

The CDC embraces bogus claims of autism-vaccine links

Benjamin Mateus**21 November 2025**

On Wednesday the Centers for Disease Control and Prevention quietly amended its “Autism and Vaccines” webpage to state that the familiar assertion—“vaccines do not cause autism”—“is not an evidence-based claim because studies have not ruled out the possibility that infant vaccines cause autism.” The agency further acknowledged that studies suggesting such a link “have been ignored by health authorities.”

In so doing, the world’s preeminent public health institution surrendered to the anti-science agenda of the Trump administration, enforced by Secretary of Health and Human Services Robert F. Kennedy Jr., the most notorious proponent of the myth that vaccines cause autism.

The updated webpage means that the CDC has crossed the Rubicon in the ongoing dismantling of science-based public health in the United States.

In their third key point of the web posting, HHS declared that “HHS has launched a comprehensive assessment of the causes of autism, including investigations on plausible biologic mechanisms and potential causal links.” This is to be taken up at the meeting of the Advisory Committee on Immunization Practices on December 4-5, 2025.

Kennedy and his anti-vaccine network have repeatedly called for stripping long-standing liability protections for vaccine manufacturers, reshaping the Vaccine Injury Compensation Program, and rewriting federal vaccine guidance from the ground up to reflect their anti-vaccine views. The decades of accumulated scientific evidence showing no credible association between childhood vaccines and autism are now being discarded.

In response to the CDC’s falsified and politically altered webpage, the Autism Science Foundation (ASF) issued an unusually direct statement on Thursday. “We are appalled to find that the content on the CDC webpage ‘Autism and Vaccines’ has been changed and distorted and is now filled with anti-vaccine rhetoric and outright lies about vaccines and autism,” the organization wrote.

ASF underscored that the scientific consensus on this question is unequivocal. “The science is clear that vaccines do not cause autism. No environmental factor has been better studied as a potential cause of autism than vaccines. ... All this research has determined that there is no link between autism and vaccines. This is consistent across multiple studies, repeated in different countries around the world, with different individuals, at different ages including infancy, and using different model systems.”

The Foundation also pointed to evidence of prenatal neurological differences in autistic children—as early as the second trimester—confirming that autism’s developmental origins precede

any exposure to vaccines. Their statement amounts to a direct repudiation of the CDC’s new language and a stark reminder of how thoroughly the agency has broken with decades of accumulated scientific research.

The medical community’s response was equally unequivocal. In a published statement, Susan J. Kressly, president of the American Academy of Pediatrics, condemned the CDC’s action: “We call on the CDC to stop wasting government resources to amplify false claims that sow doubt in one of the best tools we have to keep children healthy and thriving: routine immunizations. The American Academy of Pediatrics stands with members of the autism community who have asked for support in stopping this rumor from spreading any further.”

The AAP emphasized that more than 40 high-quality studies conducted across seven countries and involving 5.6 million individuals have consistently found no association between vaccines and autism. In addition, the AAP joined 39 other leading medical, health and patient-advocacy organizations in a joint statement rejecting “this latest attempt to create fear around routine childhood immunizations,” reiterating that vaccines remain “one of our greatest medical success stories.” They warned that the deliberate erosion of confidence in immunization programs threatens to reverse decades of progress against diseases that once caused widespread and lasting harm.

Professor of Law Dorit R. Reiss, a leading scholar on the legal and social dimensions of vaccination policy, underscored the institutional breakdown revealed by the altered CDC webpage. She told the *World Socialist Web Site*, “Changing the CDC website does not change the data, and it is just further confirmation that CDC has been compromised and is no longer a reliable source.” Reiss emphasized the human cost within the agency itself: “My heart goes out to the civil-service scientists watching their agency taken down from a world-respected public-health institution to one whose unreliable political masters use it to promote blatant misinformation.”

Other senior officials echoed these concerns. Dr. Daniel Jernigan, a long-time influenza specialist and former director of the CDC’s National Center for Emerging and Zoonotic Infectious Diseases, told STAT News that the revised autism-and-vaccines pages had not undergone any standard scientific vetting. Staff responsible for the content were neither consulted nor informed, he said—an unprecedented breach of institutional process. Dr. Demetre Daskalakis, who resigned as director of the CDC’s National Center for Immunization and Respiratory Diseases, reported the same shock. “From my personal communications with folks, everyone was blindsided from the perspective of career scientists,” he noted.

In place of principled scientists who have dedicated their lives to

public health, Kennedy has enlisted quacks and frauds to oversee the new “research” into vaccines. He appointed David Geier to re-examine CDC vaccine-safety data despite his long record, alongside his late father, Mark Geier, of promoting discredited and methodologically corrupt claims about vaccine-autism links.

Mark Geier, whose medical license was revoked in multiple states for unethical practices and deeply flawed research methods, helped create many of the claims that fueled the modern anti-vaccine movement. His son David co-authored much of that work and was previously restricted from full access to the CDC’s Vaccine Safety Datalink because of concerns over data handling and analytical reliability. Despite this record, David Geier has now been brought back into federal review processes by Kennedy.

Allowing individuals with this record to reassess vaccine-safety datasets is not an academic dispute over conflicting theories. It is substituting fraudsters for scientists. The purpose is to manufacture uncertainty to undermine confidence in routine immunization and destabilize long-standing public-health protections. Childhood illnesses will skyrocket, death rates will rise, life expectancy will plunge: all demographic outcomes that are viewed with favor by the financial oligarchs, who want to bankrupt or abolish programs like Social Security, which they regard as a waste of money.

In the United States, childhood vaccination rates have declined significantly in recent years, a trend closely linked to sustained anti-vaccine campaigns driven by Kennedy and allied groups such as those within the Make America Healthy Again movement. For decades, they have used social media, political platforms and disinformation to erode public trust in scientific institutions and cast doubt on the foundations of evidence-based medicine.

Now, these same figures—having moved from what used to be called the “lunatic fringe” into positions of federal authority—are using official channels to legitimize those narratives. Their claims, now published on CDC webpages that traditionally serve as scientific reference points, do more than distort specific findings: they rewrite the language of science itself, replacing established standards of evidence with deliberate misrepresentation.

Against this backdrop, two policy proposals now under active consideration—and for which the revised CDC webpages appear designed to provide justification—are expected to define the December 4-5, 2025, ACIP meeting. The first is the removal of aluminum adjuvants from certain vaccines; the second is the dismantling of established multivalent vaccines, such as the measles-mumps-rubella (MMR) shot, into separate monovalent doses. Both run directly counter to decades of scientific evidence showing the safety and efficacy of these formulations.

As STAT News reported, the practical consequences would be profound. Developing replacements for aluminum-containing vaccines or creating single-component versions of combination shots would require manufacturers to return to square one, a process that could take a decade or more and cost upward of \$1 billion per vaccine. Industry experts warn that the uncertainty, expense and regulatory disruption involved could render the US vaccine market “really unattractive,” driving manufacturers out of the country and destabilizing an already fragile supply chain.

Furthermore, the move to reverse the CDC’s longstanding stance on autism is being interpreted by legal and public-health experts as a prelude to adding autism to the VICP’s (Vaccine Injury Compensation Program) Table of Injuries—a change that “could face an exorbitant number of claims that would threaten the viability of the

program.” If the protections that underpin the US childhood vaccine market are undermined, manufacturers may find the US market untenable and could withdraw, placing availability of key immunizations at risk.

The new guidance also raises alarms for the ACA’s preventive-services mandate: under current law, private health plans must cover ACIP-recommended vaccines delivered in-network with no cost sharing, but if the ACIP’s recommendations or the CDC’s endorsement change, this coverage guarantee could vanish. Meanwhile, the VFC program—providing free vaccines to children who are uninsured, underinsured or Medicaid-eligible—stands to face immediate consequences from manufacturer pull-out, altered vaccine schedules or cost shifts to states and families.

The implications of these proposals are not theoretical. Researchers at Stanford Medicine, in collaboration with scientists at several universities, published a large-scale epidemiological modeling study in *JAMA* in April that examined what even modest declines in vaccination would mean for the United States. Their models showed that a 10 percent reduction in vaccination coverage would lead to 11.1 million measles cases over the next 25 years, with measles becoming endemic in under five years. The projected toll included 90,000 hospitalizations per year, 34,000 deaths, and more than 8,000 individuals left with lifelong disabilities, alongside an estimated \$1 trillion in economic costs.

If vaccination rates were cut in half—a scenario well within reach if the current political program succeeds—the outlook becomes catastrophic. The model forecasts 51.2 million measles cases, 9.9 million rubella cases, 4.3 million polio cases, and 200 cases of diphtheria. Over 25 years, this would produce 10.3 million hospitalizations, 159,200 deaths, 51,200 cases of post-measles neurological injury, 10,700 cases of congenital rubella syndrome, and 5,400 cases of paralysis from polio. Under these conditions, measles would become endemic in less than five years and rubella in under 20. The study leaves no ambiguity: sustained declines in immunization would reverse decades of public-health progress and reintroduce diseases that modern vaccines had effectively eliminated as routine threats.

What is unfolding at the CDC is the opening phase of a political project that seeks to dismantle the scientific infrastructure underpinning modern public health. These changes reflect a much deeper shift in the political landscape, where mounting economic pressures are pushing the ruling establishment toward increasingly authoritarian and anti-scientific solutions. The attack on vaccines and public health is part of a broader drive to weaken the social protections that were built to safeguard ordinary people.

In the end, it is the working class—the families who rely on public hospitals, routine immunizations, and functioning health systems—who will bear the full cost of this manufactured crisis. And so it is the working class, allied with principled doctors and other health professionals, that must lead the fight back against this attempt to turn back the clock by decades, even centuries.



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