



Congress of the United States
House of Representatives
Washington, DC 20515-0917

July 20, 2021

The President
The White House
1600 Pennsylvania Avenue, NW
Washington, D.C. 20500

Dear President Biden,

I write concerned about the possibility of shifting the voluntary COVID-19 vaccine effort to a mandatory program in the military, like the Anthrax Vaccine Immunization Program. As a former Airborne Infantry Officer and a JAG Corps Officer, I know the negative consequences this shift can have in our military.

Unlike the current COVID-19 vaccine effort, the mandatory Anthrax Vaccine Immunization Program required troops to take a series of shots and those who refused were often faced with harsh penalties. Many military officials testified in Congress that this controversial program contributed to what is known as the Gulf War Syndrome. Many of the recipients faced hospitalizations, chronic joint pain, arthritis, mental lapses, and several other negative side effects.

Forced vaccinations will also negatively affect military readiness. The Anthrax Vaccine caused many troops to leave the military. We should work together on a compromise that does not punish or infringe on the rights of our service members who swore an oath to defend our country. In worst case scenarios, such as an outbreak on a ship, the commander should have the authority to determine if the vaccine should be mandatorily administered or allow those who have tested positive to quarantine.

I understand that the Pentagon mandates certain licensed vaccines, however, the COVID-19 vaccine is still in the process of receiving a full approval from the U.S. Food and Drug Administration (FDA). Because of the wide-spread pandemic, the Emergency Use Authorization (EUA) allowed the FDA to voluntarily administer the COVID-19 vaccine prior to receiving full approval. The Uniform Code of Military Justice also requires “informed consent” from our service members who are taking drugs under an EUA.

We regularly hear news about unsanitary conditions at manufacturing facilities, accidental conflated ingredients, mislabeling, and failure in properly training staff at these facilities. We are

also not fully aware of its long-term side effects to justify forcing our service members to receive the vaccination involuntarily.

According to Congressional Research Service reports and the Centers for Disease Control and Prevention (CDC) website:

- Reports of 4,393 adverse reactions after receiving Pfizer BioNTech COVID-19 vaccine had been submitted to the Vaccine Adverse Event Reporting System (VAERS)
 - VAERS data sets, although a self-reporting system, shows that several thousands of individuals had adverse reactions to the COVID-19 vaccines
- Several cases of anaphylaxis, which is a severe and potentially life-threatening allergic reaction, from the first Pfizer/BioNTech vaccinations
- Several reports of thrombosis with thrombocytopenia syndrome (TTS) after Johnson & Johnson's Janssen Biotech (J&J/Janssen) COVID-19 vaccination
- 594 reports of myocarditis (inflammation of heart muscle) or pericarditis (inflammation of the outer lining of the heart) after COVID-19 vaccination
- VAERS received 5,946 reports of death among people who received a COVID-19 vaccine. Though CDC did not find a causal link, this should be investigated.

Many adverse effects were already proven to be a strong link to the vaccine, such as blood clots from the J&J/Janssen vaccine and heart inflammation from Pfizer and Moderna. The CDC and FDA should continue to conduct joint investigations on the VAERS reports that were submitted following the vaccination. It also remains to be known how long immunity lasts after receiving the vaccines. First Anthrax, then COVID-19, when will it end? We should not entertain this dangerous precedent of mandating certain drugs and treatments on our service members. I look forward to your response.

Sincerely,

A handwritten signature in black ink, appearing to read 'W. Gregory Steube', written in a cursive style.

W. Gregory Steube
Member of Congress