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THE WHITE HOUSE

Statement by the President

I would like to issue the following statement about the polio vaccine situation. The last week has been both eventful and encouraging.

A committee of scientists is now screening polio vaccine before it is released for public use. The Surgeon General of the Public Health Service tells me that it is hoped to release some vaccine within a few days. Batches of vaccine must pass the most careful tests that scientists can devise and be as safe and effective as man can make the vaccine.

According to Dr. Francis' report on last year's field tests, the child who was vaccinated had a three times better chance of avoiding polio than the child who was not vaccinated.

There has been delay in the vaccination program. But remember - we are dealing in this field with the lives of our children and our grandchildren. Because of scientific work that was done during that delay science has learned new things about the way viruses behave in large scale manufacture and about the way we should make vaccine. Scientists have been able to design testing techniques of greater sensitivity and production techniques which build in a greater factor of safety and additional checks on the final product. So from that delay science has gained new knowledge, new safeguards.

I want to caution the people of our nation about two things:

First: No vaccination program can prevent all cases of the disease against which it is directed. Let us not forget that Dr. Francis reported the polio vaccine as used in the 1954 field trial was found to be 60-90% -- not 100% -- effective in the field trials last year.

Second: Although the manufacturers are now moving toward full scale production and distribution of this vaccine, it will take them varying periods of time to "retool" to meet the revised production standards. During the months immediately ahead we must be patient while our limited supply of vaccine is used first to help protect those who need it most.

Every parent and every child should be grateful to those scientists who have been working without rest and without relief during recent weeks to find answers to the problems that caused the delay. They have found these answers and another battle in the continuing fight against polio has been won.

DISTRIBUTION

Since April 12 the National Foundation for Infantile Paralysis has been furnishing free vaccine for children in the first and second grades, and for children in the third grade who participated in the field tests of vaccine last year. More than 5 1/2 million children have been vaccinated -- ircluding one of my grandchildren, a first grader. This free vaccination program is the initial method for getting the vaccine to our children. No vaccine is now being distributed in any other way.

Sufficient vaccine to complete the Foundation's program should be released within 60 days. Until it is finished all vaccine produced will go to the Foundation.

The fact that some children do not get their second injection promptly will not reduce the effectiveness of the first injection. Dr. Salk, himself, stated last week that the level of immunity developed by the first injection would last many months.

DISTRIBUTION WHEN THE FOUNDATION PROGRAM IS COMPLETED

As soon as the Foundation program is completed, distribution must continue to proceed in a fair and orderly manner. The Secretary of Health, Education and Welfare presented to me two weeks ago a sound plan for the distribution of the vaccine. I promptly endorsed that plan and made it public.

Briefly the voluntary control plan for distribution will work as follows:

1. Priorities: The vaccine must be used first for those most susceptible to polio. Not only is this just, but also by reducing the incidence of the disease among those most likely to get it we increase the protection for all of us. The National Advisory Committee on Poliomyelitis Vaccine and the Secretary of Health, Education and Welfare have recommended that the vaccine be administered first to children of the ages of 5 to 9, inclusive.

I strongly endorse this recommendation and call upon our people to adhere strictly to the age 5 to 9 priority during the months ahead. No person not in the 5 to 9 age group should be vaccinated until the children of these age groups have received two vaccinations. The doctors of the country, through the American Medical Association, have pledged their support of these priorities.

The age group of second priority will be established and announced in due course.

2. Output of the Manufacturers: Each of the manufacturers of the vaccine has individually agreed to distribute his entire output of vaccine in accordance with this overall

plan adopted by the Secretary of Health, Education and Welfare on the recommendation of the National Advisory Committee.

- 3. Allocation to States. The Secretary of Health, Education and Welfare will compile reports on the total output of the manufacturers and allocate the vaccine to each State on the basis of its population of unvaccinated children within the 5 through 9 age group, and subsequently, for other age groups.
- 4. State Responsibility. The States will advise the Secretary of Health, Education and Welfare as to their general plans for distribution of the vaccine and, specifically, their shipping instructions for manufacturers. This information then will be transmitted to the manufacturers.
- 5. Vaccination Programs. To assure that no child is denied vaccination by reason of its cost, some states and localities may operate mass free public vaccination programs for all children.

Other states may provide free vaccination only for children whose parents are unable to pay, through clinics, schools and pre-school programs, or by furnishing free vaccine to private physicians. In those States, a portion of the State allocation of vaccine will flow into normal drug distribution channels for the exclusive use of children in the priority age brackets -- to be administered by family doctors.

To assist the States in providing free vaccinations, I have recommended that the Congress enact legislation making \$28 million available to the States for the purchase of vaccine. This legislation is now being considered by the appropriate Committees of the Congress and I urge its immediate adoption.

6. Keeping of Records. Doctors, as well as all manufacturers and distributors of the vaccine, will keep records of the vaccine they handle. Cooperation to this end has been pledged by the doctors, the manufacturers and the distributors.

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This plan for distribution of the vaccine can go into effect as soon as the free vaccination program of the National Foundation for Infantile Paralysis is completed. Under it, the Federal Government will assume responsibility for the equitable allocation of the vaccine among the States, and the States will assume responsibility for the direction of distribution within their borders.

The program will operate in a sure and orderly way, given the full cooperation of the State officials, the manufacturers, the distributors, the medical profession, and the people of the Nation. I am confident that the program will receive that support.

For these reasons I do not believe that regulatory legislation in this field is necessary.

We all hope that the dread disease of poliomyelitis can be eradicated from our society. With the combined efforts of all, the Salk vaccine will be made available for our children in a manner in keeping with our highest traditions of cooperative national action.