulnerable by the chickenpox lesions.”

Typically, a child with chickenpox endures a fever, headache and about 300 lesions that are incredibly itchy. The sickness lasts about five to 10 days. (All aspirin products are to be avoided as they could cause Reye’s syndrome.) The AAP recommends the first dose of the chickenpox vaccine be administered at 12 to 15 months of age and a booster dose at 4 to 6 years of age.

A recent study by the Centers for Disease Control and Prevention shows that since the vaccine’s release in 1995 the mortality rate in children ages 1 to 9 has declined 90 percent; 85 percent of general pox infections

have been prevented as have 95 percent of severe infections, such as pneumonia and encephalitis. Before the vaccine, about 4 million people in the U.S. caught the illness annually, with about 10,600 of them being hospitalized and 100 to 150 dying.

Skeptical parents worry that the vaccine will not produce permanent immunity from wild strains of the virus. According to the AAP, parents are most concerned about the chickenpox vaccine, but in general are concerned that vaccines weaken the immune system and cause developmental disabilities.

Granted, there are possible side effects. Generally, they include a slight fever, soreness or swelling at the injection site and a mild rash. However, the Vaccine Adverse Event Reporting System finds that about 4 percent of chickenpox vaccinations induced serious reactions, such as seizure, pneumonia and neurological problems. As for a lifelong immunity, the rates are equal for catching breakthrough chickenpox whether the person was vaccinated or caught a wild strain of the virus.

However, concerned parents have an advocate in Barbara Loe Fisher.

The president and co-founder of the National Vaccine Information Center says: “Mass use of chickenpox vaccine by children in America has driven chickenpox out of the child population, where it was mild and self-limiting, and created increases in adult shingles...In addition, it is unknown how two doses of another live virus vaccine has interacted with the dozens of other vaccines given to children and contributed to an increasing number of children developing chronic immune and brain system problems.”

She urges parents to inform themselves and discuss their family medical history with trusted health care providers before making a vaccination decision. 6

VACCINE NATION

Vaccines have become a hotbed of contention with many parents asking: Are we overvaccinating our children?

Before the advent of vaccines, childhood was a perilous time—measles, polio, smallpox, and whooping cough struck almost every household. These diseases are nearly eradicated today, mostly thanks to our national vaccination program.

Currently, the Centers for Disease Control and Prevention recommends children (birth through age 18) receive approximately 56 to 68 doses of about 13 different vaccines. Many parents are afraid this exposure is causing autism and other long-lasting neurological side effects.

Dr. David Kimberlin, a member of the American Academy of Pediatrics Division of Pediatric Infectious Diseases, says he believes these concerns are unfounded: “Vaccines do not cause autism. People are hearing the zealots more than they’re hearing the proven medical facts. Vaccines prevent diseases that used to kill millions of children.”

Barbara Loe Fisher, co-founder and president of the National Vaccine Information Center, hopes that research will shed more light. She says the question “can only be answered with large, case-controlled prospective studies spanning several decades to compare the long-term health of highly vaccinated and unvaccinated individuals.”