The Cutter Incident: How America’s First Polio Vaccine Led to the Growing Vaccine Crisis


Reviewed by: Christina Cameli, RN, SNM.

The primary focus of Paul A. Offit’s book is telling the story of what went wrong with America’s first polio vaccine. In 1955, there was a much-celebrated mass immunization with the breakthrough vaccine. In the following weeks, 220,000 individuals became infected with poliovirus from the vaccine. This human-made polio epidemic involved 70,000 active polio infections, ultimately leaving 200 people permanently paralyzed and 10 dead.

Written at a level the layperson will understand, but still engaging for readers with a health care background, the book is a quick and interesting read. What makes it particularly absorbing is the care taken to develop the context of the tragedy. The reader too young to personally know polio’s influence gains an understanding of what living under the shadow of this disease may have been like. One is given both a brief history of vaccination and a thorough account of the personal, political, societal, and scientific influences that shaped the evolution of the polio vaccine.

With investigative zeal, Offit has combed through historical documents and held dozens of personal interviews in an attempt to reconstruct the story of what went wrong in 1955. What emerges is a detailed and captivating story of how unreliable technology, faulty theories, individual failings, and inadequate governmental regulation resulted in the release of vaccine lots containing live poliovirus. The reader develops an appreciation for the imprecise methods available to create and test early vaccines, as well as an understanding of the measures in place today to prevent a similar tragedy.

After fully exploring the confusion and oversights which led to the “Cutter Incident,” Offit then turns his attention to the ensuing court case brought against Cutter Laboratories. He explores the implications of the legal precedent of “liability without fault” established by this case and how that precedent, together with the overgrowth of the personal injury tort system, creates an environment that discourages pharmaceutical companies from developing and producing vaccines, which is a primary reason for the recent shortages of childhood and flu vaccines. Of particular interest to those involved in maternal health care is the author’s discussion of how corporate liability concerns are currently keeping the morning sickness drug Benoquin and a Group B streptococcus vaccine unavailable.

In the last 10 pages of the book, Offit offers a solution for remedying the climate of liability: expansion of the National Vaccine Injury Compensation Program (VICP). The program took effect in 1988 in an attempt to ensure continued vaccine production by insulating pharmaceutical companies from increasing liability awards. The VICP currently covers only those receiving vaccinations recommended by the Centers for Disease Control and Prevention for routine administration to children. Offit’s solution would require anyone claiming injury from any vaccine to go through the VICP process, thereby exempting vaccine producers of all liability for their products.

Unfortunately, Offit makes no attempt to critically explore the ramifications of such a decision on the federal budget or future vaccine development, nor does he consider the cumulative effect of no less than eight additional routine childhood vaccinations yearned for in his closing paragraph. Such a hasty and relatively unsupported conclusion following an otherwise meticulously laid out book comes as a bit of a shock. Considering Offit’s work as a professor of immunology and a key player in US vaccine policy, however, neither his conclusions nor his strong sense of sympathy for pharmaceutical companies are shocking.

Despite its awkward ending, the book is a worthwhile read that will expand the reader’s understanding of the history and context of early vaccination efforts in the United States. It skillfully recounts the story of the first polio vaccine and clearly shows how liability concerns keep pharmaceutical companies from releasing new vaccines, particularly those vaccines that are intended for children and pregnant women.
It skillfully recounts the story of the first polio vaccine and clearly shows how liability concerns keep pharmaceutical companies from releasing new vaccines, particularly those vaccines that are intended for children and pregnant women. — Christina Cameli, Journal of Midwifery and Women’s Health.

"Wonderful." — Scott Barrett, Health Affairs.


Amazon review by Whale.to (still up as of Feb 2011): The Cutter disaster was completely unnecessary which is what Dr Offit will never tell you, as polio is/was a man made disease, from DDT which got into the milk supply or circulating in the air from crop spraying (as shown by researchers: Jim West, Ralph R. Scobey, M.D., and Morton S. Biskind, M.D.) and medical injections such as. antibiotics and vaccines themselves. Yes, vaccines were and are a major cause of polio!

"The vaccination programs are irrelevant to the decline of polio, while pesticides correlate perfectly with polio."