

## **Anthrax vaccine op-ed**

*by Thomas L. Rempfer*

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### **Concerns:**

A fighter pilot questions the effectiveness of the military's immunization program and calls for an independent review.

### **About the issue:**

Thomas L. Rempfer, a Captain with the Connecticut Air National Guard, is a U.S. Air Force Academy graduate who has served tours as a senior fighter pilot in Bosnia and the Middle East. Recently, Rempfer and dozens of other pilots resigned rather than disobey an order to take a mandatory anthrax vaccine.

Pilots refusing the vaccine have expressed concerns about the safety of the vaccine. Pentagon officials maintain that the shots have been successfully administered to more than 200,000 service members. Defense Secretary William S. Cohen, concerned about the possible use of anthrax-releasing weapons against U.S. troops, wants to inoculate the entire 2.4 million active-duty and reserve force by 2005. Meanwhile, the Air Force is creating a panel that will take a renewed look at the year-old program of mandatory vaccinations, The Sun reported last week.

Rempfer and other service members, representing the pro and con sides of the inoculation issue, are to testify on the vaccination program Wednesday before the National Security Subcommittee of the House Committee on Government Reform and Oversight. He wrote this article for The Sun.

### **Anthrax vaccine offers no sure cure in warfare**

Members of each branch of the U.S. armed forces, both active duty and reserve, share concerns about the military's Anthrax Vaccine Immunization Program. Some of these concerns relate to health, safety and the vaccine's unknown relation to Gulf War illness. Some feel that the vaccine might not effectively protect against anthrax weapons that could be used in biological warfare.

Others question why we are using an outdated vaccine to defend against a military threat that has existed for decades. Even commanders in the field are in a quandary over how to convince their troops of the vaccine's safety and effectiveness. All these points serve to complicate the task of Defense Department officials who face the enormous responsibility of protecting our armed forces.

My concerns about the anthrax vaccination policy began when it was announced in December 1997, while I was on my most recent tour of duty in the Persian Gulf. Later, at the request of my commander, I was part of a panel that reported on service members' concerns about anthrax. Many safety issues were raised. However, I would like to draw attention to points that are not often brought up during discussions of the anthrax program -- particularly questioning whether this program can be a necessary and effective part of military doctrine.

Is it effective, for example, to vaccinate against only one of many possible biological threats? By implying that our troops are protected against one pathogen, is it possible they will become vulnerable to other agents or toxins? Also, deadly consequences are possible for our troops if our civilian and military leaders mistakenly believe that we can withstand a biological attack. Could we create a dangerous facade of protection by using a vaccine that might not protect against all strains of anthrax? Will a doctrine of defense against biological weapons persuade other nations to institute biological-weapons programs? Could we legitimize biological attacks, at home and abroad, by emphasizing our capability to defend against biological threats?

### **Some historic context might help answer these questions.**

After the horrors of World War I, the world's leaders attempted through treaties to ensure that chemical weapons would not be used in future wars. This restraint proved itself in 1945, when even the fading Third Reich of Nazi Germany refrained from staging chemical or biological attacks.

In addition, we might note a parallel between the nuclear threat of the Cold War era and the anthrax threat of today. Just as building bomb shelters proved unnecessary against the nuclear threat, perhaps a similarly reflexive response to the threat of biological weapons will prove dubious. Our nation's strength and willingness to respond with massive retaliation won the Cold War. This time-tested strategy of deterrence might also be the way to avoid a biological and chemical arms race. If troops must have protection against biological weapons, it should be part of a broad response to all biological weapons. Besides the procurement of highly pressurized vehicles and structures, a protection strategy should be based on the four foundations of intelligence, threat detection, external protection and medical treatment. These represent a comprehensive method for safeguarding troops from any biological or

chemical weapon. In contrast, vaccinations against single biological threats might be an unwise and expedient tactical response to a strategic problem.

This doctrinal debate is healthy and essential to our future. The dialogue should continue within Congress, the Defense Department and America's think tanks.

However, it should be remembered that deviating from past international consensus by passively accepting the inevitability of biological attack is not consistent with our doctrine of deterrence. Indeed, our nation's top civilian leaders should undertake a thorough review of the anthrax vaccination policy. Because the anthrax threat and the vaccine are not new -- the shots were first administered about 1970, though the mandatory program began a year ago -- it might be wise to step back and determine if a new doctrine that mixes biology and bullets is prudent. Service members know the risks of their profession and are willing to face them while protecting the nation's interests. When these men and women joined the armed forces, they swore an oath to defend the Constitution and obey the lawful orders of those appointed over them. Therefore, America's citizens, civilian leaders and military commanders must ask why military pilots are leaving their planes, why Marines are leaving the Corps, why soldiers and sailors are leaving the service of their nation over the anthrax vaccination policy.

These service members are making a principled decision, at significant personal sacrifice, and it is a grave loss for our country. An independent review might find that the policy's costs far outweigh its limited benefits.

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