Vaccine Conversations in 2026: Bridging the Gap Between Parents and Pediatricians Transcript

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Podcast Introduction and Guest Overview

Welcome to the Doctors Making a Difference podcast where we help physicians to be empowered with the tools they need to successful in medicine, in finance and in life.

Join us as we highlight doctors and other professionals around the world who are making a difference. How many of you have had a conversation that goes something like this?

Hey doctor, I used to vaccinate my kids. My older kids all had vaccinations, but ever since COVID I don't want to do vaccinations or I'm nervous about vaccinations.

Or I want take a more measured or more holistic approach. I feel like it's been something that's, been on my mind a lot as different people have come forward.

And I think vaccines are so important, but it is important that we meet people where they're at and have these conversations. Today, I'm excited to invite Dr.

Joel Warsh onto the podcast. I, think you'll find this conversation fascinating. Today, we're joined by Dr. Joel Warsh. I'm excited to have Joel, a board-certified pediatrician and an integrative medicine expert.

And so I excited dive right into this conversation. But Joel and Dr W Marsh, would you mind introducing yourself to our audience? Yeah, thank you for having me on.

I'm a pediatrician in Los Angeles, trained great Western programs, Jones Hospital Los Angles, did medical training at Thomas Jefferson in Philadelphia.

And during my residency training, I met my now wife and she was very holistic minded and opened up my eyes. little bit to a different world and thinking about eating and exercise a little more than I was maybe in residency while we were so busy and I started doing some training in integrative and functional medicine and of course during our training a lot of stuff you hear about integrate medicine is what is that kind of woo woo went out there and when I.

Started to learn it was really interesting to me that a, lot, of it, was around diet and, exercise and sleep and things that are very foundational and so I, this isn't woo at all it's really, interesting right that, kind, foster my love and i've tried to bridge.

gap and tried to practice in an integrative way. And so I'm not against Western medicine at all. My practice will do medications when we need it.

Dr. Joel Warshu2019s Background and Integrative Medicine

I just try to minimize using that as much as possible and spend as time as on prevention and speaking about lifestyle factors as I possibly can. So that's what I've been doing more recently, but.

What you realize very quickly when you're in the integrative space is that people have a lot of questions about vaccines. And I realized that as much as I finally knew about the vaccines, there was still a whole lot more to learn.

I didn't know the answers to a lotta questions that parents started to have. That really has led me down the path in last decade to learning more about vaccine.

For me, during COVID, a lof of people got really frustrated with the public health messaging. It was very frustrating that things were so censored, especially around vaccines around that time.

And so that led me to want to really research and write a book. And more recently, like a year ago, I wrote a books about vaccines called Between a Shot and a Hard Place.

I have been speaking a lot about the vaccines in the last six months or so and having discussions about that topic, which I think is something that is really important to us as physicians and really very topical these days.

It seems like there's always something in news every single day about vaccine. So it is kind of a crazy time. Yeah. No, thank you for that. And I just want to dive right into it here, Joel.

I think this is such an interesting and important discussion to have in 2026. Like I said before, we hit record. We live in the information age. Our patients have access to endless amounts of information.

They can hit chat GPT or any of the search engines and they can find a tremendous amount of information, but it's not necessarily placed in context. And they don't have the expertise or maybe wisdom of someone that has practiced it and seen both sides of that.

I think most patients, parents especially, just want answers and just wants truth. But my observation, probably just like what you've observed, is since COVID, I have more vaccine hesitancy, more vaccines skeptical kind of questions from my patients.

And I had one a few weeks ago, really an interesting, dedicated, diligent mom who has children and she's expecting another one. She said, "I don't know where to turn for answers." Like she said my social media feed feeds me endless algorithms of vaccine skeptical information, but I don"t want my child to get measles either.

And she's like, how do I find information? So I said, as your physician, I can try to provide you the best information I Can. But really, you're a parent.

You need to decide what's best for your child. Really, most of the time when vaccinations come out, they usually have gone through a lot of safety stuff.

And especially, we see a measles outbreak. So a lotta people have that top of mind. How do you approach those kind of conversations now with folks, especially in these last few years since COVID?

Yeah, I think it's the toughest time to be a doctor, certainly a pediatrician that it ever was. And I also think that's one of the tough times to a parent trying to navigate this information because even our own associations and societies can't seem to agree with each other and are suing each and different schedules and depending on what week it is, there's all sorts of stuff in the news about vaccines and I really think its tough.

And we need to be empathetic to that as physicians because people are getting information from all different places. And I guess before we even get into that, for me, I'm not against vaccines at all.

For sure. We give vaccines in our office, have vaccines my life. I think they have certainly an important role in society. But I at least personally don't believe that we should be forcing people to do anything.

And so in my practice we have patients that do the regular schedule some do a slower schedule sum don't do it most patients at least to a slow.

Why Vaccine Questions Have Increased Since COVID

Can we work our way through but i certainly see a lot more hesitant families that's a little other reason sometimes what people come in the first place is there's more has it been to me when i have conversations.

And it does feel like in modern medicine, there's been this digging in of our heels and pushing back and a lot of physicians don't seem to want to have conversations about vaccines as much as they used to.

Want to and if family wants to ask questions, they sometimes take it personally or kick them out of the practice or a practice won't even take people that won.

Vaccinate and so I think there is this. set up for a lot of animosity between families and doctors right now where parents don't feel heard and they're not necessarily not wanting to get vaccines, but they are concerned about it.

And just like you said, we're all on the same team, right? Everybody wants healthy kids and nobody wants kids to be measles and die. But they also don' want their kid to go to measle vaccine and have a bad reaction.

For a lot of physicians, we've been in training, in the ICU, been to the hospital. We've seen the worst of the worse when it comes to some of these diseases, but most parents haven't.

Most doctors live in a very specific world, especially ones that work in hospital, and that's not the reality of what most people see. What most parent see is chronic disease.

They see allergies, autoimmune conditions, cancer. ADHD, neurodevelopmental concerns, all of these things skyrocketing all at the same time. And they maybe had a reaction from the COVID vaccine, had friend who had erection from COVID, vaccine had, a friend, who swears at whatever vaccine caused their kids autism or autoimmune condition or whatever it is.

That's what they're seeing. World where physicians like you're crazy. Do you want your kids to get measles and die? Like we have these vaccines, they're safe.

They're effective. We've studied them for years. Why wouldn't you do it? And a lot of parents are hearing other things, seeing other thing. And there's this big gap, I think, between what physicians are seeing and what parents.

Are seeing. Sometimes there is that lack of empathy, of understanding where the families are coming from. And I think that's tough and it's pushing people away more and more from health care and from doctors and really feeling heard or respected.

And, I also think a lot of doctors think, that all of the stuff that we've ever been told is absolutely true and all the things that our bodies have told are absolutely and things have been studied extensively and we have all sorts of vaccinated versus unvaccinated trials and also it is a research that doesn't actually exist.

Obviously, vaccines are studied a lots, but there is another perspective. Unless you go look at the primary alert yourself, unless you look into some of these other resources, You don't necessarily have all the information that these parents have or at least they have a certain Type of information and it's really hard to counter that narrative or have A reasonable discussion if you don"t know both sides and if he just come to place.

Oh, they're safe and effective They've been studied extensively their most studied product in the world Why would you not want to take one and I think that is not the position that really is helpful You're not going to force somebody to do it that they don' t want do you have to convince them through education and just citing the fact that you don't want to die of measles or hemophilus influenza, or I've seen it came with meningitis.

That's not enough anymore. Yeah. And it's interesting, like you say, most people are probably in the middle. Like I have my patients, I had some who are, they're not interested at all.

Don't bother me about it. Maybe just even a little bit offended if we even talk about, and I other patients who die hard, we're going to do every shot no matter what.

But I do find that most people are in the middle. They have honest questions and for the most part that centers around the well-being and love for their child.

And we do want to be honor science and take the answers wherever they lead. As a physician, you kind of get the training of the scientific background, which is where you take a null hypothesis, study it, and you follow where the data actually says.

We try to share these conclusions with patients. But you're right, if it comes off as tone deaf or I am going to tell you what to do because I'm the expert versus the parent says I have access to the same information set you do, I just don't have the experience and I want to gather that from you as a physician.

It puts you in this interesting spot. I found the other thing, just practically speaking, is these conversations take a lot of time. When you're in the middle of a busy clinic and you've got so much stuff going on, suddenly somebody wants to have a 40 minute, 45 minute conversation around the details of this.

It is challenging to fit that into it. They've a scheduled spot for a certain amount of time. And so I was asking you as a pediatrician, you have been through residency training.

You've done through all, worked in all these environments. How does your normal approach when someone says, Hey, I've questions about vaccinations other than, hey, read my book.

how do you approach it? Yeah, I never say people to go read my book. I think that's… I mean, if people want to read it, obviously, that fine.

Empathy, Trust, and How Vaccine Conversations Have Changed

But I, think, for me, it's about having conversations and being open to answering any questions that parents have and trying not to be judgmental or substitute my thoughts for theirs, just trying to listen and to answer in the best, most educated, the most information, scientific way possible.

And I thing most parents respect that and are okay with that. Just like you said, there is a big problem in medicine right now in terms of the way the system runs, where it is really difficult for some physicians, a lot of physicians that work in big systems that have those kinds of conversations, because they're not short.

I'm lucky I have a private practice, I can set up some time for people if they want it. And if I know I'll have vaccine conversation, probably set off half an hour to do that.

That's just scratching the surface. You're just not going to be able to have reasonable conversation in five minutes. It's not enough time other than if you're going safe and effective.

So it is easier to brush that patient off. But I think what then families see is that we're not willing to have these discussions and we were just dogmatic.

And I don't think that's a good long-term solution. To me, at least we are taught that, we treat everybody, right? We treat, everybody we work for everybody.

If somebody murders somebody, your job in their emergency department, still treat them, it doesn't matter what they did. You don' judge them. We just treat.

them And i think for whatever reason with vaccines. as shifted and a lot of practices are unwilling to have those conversations and have discussions and don't take those patients.

And so I think that's a doctor's right. It's not illegal, but I do think it does set an odd precedent that is being strongly pushed back against, as is just the general impression of people that have questions around vaccines.

A lot of doctors are very quick to label people anti-vaccine or like label me, someone who's anti vaccine, which makes no sense. I gave vaccines to people yesterday, like not against vaccines at all.

It's like saying, oh, are you anti car? And I'm not anti CAR. Am anti Car that blows up, right? Like I am against a vaccine that causes a reaction, but that doesn't mean there isn't a place for it.

And, I think for so many parents and certainly for me I, think there are two discussions that we had. You can talk about vaccine efficacy and how well they work and, how much they protect you.

But also you can about vaccines safety. and risk and every medical product has risk. And I believe that a lot of that vaccine safety conversation has been minimized and most of the conversations around vaccine efficacy and, oh, it saved hundreds of millions of lives over years.

But there is very little discussion about how vaccines play a role in terms of reactions. We learn, Oh, It's like one in a million. That doesn't really sit well with me.

I don't think it's as rare as we think that it is. Certainly with the COVID vaccine, so many people know people that had reactions, but it doesn' seem like it' s one-in-a-million.

It doesn''t mean it''s There are benefits to vaccines of course there are but I think if we were to also show. More strong with more strength that we care about safety and we're pushing back against pharma and run the side of families.

And we want more safety testing we what more rigorous safety test a more long term safety. Then I'd think that's what a lot of parents want especially the ones that.

sometimes get labeled as anti-vaccine after their kid has a reaction and they don't want to do it anymore and it's just an anti vaccine parent that person literally took their kids to get a vaccine and They feel like that child had a Reaction and that no one's listening to them and no ones acknowledging what happened to their child and the want that to not happen to the next child.

And I think we we don' realize that we dont have the systems in place to really look at things in a cumulative aspect with the vaccine schedule and certainly not long-term.

Most of the studies with vaccines are done by the companies before the product hits the market, and they're studied for six months, a year, maybe two years if you're lucky.

They're not followed out for 6 to 5 to 10 years. We're now studying the schedule in a cumulative sense. And when we have this explosion of chronic disease, it isn't unreasonable to say how or if vaccines might be related in some way.

And let's think about that. Let's look into that, let us continue to study that." And I think that's what parents want. And it's not that there haven't been any studies, but how many studies have there been a vaccinated versus unvaccinated kid?

How many databases have we looked at when we take all the kids that are vaccinated and compare them for certain chronic conditions? You just don't see that and that is the kind of studies that parents wanted.

How may prospective studies are there following kids forward, looking at kids who are vaccinating versus not vaccinate and looking their health status?

you want people to trust in your system and in you products, they want to see those kind of safety studies done that haven't been done. And I think we shouldn't shy away from that.

We should be open to it and embracing it. If we do find safety signals, I do think doctors would want know that, and it's not about, for example, like a lot of concern around aluminum, right?

And so, if we were to find problems with aluminum let's say, let say Hep B vaccine increases your risk of asthma by

10 times, we would wanna know We would want to know that was the case.

And we would say, okay, well, if that's happening, why is there something else we could put in a vaccine to make it safer, not have that happen? Or you do the study and you find there's no difference between the two groups.

That's going to be the kind of research that is going be really helpful for parents to feel more confident to do these vaccines. And I think right now we're stagnant with our safety research.

And that's a big push that Secretary Kennedy and other people have mentioned and doctors push back and they say, oh, no, these things have been extensively studied.

They're totally safe. I don't think people feel that. Even if that is true, people don' t feel like they've been extensive studied and we shouldn't shy away from doing more research or more science.

vaccines very high up in their job and in the things that they do that are helpful for patients.

Safety, Informed Consent, and the Need for Better Research

And so I don't see why we should shy away from doing more research, more safety studies to look into this and to have more and more evidence to show that we are safe.

Or if we do find issues, we shouldn't be okay with that. We should adjust as we go. I think, to say that a product is safe. We should be on the side of the patients, on this side, of safety and health.

And we shouldn't be pushing for more vaccines, we should pushing it for healthier kids. It might be more vaccine, it might mean fewer vaccines. it may mean prioritizing some vaccines maybe not every vaccine we still need the same way we did 50 years ago, like we're in a different place.

So I thing that people saw that sort of mentality, some sort middle ground. then they'd be more apt to trusting that doctors have their safety at mind and not just pushing a product, which I think a lot of people feel.

A lot people will feel like doctors are pushing vaccines regardless of the safety concerns that they have. Yeah, I you are right. Longitudinal studies, just a more robust attentiveness to longitudinal studies and seeing what are the outcomes of these populations, folks who did get vaccinations, and folks And like I said before, follow the data where it takes us.

I think that'd be wonderful and maybe good for us as physicians, good the entire world to look. The other observation I had is during COVID, folks, just the general public got to see science in real time.

And a lot of times when we put out, when a product comes out as a medication or a vaccine or what have you, it's already been through those initial steps and the initial trials of people who have participated and have got a of informed consent around this may or may not work.

But in COVID, it was on the news every single day. And sometimes, I felt like our public health administrators represented a level of certainty that was not possible to have at that time.

They said, this is for sure the way to do it. This is, for what we know. Really, the honest answer is we don't know, we need to let the science play out.

That's an important point. I think trusted medicine, health, and public was already on a decline, but COVID put gasoline on a fire and to me the biggest thing was safe and effective that is propaganda and we shouldn't be saying that in public health view when you have a new product right when having new products like the covid vaccine.

There's nothing wrong with saying look here's the research that we have it seems like it's effective it seem like a decrease your risk of death and hospitalization we haven't found any major safety signals yet.

That's what we know and we recommend it. There's nothing wrong with it You can't say something is safe when it's new It doesn't make any sense that you don't know what's gonna happen in six months or a year or two years and you Don't have to and that's totally fine But when you say Something is saved definitively then especially when things go on which you're always gonna find Something any product you can get millions of people you gonna have some problem for some of those people that obvious right and so You're basically setting yourself to fail and then on top of that talking about natural immunity When anything I've ever been time else has been taught you know that for especially for a respiratory illness.

You're gonna have great immunity in general from the disease right if you get sick right you have most immunity there's no reason you should have to get a vaccine right after you.

The reason to vaccine is to. Decrease your risk of having serious disease when you get it where you're training the audio training systems that we have a better immune response and you don't get very sick.

But if you didn't die from the disease and You had it there's no reason in the short term that in general that you should have to get a vaccine. You're just taking risk without any benefit and they were such a strong push for everybody to give accident no matter what and I think people saw that it made no sense.

And then they said, okay, you lying to me. What else are you lying about? And then they start to go look at the childhood schedule. And they're like, wait, how many vaccines do we give to kids now?

What are the safety studies on that? what are people saying? and I think there's this now massive pushback in the other direction because people don't trust public health anymore and they don' trust pharma.

And they just see physicians as an arm of pharma at this point. And I believe that is partly true. We really have become ingrained in pharma and I think we need to step back from that and be a part of family.

It's really doctors and families against phharma. it's not doctors against family, we're all on the same team. we all want people to be healthy. And I think that sometimes we as physicians forget that we're on the side of the families and not necessarily on this side.

And Pharma has done so many horrible things over the years and to just trust them implicitly doesn't make much sense. the research on vaccines pharma has done.

That also doesn't make a ton of sense. They have a lot of incentive to fudge the data and move it in a certain direction and make their products look as good as possible.

Whether that's true or not, I don't know. But we should be on the side of, let's double chat. Let's make sure. let us push for more research. And no better discussion on the Hep B, right?

There's so much back and forth about Hep E for newborns in the last year. And there are just so many families that it just does not make sense to get hepatitis B when they have a newborn.

But the medical system has pushed so hard against that when most parents are like, look, I've been tested. I know there's a theoretical risk, one in a million, 1 in 7 million.

Whatever it is that my baby could get it. Yes, we understand that there is a potential benefit from this vaccine, but you also have to look at society and look prioritizing.

Where do you want to put the most effort? And we're going to push people to get a vaccine on day one. It should have a ton of benefit with very minimal risk.

And I think that, there's very minimum benefit for most people for hepatitis B. Sure, There's going be one kid that's gonna get hepatites B, that is how things go.

it's unfortunate, push every family to get a hepatitis B vaccine on day one, it's not listening to most parents where I think most pairs are very skeptical to do that on Day one when they've tested negative, even if they know that there is some potential benefit.

And so I. Think sometimes doctors don't step back and kind of look at the whole picture and prioritize. OK, what do we prioritize? We prioritize the measles vaccine and we'll be in cop or you prioritize every kid getting hepatis B on a one because if you push too many vaccines and people push back against it.

so many vaccines that a lot of parents like wait how many like when I was a kid I got five or six or seven there are 20 there 30 is that too many and it's really easy to get pushback and concern against that versus prioritizing the top five Yeah, no, that's a good comment.

And I just thinking like via back to that COVID time. Prior to time, I would say most of my patients, when we talked about vaccinations, there was a vaccine schedule and yeah, it's fine.

Occasionally someone would said, don't want to do it. But because it was in real time you're watching this unfold.

COVID Messaging, Natural Immunity, and Public Trust

You're having public health officials say this is safe and effective when, we can't possibly have had real life data other than just the preliminary nine months or whatever it took to study that.

And so people got really frustrated. I'll use an example. Where I live in rural Idaho, people are vaccine hesitant at baseline and maybe a little bit distrustful of systems just because it's a rural, independent-minded place.

When COVID first rolled out, the senior citizen crowd where I lived, you know, that same crowd of farmers and ranchers and people who are really nervous about that kind of stuff, they lined up when we had the first COVID vaccination that came to the community.

They lined up, everybody got it. We had one of the highest vaccination rates in the state for people of that older age category, because there was a lot of trust and said, we want to do this.

we'd want go on with our lives and move forward. And then just a few months later, you have this issue where government officials are saying, if you don't do, this you lose your job.

If you, don' do you no longer can work in our hospital. if, You don', do here's all these repercussions because you heard things like, We're so sick and tired of people not doing what we tell them to, do that we're going to force you to.

And that landed very poorly. And so from that point forward, the number of people who even would wear a mask or even talk, even say the word COVID went down to about 2%. And where I lived, all the vaccination recommendations and masking recommendations, and not gathering together, people Completely turn their nose up at it and we pretty much just went on with life as if nothing had happened because of because people ignored all that and both were extremes to just implicitly trust everything that They were told was probably too much of an extreme But to also turn up your nose and say everything the public health is saying is now bad I'm just not going to listen to any of it was not the right answer and so When it comes to these vaccination discussions and how you approach it with patients and in the medical system as a large system and on an individual basis, I think we have to be informed.

People have appropriate questions and it's not that their questions are necessarily based on truth either. We just have design some studies so that we can actually answer those safety data questions.

But we shouldn't throw people out and say, oh, you can't come to my practice because you're nervous about this question. I think that's ridiculous. I haven't really seen that where I've practiced.

How common is that across the United States where people are rejecting or declining folks from their practice because they won't vaccinate their kids?

Have you observed that very often? Oh yeah, it's extremely common. Most practices don't. The majority, certainly more than half, if not three quarters, are very strict.

We only take the regular schedule down. There are certainly a fraction of practices that will take you. So I think there are very few practices. That won't take people.

They're very good practices, that we'll take. People that don't vaccinate. Most practices will not allow those. Pediatric specific or is that even pediatrics?

Yeah. But most practices we only taking people that vaccinating. A good chunk of practice will. Take people, who are willing to go on a slow schedule.

It just won' t take, people who won t vaccinated at all. And then there a few. Practices that would take anybody. So I think the majority don't take patients.

It's very hard for families to find a practice if they don' want to vaccinate. Even in California where people are pretty progressive on certain things, most practices just don"t take you.

So it's not like we have any issue getting patients, we line up out the door, I can't get patients because there's so many people that come to us just because we're open to having discussions.

And I think that, again, people think they get called anti-vaxxer. A lot of people choose to vaccinate if you're open to having discussions. They just want to talk about it.

And, I would say, the vast majority of my patients do get vaccines. Many of them do it on a slower schedule, but that's what they're comfortable with.

But at least they do, and families are doing zero. I do think medicine has moved way too far into telling people what to do and way to far away from having discussion.

To me, especially with vaccines, We have to move back to going to a risk versus benefit discussion, helping people to make that decision. And I think we have a really good understanding about the risks of the diseases and the benefit of vaccine.

But I don't think that we don t have the very best understanding of that safety of vaccines. I believe that's where a lot of our focus and research should be over the next little while so we can have like a better understanding what are the true risks from vaccines short term and long term.

And I think that's going to help people to think through adequate and a little bit easier and to be a bit more comfortable in those decisions because ultimately there's gonna be risk for vaccines and i think it can be higher than we think is i don't think its like extraordinarily high but i thing it's not one in a million i there is a higher risk than that.

And certainly when you're talking about giving kids 20, 30 vaccines, you are compounding that risk over many vaccines. And I do think that we need to consider that so that way people can understand where we're coming from, be a little bit more honest with that informed consent.

Maybe that's going to be prioritizing a few of the vaccines making the other ones more shared clinical decision. That could be. a reasonable thing that we do in the long run, maybe that's going to be the impetus to innovate.

And maybe if we see that certain vaccines are causing more problems than we think, then we would innovate and we will change the vaccine, we change ingredients, We do it in a different way.

We have some vaccines that you could drink, some nasal sprays, like maybe we're going be able in future to spray in your nose for flu and whooping cough and RSV and maybe it has lower risk of side effects and works pretty well.

Then we don't have to do five whoops. To me, for example, whoop and cough, does it make a ton of sense we have five vaccines in two years like there's a lot of vaccines where maybe if we had a better working vaccine, we could just do one or two.

Hep B, Vaccine Prioritization, and Schedule Concerns

And so I think that we should have some humility in medicine and we Should be open to trying to continue to improve and to pushing pharma companies to Continue to innovate and trying To decrease the amount of axes, decrease, the number of side effects while still getting the same benefits.

I Think there there is a we can still do to make families to trust us again, to push for that. And a lot of parents coming up polio, like obviously we don't want poli to come back.

We haven't had polo here in a long time. Do we have to give two month olds polia? Do have give four in the first two years? Could we give that later? I don' know.

Maybe, maybe not. Obviously pola comes back, we wouldn't that, but maybe we could prioritize whooping cough and RSV and hemophilus in that first few months.

Or maybe can combine those into one vaccine so we won't have do so many. But maybe there are ways that we innovate so, so may pokes and people be more Comfortable doing it like maybe we can prioritize the couple and that's the one vaccine that you get we have combo shots.

So maybe We could just do One combo shot once or twice and and That would be enough for the first year and it will be more palatable for people I don't know what the answer is but I think we shouldn't stop asking the question and given the fact that there is so much hesitancy and so Much concern we could be in charge of that narrative and we Could listen to it and We can innovate towards making people more comfortable or we Can continue to?

call people anti-vax quacks and not listen to it and push people away and see more and more people turn away from medicine and lose that trust where I think that would be a real shame like doctors and public health were trustworthy and such a big part of people's families 50 to 100 years ago and it seems like there's such animosity right now between families and doctors and so many practices.

I read them on Facebook groups and whatever. A lot of doctors don't know what to do. People are so hesitant to vaccines right. Now and they're losing so.

Many patients and. They feel very frustrated because people are pushing back and They're not getting vitamin K and not. Getting the measles shot and we're seeing outbreaks.

And I think a lot doctors just don. Know what. To do and I don' think the answer is to take our heels and further and just talk about how great vaccines are.

We need to understand what the concerns are and address them. versus getting your heels in and pushing back and attacking people that have these discussions and, you know, I'm called anti-vaxx a lot.

It doesn't make any sense. I am not against vaccines. Not against anything. Just want to have this kind of conversations and I always want change my mind, always change what I say.

And I just try to present what i've seen and what read. A lot of what a read I had no idea. And I didn't know before, because I don't look into it myself.

And when I did, I was pretty surprised at what some of the research was and what's some other research we didn'

have was. Some of things that we say and we're so confident in saying them, like, why am I so competent in this thing?

When I look at the researchers, it doesn't really totally show that. So, maybe some these parents aren't as crazy as I once thought. And I think that humility is really helpful to being able to have these conversations because the people who do vaccinate practice is pretty high.

There's a pretty higher rate of people getting vaccines when they trust you to not push them on vaccines, but to had discussions about it. But it's hard with our system because we don't have that kind of time.

Maybe doctors are going to realize we have all the power in the system and maybe we can push back to help create a better system. And that's one of my hopes, too, is I we let the insurance companies really dictate things.

And insurance companies don't exist without doctors. And if we banded together, we could really change that system. Like, it's not a good excuse to say, We don' have enough time to talk about vaccines.

We only have three minutes. If we need to create a system where we have that time, this is something that's so important to us. like, I need you to book an hour with a patient.

I have to be able to get paid for that to make that happen. and we Have that kind of power if We work together. Just doctors are not very good at working together I think.

You know, I want to just echo two points like, number one, let me join with you the call that let's continue to call for good longitudinal safety data on every intervention and vaccinations, especially because it's a young, healthy population that we're giving an intervention to.

And I think that it shouldn't all be pharmaceutical funded. Sometimes these longitudinal studies take funding, and it probably requires public funding university funding and not pharmaceutical funding.

I totally agree with the exclamation point at the end of that thought. The second thing is Joel. I'm just, I just am flabbergasted. You said the majority of pediatric practices won't take people that don't adhere to the published vaccination schedule.

That just shocks me where I practice. Most of the people I work with or my peers would say they've taken a Hippocratic oath. I'll help people wherever that they're at.

They don't want someone in my waiting room with measles. We've got to be a little bit careful and be attentive to not have diseases that are going to spread to other folks.

But on the other hand, I just can't imagine turning somebody away because they had a question or because there were different. To me that flies in the face of what I do as a doctor.

And I'm just shocked to hear that because it's not what observing where I am at and I can believe that would actually be the case. So I mean, I want to clarify.

I don't think that most doctors turn patients away for asking a question. Most doctors, at least where I am in my impression, in most practices across the country, if you don' t follow the schedule, that's their policy.

Their policy is follow CDC schedule or they have certain ones that they require. Maybe they don t require you to do flu shot or the ones are not required for their state, but they do require them.

And if are unwilling to follow that, they send you a letter. They say we're not the right practice for you. If they dismiss you, so that I don't know the numbers, but my sense is that the majority of practices follow that.

And then if I had to guess, like 50% of the practices do that, maybe 10 or 25 or so practices, 25% or some

practices will let you vaccinate, But on a slower schedule is okay as long as you're doing them, just zero.

Practice Policies, Patient Choice, and Slower Schedules

and then the smaller percentage would allow you to do whatever you want. That to me is the sense, I dunno where you are, that's true. But maybe if you, the more rural you That's my sense of what a lot of practices do, and it's not illegal, but I think In some way, it's the little discrimination against vaccine choices to not take those patients, but at the same time, that's a protected class.

So you can, if you really strongly believe in vaccines, which most doctors do, then they feel like, and this is what I've heard from any practices, they're not the right doctor for you.

You don't believe science, you aren't going to listen to their other recommendations. They're going have other issues. the right practice for them and so I understand that perspective certainly I just don't agree with it but I think that it's not legal and you should be able to do whatever you want but i i just hope that there's always enough practice with these patients because ultimately good doctors that believe in things can convince patients if they have that time to And if you have that relationship, then maybe the family's not gonna do Hep B at birth, but you had that time because you didn't force them and they see that you've got their best interests at heart and you're not requiring them to do things and then comes around to whooping cough or something else, which is probably more important for that baby than Hep-B in general.

And he didn' make me do to have to be, But you are saying how important this whoopin' cough shot is. Okay, maybe then I should listen to you or. Maybe you don't even do any for the first couple of months and you start talking about the measles vaccine and why that one you feel like is more important and they do end up getting that.

Which to me has more benefit than most of the other vaccines. If you're going to pick one, that's probably the one that I would choose. Sometimes that can be really helpful.

I might have a patient that doesn't vaccinate, but does use a measle shot. And if I'm going pick 1, I think right now that is probably 1 to 2, given what's going on.

So I, think. There is also something to be said if we're working with patients where they are, but there's no question about it. That takes time, that takes discussion, it takes relationship, sometimes it take months or years before people are willing to do it, and I think it's going to have to up to each doctor to decide that, But I just don't think in general it is a good look.

for doctors to be kicking patients out for their vaccine status. I think that's one of those things that is really gaining some steam in terms of a narrative against the medical practice in that doctors are basically forcing you to do something or they kick you out.

That to me just isn't a good PR move for a doctor. We're not very good with PR. This social media PR kind of game and it is a little bit of the game. And it's unfortunate that Influencers who don't know anything about healthcare push a narrative or doctors don' work together to have discussions and also I think a lot of physicians are terrible at having debates.

I Think that's another big miss in my medicine right now is the people that are the most pro-vax or most knowledgeable refuse to debate. they refuse to have discussions, they refused to sit down and often times their wording in their narrative is the science is science, literature is literature and there's no need to debate.

Debate is not reasonable. I don't want to give a platform to somebody who has a different opinion and let the literature show. If you want us for something different, do it in the push back hard on that every time because people can interpret the literature in different ways and that's the whole point of having debate and the smartest people that know the most could on a stage be very convincing when you have discussions about some of these topics and it just does not ever seem to happen.

Like I've never seen Secretary of Academy sit down with a Paul Lafayette or anybody they just refuse to speak to them and I think if you did then you'd have actually a lot of positive that would come from that.

And I think they think it's going to be so negative. I thing people only get one side of the discussion and sometimes the people that are stronger against vaccines are much louder.

That narrative is dominating and the Paul Offitz of The World and other people who are very strongly in that pro, they just don't have that platform. They don t speak out.

You don get to hear them and you certainly don' t get them in a discussion. and I would love to discuss and debate some of my questions that I have with them.

I feel like these people know a lot more than me. When I read the literature, I might read it in the wrong way. I may not know some studies and I think that it would do a good for the public to hear smart people discuss this and have discussions and arguments about those topics.

And I think that would move the narrative forward and also maybe some of the super strongly pro-vaccine individuals would also learn something too. And maybe they would hear, hear some other concerns.

Here's what does and doesn't exist. All right, let's push to get some that research so people can feel more comfortable. I don't know why that's unscientific or problematic.

find some middle ground there, agree on some things, disagree on somethings, and the things that we disagree, push the NIH and CDC to get that research that, we don't feel like, some of our pro-vaccine feels like we have the research, someone anti-vax doesn't.

Okay, let's listen to that and let see what information we do and do not have. Let's publish a review on what we're doing to have and then let study what haven't actually studied.

Like, the vaccine is an autism conversation.

Debate, Autism Research, and the Need for Open Discussion

We haven t talked about that at all, but We haven't studied that extensively like we talk about in medicine, like, we say, oh, it's so extensively studied, but that's mostly on MMR, mostly time aerosol.

And there are so many other vaccines. I want to see vaccinated versus unvaccinated studies. That's going to be the kind of information that is going be really helpful.

and pneumococcus and all these other vaccines and how that plays into autism and chronic disease. That's what I want to see that parents want. To see and this anti scientific doesn't mean that I feel like vaccines cause autism or anything like that.

But I think that's the narrative that people hear and they go look at the research and the hero. It's settled and you actually go. Look at. The research.

And the vast majority, pretty much all of it's on MMR and thimerosal. Thimerose is not even in vaccines anymore. And M MR versus no MR in the setting of getting other vaccines does not prove or disprove that vaccines are related to autism.

You have to study no vaccines. So that's what I want to see. I would love to See those kind of studies, because that would be really helpful to Continue that narrative and discussion forward as opposed to pushing people away and just giving them a line a propaganda line Which people are seeing through now?

Yeah, so I'm excited about what you're talking about and I just want to as we wrap up time I think you and i totally

agree that there's a place for vaccinations They're really important.

They help prevent a lot of diseases. If my patients are listening to this, I want them to know that, yeah, hey, vaccinations are really. But I would want anybody with a question not to say, Hey, you're rejected because you have a.

I think it's important that we have ongoing science. That's the beauty of the science it. It's an ongoing process of inquiry that could last for decades or centuries as we continue to reevaluate and understand.

So. I appreciate the call to action. I think you and I should do another episode because there's so many more things to talk about on this. And I thinks the best thing maybe that I've come out of this is just keep meeting patients where they're at.

People have questions. A lot of times it's really sincerely held questions and the thing we can do is try to create time. If you only have 20 minutes with somebody, have them come back.

Keep going down those conversations and try and help people come to the things for them and for their family. Man, Joel, do you have any, I know there's a million things we could talk about.

Any final thoughts as we wrap this up? And also, where would you people turn to to access your website, your book? Where would have them follow your work?

Yeah, first I want to say thank you for having this conversation, because not everybody is willing to do it. And I think it's really important that we continue to have vaccine conversations and not to label people as who are out there, anti-vax, just because they're asking questions.

Again, I echo what you said. I'm not against vaccines. They have a place. I think they do a lot of good. But I there are a of concerns around vaccines, parents have those, and I am trying to echo and bring out some of those concerns that families have and that I hear and then I here over and over again.

and that I don't think that doctors fully appreciate or hear in trying to express those concerns because not responding to them is not helping this conversation.

It's getting louder and more and people are hesitant and I think the answer is to listen to the concerns and to respond to then and study the things that people have concerns as opposed to labeling it and just dismissing it.

And I'll just finish with saying two things can be true. Vaccines can effective, and they can also cause problems. And we can have studied vaccines in the past, but we could study it better and different in future.

We can always strive for better, safer vaccines. Every single person here, every doctor is listening, everyone around is taking care of, we all want the same thing.

A healthy kid. Not everyone necessarily agrees on how to get there, But I think we have the North Star and we don't have to label each other. dismiss each other just because there are different opinions or we're having discussions about it, we have to stop dismissing people who bring up concerns around vaccines.

The answer is to listen to it and to listened to parents and study it not to dismiss it. And ultimately, you may very well find that vaccines are the safest thing ever in the world.

That's great. People don't feel like the research is there. Whether that's true or not, you can say that to your blue-in-the-face, oh, they're the most studied thing ever.

We know for sure this. They're safe and effective. You can see it over and over again. People didn't believe that anymore, and that is not working. And we're seeing that it's not work because more and more people are hesitant and I have more come to my office who vaccinated their older kids and don' want to vaccinate their new baby now.

So there is a trend away from vaccines and a failure of the messaging. And so the answer to that is not to dig in harder, it's to listen and to change our approach, I think.

Closing Thoughts and Where to Find Dr. Warsh

And I that if we were to listening to some of those concerns, we would be a little bit less dogmatic about it, and we'd be little more willing to push for research, because I thing every doctor is about research and science and data.

I don't think that, if did the right kind of studies in Harvard and Hopkins and they were defined that there was a bunch of problems with vaccines, the doctors would like, ah, never mind, just do vaccines anyways.

No, no. We would want to know what those problems were. So I think that everyone is on that same page, but sometimes people are talking over each other instead of to each, and I hope we can start talking to one another and having more discussions like this in a very kind way.

I've had lots of discussions with doctors, no yelling here, everybody's friendly. No one's throwing a tomato at me. And I have gone to some mainstream conferences, I talked on the most anti-vax things and very pro-vaccine things, so I can have these conversations respectfully.

and kindly, and I can have my mind changed and you can your mind change and we can a discussion and don't have to agree on everything. And the more of this that we do, the that more we model having good respectful conversations, The more it's going to help people in the long run to trust us when we make recommendations, especially around something like vaccines, because they hear that, we actually hear their concerns and are working towards making them as safe as possible and that's what most patients want.

So for me, you can find me at Dr. Joel Gator on Instagram or X. The book is called Between a Shot and a Hard Place. And I also have a sub stack called between a shot and the hard place, and you could find the book on Amazon or anywhere the books are sold.

Awesome. Thank you again for taking the time to do this. I look forward to keeping in touch and I appreciate you taking time. Thanks for tuning in to the Doctors Making a Difference podcast.

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