

# Hollywood's Vaccine Wars: L.A.'s "Entitled" Westsiders Behind City's Epidemic

**Vaccination rates are plummeting at top Hollywood schools, from Malibu to Beverly Hills, from John Thomas Dye to Turning Point, where affluent, educated parents are opting out in shocking numbers (leaving some schools' immunization rates on par with South Sudan) as an outbreak of potentially fatal whooping cough threatens L.A. like "wildfire"**

THE KIDS AREN'T ALL RIGHT. Across California, thousands of children and babies are coughing so violently that their bodies convulse, uncontrollably wheezing and fighting to breathe for weeks. Nearly 8,000 pertussis cases have been reported in 2014 to the state's Department of Public Health as of Sept. 2, and 267 of those patients have been hospitalized, including 58 requiring intensive care.

Adults can contract the disease, but 94 percent of all cases reported statewide involve children — and the youngest suffer the most. So far this year, three infants under 2 months of age have died statewide from pertussis, a disease commonly known as whooping cough (named for the high-pitched sound that kids make when they inhale after coughing).

Children's Hospital Los Angeles is at the front line, with 72 pertussis patients this year. "A number of them have been in the ICU and very, very sick," says CHLA infectious disease specialist Dr. Jeffrey Bender. "They cough so hard, it turns into vomiting and broken ribs; they end up intubated, to ventilate their lungs."

Although whooping cough was once a national scourge, killing more than 1,100 in 1950, decades of immunizations — the DTaP (diphtheria, tetanus and pertussis) vaccine and its forerunners — almost eliminated the disease. Only six Americans died of pertussis in 1995. Alas, an epidemic has arrived. (One case of pertussis typically can cause at least a dozen secondary transmissions because it is so communicable. Antibiotics do little to ameliorate the symptoms, except to shorten the period of infectiousness.) Medical officials are increasingly alarmed — especially here in L.A. No other county in California has more cases: 1,317 so far this year. "It's a smoldering fire that has started and it could be a complete wildfire if vaccination rates continue to fall," says Dr. Deborah Lehman, associate director of pediatric infectious diseases at Cedars-Sinai Medical Center.

And it's not just pertussis. According to the U.S. Centers for Disease Control, the number of domestic measles cases is at a 20-year high. About half of the cases in California involve unvaccinated patients.

Whether it's measles or pertussis, the local children statistically at the greatest risk for infection aren't, as one might imagine, the least privileged — far from it. An examination by *The Hollywood Reporter* of immunization records submitted to the state by educational facilities suggests that wealthy Westside kids — particularly those attending exclusive, entertainment-industry-favored child care centers, preschools and kindergartens — are far more likely to get sick (and potentially infect their siblings and playmates) than other kids in L.A. The reason is at once painfully simple and utterly complex: More parents in this demographic are choosing not to vaccinate their children as medical experts advise. They express their noncompliance by submitting a form known as a personal belief exemption (PBE) instead of paperwork documenting a completed shot schedule.

The number of PBEs being filed is scary. The region stretching from Malibu south to Marina del Rey and inland as far as La Cienega Boulevard (and including Santa Monica, Pacific Palisades, Brentwood, West Hollywood and Beverly Hills) averaged a 9.1 percent PBE level among preschoolers for the 2013-14 school year — a 26 percent jump from two years earlier. By comparison, L.A. County at large measured 2.2 percent in that period.

Many preschools in this area spiked far higher, including Kabbalah Children's Academy in Beverly Hills (57 percent) and the Waldorf Early Childhood Center in Santa Monica (68 percent). According to World Health Organization data, such numbers are in line with immunization rates in developing countries like Chad and South Sudan. These two schools aren't outliers; dozens more — including Seven Arrows, Turning Point and Calvary Christian — report PBE levels that are five times the county average. And *THR* has found that administrators at many of these facilities are hardly alarmed.

It's no secret that anti-vaccine sentiments run high on the Westside. But the data reveals a community where ambiguous fears about the perceived threat of immunization have in fact caused a very real threat. This is a hard topic to discuss, especially here in Hollywood. It hinges on parental choices that directly impact your own children and other parents' kids, too — a dinner-party land mine to be avoided at all costs. Few parents would speak to *THR* on the record about their decisions for fear of the backlash.

Yet this silence has turned the issue into a time bomb. At a time in which America is consumed with Ebola fears, a very real and preventable health crisis could explode in our backyard. With a whooping cough outbreak growing even faster than the swelling non-vaccination rate, questions of responsibility, both personal and collective, deserve urgent answers.

AT THE CORE OF THE DEBATE over vaccines is the immunization schedule itself. The CDC's recommended vaccine calendar, which most parents still follow, includes inoculations (sometimes in multiples) for 14 diseases. That's up dramatically from 1984, when kids got shots to ward off seven classics such as polio and the flu. Now, a child could get up to 19 shots in the first six months of life.

Underlying the revision of this schedule is a concept known as herd immunity, in which a community is protected against contagion if enough people have been vaccinated. The CDC indicates that herd immunity begins to be seriously compromised for whooping cough and measles when 6 percent or more of the population isn't properly immunized. And that's exactly what's happening on the Westside.

The trend has public health officials concerned that a hazardous health zone could emerge. "If a school has a PBE level that is so high that it crosses the herd immunity threshold," says Dr. A. Nelson El Amin, medical director of the L.A. County Department of Public Health, "a disease has a far higher likelihood to infect, to propagate and to reach all of the people who are not vaccinated."

Dr. Dolly Weisserman, a Santa Monica-based pediatrician, is more blunt: "We have seen a huge pertussis outbreak in Malibu and the Palisades area." (County health officials have not yet tabulated or released localized pertussis data for 2013 or 2014 to verify that observation.)

To be clear, a school's PBE level doesn't precisely measure how many students don't get vaccinated at all. The state requires parents to submit the form unless inoculations are strictly and fully obtained on time. Sometimes, the harried parents of fully immunized children submit a PBE because it's easier than getting a doctor's signature on other forms. (To change that, the California legislature passed a bill, which went into effect on Jan. 1, requiring an equivalent medical signature on PBE forms.) In other cases, parents plan to immunize children with late birthdays soon after the school year starts, when forms are due.

Still, most parents who submit a PBE elect to follow an alternative schedule that limits or delays the shots, working with a doctor who shares their views. The timetables are purposefully malleable, though many follow a program laid out by Dr. Robert Sears, a nationally prominent Orange County-based pediatrician who outlined his methodology in 2007 in *The Vaccine Book*. He supports delaying DTaP and flu inoculations and skipping hepatitis B and polio shots. Sears also considers the MMR vaccine (for measles, mumps and rubella) discretionary.

Most parents pursue alternate calendars out of a professed fear that the antigens (foreign toxins introduced to

evoke an immune response) or other substances in shots may hurt their kids. They're also wary of what they see as an unchecked expansion of the schedule over time.

Such feelings arose after the publication of British physician Andrew Wakefield's since-retracted and discredited 1998 research in the medical journal *Lancet* linking vaccinations to autism. Critics, like free-range social activist Robert Kennedy Jr., persist in claiming, against broad scientific consensus, that the mercury-based preservative thimerosal, which was removed from children's shots except for some flu vaccines years ago, is a threat. The movement grew in 2007, when Jenny McCarthy began her own highly vocal crusade linking autism to vaccinations. In light of broad censure, McCarthy has backed away from this position. (She declined to comment.)

Despite the debunking, public concerns remain strong. According to more than a dozen area pediatricians and infectious disease specialists *THR* spoke to, most vaccine-wary parents have abandoned autism concerns for a diffuse constellation of unproven anxieties, from allergies and asthma to eczema and seizures. "If I talk to most of my patients, who are very savvy by the way, they will say they know someone directly or indirectly who felt that their child has not been the same since the vaccine," says Dr. Lauren Feder, whose pediatrics practice, popular with those leery of immunizations, is based just south of L.A.'s Miracle Mile.

Experts on both sides of the issue say these families seem unconcerned about herd immunity — often questioning the legitimacy of the very concept — and the lack of medical evidence supporting the effectiveness of individualized calendars.

This dismays parents (and health care experts) who believe full immunization is a vital bulwark against serious and present public-health threats. "I know a lot of parents who stagger their kids' vaccines," says actress Amanda Peet, who has two young daughters (one of whom contracted pertussis despite having received two of her three shots) with her husband, *Game of Thrones* showrunner David Benioff, and is active with the U.N.'s Shot@Life vaccine campaign. "Their position is, 'Hey, why are you so gung ho on tanking your kids with all those vaccines?'" says Peet, who is expecting her third child. "They act almost concerned for me, and I want to say, 'Wait a minute, your children are actually benefiting from the barrier I'm putting in place for them, and now you're questioning my soundness of mind for doing that?'"

WHY WOULD PARENTS want to skip vaccinations or change the shot schedule for their kids? Why doubt a concept — maintaining high herd immunity to prevent the spread of disease — that is widely accepted by the medical establishment? Such suspicion frequently is rooted in a fundamental worry that parents and their children have been unfairly forced to participate in a rigid and potentially flawed system. "In the first world, there are countries that vaccinate much less — France, Sweden, Denmark, Iceland — and they do just fine," says biochemist Brian Hooker, Ph.D., a thimerosal opponent and adviser to A Shot of Truth, a nonprofit critical of vaccines. "You look at these countries and they are not being ravaged."

"There may be a safer way to vaccinate each individual kid, taking into consideration the family's travels, the family's history," says Santa Monica-based Dr. Jay Gordon, the most influential pediatrician among Westside vaccine decliners. (His Twitter followers include Alanis Morissette, Jenna Dewan Tatum, Kristin Davis and Emily Deschanel.)

Gordon, like Sears, concedes that opponents have issued him "a nasty challenge" to support his deviation from the endorsed schedule timeline, "and you're right, I can't prove it." His devotees don't need him to. For instance, actress Ione Skye, herself a former Gordon patient ("I never had antibiotics growing up; he really went the natural route") who now brings in her own two daughters to see the physician, believes that the alternative path she and her husband, musician Ben Lee, have chosen makes "instinctive" sense. "With my kids, I spaced them out and waited and missed some," she says. "As a mother, it just felt better to me — and my kids never had any reaction."

Doctors on both sides of the issue say vaccine-skeptical parents tend to trust their own gut more than the medical establishment. A distrust of corporate motives plays a pivotal role, too. "You have real animosities about pharmaceutical companies making massive profits," says Mark Largent, Ph.D., a historian at Michigan

State University and the author of *Vaccine: The Debate in Modern America*.

“These companies are not infallible,” says Barbara Loe Fisher, president of the National Vaccine Information Center, a top oppositional voice on child immunization. “You can understand why people are very frustrated by a growing list of vaccines that are being recommended and mandated by the government.” (Non-governmental agencies, including the WHO, American Academy of Pediatrics and UNICEF, endorse their use, too.)

Such views gail many doctors. “These are flat-world people,” says Brentwood pediatrician Dr. Robert Landaw. “They’re speaking against science.”

The CDC resolutely has battled public anxiety about vaccine safety. “Every day, a healthy baby’s immune system successfully fights off millions of antigens,” explains the agency on its website. “Vaccines contain only a tiny fraction of the antigens that babies encounter every day in their environment, even if they receive several vaccines on one day.”

Adds Cedars’ Lehman: “We don’t advocate for spread-out schedules because they leave children vulnerable. The schedule is set up the way it is because it’s been tested on tens of thousands of children. If you make up your own schedule, you are flying by the seat of your pants.”

THE WESTSIDE IS HARDLY THE ONLY PLACE where anti-vaccine sentiments run high. They’ve arisen in working-class religious and ethnic communities — Orthodox Jews in Brooklyn, the Amish in Ohio, a Somali enclave in Minnesota — that in turn have been trailed by measles outbreaks. It also isn’t the only wealthy region of a liberal, cosmopolitan sensibility to harbor vaccine skepticism. These beliefs have impacted Manhattan prep schools and classrooms in Marin County in the Bay Area.

Historically, this kind of dissent has not emerged from affluent communities. “A century ago, much of the resistance was coming from the working class, who were most targeted for compulsory vaccination: in steerage compartments on steamships rather than first class, in public schools rather than private schools, in factories rather than offices,” says Brandeis professor Michael Willrich, Ph.D, author of *Pox: An American History*. “But the contours here are anything but. It’s the story of the well-educated, upper-middle class or upper class.”

Today, on the Westside, those who abstain from vaccinating their kids see refusal through their own socio-anthropological lens. “They’re well intended — the people that only want to do the best for their child. They want only natural products, organic foods, attachment parenting, family beds,” says Dr. Lisa Stern, a Santa Monica pediatrician. Observes Dr. Neal Baer, a trained pediatrician and veteran TV writer-producer (*ER*) who wrote an episode of *Law & Order: SVU* about the public health consequences of vaccine refusal, “It’s about not wanting to have anything that isn’t ‘natural’ in your child — this whole notion of the natural and holistic versus the scientific.”

For his part, Gordon sees in this stance a commitment to well-being that deserves respect. “These parents aren’t feeding their kids junky foods, they are making sure [their kids] are wearing their bicycle helmets and they just want to have a real discussion about vaccines — and [other doctors] just won’t have it,” he says.

According to those on both sides of the issue, this demographic is unafraid to take on the medical establishment. “They are not intimidated by the authority of the doctor,” says Brendan Nyhan, Ph.D, a political scientist at Dartmouth who has studied parents who are vaccine skeptics. “Educated, high-income people are more likely to feel confident in standing up to doctors or seeking out ones who are more favorable to alternative schedules and selective vaccination.”

Many irked local pediatricians, however, describe a parent profile defined by ignorance that’s sheathed in arrogance. They say these misguided guardians are seduced by anecdotes about “vaccine-damaged children” and are prone to confirmation bias (the impulse to favor information that affirms pre-existing beliefs). In addition, assert some doctors, these parents tend to believe hours accrued researching on the Internet and engaging in urgent conversations within their social circle give them the authority to debate the legitimacy of immunization

with their child's health care provider.

"It's a sense of entitlement and it comes out of a customer mentality since they are often choosing their doctor and paying cash," says Dr. Nina Shapiro, the director of pediatric otolaryngology (ear, nose and throat conditions) at UCLA's Geffen School of Medicine and a vocal critic of anti-vaccine sentiment.

Of course, local pediatricians partial to vaccine skepticism harbor a more benevolent view of such parental involvement. "They are focused, intense, very well-read," says Feder. "My patient population wants to participate. In the past, that didn't happen; you did as you were told. Now they make decisions sometimes with or without the permission of their practitioners. I try to meet patients where they are and maybe take them a little further."

Gordon concurs. "Parents have a right to participate in the discussion, to decide when and how their children are vaccinated," he says. Fisher, with the National Vaccine Information Center, argues that the way doctors talk to parents about vaccinations must change. "That authoritarian, paternalistic approach to medical care isn't going to work in the 21st century," she says. "What's really disturbing with that kind of attitude is the elitism that's inherent."

Skye puts it this way: "People want to feel like they aren't being told what to do."

WHILE THE VACCINATION DEBATE continues to roil, the data is clear: Immunization rates have precipitously dropped at Westside schools. And experts say they've begun to cross a perilous threshold. Yet you wouldn't know there's a crisis by talking to school administrators. *THR* contacted several dozen educational facilities where PBE levels rank among the area's highest. A minority of them responded. Of those that did, officials at only four openly admit unease.

"I have been concerned," says Shari Latta, director of Children's Creative Workshop in Malibu, whose PBE level is 53 percent. "I'd prefer that children be immunized. We've been fortunate to avoid any outbreaks." Notes Omid Kheiltash, assistant director of Seven Arrows in Pacific Palisades (17 percent): "Our PBE level isn't where it should be. We have done our best to educate our parent body that vaccinations are completely safe. ... We do anything short of enforcing it."

The rest offer nuanced interpretations to explain elevated PBE levels. A primary one is that students "tend to be undervaccinated rather than unvaccinated," says Kim Feldman, director of admissions at The Willows in Culver City (15 percent). Other administrators cite bureaucratic blunder ("It was a clerical input error by a city employee," assures Heather Sumagaysay, publicist for the city of Beverly Hills' Coldwater Park Preschool, 44 percent) or simple timing ("We start our school earlier," explains Diana Adams, assistant director of the Pacific Palisades Presbyterian Nursery School, 28 percent).

A few school officials claim to have been unaware of PBE levels until *THR* inquired, and others say they're not worried about the subject. "I've been here for 10 years and we haven't seen any outbreaks," says Elena van der Baan, administrator at Methodist Preschool of Pacific Palisades (21 percent). Concur Chana Hertzberg, director of the Palisades Jewish Early Childhood Center (18 percent): "Right now it's not a problem for us. I don't think it's an issue."

In their approach to vaccinations, these schools haven't taken a proactive stance — "If there was an outbreak, we would take those students off of campus," says LeDeana Satriano, an administrator at Crestwood Hills Cooperative Nursery School in Brentwood (39 percent) — often noting that they follow all health laws and inferring that there isn't anything they can do. Mostly private institutions, they are acutely aware that they provide a service in a competitive market for picky families who have the prerogative to take their tuition elsewhere. "It's about respecting the parents," says Roleen Heimann, director at New School-West (30 percent). "I am personally concerned — my grandchildren are immunized — but that is not the issue. The issue is honoring the parents' belief."

Health care experts see this attitude among skeptical parents and their obliging doctors and education officials as proof that vaccines are victims of success. “In the ’50s, everyone knew someone with an iron lung [used to help polio patients breathe],” says Santa Monica-based pediatrician Sheila Phillips, “and now they have this idea that immunizations are bad.” Experts also argue that the impact of outbreaks is often abstract among those who haven’t seen the dire consequences. “When a child does die of a vaccine-preventable disease, the parent always says the same thing: ‘I can’t believe it happened to me,’ ” says Dr. Paul Offit, chief of infectious diseases at Children’s Hospital of Philadelphia and, with his book *Autism’s False Prophets*, a prominent critic of anti-vaccine rhetoric.

What those in favor of full immunization find especially maddening is skeptics’ shrugging off of what they consider the social contract inherent in herd immunity. “It’s a more selfish time,” says Offit.

Gordon disagrees. “[Herd immunity] enters every single discussion I have with parents,” he says. “But it isn’t the predominant topic because they don’t come in with a 2-month-old baby and go, ‘What’s the best thing for Los Angeles?’ ”

Largent observes that herd immunity isn’t a convincing argument in modern societies like the Westside. “For [these people], what you’re saying is that the public good is more important than their child’s well-being,” he says. “I don’t think parents give a shit. It doesn’t work for them. It’s such a big, amorphous claim.”

Medical experts don’t find the threat amorphous at all. “Unvaccinated children put vaccinated children at risk,” says Stern. “When we vaccinate a child, there’s a certain percentage that don’t make antibodies. Herd immunity requires everyone to be vaccinated. If there are 10 percent unvaccinated, that puts everyone at risk.”

Likewise, Peet sees pernicious self-interest at play. “Parents don’t want to talk about the fact that when they don’t vaccinate, their school-age kids can easily expose newborns and people who are immune-compromised to disease,” she says. “If fewer vaccinate, there will be a tipping point and we’ll start to see infant mortality rates go up — they already have. Is that what it’s going to take?”

Landaw would say so: “All it takes is one bad epidemic and 90 percent [of skeptics] will change their mind.” Shapiro concurs. “A baby dies of whooping cough in the Palisades?” she says. “Let me tell you, everyone will be immunized. No question.”