Hi Sharyl,

Here are the numbers of compensable cases for encephalitis/encephalopathy and seizures in our database from October 1, 1988 to March 4, 2008.

Encephalitis/Encephalopathy 611
Seizure Disorders 711
Total 1,322

I'm providing both numbers to you, because there's not much difference in the medical history and outcomes for children that were compensated for "encephalopathy" versus "seizures." Those compensated for encephalopathy often had seizures as part of their clinical picture, and vice versa.

Do you know when your story is going to air?

I hope this helps,

Tina
The program allows injured individuals to seek compensation in a special court without cost to them. Certain injuries are presumed to have been caused or aggravated by the vaccine, and are on a table of injuries <http://www.hrsa.gov/vaccinecompensation/table.htm/>. If the injury is found to be consistent with a table injury without sufficient evidence of another cause, the family would be compensated. Injury cases not included on the current table also can be compensated if there is sufficient proof that they were caused by the vaccine. Since the program began, 2,100 families and individuals have received compensation.

Your Questions

1. How many vaccine court cases has the government compensated, been ordered to compensate, and/or agreed to compensate in which a vaccine-injured child ended up with and/or claimed autism and/or autistic symptoms? (We know of a number of cases, but have been told it is not a complete list.) Please break down these compensations by year.

The government has never compensated, nor has it ever been ordered to compensate, any case based on a determination that autism was actually caused by vaccines. We have compensated cases in which children exhibited an encephalopathy, or general brain disease. Encephalopathy may be accompanied by a medical progression of an array of symptoms including autistic behavior, autism, or seizures.

Some children who have been compensated for vaccine injuries may have shown signs of autism before the decision to compensate, or may ultimately end up with autism or autistic symptoms, but we do not track cases on this basis.

2. Is the government currently conducting research on the pending vaccine court autism plaintiffs to see if there are commonalities, patterns of pre-existing conditions or other patterns of medical and/or genetic factors that could play a role, such as in the Poling case?

We are not commenting on the Poling case at this time. In 2002, the Chief Master of the U.S. Court of Federal Claims created the Omnibus Autism Proceeding to adjudicate petitions filed with VICP alleging autism or autism spectrum disorder from either the MMR vaccine or thimerisol-containing vaccines, or from both. Anticipating large numbers of claims, the Court allowed the filing of "shortform" petitions, but without medical records. As a result, a very small number of the pending 5,000 claims have medical records, making it impossible for us to review and compare commonalities, patterns, or any general trends among all of the petitioners. Over time, we may learn more about patterns of pre-existing conditions and the role vaccines play, if any, in their progression. As we have done in the past, the VICP medical staff will look at the court findings and any new scientific information, and may publish scientific articles as appropriate.

3. Several high ranking government health officials including Dr. Zerhouni and Dr. Gerberding have been claiming they did not know of the Polling case until the media began reporting on it, and still have not seen the medical files. This implies that the nation's top health officials are not apprised of the findings and cases in vaccine court. Is this correct? And has it always been the case?

CDC and NIH, along with other agencies in the U.S. Department of Health and Human Services and the scientists and health professionals involved in the nation's immunization programs, do regularly share information and collaborate together on the wide variety of issues surrounding vaccines and vaccination. In their respective roles, Dr. Zerhouni and Dr. Gerberding comment frequently on the safety and efficacy of vaccination. Under the National Childhood Vaccine Injury Act, and consistent with the federal Privacy Act, access to medical files is limited to HRSA's Division of Vaccine Injury Compensation staff and medical experts, as well as the legal personnel at the Department of Justice and the U.S. Court of Federal Claims, who may see these records in the course of litigation. This has always been the case.