

# Swine Flu Inoculation Fiasco Had Its Helpful, Harmful Sides

THE swine flu campaign now is regarded widely as a flop, but it has had three notable effects, two good and one bad.

It may have prevented some cases of flu. Good.

It demonstrated that nationalized dosage of medicines is subject to bureaucratic failures as well as medical risks. Good.

It may have been a setback to preventive medicine. Bad.

You might argue about how many cases of flu may have been prevented by the immunization project. So far, there has been no epidemic of flu, either among those who received the government-administered shots or among those who did not.

Other types of influenza have shown up, including Hong Kong-B, Victoria-A and a strain simply referred to as Type B. Vaccine used in the federal program was not claimed to be effective against all the many types of flu.

The original goal of the inoculation effort was to reach every

American, and Congress appropriated \$135 million to pay for it. Later, a spokesman for the Department of Health, Education and Welfare predicted 60 to 70 per cent of the population actually would be vaccinated. This proved to be too high.

Less than 25 per cent of the people took the shots, and critics blame the shots for deaths of more than 100 persons, and for paralysis of another 197. Positive proof that the shots caused these casualties has not been presented, but there is no doubt that the charges brought the program to a screeching halt.

They also resulted in a deluge of inquiries and claims in connection with the law which placed financial responsibility on the federal government. The suits range to more than \$1 million and bear a striking similarity to medical malpractice suits.

Physical differences of individuals constitute a major obstacle to success of mass medication. These cannot be given personal consideration by officials deciding whether or not to vaccinate millions of people, with varied characteristics, living in different parts of the country.

Socialized medicine appeals to certain people who may be unable or unwilling to pay high costs of medical care, but such care is not free. If patients don't pay, the public must.

Most childhood diseases can be prevented by immunization measures, but schools have encountered indifference, procrastination and resistance among parents and children in efforts to compel their use. People must be convinced before they will conform.

Preventive medicine is the least expensive form of medical care, involving minimum pain and reduced inconvenience. It works when used personally, locally and voluntarily.

The on-and-off-and-on swine flu program should be convincing evidence that socialized medicine is not the best prescription for America. There must be a better way to treat a cold in Oklahoma than by a directive from a bureaucrat in Washington!