Musings of an Anti-Vaxer

It has been interesting reviewing the mainstream news coverage on pending state and federal vaccine legislation....and in particular in my own state of California, where SB 277 just passed through the Senate, virtually unhindered, even in light of a very strong public opposition.

For those of you who do not know SB 277, as of June 2, 2015, states that to attend a public or private school, children must either be vaccinated according to the current vaccine schedule or have a medical exemption for each vaccine not received.

There would be no philosophical or religious exemption. Originally before being amended, SB 277 said that all children, even those who are homeschooled must follow this mandate.

In Vermont, a similar state bill that repeals the philosophical waiver was just signed into effect by Governor Peter Shumlin [1]; H.R. 2232 Vaccinate All Children Act of 2015 has recently been introduced on the FEDERAL level [2], and an National Adult Immunization Plan is being developed. [3]

This is a nationwide effort to increase vaccination [4], and is getting much coverage in newspapers and mainstream online sources.

Most mainstream news reports go something like this...

"......Anti-vaxers, religious in zeal , shun vaccination, basing their decision on a doctor, the father of the anti-vaccine movement, Andrew Wakefield, that linked the MMR to autism.....This paper has since been retracted and proven to be untrue, and the doctor’s license revoked.... anti-vax claims are without scientific documentation. Vaccines are safe and effective and have helped in minimizing/eradicating very dangerous diseases....such as the deadly small pox and dreaded polio...."[5,6,7,8]

Some of the more passionate writers throw in their own zealous, “...Hell, yeah...I would sue [9]” (in this case, if an unvaccinated child gives another child the measles) ... or maybe compare the measles to the bubonic plague or Ebola....[10]While other reporters, who are more analytical (typically of the economical/political sort) suggest that instead of taking away choice, the powers that be should slowly expose us(anti-vaxers) to the downside of not vaccinating and that our sense of what is right should be played upon, in a more subtle fashion...so that we would eventually choose to vaccinate.

Reading these media excerpts, a mixture of emotions course through my being...but more than anything I am repeatedly struck at the gross simplification and seemingly “cut and paste style”
analysis of the “anti-vaxer” perspective, and what we, as anti-vaxers, feel, think, and have studied in regard to vaccination.

I am amazed at how this simplistic “anti-vax summary” is so effective in creating and supporting a pro-vaccine belief system...and have been stunned at how many people, know so little about the history of vaccination and the scientific research, that has been done on the safety and effects of vaccines, or have even for that matter, read a pharmaceutical insert for a vaccine...Many of which, do not cast a favorable light on these injections.

It seems that instead of truly researching vaccines, so many, be it physicians, senator aides, newspaper reporters, or the average person...parrot the same mantra...”vaccines good.....they don’t cause autism...Wakefield bad...retracted study...no science behind claims”

It is because the mainstream media is so rife with this type of gross simplification, and because of its simultaneous power of persuasion, that I offer a perspective on vaccines counter to popular media. While I am deeply opposed to vaccination, due to their inherent danger, my intent is not to say, “Don’t vaccinate”, but rather, this is a subject that cannot be given a cursory glance but must be looked at, in-depth and from many angles....and ideally with an unbiased mind....especially before mandating compulsory vaccinations.

Personally, I had not heard of the term anti-vaxer until recently and I feel that it is a very limited description and from the get go sets up a feeling of division. While I have chosen not to vaccinate, this opinion has evolved over twenty-one years and has been shaped by many different factors.

To be fair, I must say that I was a bit biased when I started my study on vaccination...or at least, I had a healthy dose of discrimination in place. This was not intentional and in fact I had grown up with a very strong familiarity with the mainstream medical profession...both socially and professionally. From an early age on I loved going to the doctor.... vivid memories of orange children’s aspirin, pink penicillin, and dum dum lollipops flood my mind......many of our family friends were physicians, and as I became a teen, the medical profession symbolized wealth and prestige. So, all in all, doctors held a very favorable and comfortable position. I was unquestioning of the medical system and was very accepting of its practices.

This unwavering acceptance to the allopathic model began to radically shift when, in my early twenties, I began working at a local health food store on my college campus. Here, many of the deep seated beliefs that I had, and in particular around what created health and how to approach disease, were completely shaken, broken down and rebuilt as I begin to daily interact with those that did not choose to use the medical profession, opting instead to take their health into their own hands, or those that had left the medical system dissatisfied, after not getting the results that they wanted or worse yet, had been injured from a pharmaceutical or medical procedure. And the most amazing thing to me is that these people were successful in improving their health. Even with such things as cancer, diabetes and heart disease. They were reversing diagnoses, and defying prognosis. I saw this, on a regular basis and when I began following what they said, I too, felt better than I had ever felt, without a doctor.
Over the next ten years, I went on to study holistic nutrition, and family and nutritional herbalism. While I never again visited a physician, I did draw on many medical doctors' knowledge, mainly through books. Many of these M.D.'s such as Dean Ornish MD and Max Gerson MD, shared how they had transitioned away from more invasive, pharmaceutical or surgically based treatments and had begun using diet, healthy habits such as meditation, exercise, herbal remedies, and juicing for the mainstay of their regimens.... in their cases, for advanced heart conditions and cancer. [11,12]

They shared that diet and lifestyle, greatly impacted health....Dr. Ornish in his book, Dr. Dean Ornish's Program for Reversing Heart Disease...The Only System Scientifically Proven to Reverse Heart Disease Without Drugs or Surgery [13,14] and Dr. Gerson in his book, A Cancer Therapy Results of Fifty Cases and the Cure of Advanced Cancer by Diet Therapy.[15,16]

Dr. Ornish shared how he began to formulate his methods,

“...Surprisingly, no one had studied a comprehensive lifestyle program that used all of these lifestyle interventions (meditation, exercise, diet, and so on), and no one had examined the effects of these lifestyle changes not only on risk factors such as cholesterol and blood pressure but also, more importantly, the effects of a comprehensive lifestyle program on the underlying heart disease process....” [14 pg. 13]

And Dr. Gerson stated as early as 1958,

“...The coming years will make it more and more imperative that organically grown fruit and vegetables will be, and must be, used for protection against degenerative diseases, the prevention of cancer, and more so in the treatment of cancer....We will again need real housewives, not eager to save kitchen time but homemakers who will devote their lives to the benefit of all, especially the task of developing a healthy family....” [16 pg. 3-4]

The common trait in these, and other books that I was reading, was that they were empowering people to take charge of their own and their family's lives, through everyday lifestyle choices. They felt these choices significantly impacted people's health.

Simultaneously, other medical writers introduced me to the political side of the medical establishment. In fact, one of the most impressionable, to me, at this time was the epic 770 pg text, The Politics of Cancer, Revisited,[17] by Samuel Epstein M.D.,[18] who has published over 300 peer reviewed articles and has written eleven books including The Safe Shoppers Bible, and the Breast Cancer Prevention Program, and co-authored Toxic Beauty to name a few.

Relevant to the topic of vaccines, his book exposed and introduced me to the virtual revolving door between the medical system, the pharmaceutical industry, pharmaceutical lobbyists, and governmental agencies...and how these relations affect medical education and therefore protocol and keep the average citizen and patient in the dark about true causes of disease and available approaches to healing that are alternative and less invasive. [15]
As I focused very deeply on cancer treatment, this general message was only supported. In Ralph Moss's book *Questioning Chemotherapy* [19], I learned how cancer statistics were typically manipulated and in his book *The Cancer Syndrome* [20], I learned that on the board of Memorial Sloan Kettering, one of our country's largest cancer treatment center, instead of renown healers, sat businessmen from General Electric, General Motors, and Phillip Morris....representatives from many of the industries that produced cancer causing items.

Going on, I read Kenneth Ausbel's book, *When Healing Becomes a Crime* [21], which documents the life and natural cancer treatment plan of Harry Hoxsey. He, though having great success with cancer victims, was driven out of the U.S. like Max Gerson, and had to move his clinic to Tijuana.

While I was taking this all in, my grandmother’s doctor fired her, because she refused to do chemotherapy. She at 74 had to wade through natural health books, in order to figure out what supplements to take, while dealing with Non-Hodgkin’s Lymphoma.

Years later I was to see my next door neighbor clinically go from Non-Hodgkin’s Lymphoma stage 3 to stage 2 within 2 ½ weeks on an intensive juice cleanse, over one hundred and thirty ounces per day, and a supplementary herbal and lifestyle program.

What would have happened to my grandmother had her doctor been taught about holistic methods?

My grandmother, though, surpassing the cancer statistics, even with her self-created regime, fared better than my mother-in-law, Katie, who a beautiful woman, and public health nurse, believed very much in the medical system.

Originally Katie was diagnosed with ovarian cancer. I forget what stage. She ended up having a hysterectomy and undergoing radiation and chemotherapy. The cancer was said to go into remission and everyone celebrated.

But supporting what I had learned in school, quite often, the cancer comes back, stronger than ever, which in her case it did, relatively soon, after the supposed remission.

For you see in the alternative world, cancer is never seen as a localized situation but rather an imbalance with the entire system. Whereas the allopathic approach is to kill off the disease, I was being taught, like Dr. Gerson, that the way to work with cancer is to make the body so healthy, that the cancer ceases to exist. The methods typically employed include copious juicing, cleansing the various eliminatory organs such as the skin, colon, kidneys, and liver; stimulating the lymph; looking at underlying emotional issues; bringing in vital nutrition and stopping all forms of sugar, refined food, and meat due to their effects on the pH of the body, and lastly incorporating some form of reflection and inspiration. This is done religiously, and regularly, all day long for typically many months. Usually the results are “miraculous”...though really very logical, as the entire inner terrain is revamped.
Katie however did not have this knowledge, and neither did her doctors, and so her cancer came back stronger than ever, having spread to various parts of her body. By the end even though she was traveling all the way to Yale, every other weekend for treatments, she ended up passing away. When she died, she was on numerous drugs, possibly even ten different ones, all trying to do something and yet many having their own side effects. Because of these prescriptions, at her time of death, she was hallucinating and fairly incoherent.

The struggle that my grandmother had to secure holistic methods, and the results of my mother in law’s cancer treatment, made a very deep impression on me. Especially, since I was at the same time studying people such people as Max Gerson, and Harry Hoxsey.

**It is with this evolving understanding and discrimination,** in my early thirties, that I approached vaccines, and on a deeper level how I approached and developed my view on childhood illness, and how I wanted to support my child- to- be’s health, as well as my view of the entire medical system.

I also, in opting for a traditional midwife vs. a standard physician, did not have a doctor telling me that I should vaccinate, and so did not have the pressure or influence that many parents-to-be, have.[22,23,24,25]. This persuasion can affect many parents, especially when they do not have confidence of their own knowledge in health and disease.

On the contrary, the books by the medical doctors that I was exposed to, were the likes of Dr. Mendelsohn M.D.,[26] and George Wootan MD [27] that even though both had been long time pediatricians, they were questioning the safety, over-use and efficacy of vaccines and **focused on supporting the parent to be proactive and the main team player, in their family’s health.**

So instead of hearing vaccination being praised by a pediatrician, I was hearing Dr. Mendelsohn say,

“....Although I administered them my-self during my early years of practice, I have become a steadfast opponent of mass inoculation because of the myriad hazards they present. The subject is so vast and complex that it deserves a book of its own. Consequently, I must be content here with summarizing my objections to the fanatic zeal with which pediatricians blindly shoot foreign proteins into the body of your child without knowing what eventual damage they may cause.....”[28, pg. pg. 231]

Dr. Mendelsohn then went on to give a brief description of the main childhood diseases and his thoughts on the main childhood vaccinations. [28]

Dr. Mendelsohn’s and Dr. Wootan’s respective books are entitled, **How to Keep Your Child Healthy In spite of Your Doctor** [28] and **How to Take Charge of Your Children’s Health.** [29] It is pertinent to note that Dr. Mendelsohn had been a pediatrician for over thirty years when he died and Dr. Wootan, has been a physician for over forty years.
While the above is a bit of a personal tangent, it is crucial in this discussion.

I **highly doubt** that I, like the average person, would have questioned vaccines, had I not had the particular exposures that I had. Not only was I exposed to the politics of medicine and its consequent limiting of information to the average patient, and the far reaching influence of the pharmaceutical body, I was also exposed to countless ways to dynamically build health, without medical intervention...

Most importantly, I not only studied from books and in school how to build health, I **experienced** an increase in well-being, and stopped going to the doctor (and to this day have never gone back), after twenty years of regularly visiting one, and growing up within the medical system. On a larger scale, I saw the same success in many around me, when employing holistic methods...in both chronic and acute health situations....again and again.

At the same time, from a certain stand point I could see why the idea of vaccination could sound good, and did not want to blindly go against it, and in fact had even gotten a tetanus shot five years earlier.

In essence, vaccines even appeared at first glance, to be homeopathic...give the body a little bit of a disease, develop a very mild version of the illness and develop antibodies....hence no full blown illness with major complications....hmmm perhaps. .. And so, I was not opposed to vaccination and attempted to systematically go through each illness, weighing the many various factors of the illness itself and the characteristics of their respective vaccine.

For the record, I had never heard of Dr. Wakefield and knew next to nothing about autism.

Two of the first books that I pored over and are now worn and dog eared were Dr. Tim O'Shea DC’s book, *Sanctity of the Human Blood,... Vaccination is not Immunization* [30] (This book has had multiple editions, the newest entitled simply, *Vaccination is not Immunization*) and Neil Z. Miller’s book, *Vaccines: Are They Safe and Effective*?[31]

What I love about these books is that they not only are packed with scientific data and studies from reputed medical and scientific journals, but they taught me to question vaccines....To question and analyze the safety and efficacy of each vaccine and to then go beyond how each vaccine appeared in a clinical setting, and look at the effects of the vaccine in real life. What really happened?

Here are some examples of the questions that I learn to ask, about vaccines, and the answers that I learned.

But first, let’s take a little test.....

1. If you are vaccinated for measles or any other disease, does this guarantee prevention?
2. The Pertussis Vaccine gives twenty years immunity True/False
3. Only unvaccinated people can be contagious. True/False
4. When completing the last booster, you are immune for life? True/False?
5. It is common to see disease occurrence in vaccinated people? True or False?
6. In the recent whooping cough outbreak in California, a large percentage was vaccinated. True or False?
7. Vaccines eradicated small pox.
8. Vaccines eradicated polio.
9. In your opinion, are vaccines safe and effective?
10. How the term herd immunity was first defined and how does it apply to vaccine-derived immunity?

Okay so here we go....

**Do vaccines give permanent immunity?**

No.

According to the CDC, “...Active immunity results when exposure to a disease organism triggers the immune system to produce antibodies to that disease. Exposure to the disease organism can occur through infection with the actual disease (resulting in natural immunity), or introduction of a killed or weakened form of the disease organism through vaccination (vaccine-induced immunity). Either way, if an immune person comes into contact with that disease in the future, their immune system will recognize it and immediately produce the antibodies needed to fight it...” [32]

Going further, the CDC states,”... Active immunity is long-lasting, and sometimes life-long....”[32]

Many pro-vaccine websites equate vaccine-induced immunity to natural immunity, leading the general public to believe that they give the same, or nearly the same long-lasting results.

Yet, immunity is based on much more than just a high antibody count and is composed of many different elements; most likely many that we have not even discovered or understand fully.

In his thought provoking article, “A Case Against Immunization [33]”, Dr. Richard Moskowitz MD, shares how when one naturally acquires the measles, the entire immune system takes part in the process.

“....It is abundantly clear from the above that the process of mounting and recovering from an acute illness like the measles involves a general mobilization of the immune system as a whole, including inflammation of the previously sensitized tissues at the portal(s) of entry, activation of leukocytes, macrophages, and the serum complement system, and a host of other mechanisms, of which the production of circulating antibodies is only one, and by no means the most important....”[33]
Dr. Moskowitz then goes on to contrast the naturally acquired measles incident to a vaccine-induced immune response and proposes that vaccination may actually suppress the immune system and drive the illness deeper, leading to a higher incidence of chronic and auto immune disease.[33]

I highly recommend reading the entire article, as it is written with great clarity and poses some very important thoughts for us to consider.

http://doctorrmosk.com/Site/The_Case_Against_Immunizations.html.  [33]

Other researchers also question if a high antibody count always reflects immunity to a particular disease, as well. As seen in the 2007 study entitled, “Mumps Outbreaks in Canada and the United States: Time for New Thinking on Mumps Vaccines”, earlier trials of the Jeryl Lynn strain of the mumps showed a 95% efficacy rate but in epidemic situations only a 62% effectiveness .....While the Rubini strain showed nearly 0% effectiveness in epidemic situations. Meanwhile The Urabe strain showed a 54%-87% effectiveness but was also prone to cause aseptic meningitis....the Leningrad strain showed a “promising” effectiveness of <95% effectiveness and though connected with meningitis, it was of a benign type.[34]

So not only do some strains exhibit lower effectiveness in real life, even at times with a high antibody count, the strains that are termed “effective” in the researchers eyes, have been linked to meningitis. To me this sounds a bit like out of the pot and into the fire!

Also, Ethan Huff shares in his article, “Bedrock of Vaccination Theory Crumbles as Science Reveals Antibodies Not Necessary to Fight Virus”, “..... But the new research[35] highlights the fact that innate immunity plays a significant role in fighting infections, and is perhaps more important than adaptive immunity at preventing or fighting infections. In tests, adaptive immune system antibodies were shown unable to fight infection by themselves.... [36]

Another variable to throw into the mix, is that many researchers, physicians and scientists, question if the Germ theory is a valid theory or at least complete in and of itself, downplaying the role of the robustness of the individual. Notable people in the field of dealing with health and disease, both Rudolph Virchow and Florence Nightingale, emphasized the importance of sanitation and strength of the being, more so than invading germs.

“If I could live my life over again, I would devote it to proving that germs seek their natural habitat, diseased tissue – rather than being the cause of the diseased tissue.”
– Rudolph Virchow [37,39]

“The specific disease doctrine is the grand refuge of weak, uncultured, unstable minds, such as now rule in the medical profession. There are no specific diseases; there are specific disease conditions.”
– Florence Nightingale [38,39]
Many do not realize that while Pasteur was focusing on the destruction of germs, with the goal of destroying “illness”, his peer Antoine Bechamp MD, was focused on supporting the strength and vitality of the terrain, or bodily system, and how that, made one more resistant to disease.

*This premise is very significant, if not the crux of the vaccination debate. For depending on one’s bias, a course of action will set be in motion*, in the face of illness. One of a more allopathic mindset, will set out, sometimes at all costs (as seen with such things as chemotherapy, and radical surgeries), in hopes of stopping the “disease”. While a person who understands Bechamp will not so much focus on “killing the germ”, or “eradicating the disease”, but instead on dynamically fortifying the system, in as many ways as possible, similar to our above discussion with cancer treatments. Kill the disease or build health...

For an in depth look at the differences between Bechamp and Pasteur please see Ethel Hume’s, *A Lost Chapter in the History of Biology* and R. B. Pearson’s *Pasteur: Plagiarist, Imposter The Germ Theory Exposed*. [http://www.mnwelldir.org/docs/history/biographies/Bechamp-or-Pasteur.pdf](http://www.mnwelldir.org/docs/history/biographies/Bechamp-or-Pasteur.pdf)

[39]

Perhaps this general lack of understanding is why, instead of long term immunity with vaccinations, we see disease incidence in vaccinated populations, the need for more and more booster shots, and also scientific studies that show that the efficacy of vaccines can be surprisingly short. From this scientific and real life data, we clearly see that **vaccine derived immunity is not the same as true and lasting immunity**...

Thus the very name immunization is misleading and false.

Immunity to a particular disease, for instance whooping cough, chicken pox or the measles, which is truly long lasting, is only created through getting the actual disease versus variable and waning immunity when protection is vaccine derived.[40,41,42]

*Passive* immunity is another form of immunity and occurs when one is *given* antibodies to a disease. One way in which passive immunity occurs is when a mother transfers antibodies to her child. This occurs both through the placenta as well as through breast milk. (Most strongly in the colostrum and then in waning strength over the ensuing months).[43] While mothers who are vaccinated may still pass on antibodies, as a 1995 study shows that mothers with natural immunity may have a higher antibody titer than those that had been vaccinated.[44]

**So how long does immunity last from vaccines?**

**Pertussis Vaccine...Surprisingly short-lived**

As Hilary Butler shares in her in-depth article, studies show the inadequacy of vaccine derived immunity for pertussis in comparison to the naturally acquired disease.

Because of its breadth, it is much better to read the entire article:
Other studies in similar fashion have shown the waning efficacy of the pertussis vaccine. A few examples include 1. A 2012 study showing that,”... An estimated 15% of vaccinated individuals lost their immunity within five years after vaccination....(vaccinated with pertussis)”[46] 2. A 2010-2012 study that showed disease incidence in a pertussis vaccinated population, as well as waning vaccine-derived immunity[47] and another 2012 study showing the incidence of whooping cough in a vaccinated population. [48]

Moving on to other illnesses, how does vaccine-derived immunity stack up?

Again, here is a study that shows waning antibody levels in the measles, mumps and rubella.[49],a study that shows the need for a hepatitis b booster [50], a study showing the waning vaccine derived immunity for the flu [51], a study that shows that,”... Infection with OPV (vaccine "take") is highly seasonal in India and results in intestinal mucosal immunity that appears to wane significantly within a year of vaccination....”[52], a study showing variable “immunity” for chicken pox [53] and a study showing waning immunity and a need for chicken pox boosters [54].

As I look over these studies, I see a fairly across the board, waning vaccine derived immunity and a regular call for an increase in boosters. This to me foreshadows a prescription to keep us hooked on drugs for an indefinite period time, in this case pharmaceutical boosters, to attain a supposed “immunity”. Can we truly call this immunity when we are dependent on a drug to attain the desired effect?

Unlike the authors of these studies, instead of drawing the conclusion that we should incorporate more boosters, I see a lack of effectiveness in vaccines developing true immunity and I deeply question if we can attribute the decline in childhood diseases to vaccines, and surely not the touted eradication of disease.

I also question, like many others, how this waning immunity is effecting the epidemiology of childhood illness.....are we exchanging disease in the earlier years where some diseases such as chicken pox are more benign and moving them to an older age, when there can be a greater risk of complication? [54] And just as we see the detrimental emotional effects when a parent is always stepping in to fight their children's battles, are we, by suppressing immunity and not allowing our children to experience these, what were once considered normal childhood illnesses, keeping them in a continued weakened state. What will happen if a major epidemic occurs that we do not have a vaccine for? How on earth will their bodies know what to do because they have never had a chance to develop as nature intended....gradually building up over time?

Lastly, I realize that in reading these studies, there are so many variables unaccounted for and benefits or favorable results are so quickly attributed to the vaccine. For instance in [53] the article states that the varicella vaccine has 100% effectiveness rate in preventing severe chicken pox.
My son who was *not vaccinated*, also had a very mild case of the chicken pox.

My schooling has taught me that the foundational health of the person will have a direct influence on the prognosis of the patient. Therefore, how do we know that it was the vaccine that produced a less severe case of the chicken pox? Perhaps, these children were more robust and healthy.

To truly know, one would have to compare a group of vaccinated children with average lifestyle to an unvaccinated group with a dynamically healthy lifestyle, and then expose them to the disease, and see what the effects are. Some feel that this would be unethical. However, if those that are vaccinated are counting on them working, and we who do not vaccinate, are not fearful of something such as the chicken pox, and know how to prevent complications, I personally do not see how this is unethical. Especially considering the other option is that I would be forced to vaccinate my son, with what have been proven to be quite dangerous, if he was ever to want to go to public school. What is truly unethical?

I feel that we *must* consider these questions.

Yet, many will not be satisfied with my interpretation. I am by no means an expert on vaccines. Let us look at what Dr. Viera Scheibner [55], who has studied more than 100,000 pages of medical orthodox papers regarding vaccination and what she has to say,

>[she]“… established that there is no scientific evidence that these injections of highly noxious substances prevent diseases, quite to the contrary, that they increase susceptibility to the diseases which the vaccines are supposed to prevent and also to a host of related and unrelated viral and bacterial infections. Vaccines are involved in a great number of modern ills of childhood such as immunoreactive diseases (asthma, allergies), autoimmune diseases (diabetes, multiple sclerosis, lupus erythematosis), cancers, leukaemia, degenerative diseases of bone and cartilage, behavioural and learning problems, to mention just the most important conditions…..”[55]

She has studied over 100,000 pages of scientific literature.

We also must realize, if the amount of boosters given increases, as many of these more recent studies proclaim, the probability of these adverse reactions will also increase. This potential increase in risk, does not even take into account, the increase in the cumulative load of toxins and adjuvants within the body, as more and more boosters are added, to reach the ever so elusive eradication point. We must ask, eradication at what cost?

**So if vaccines do not grant lifelong immunity, does that mean that I can get the very disease that I am vaccinated against?**

Let’s use the much talked about MMR as an example...

What does the CDC say?
“….Protect your Child with Measles Vaccine…

You can protect your child against measles with a combination vaccine that provides protection against three diseases: measles, mumps, and rubella (MMR). The MMR vaccine is proven to be very safe and effective. CDC recommends that children get two doses:

- the first dose at 12 through 15 months of age, and
- the second dose before entering school at 4 through 6 years of age.” [56]

Yet, does the MMR guarantee that you or your child will not get the measles? What does history show?

A sampling of studies which show disease incidence even with vaccination of MMR

1. 1988 “….. Of the 3411 reported cases, 1942 occurred among school-aged children. Of these, 1339 (68.9%) had been appropriately vaccinated. Most of the vaccine failures occurred in persons 12-19 years of age (Figure 2). Reported by: Div of Immunization, Center for Prevention Svcs, CDC…..”[57]

2. Outbreak of Measles Among Persons With Prior Evidence of Immunity, New York City, 2011[58]

3. Mumps in vaccinated population
   [http://www.sciencedirect.com/science/article/pii/S0022347605807267] [59]

4. 1991 Mumps outbreak in Tennessee schools 68 cases, 67 had been vaccinated[60]

5. An article on vaccination, by Dr. Richard Moskowitz, including a variety of subtopics including the history of the measles, vaccine derived immunity and natural immunity, and DPT. This is an excellent article. [61]

6. Here we see a view of the MMR effectiveness from a proponent of the vaccine, Dr. Gregory Poland MD, editor in chief of the medical journal, Vaccine,[62]

   “...The immune response to measles vaccine varies substantially in actual field use. Multiple studies demonstrate that 2–10% of those immunized with two doses of measles vaccine fail to develop protective antibody levels, and that immunity can wane
over time and result in infection (so-called secondary vaccine failure) when the individual is exposed to measles. For example, during the 1989–1991 U.S. measles outbreaks 20–40% of the individuals affected had been previously immunized with one to two doses of vaccine. In an October 2011 outbreak in Canada, over 50% of the 98 individuals had received two doses of measles vaccine... this phenomenon continues to play a role in measles outbreaks.

Thus, measles outbreaks also occur even among highly vaccinated populations because of primary and secondary vaccine failure, which results in gradually larger pools of susceptible persons and outbreaks once measles is introduced.

This leads to a paradoxical situation whereby measles in highly immunized societies occurs primarily among those previously immunized....” [62]

Dr. Poland suggests that we need to develop new and improved vaccines to combat this ineffectiveness and unreliability.

7. In “Measles and Measles Vaccines: Fourteen Things to Consider [63]”, Roman Bystrianyk sums it up well,

“....Digging beneath the thin fairytale of the measles vaccine, it is possible to unearth a large number of facts that question the entire premise of continuously vaccinating the entire human population from cradle to grave. We were told that a vaccine was invented to tame measles and we all lived happily ever after. As we have seen, this is not the case. Unfortunately, the term “vaccine” has achieved a magical cult like status in our society. Simply attach the term vaccine to anything and it instantly becomes “safe and effective” for the vast majority. It doesn’t matter what the ingredients are, who manufactured it, how it was made, or any of its less than stellar history. Vaccines are always the magic wand for any disease. No questions asked. We now know that by the time the measles vaccine was put into place, the death rate had fallen to virtually zero along with a declining incidence of the disease. We were promised that a single shot would provide lifelong protection and that if only the “right” number of children were vaccinated the disease would have been eradicated by 1967. Instead, we now have to have all children subjected to at least 2 vaccines with less than lifelong protection. Now, whereas natural measles exposure generally left the person with reliable lifelong immunity, measles vaccines leave the individual with waning immunity. Because the truly immune seniors are dying off, the vaccine immune are now recommended to get adult vaccines. This dynamic of waning immunity means we will probably see measles epidemics even in highly vaccinated populations....[63]”
Personally, after seeing this type of research, repeatedly, I seriously questioned if vaccines were the method that I wanted to rely on to “protect my son”, and ensure his health. At the same time, at least from a world perspective, these are pretty small figures. What about two of the most infamous diseases, small pox and polio, didn't vaccines eradicate them?

Here’s an account of small pox that the average person may not know.

According to Dr. O’Shea DC, in Sanctity of the Human Blood, Vaccination is not Immunization [30], Dr. W. Hadwen MD had a very insightful account of England and Prussia and the effects of their compulsory vaccination programs.

“......It happened that Prussia passed a mandatory vaccination law in 1834 for small pox. The law provided that every infant be vaccinated, and then revaccinated when starting school. After graduation he had to be vaccinated again, and then once more upon entering the Army. And all healthy males had to go into the army. Anyone who refused the vaccination was to be” held down and vaccinated in ten places on each arm......” [64]

I was able to locate the full speech that this excerpt comes from. This is the fate of Prussia after thirty five years of forced vaccination.

“.... In that year small-pox carried off no less than 124,978 of her vaccinated and re-vaccinated citizens after thirty-five years of compulsory vaccination of the description which I have referred to! This roused Prussia, and she began to look about her; she saw the cause, and she was determined to remedy it. She brought good water into her cities, purified her river Spree, introduced a complete drainage system throughout the country—(loud cheers)—she got rid of her "rookeries," and ordered model barracks to be built for the soldiers; and away fled the small-pox, like the Philistines before the Children of Israel. Sanitation did for Prussia what 35 years of compulsory vaccination was unable to accomplish. At the present time in Prussia small-pox is almost extinct. (Cheers.) It is not that people ‘are being vaccinated more; they are vaccinated less. (Hear, hear.) They hate it in Germany as we English people do; and you can now get out of vaccination there by the payment of a shilling fine. Even the very children in Germany know well enough how it is hated, and in proof of this I may relate to you an amusing incident, a school inspector went to one of the schools the other day and asked the question of the class, "Why was Moses hidden by his mother in the bulrushes?" Very soon a little fellow put up his hand and replied, "Please sir, she did not want him to be vaccinated." (Loud laughter.)”[65]

For the complete talk, which is as applicable today as it was then, go here http://www.soilandhealth.org/02/0201hyglibcat/020119hadwin/020119hadwenrallytalk.html[65]
It is well worth the read and in being delivered by an Englishman, is quite humorous, albeit very eye opening....and perhaps shocking to those that think that vaccines eradicated the small pox.

Lest you think that this is a one off, you may want to review the incidence of small pox and fatality in England and Wales in 1923 and 1926, where a substantial incidence of the small pox in vaccinated individuals is seen. [66]

Yet, it has been so oft repeated that because of vaccination, small pox has been eradicated. Naysayers to the dangers of vaccines, claim again and again that we who question vaccines, have no science to back our claims. To read Dr. Scheibner’s highly referenced analysis of the small pox eradication program, please see [http://www.vaccinationcouncil.org/2012/04/02/smallpox-declared-eradicated-while-still-alive-and-well-by-viera-scheibner-phd] [67]

To end our discussion for now on small pox, let us take a look at Leicester England and how its citizens responded to mandated compulsory vaccination,

“.....The town of Leicester was a particular hotbed of anti-vaccine activity and the site of many anti-vaccine rallies. The local paper described the details of a rally: “An escort was formed, preceded by a banner, to escort a young mother and two men, all of whom had resolved to give themselves up to the police and undergo imprisonment in preference to having their children vaccinated...The three were attended by a numerous crowd...three hearty cheers were given for them, which were renewed with increased vigor as they entered the doors of the police cells.” [5]

The Leicester Demonstration March of 1885 was one of the most notorious anti-vaccination demonstrations. There, 80,000-100,000 anti-vaccinators led an elaborate march, complete with banners, a child's coffin, and an effigy of Jenner...." [68]

I guess Dr. Wakefield is not the father of the anti-vax movement after all.

Dr. Suzanne Humphries and Roman Bystrianyk share in their article, “Vaccination, a Mythical History” [70], that soon after this demonstration, the pro-vaccine government was replaced by politicians that did not support compulsory vaccination, leading to a significant drop in vaccination rates. [70]

What was the outcome of only 10% people being vaccinated?

“....Instead of relying on vaccination, people began to rely on proper sanitation, quarantine of smallpox patients and thorough disinfection of their homes. They believed this technique was a cheap and effective means that eliminated the need for vaccination. However, there were dire predictions from the majority of the medical community that strongly endorsed vaccination and believed the low vaccination rate would result in a terrible “massacre,” especially in the “unprotected” children.[29][article citation] Despite such prophesies of doom from the medical profession, the majority of the town’s residents were steadfast in their belief that vaccination was not necessary to control smallpox. The prophecy that the Leicester residents would eventually be plagued with disaster never did come to pass. Low vaccination rates resulted in lower smallpox
rates and deaths, than in well-vaccinated towns.[30][article citation] In fact, the lower vaccination rates correlated to an overall decrease in smallpox deaths (Graph 2). Leicester showed that by abandoning vaccination in favor of what became termed as the “Leicester Method,” deaths from smallpox were far lower than when vaccination rates were high....” [70]


Moving on, polio is yet another infamous disease and one that supporters of vaccination speak about again and again as a remarkable success.

Recently I decided to go to a discussion in my home town of Nevada City/Grass Valley, California, where a public health representative, an MD from Yale, was talking about the many successes of vaccination. I found his presentation quite interesting. After profusely thanking Bill Gates and his foundation which has financed worldwide vaccination programs, he showed very graphic photographs of the worst possible case scenarios, of each childhood illness. For measles, the person was almost one big red splotch......same for the chicken pox...... and for polio one adorable little girl was crippled, while another photo showed a room full of people in tank respirators, or “iron lungs.”

The presenter did know that there had been a few issues with certain vaccines such as polio and dpt, mentioned them each of his own accord and then minimalized each with a cast of the hand,”...yeah...there have been a few bad batches....pretty minor....”

How minor?

The Merck manual does concede that adverse reactions can at times happen, with vaccination. However, the text point out that these are fairly insignificant.

“...The pertussis component of the older whole cell diphtheria, tetanus, and pertussis vaccine (DPT) occasionally led to febrile seizures in about 1/10,000 children and more rarely confusion and fainting. Although these episodes do not leave any lasting damage, they are distressing to parents....”(pg 492)[71]

“.....The oral polio vaccine which is made of a live, weakened virus, can cause polio if the weakened virus mutates, which happens once in every 2.4 million children.....”[72]

What does history show?

In her revealing and again heavily cited article, Dr. Viera Scheibner (who remember from before, has read over 100,000 pages of scientific literature on vaccination), first shares how it has been repeatedly scientifically cited that polio has occurred, shortly following an injection of antigens, quite often with DPT. [73]

She then goes on to describe more recent developments with the polio vaccine:
“…The history continued repeating itself all over the world wherever the poliomyelitis vaccines were used. Paralysis developed after both injectable and oral polio vaccines.

It comes as no surprise that the most recent mass polio vaccination programs fuelled by Bill and Melinda Gates Foundation resulted in increased cases of VAPP. In India, two paediatricians, Dr Neetu Vashisht and Dr Jacob Pulliel of the Department of Paediatrics of St Stephens Hospital in Delhi noted that another major ethical issue raised by the campaign is the failure to thoroughly investigate the increase in incidence “of non-polio acute flaccid paralysis (NPAFP)” in areas where many doses of vaccine were used, while noting that these cases are clinically indistinguishable from polio paralysis and twice as deadly.

They also noted that while India was declared polio-free in 2011, at the same time there were 47500 cases of NPAFP, which increased in direct proportion to the number of polio vaccine doses received. Independent studies showed that children identified with NPAFP “were at more than twice the risk of dying than those with wild polio infection”.

According to their report, nationally, the NPAFP rate is now twelve times higher than expected. In the states of Uttar Pradesh and Bihar – which have pulse polio vaccination every month – the NPAFP rate is 25 and 35 fold higher than the international norms (Ramesh Shankar, Mumbai 2012)…."[73]

And yet, how is this same polio program described online, by the Gates Foundation?

“…India, which was declared polio-free in February 2012, is perhaps the best example of how a fully funded program driven by committed leaders and dedicated workers can achieve success. India was long considered the most difficult place to end polio due to its population density, high rates of migration, poor sanitation, high birth rates, and low rates of routine immunization…."[74]

http://www.gatesfoundation.org/What-We-Do/Global-Development/Polio

How did news outlets like the LA Times respond? Their version sounded more like the Gates Foundation. [75]


While Joe Samuel from nsnbc International had a different take, and to me represents the first person that includes scientific references, in a mainstream publication, Thank-you Joe, so very much. [76]

http://nsnbc.me/2013/05/08/bill-gates-polio-vaccine-program-caused-47500-cases-of-paralysis-death/#comment-399593
I feel it is very important for you to read these articles and grasp the relevance in what is reported versus what actually happened. Realize that this is very similar to the original propaganda associated with the polio vaccine.

Beyond just inherent risks, in the polio vaccine, what about a bad batch?

The following is the introduction to the third part of the article entitled “The Polio Vaccine” [77]

“…In 1959, Bernice Eddy, a brilliant government scientist working in Biologics at the National Institutes of Health, discovered that polio vaccines being administered throughout the world contained an infectious agent capable of causing cancer. When Eddy attempted to report her findings and halt production of these contaminated polio vaccines, her government superiors barred her from publicly revealing the problem. Instead, her lab and equipment were taken away and she was demoted…” [77]

This article has over 170 citations and it hits home how absolutely absurd it is when the mainstream news outlets say that those who question vaccination, have no science evidence to back their claims.

Another notable bad batch in the polio vaccine’s history was a 1955 batch from Cutter Laboratories. This time, the virus had not been properly inactivated and resulted in at least 40,000 people developing polio, 200 children with varying degrees of paralysis and 10 dead. [78]

I remember when my then father in law, a lawyer, found out that we were not going to vaccinate our son. He looked at me and said...

"You better not hurt my grandson…"

In particular, he remembered polio, and most importantly, how vaccines had" wiped that out.” He still remembered the newspapers and their proclamation of the many lives saved from polio by vaccination. And yet, when I offered him literal stacks of books, many by medical doctors, sharing different information, he, a very intelligent man who loves to read, refused to so much as open the first page.

This, to me, exemplifies to perfection, the power of propaganda.

Looking at the recent LA Times description of the Gates fiasco in India, I see that things have not changed much.

What about herd immunity?

The CDC discusses the term “community immunity as: “…. A situation in which a sufficient proportion of a population is immune to an infectious disease (through
vaccination and/or prior illness) to make its spread from person to person unlikely. Even individuals not vaccinated (such as newborns and those with chronic illnesses) are offered some protection because the disease has little opportunity to spread within the community. Also known as herd immunity...” [79]

This is one of the main arguments that people in favor of mass vaccination use to force compulsory vaccination.

Yet some scientists and physicians strongly question the idea of “herd immunity”, especially when used in the context of vaccine-derived herd immunity versus a more lasting immunity developed from acquiring the actual disease.

Really how can one compare the two?

Even with a very simplistic analysis, how can one compare the “herd immunity” before the advent of compulsory vaccines when people actually developed lasting immunity for life to the chicken pox or measles, to a vaccine-derived immunity when we the infants develop a weaker passive immunity and then go on to be vaccinated, and this vaccine derived immunity varies so dramatically in long it is effective?

As Dr. Russell Blaylock M.D. states,

”..... When I was in medical school, we were taught that all of the childhood vaccines lasted a lifetime. This thinking existed for over 70 years. It was not until relatively recently that it was discovered that most of these vaccines lost their effectiveness 2 to 10 years after being given. What this means is that at least half the population, that is the baby boomers, have had no vaccine-induced immunity against any of these diseases for which they had been vaccinated very early in life. In essence, at least 50% or more of the population was unprotected for decades....

If we listen to present-day wisdom, we are all at risk of resurgent massive epidemics should the vaccination rate fall below 95%. Yet, we have all lived for at least 30 to 40 years with 50% or less of the population having vaccine protection. That is, herd immunity has not existed in this country for many decades and no resurgent epidemics have occurred. Vaccine-induced herd immunity is a lie used to frighten doctors, public-health officials, other medical personnel, and the public into accepting vaccinations. [80]

Can a person who is immunized be contagious?

Some may be very surprised that those that are vaccinated can actually be carriers of the disease.

For an referenced article on the subject by Barbara Loe Fisher [81]

What about adverse reactions?
So, now I know that

1. Vaccines will never grant true immunity
2. There has been a relatively high incidence of disease in vaccinated people
3. Sometimes you can get the very disease from the vaccine itself
4. Sometimes you can be a carrier of the disease that you are vaccinated and transmit the disease.

I asked myself are vaccines safe, in regard to adverse reactions and do these potential risks outweigh the threat of the illness itself?

Each pharmaceutical has a material safety data sheet for each vaccination. I was able to find fairly detailed information for each vaccine, online, by either searching for a specific msds or by looking up the prescribing information for each vaccine.

It is important to note that the common charts for adverse reactions first shown on these inserts, are more benign occurrences such as fever, swelling, irritability, etc. Yet, if you continue on, down the insert, you will typically see adverse reactions reported post clinical study. There is typically a disclaimer with this that states that as with any vaccine, adverse effects may occur and no causal relationship between reported occurrence and vaccine has been proven.

This will affect parents differently. Personally, it was not worth it to me, playing what I consider vaccine roulette, with my son. Even if only a relatively small percentage of children had severe reactions, in some cases death or permanent impairment, we do not know who that small percentage will be. **No one can guarantee that your child will not be harmed by receiving a vaccine.**

And small in relation to the world population is still quite substantial.

**Also, repeatedly, parents have said that it was challenging for them to make an adverse reaction claim, and that their physician had readily dismissed any causal connection.**

**How can we truly know the statistics of vaccine related injury?**

And yet, regardless of how many victims, some parents do not find enough significance in some individuals being injured, to not vaccinate their own children. Recently, when I asked a local mother about vaccines, she said....”....My three children are fine. The middle one does have Asperger’s, but I think that it is from the plastic...”

To me, when I see countless people being harmed and die from a substance, I take this into consideration and find that the risk is quite significant.

The truth is that not only, do we not know who will have an immediate and overt reaction; we are only beginning to get a glimpse of what the long term effects of vaccination is, to the human race, are.
A few examples of adverse reactions:

**Chicken pox**

What does the Merck manual say:

“A person who has had chickenpox develops immunity and cannot contract it again. However, the varicella-zoster virus remains dormant in the body after an initial infection with chickenpox, sometimes reactivating in later life, causing shingles (see **Shingles**). A shingles vaccine is available for older adults. This vaccine may decrease the risk of developing shingles in later life.” Merck manual [82]

1. **Varivax®**

“... Body as a Whole

Anaphylaxis (including anaphylactic shock) and related phenomena such as angioneurotic edema,

facial edema, and peripheral edema.

Eye Disorders

Necrotizing retinitis (in immunocompromised individuals).

Hemic and Lymphatic System

Aplastic anemia; thrombocytopenia (including idiopathic thrombocytopenic purpura (ITP)).

Infections and Infestations

**Varicella (vaccine strain). (CHICKENPOX!**

Nervous/Psychiatric

Encephalitis; cerebrovascular accident; transverse myelitis; Guillain-Barré syndrome; Bell’s palsy;

ataxia; non-febrile seizures; aseptic meningitis; dizziness; paresthesia.

Respiratory

Pharyngitis; pneumonia/pneumonitis.

Skin
Stevens-Johnson syndrome; erythema multiforme; Henoch-Schönlein purpura; secondary bacterial infections of skin and soft tissue, including impetigo and cellulitis; herpes zoster...” [83]

2. Study showing possible increase in shingles with use of chicken pox vaccine [84]

Diptheria, Tetanus, and Pertussis

1. Daptacel ®

“... Blood and lymphatic disorders
Lymphadenopathy
• Cardiac disorders
Cyanosis
• Gastro-intestinal disorders
Nausea, diarrhea
• General disorders and administration site conditions
Local reactions: injection site pain, injection site rash, injection site nodule, injection site mass, extensive swelling of injected limb (including swelling that involves adjacent joints).
• Infections and infestations
Injection site cellulitis, cellulitis, injection site abscess
• Immune system disorders
Hypersensitivity, allergic reaction, anaphylactic reaction (edema, face edema, swelling face, pruritus, rash generalized) and other types of rash (erythematous, macular, maculopapular)
• Nervous system disorders
Convulsions: febrile convolution, grand mal convolution, partial seizures
HHE, hypotonia, somnolence, syncope
• Psychiatric disorders
Screaming......”[85]

2. Infanrix ®

“....As with any vaccine, there is the possibility that broad use of INFANRIX (diphtheria and tetanus toxoids and acellular pertussis) could reveal adverse events not observed in clinical trials.

Additional Adverse Reactions: Rarely, an anaphylactic reaction (i.e., hives, swelling of the mouth, difficulty breathing, hypotension, or shock) has been reported after receiving preparations containing diphtheria, tetanus, and/or pertussis antigens.” Arthus-type
hypersensitivity reactions, characterized by severe local reactions, may follow receipt of
tetanus toxoid. A review by the IOM found evidence for a causal relationship between
receipt of tetanus toxoid and both brachial neuritis and Guillain-Barré Syndrome. A few
cases of demyelinating diseases of the CNS have been reported following some tetanus
 toxoid-containing vaccines or tetanus and diphtheria toxoid-containing vaccines,
although the IOM concluded that the evidence was inadequate to accept or reject a causal
relationship. A few cases of peripheral mononeuropathy and of cranial mononeuropathy
have been reported following tetanus toxoid administration, although the IOM
concluded that the evidence was inadequate to accept or reject a causal relationship.

Postmarketing Reports: Worldwide voluntary reports of adverse events received for
INFANRIX (diphtheria and tetanus toxoids and acellular pertussis) since market
introduction are listed below. This list includes adverse events for which 20 or more
reports were received with the exception of intussusception, idiopathic
thrombocytopenic purpura, thrombocytopenia, anaphylactic reaction, encephalopathy,
and hypotonic-hyporesponsive episode for which fewer than 20 reports were received.
These latter events are included either because of the seriousness of the event or the
strength of causal connection to components of this or other vaccines or drugs.

Body as a Whole: Fever, Sudden Infant Death Syndrome.
Cardiovascular System: Cyanosis.
Gastrointestinal System: Diarrhea, intussusception, vomiting.
Hematologic/lymphatic: Idiopathic thrombocytopenic purpura, lymphadenopathy,
thrombocytopenia.
Hypersensitivity: Anaphylactic reaction, hypersensitivity.
Infections: Cellulitis.
Injection Site Reactions: Injection site reactions.
Musculoskeletal: Limb swelling.
Nervous System: Convulsions, encephalopathy, hypotonia, hypotonic-hyporesponsive
episode, somnolence.
Psychiatric: Crying, irritability.
Respiratory System: Respiratory tract infection.
Skin and Appendages: Erythema, pruritus, rash, urticaria.
Special Senses: Ear pain.

These adverse events were reported voluntarily from a population of uncertain size;
therefore, it is not always possible to reliably estimate their frequency or establish a
causal relationship to vaccination....” [86]

Polio

1. **Ipol®**

Used for polio

“.....Blood and lymphatic system disorders: lymphadenopathy

• General disorders and administration site conditions: agitation, injection site
reaction including injection site rash and mass

• Immune system disorders: type I hypersensitivity including allergic reaction, anaphylactic reaction, and anaphylactic shock

• Musculoskeletal and connective tissue disorders: arthralgia, myalgia

• Nervous system disorders: convulsion, febrile convulsion, headache, paresthesia, and somnolence

• Skin and subcutaneous tissue disorders: rash, urticarial…..” [87]

HIB

1. **Pedvax HIB®**

Potential Adverse Reactions

“….The use of Haemophilus b Polysaccharide Vaccines and another Haemophilus b Conjugate Vaccine has been associated with the following additional adverse effects: early onset Hib disease and Guillain-Barre syndrome. A cause and effect relationship between these side effects and the vaccination was not established.” [36,37,39,40,41,49]

Post-Marketing Adverse Reactions

The following additional adverse reactions have been reported with the use of the lyophilized and liquid formulations of PedvaxHIB:

**Hemic and Lymphatic System**

Lymphadenopathy

Hypersensitivity

Rarely, angioedema

**Nervous System**

Febrile seizures

Skin

Sterile injection site abscess…..” [88]

**Measles,Mumps, Rubella**

1. **MMR II®**

Body as a Whole
Panniculitis; **atypical measles**; fever; syncope; headache; dizziness; malaise; irritability.

**Cardiovascular System**
Vasculitis.

**Digestive System**
Pancreatitis; diarrhea; vomiting; parotitis; nausea.

**Endocrine System**
Diabetes mellitus.

**Hemic and Lymphatic System**
Thrombocytopenia (see WARNINGS, Thrombocytopenia); purpura; regional lymphadenopathy; leukocytosis.

**Immune System**
Anaphylaxis and anaphylactoid reactions have been reported as well as related phenomena such as angioneurotic edema (including peripheral or facial edema) and bronchial spasm in individuals with or without an allergic history.

**Musculoskeletal System**
Arthritis; arthralgia; myalgia.

Arthralgia and/or arthritis (usually transient and rarely chronic), and polyneuritis are features of infection with wild-type rubella and vary in frequency and severity with age and sex, being greatest in adult females and least in prepubertal children. This type of involvement, as well as myalgia and paresthesia, have also been reported following administration of MERUVAX II. Chronic arthritis has been associated with wild-type rubella infection and has been related to persistent virus and/or viral antigen isolated from body tissues. Only rarely have vaccine recipients developed chronic joint symptoms.

Following vaccination in children, reactions in joints are uncommon and generally of brief duration. In women, incidence rates for arthritis and arthralgia are generally higher than those seen in children (children: 0-3%; women: 12-26%),[17,56,57] and the reactions tend to be more marked and of longer duration. Symptoms may persist for a matter of months or on rare occasions for years. In adolescent girls, the reactions appear to be intermediate in incidence between those seen in children and in adult women. Even in women older than 35 years, these reactions are generally well tolerated and rarely interfere with normal activities.

**Nervous System**
Encephalitis; encephalopathy; measles inclusion body encephalitis (MIBE) (see CONTRAINDICATIONS); subacute sclerosing panencephalitis (SSPE); Guillian-Barré Syndrome (GBS); acute disseminated encephalomyelitis (ADEM); transverse myelitis; febrile convulsions; afebrile convulsions or seizures; ataxia; polyneuritis; polyneuropathy; ocular palsy; paresthesia.

Experience from more than 80 million doses of all live measles vaccines given in the U.S. through 1975 indicates that significant central nervous system reactions such as encephalitis and encephalopathy, occurring within 30 days after vaccination, have been temporally associated with measles vaccine very rarely.[58] In no case has it been shown that reactions were actually caused by vaccine. The Centers for Disease Control and Prevention has pointed out that "a certain number of cases of encephalitis may be expected to occur in a large childhood population in a defined period of time even when no vaccines are administered". However, the data suggest the possibility that some of these cases may have been caused by measles vaccines. The risk of such serious neurological disorders following live measles virus vaccine administration remains far less
than that for encephalitis and encephalopathy with wild-type measles (one per two thousand reported cases).

Post-marketing surveillance of the more than 200 million doses of M-M-R and M-M-R II that have been distributed worldwide over 25 years (1971 to 1996) indicates that serious adverse events such as encephalitis and encephalopathy continue to be rarely reported.[17] There have been reports of subacute sclerosing panencephalitis (SSPE) in children who did not have a history of infection with wild-type measles but did receive measles vaccine. Some of these cases may have resulted from unrecognized measles in the first year of life or possibly from the measles vaccination. Based on estimated nationwide measles vaccine distribution, the association of SSPE cases to measles vaccination is about one case per million vaccine doses distributed. This is far less than the association with infection with wild-type measles, 6-22 cases of SSPE per million cases of measles. [89]

**HPV**

**What does the CDC say about HPV:**

“…..**How safe are the HPV vaccines?**

…..All three HPV vaccines have been licensed by the Food and Drug Administration (FDA). The CDC has approved these vaccines as safe and effective. The vaccines were studied in thousands of people around the world, and these studies showed no serious safety concerns. Side effects reported in these studies were mild, including pain where the shot was given, fever, dizziness, and nausea. Vaccine safety continues to be monitored by CDC and the FDA. More than 60 million doses of HPV vaccine have been distributed in the United States as of March 2014.

Fainting, which can occur after any medical procedure, has also been noted after HPV vaccination. Fainting after any vaccination is more common in adolescents. Because fainting can cause falls and injuries, adolescents and adults should be seated or lying down during HPV vaccination. Sitting or lying down for about 15 minutes after a vaccination can help prevent fainting and injuries…..” [90]

“…..**Who should get vaccinated?**

All boys and girls ages 11 or 12 years should get vaccinated.

Catch-up vaccines are recommended for males through age 21 and for females through age 26, if they did not get vaccinated when they were younger.

The vaccine is also recommended for gay and bisexual men (or any man who has sex with a man) through age 26. It is also recommended for men and women with compromised immune systems
(including people living with HIV/AIDS) through age 26, if they did not get fully vaccinated when they were younger....." [91]

**Gardasil**

For HPV

“...The following adverse events have been spontaneously reported during post-approval use of GARDASIL. Because these events were reported voluntarily from a population of uncertain size, it is not possible to reliably estimate their frequency or to establish a causal relationship to vaccine exposure.

Blood and lymphatic system disorders: Autoimmune hemolytic anemia, idiopathic thrombocytopenic purpura, lymphadenopathy

Respiratory, thoracic and mediastinal disorders: Pulmonary embolus.

Gastrointestinal disorders: Nausea, pancreatitis, vomiting.

General disorders and administration site conditions: Asthenia, chills, death, fatigue, malaise.

Immune system disorders: Autoimmune diseases, hypersensitivity reactions including anaphylactic/anaphylactoid reactions, bronchospasm, and urticaria.

Musculoskeletal and connective tissue disorders: Arthralgia, myalgia.

Nervous system disorders: Acute disseminated encephalomyelitis, dizziness, Guillain-Barré syndrome, headache, motor neuron disease, paralysis, seizures, syncope (including syncope associated with tonic-clonic movements and other seizure-like activity) sometimes resulting in falling with injury, transverse myelitis.

Infections and infestations: cellulitis.

Vascular disorders: Deep venous thrombosis. [92]

**Misc. Studies, etc. related to HPV vaccination**

1. A findings of a study assessing the safety of vaccination for HPV [93]

“...Hence, the harm experienced to date is overwhelmingly greater than the benefit expected...”[93]

*A memorial to many young women that have died from Gardasil:[94,95]*

[http://truthaboutgardasil.org/memorial/][94]

http://www.vaccinationinformationnetwork.com/say-gardasil/ [95]
Still more studies:

For Hepatitis B: http://thinktwice.com/s_hepb.htm [96]

For the MMR: http://thinktwice.com/s_mmr.htm [97]

Immunological: http://thinktwice.com/s_immuno.htm [98]

Neurological: http://thinktwice.com/s_neuro.htm [99]

A family’s personal story

http://www.thedetail.tv/articles/new-inquest-ordered-into-co-down-teenager-s-death [100]

If possible, you may want to take the moment right now and watch this video. It is only five minutes. It shares not only the tragedy of a family, in losing their teen-age son, ten days after being given the MR, but also the challenge that they had, in getting recognition for the death being connected to the vaccine.

What does the Merck Manual say about vaccines, “....Vaccines available today are highly reliable and most people tolerate them well. They do not work in everyone, however, and rarely they have side effects....” (pg 1093 mm) [101]

Do physicians let us know of these possibilities?

Here is an excerpt from a presentation that Dr. Robert Jacobson MD, professor of pediatrics, offers to other physicians, on how to deal with those that question the safety of vaccination, and is entitled...“Approaching the Vaccine Hesitant Parent Using C-A-S-E...” [102]

“....CDC Information
  • Don’t plan on printing and giving to parents
  • Don’t plan on emailing them the links
  • Instead read and remember to make your CASE

Summary
  • Persuade rather than inform
    – CASE
  • Corroborate → About Me → Science → Explain/Advise
    – Aristotelian Rhetoric
  • Pathos → Ethos → Logos → Pathos
  • Know your sources of information
    – ACIP and its recommendations
Let’s recap that…”….Don’t plan on printing and giving (information) to parents...don’t plan on emailing them links, and instead remember the info and notice that he is only referring to CDC information.

It is also pertinent to note that for those wanting a truly educated decision, about the safety and efficacy of vaccines, it would be absolutely impossible to remember all the information required to give parents. It has taken me over three months to gather this information....and yet there is so much more out there.

Some parents may feel that the risk of adverse reaction is less than an actual disease. Again, personally, I would rather have a child, robust enough to handle the chicken pox, measles, the flu and whooping cough....I have learned about proper wound care instead of relying on a tetanus shot....and as I had to chuckle when I read the words of a mom who said that, the last time she checked with her preschool teacher, the kids weren't having sex or using illicit drugs and needles....well I could say the exact same thing about my eleven yr old...so we’re good on hep b. In regard to polio, my son may very well get polio, if we vaccinate.

I do strive to discern when and if medical intervention is truly warranted. If I felt that I need a second opinion, or if my son did develop a disease which is beyond my personal knowledge, I have developed relationships with various naturopaths and acupuncturists in the area and would not hesitate to go to the emergency room if needed.

Thus far, in the eleven years of my son’s life, this has not occurred. Recently, to fulfill a physical requirement, we went to a naturopath for the first time, who proclaimed him to be in excellent health.

Regardless of how individuals feel about risks, I feel that it is imperative that all individuals are told in an open and upfront way all risks possible.....not with the bias of not vaccinating in mind, but rather the risk of the disease itself, and presented with different forms of treatment (including holistic), and taught how to prevent complications from occurring, and then shared the risks and efficacy of each vaccine.

I feel that we, as individuals, must assess for ourselves what the greatest risk is, after full disclosure. How can a legislative body mandate compulsory vaccination, when full disclosure is so grossly lacking?

As it seems that very few physicians discuss such risks, I hope that more individuals become educated in this matter.
So after looking at this and countless other scientific studies and information, for many, many months...and after ten years of studying how to not only prevent disease through lifestyle but also how to support and create health, I decided not to vaccinate.

Because the topic has been so interesting, I have continued to study vaccines for eleven more years.

Now, I am even more adamant in my opinion, not to vaccinate because this is just the tip of the iceberg, in regard to the mountains of scientific data out there, showing that vaccines can be quite ineffective and quite dangerous. At the end of this article I will list some other sources for those that want an educated opinion. I would love to type each and every one of the studies here but I think that my son would disown me, due to the fact that this would take a very long, long, long time.

Informed Consent, educated decision making and a lack there of.....

I want to make it very clear that if ever there is a tone of frustration in my words, it is not directed at any particular body of people. I know lovely pharmacists; have awesome relatives that are physicians and friends and relatives that vaccinate.

What my deepest frustration stems from is the lack of well-rounded information, easily and immediately available to the common person, who mainly draws solely from their doctor, web sites such as the CDC, and mainstream news media, on the pros and cons of vaccines, which translates to what is shared is mostly the pros and very, very few of the cons.....

The other day, as I have started to do, I asked a store owner, who looked to be in her seventies, what her thought on the measles and vaccines was.

She said that she was not a good person to ask because her father had been pediatrician.

I said that she was perfect and I wanted to know what she thought....

She said that she and her book club had just been talking about vaccines and that they thought vaccines were good... there was no link to autism and that study on the MMR had been retracted...In a nutshell, she quoted almost verbatim what the newspapers were saying.

I said that my generation was seeing other information and asked her if she had ever heard about a connection with DPT and SIDS. She said she had not. I asked her if she had heard about the incidence in Prussia with the small pox. She said she had not. I asked her if she had seen that type of information would she question/research vaccines more deeply.

She said,

“...Yes I would...”
“...I am happy that I am not a mother today..................You should come to the book club...”

The Root of Allopathic Medicine

What we must realize is that the topic of vaccination is a multi-faceted subject.

To even begin to look at vaccination with an objective eye, we must first question our very belief system about health and disease. For the average person, their belief system is set in place by their physician and the current stance of the American Medical Association.

What do we learn from the mainstream medical body? This is what the Merck Manual tells us:

“.....When considering the risks of vaccination, parents must remember that their child is at much greater risk from the diseases that vaccinations prevent....pg. 1494” [103]

Another mindset of allopathic medicine is that a greater adverse effect is acceptable, when the supposed risk is great. This mentality was fortified by Pasteur's germ theory and can be seen again and again in popular allopathic treatments. In cancer, there is the war on cancer. Which instead of fortifying the system, is based on using cytotoxic drugs to fight the cancer or so the saying goes..."Kill the cancer before it kills you...” In the heart field we have a variety of very invasive surgical procedures along with a heavy dependence on pharmaceuticals...and in people of all ages we see an increasing dependence on ADHD drugs, and ant depression drugs and the list goes on.

We can be aware that the allopathic model is not the only treatment model available, nor necessarily the most effective.

How does this affect the medical system’s approach to childhood illness?

We see this same mentality of “heroic medicine” in the allopathic treatment and understanding of childhood illness. Disease is fought versus health being built. We need to realize that when we fight disease we do not necessarily build health. Alternatively, when we dynamically create health, we are not only healthier, but disease, quite often, ceases to exist.

Differing perspectives.....leads to different treatment.....A holistic perspective....

In researching for this book, I had the honor of rereading Reclaiming Our Health [104], by John Robbins. I highly recommend this book for understanding the power and monopolizing energy of the AMA. It reminded me of how the AMA not only tried to wipe out the chiropractic practice, in covert ways, as well as the midwifery and homeopathic profession [104]
But if I could sum up with one example of how medical students can be influenced against natural treatments, the following excerpt takes the cake.

On page 36, of Reclaiming our Health, John shares words from Medical, Surgical, and Gynecological Complications of Pregnancy, an obstetrics textbook.

John says that,

“...Particularly “dangerous”, the text says, “...are those patients that consider themselves ‘socially aware.’ They are not necessarily more mature but are trying, by their active interest in such methods as ‘natural childbirth,’ ‘hypnosis,’ or using childbirth as an ‘experience’.....The intensity of her demands and her uncompromising attitude on the subject are danger signals, frequently indicating severe psychopathology....A patient of this sort is not a candidate for natural childbirth, and requires close and constant psychiatric support...”

While this quote does not directly relate to vaccines, we must see the utter audacity and tone of derision that this textbook is shaping young minds with, in regard to natural methods. This is one of many similar examples. [105]

As I mentioned, I did have a home birth. I must say, thank-god I was not influenced or had to deal with people influenced by this way of thinking. My midwife, Mariana, was incredibly loving and knowledgeable. As soon as some of the beginning signs of labor began showing, she drove to meet me. We prepared all day for the birth. She was with me as soon as contractions started and for the next twelve hours....standing by my side and gently and firmly guiding me. I did not tear at all, even though my son was in somewhat of an awkward position. She delivered him beautifully and safely. We were able to immediately cuddle and rest in the comfort of our own bedroom. In the following week, Mariana came multiple times, driving two hours, each way, to see me, and to make sure that I was healing properly and that Nelson was fine. One day she drove those four hours just so my husband and I could go on a walk while she held our son. My prenatal care was also thorough, caring and in-depth. I could not have asked for a better experience.

The thought that this would be the basis for needing psychiatric help and that this is taught, leaves me absolutely dumbfounded.

A compare and contrast.....

The truth is that many of the medical profession put down the validity of natural treatments, only because of their own ignorance on the subject.

In the past twenty years I have personally seen countless recoveries occur from utilizing natural methods in quite serious situations....including cardiovascular disease, diabetes, cancer, respiratory illness, and gall bladder malfunction.
Dr. Esselstyn MD, otherwise fondly called Dr. Sprouts, due to his inclusion of a plant based diet in his protocol, shares a similar sentiment in *The China Study Startling implications for Diet, Weight Loss and Long-Term Health* [106].

"....You take a cardiologist and he’s learned all about beta blockers, he’s learned about calcium antagonists, he’s learned about how to run this catheter up into your heart and blow up balloons or laser it or stent it without killing you and it’s very sophisticated. And there’s all these nurses and there’s lights out and there’s drama. I mean it’s just, oh my god, the doctor blows up the balloon in his head. The ego of these people is enormous. And then someone comes along and says, "You know, I think we can cure this with brussels sprouts and broccoli." The doctor’s response is, “WHAT? I learned all this crap, I’m making a freakin’ fortune, and you want to take it all away?...........Cardiologists are supposed to be expert in the diseases of the heart- and yet they have no expertise in treating heart disease, and when awareness strikes them, they get very defensive. They can treat the symptoms, they can take care of arrhythmias, they can get you interventions, but they don’t know how to treat the disease, which a nutritional treatment...Imagine a dietician training a heart surgeon...” [106]

Lest you jump to conclusions about Dr. Esselstyn, and think that he is an uneducated flake that just slipped through med school, it’s helpful to know that not only did he graduate from Yale, but trained as a surgeon at the Cleveland Clinic and St. Georges Hospital in London, and his father in law is the famed Dr. Crile of the Cleveland Clinic.[106]

**So are there other healing modalities or perspectives on childhood illness and how do they differ from the mainstream allopathic model?**

In this insightful article, Dr. Suzanne Humphries shares the treatment of whooping cough using vitamin c. I was especially touched when I saw the many people who had written her, with such gratitude, as their *infants had safely and without complications experienced this much feared disease.*

http://drsuuzanne.net/dr-suzanne-humphries-oral-intravenous-vitamin-c/ [107]

This is only one example of natural treatment for a childhood illness. I shared it in particular, because most of us realize that chicken pox is typically benign in healthy children. Some even feel this way about the measles and the mumps. But most, both those that support vaccination and those that do not, fear whooping cough.

I am seeing this type of information coupled with the countless studies that show something negative about vaccines.

The average person does not see this and understandably, in not being exposed to these other ways of treating illness, feel very strongly, that they are doing the absolute best thing for their children.
So who are the anti-vaxers?

I, though, like many others have had different experiences.

In being exposed and researching some of these books, scientific studies, physicians and healers that approach health and disease differently, I have decided not to vaccinate...which in the eyes of some makes me an "Anti-vaxer".

Though again, the term “anti-vaxer” is quite a simplistic description, that as I said, from the onset sets a negative tone, and creates division.

So who are we, the “Anti-vaxers” truly or at least from my very small, individual perspective?

**We are women, men, mothers, fathers, grandparents, children, teachers, doctors, scientists, researchers, medical doctors....and so many other diverse individuals that agree on one thing....we question and disagree with mandated and compulsory vaccination.**

Some of us may even vaccinate ....but choose when and how these are administered...

Many of us have had one of our dear, dear children vaccinated and now they are permanently injured...some of us were told emphatically, that THIS WAS NOT THE VACCINE, and chose vaccination again...and now have more than one child injured......

Some of us have had children DIE....from being vaccinated.

Some of us have had loved ones that are adults that were injured from a vaccine...or now have arthritis, or asthma or another debilitating illness....

Some of us were able to learn from these deep, deep tragedies and have not had to go through these horrors with our children....

Some of us do not agree, nor think, that the mainstream allopathic germ-theory model supports health, and we choose other methods of healing. We believe that health begets health and that you can never get a robust and healthy population through disease, formaldehyde, aluminum, and trace amounts of mercury.

As a group, we each have our own, very real experiences that have led us to our decisions.

And in this experience, lies our power.

Our words are not fabrications, or words written to make a buck ...or uttered to gain political, or pharmaceutical favor.....or to jump on the latest journalist bandwagon....our words are shaped by actual experience.
We, who do know this, must continue to rest in this knowing and feel the support of those around us even when it is so daunting, and almost comical in the depth of absurdity and ignorance that surrounds this topic.

I am sure that some of you reading this, support vaccination, and are very loving parents, who want to protect your children and think that if people are not vaccinated, your children may be harmed. I so deeply understand this instinct. And I also see why if you only read the standard literature why you would think the way that you do...and be fearful of disease.

And yet we are not only fearful of possibilities, we have experienced many, many children being harmed and DYING, repeatedly,...and history has shown us COUNTLESS of people DYING from the very thing that some are deciding that we should be forced to do, if we want our children to ever go to a public school.....

Of course some may say, “What about the very young and the immune depressed?”

To that I would say, that we as a culture need to learn the basics of what builds true health. And we need to look at why some children are immune depressed in the first place...and digging even deeper...if the answer is that they are on chemo....why do they have cancer?

This is not natural. Children are not meant to have cancer.

Still others will say, “...But there is a medical waiver....”

Let us be clear that this is not a philosophical waiver ...this is a medical waiver.....which would mean that we would have to KNOW that our child would or would not have a reaction.

According to Dr. Blaylock in discussing the medical waiver in his state of Mississippi,

“...Ironically, this is only on paper, as many have had as many as three physicians, some experts in neurological damage caused by vaccines, provide written calls for exemption, only to be turned down by the State’s public-health officer....” [108]

Did any of those parents that children died or have been injured know that their child would be harmed or had a predisposition to sensitivity?

No. Of course they did not.

How can we possibly know what the outcome will be?

We cannot.

And therefore,
To take my son...my beautiful...brilliant eleven year old son...who has never been vaccinated, nor had any pharmaceutical of any kind, including antibiotics, or even has ever gone to a pediatrician...

And get him vaccinated...

For a disease he many never get...

With a substance that will never truly confer immunity to, and perhaps not even give temporary protection against...and god forbid may actually give him the disease itself....or infect others......

And possibly a whole host of other side effects, as seen in multiple clinical settings....and even more seen in life itself.....

And has poisonous ingredients that are dangerous in and of themselves....

When many of these “illnesses” are benign or virtually non-existent, or not contagious and that through my own education and profession, I know how to deal with in a more holistic, natural way......which actually strengthens his immunity.....

**Why on earth would I ever consider vaccination?**

To some of you this is redundant. You know this. You feel this. You live this. I thank you with all of my heart. Life is so busy....and yet you are making the time to learn more and share more about the facts behind vaccination....You awesome moms and dads with busy lives, staying up to God knows how late, studying after you have put the kids to bed and then wake up to call your senators, even if they think you’re nuts, as your making breakfast. THANK-YOU.

Some of you are scientists and medical doctors that have risked your very career in the mainstream setting to share such valuable information. You, to me, are the unsung heroes. So many studies can be bought....so many jobs can be gone through, without thought, just towing the line....Thank-you for stepping out of the box...for questioning and for working tirelessly to educate us and thank-you for being so courageous.

And for all of you out there that may not know half of these scientific facts but know in your being that compulsory and mandatory vaccines are simply wrong, I thank you too. So much emphasis today is placed on scientific studies. And yet we must remember that from the 1930s to 50s it was quite common to see doctors advertising for various cigarette companies, up until the 1970’s Halsted’s radical mastectomy was one of the main ways to treat breast cancer, and that iatrogenic, or medically induced death, is a top killer.[109]
Humans are not infallible....physicians are not infallible....and we have historically been shown to be short sighted in our understanding, especially when there are profits involved....or our ego.....My god we are stubborn creatures....most of us becoming intellectual rocks that won’t budge, or suspend our own opinion for a fraction of a second.

In contrast, most of the cultures known for their longevity are historically from financially poor villages, where education is very limited and yet these very simple people know the basics of health and happiness....and this is shown in their enjoying their long lives of into their nineties and past one hundred, without medical intervention. They, in my mind, have developed true wealth and well-being and it is they that should be immulated and researched...because they are living proof of what health is. This is not what we will think will happen based on findings in a sterile lab, or a bunch of contrived numbers and predictions, this is real.

For those of you that have learned very different things about vaccines, I do ask, if possible...

Please stop and think.....

Not necessarily to agree...

To stop and think

And to research before giving some rude condemnation or knee-jerk rebuttal....And to be very blunt if you have an advanced degree in science, or perhaps multiple degrees....if you are truly honest, would you not have to set aside all preconceived notions and in an unbiased way research all data available and perhaps not only learn about disease but also learn about health, from those that do not use pharmaceutical methods, at all? And do this before typing up some quick response on some blog, perhaps for a few months?

For those of you that are on board with many alternative concepts, and yet still utilize the mainstream model, sometimes, realize that this is your right. But please also realize that there truly are healers who repeatedly support healing, in life threatening situations, with only natural methods. This typically is a very time consuming process and one must be absolutely committed to 24/7 care. But it is possible. Please be humble enough to acknowledge that this simply, may not be your understanding, or the path that you choose. But, it is a valid path. For others to also choose. And realize that while it is your right to have vaccinations, it is our right to choose not to. Because as we have seen....not only can the unvaccinated “give” the measles.....so can the vaccinated.

Perhaps if we are considerate and attempt to communicate then we can all learn something...and truly learn how we and our children can live long and healthy lives....and then maybe scientists could learn from herbalists and herbalists can learn from doctors and we all as individuals can actually practice, en masse what creates health and well-being. At the very least, we should all be able to have the freedom of medical choice.
One MD that had the courage and persistence to think and analyze, outside of the accepted medical norm, is Dr. Suzanne Humphries MD.[110] [http://drsuza...]

She used to vaccinate her patients...and then she saw repeating adverse reaction in conjunction with vaccinations.

So, she stopped and thought.

And researched ...

For thousands of hours (literally).

Thousands of hours.....pouring over documented scientific journals and scientific research.

Very few people can make that claim.

She no longer vaccinates.

So please consider, not necessarily thousands of hours...but perhaps consider studying about vaccines for a few months or at the very least a few weeks. This is something that could easily be studied for years. A few days won't do it...especially if you are just reading what the CDC says.

Good and true science starts with an unbiased mind and takes in all of the information and then decides.

How neutral are you?

I am not trying to be rude. This goes for those that question vaccination as well. In writing this paper, I continually sought out the counter argument and then I would consider this and compare it with other data. And I must say that there were two times that I had to step back, reconsider things, do some research ... and you know what happened? In my case, I came back even stronger and clearer in my decision not to vaccinate. Each person will have their own process and therefore there unique opinion, but we must at least strive for this clarity of thought, free of bias.

So what now?

How do we evolve in our understanding of health/disease and the role that vaccination plays in this...so that we may make a truly education decision?

First, we can consider what is disease? What are the characteristics of each of the childhood diseases? Is it typically dangerous, how does it present itself? What are possible complications?
The following is a description from Robert Mendelsohn MD, a pediatrician for over thirty years and a professor of pediatrics of some of the main diseases that are vaccinated against. http://www.whale.to/vaccines/mendelsohn.html

**Prognosis**

Next we can consider something that one of my teachers, Dr. Richard Schulze said:

“...There is the diagnosis and there is the prognosis...but there is something in between ...and that is you.” [112]

Or Antoine Bechamp M.D.’s statement,

"....The terrain is everything; the germ nothing...” [36]

If you have a healthy child, they are going to very likely have a very different prognosis than a malnourished child.

**A Comparison**

A child is born to parents that have consciously prepared for his or her birth. Nourishing foods were consumed pre conception, loving words were said, uplifting music was played, the house was free of poisonous materials, birth was supported and non-invasive....The child went on to breastfeed for more than a year of its life, introducing wholesome, unrefined organic food at the appropriate age. As the child grew up, the mainstay of the diet was whole grains, nuts, seeds, vegetables, fruits, and high quality dairy products. If meat was eaten it was not raised on antibiotics and steroids....and opting for lighter eating lighter animals such as fish and chickens instead of eating cows. Beverages mainly consisted of fresh juices, herbal teas and fermented drinks. The child had loads of time in nature; times of creativity and imagination, and time with loved ones....Television was non-existent save the occasional family movie. School was stimulating and enhanced creativity. Healthy communication was employed....pharmaceuticals for children such as antibiotics, Ritalin, and antidepressants, were not used. Instead herbal formulas were used when needed to support health, boost immunity, and to restore health in times of illness. Antibiotics such as garlic were used that do not kill good bacteria.

When on the rare occasion that an illness did develop, regular, consistent 24/7 care was provided, incorporating proper nutrition, juicing, hydrotherapy, herbal remedies (both internal and external) dosage varying on severity of illness and ranging from 3 times per
day to on the hour application, essential oils applied both on the body and circulating continuously throughout the air, massage, and acupuncture used.....schedule created depending on severity and need. Consistency and commitment to healing was observed, on the hour.

Lest this sound like a fairytale, I will say that the above description is a common scenario in our community.

Ironically, or not so ironically, our county also has one of the lowest vaccination rates in California.

These types of lifestyle habits do and will affect the prognosis of a given illness....for the better.

I realize that living in the world that we do, many of you may question, and perhaps even laugh at the above statement. Many years ago when I wrote an article for an area newspaper, a reader responded, “I’d like to see how food affects the immune system.....what have you been smokin’?”

This is the sad state of our world today that the average person is so deeply removed from what truly creates health and has grown so dependent on methods that suppress symptoms, prescriptions, and looking for outward guidance from biased studies, that they respond in this way.

For those of you who want to truly support public health, we must realize that malnourished children are not only in some far off corner of the world, but right in our very own backyards. Financial status may have nothing to do with it.

Consider that according to the Daily Mail, in the article,”....Junk Food Mountain, The Astonishing Amount of Rubbish that One Child Eats Every Year...”[113], shares this average yearly diet of a typical child in the UK, based on the Food Standards Agency and the 2009 National Diet and Nutrition Survey :

1. Equivalent of 47 packs of biscuits
2. Equivalent of 54 packs of buns, cakes and pastries
3. 4,380 grams of cheese
4. 6 tubs of ice cream
5. 3 blocks of butter
6. Equivalent of 14 packs of bacon
7. Equivalent 13 bags coated chicken
8. 17 hamburgers
9. 68,225 g of milk per year
10. 600 cocktail sausages
11. 14 steak and kidney pies
12. 130 fish fingers
13. 8 bags of oven chips
14. Equivalent of 3.5 bags of sugar 31,390 grams
15. 7 boxes breakfast cereal (not whole grain)
16. 13 boxes whole grain cereal

And what does natural healer, Dr. Richard Schulze have to say about the average American diet?

“…They eat a low nutrition high fat and sugar food program. A diet high in over processed nutritionally deplete food. They consume 300 soft drinks a year, 170 pounds of white refined sugar, 400 candy bars, 500 doughnuts, and will eat over 12 entire 3,000 pound cows, 6 whole pigs, 3,000 chickens and other birds and another 3,000 assorted fish and sea creatures and over 30,000 quarts of milk and pass all of this through their digestive system and bloodstream.

They will have an average of 2-4 bowel movements a week coming up 70,000 bowel movements short in their life time, definitely having diverticulosis and digestive/elimination problems.

They will get very little exercise if any, be 25 pounds or more overweight, have hypercholesterolemia with a average level of 200 and have high blood pressure

They take over 30,000 aspirin and assorted other pain killers in their lifetime along with over 20,000 over the counter and prescription drugs and over 2,000 gallons of alcohol…

Many people spend 30 or 40 years killing themselves with cigarettes, beer, wine or whiskey, coffee, black tea or soft drinks, high fat, sugar and low fiber diets, junk food, no exercise, negative television and a bad attitude. These same people then worry if a herb may hurt them, if they are getting enough protein on a vegetarian diet or if they can physically take a health routine. Get real! You’re lucky to be alive after what you have done. I have always found that a person’s breaking point is about a million times past where they think it is. Most people who are taken hostage, starved and given forced labor end up healthier. Maybe you should consider getting kidnapped by a hostile government…..” [114] http://falconblanco.com/health/schulze.htm

These food and lifestyle choices will also affect prognosis…..and not for the better.

As will these lifestyle choices taken from The University of Michigan [115],

“…..On average, children ages 2-5 spend 32 hours a week in front of a TV—watching television, DVDs, DVR and videos, and using a game console. Kids ages 6-11 spend about 28 hours a week in front of the TV. The vast majority of this viewing (97%) is of live TV
In about two-thirds of households, the TV is "usually" on during meals.

TV viewing is probably replacing activities in your child’s life that you would rather have them do (things like playing with friends, being physically active, getting fresh air, reading, playing imaginatively, doing homework], doing chores).

Kids who spend more time watching TV (both with and without parents and siblings present) spend less time interacting with family members.

Advertisers target kids, and on average, children see tens of thousands of TV commercials each year]. This includes many ads for unhealthy snack foods and drinks. Children and youth see, on average, about 2,000 beer and wine ads on TV each year.

Kids see favorite characters smoking, drinking, and involved in sexual situations and other risky behaviors in the shows and movies they watch on TV.

An average American child will see 200,000 violent acts and 16,000 murders on TV by age 18.

Even having the TV on in the home is linked to more aggressive behavior in 3-year-olds. This was regardless of the type of programming and regardless of whether the child was actually watching the TV......" [115]

http://www.med.umich.edu/yourchild/topics/tv.htm

What about those cleansers?

According to David Steinman and Dr. Samuel Epstein M.D., in their 1995 book, The Safe Shopper’s Bible A Consumer’s Guide to NonToxic Household Products, Cosmetics and Food [116]:

“...Many household products being gaseous in nature, form microscopic particles that become trapped inside, greatly affecting indoor air quality. “...Peak concentrations of twenty toxic compounds—some linked to cancer and birth defects—were 200 to 500 times higher inside some homes than outdoors, according to a five-year EPA study that surveyed six hundred individuals in six cities to find out what their exposure was to common air pollutants. Not surprisingly, EPA experts say that indoor air pollution is one of the nation’s most pressing health concerns....”[116]

The authors go on to discuss how numerous everyday products that we see every day on the average grocery store shelf are neurotoxic, carcinogenic, allergens or have a negative impact on reproduction.[116]

This book is 445 pages of a clear, concise analysis of hundreds of brand name items and which ones are the safest for you and your family.

We must realize that often times; it is the everyday actions and items that we bring into our lives, that aide or go against or health. This means not only, do these things affect our average overall health, but that when we do experience illness from other factors, our overarching lifestyle habits have an impact on our prognosis.
We can be empowered by this knowledge and really look closely at what we bring into our lives...emphasizing those practices and items, that support health...or we can continue to blame germs and bacteria as the main culprits and look for silver bullets outside of ourselves to “protect” us.

Which truly makes us healthy and more disease resistant? A healthy life or an injection of (literally) disease cells, formaldehyde, aluminum, and mercury?

**Fever Reducers.....another factor when determining prognosis**

Another variable that effects prognosis in many childhood diseases is the use of fever reducers which are regularly mentioned in allopathic medical journals in conjunction with childhood illness...this is a common medical procedure...get the temperature down....as are the use of pharmaceutical antibiotics which also kill the beneficial bacteria in our bodies as well as have their own adverse side effects, and steroids that suppress the immune reaction.

Conversely, there are herbs that are antibacterial while at the same time not killing good bacteria and actually support and nourishing the system, and having other, BENEFICIAL, side effects, herbs that support the process of a fever, without suppression, and herbs that help allay irritation, again, without suppression.

**Imagine if most doctors could teach patients how to deal with fever....and how to lower the chances of complications such as pneumonia, with only natural methods.**

**Some healers do this.**

**By passing this restrictive vaccine legislation, I feel that we are making the divide between pharmaceutical and holistic treatment, that much greater....hence, limiting the common patient’s knowledge, more and more.**

On the other hand, I was taught in school to work with the fever. And, that the fever had it’s very important place in “illness” and is a crucial component of restoring health. Instead of reducing the fever, we were taught to moderate the fever by warm to hot baths, diaphoretic teas to induce sweating and how to cleanse the body of toxins, juices, and other supportive herbal formulas.

If a baby was involved, the mother would get into the bath as well, and nurse in the bath, while drinking the teas. Dehydration was to be avoided at all costs by the baths as well as
frequently sipping. By moderating the temperature of the fever with the bath water, there are typically not the erratic spikes in body temperature, thus lessening risk of febrile seizures.

Does this sound crazy?

Here is a M.D.’s take on fevers:

http://www.whale.to/vaccine/white.html [117]

And studies that show how fever reducers can worsen prognosis

http://thinktwice.com/measles.htm [118]

The other day a distraught father called my coworker. He had a 21 month old daughter that had developed an earache. She was put on 5 separate rounds of antibiotics. She was then diagnosed with rheumatoid arthritis... (which she did not have prior to the antibiotics) and put onto steroids. 21 months.

Heroic measures are not always so heroic.

**What about statistics?**

This plays into analyzing the statistics for childhood illnesses.

When looking at statistics, we can ask ourselves what population is being evaluated.

So say for instance that there is a high rate of death or complications with a given disease. We can ask ourselves, “Are these standard healthy individuals or are they from a developing country, and nutritionally deprived? Are they a person who has not been raised in a healthy setting? Do they have a compromised immune system?

And even if it states “given the best medical care”, what has that care entailed and has it truly been the best? (ie fever reducers are not the best treatment)

Remember these variables alter prognosis.

Also, my son had the chicken pox as did many of my friends’ children. None of us use a physician and consequently, our children are not part of any analysis of how a disease presented itself.

Again, my son's case of the chicken pox was extremely benign.

Yet, we are not a part of the “statistics”.

**Do all illnesses affect others?**

Next, it's helpful to consider if a disease is contagious.
Should we mandate vaccines for diseases that are not going to affect others?

If I step on a nail, do you need the tetanus shot? And perhaps an even better question is, do I even need one?

I chose to learn about proper wound care instead....and the signs of blood poisoning and what to do to help to prevent this, both internally, and externally.

This is a great article on helping to explain the expression of diseases a bit more in depth.


A truly educated decision

These are all thoughts to consider for a truly educated decision.

If you want to keep on researching, here are some more sites

http://www.thedoctorwithin.com/

http://www.thinktwice.com/author.htm

http://www.nvic.org/

https://www.google.com/search?q=dr.+suzanne+humphries&rlz=&gws_rd=ssl

http://www.blaylockreport.com/

http://www.vaccinationcouncil.org/

http://www.jabs.org.uk/

http://www.vaccineriskawareness.com/

If you want lots of facts...Dr. Tim O Shea DC's  Vaccination is not Immunization  is packed from cover to cover with scientific research data. This book is truly a must for those that want to get a very good historical look at vaccines as well as being very thorough in scope and detail. I cannot recommend it enough.

My other favorite is Neil Z. Miller's  Vaccines Are They really Safe and Effective?  [28]  and I am sure that his updated version, Vaccine safety manual for Concerned Families and Health Practitioners [2 updated 2015) is information packed and extremely helpful.

I cannot recommend these books enough and feel indebted to both of these authors.
The time is of the essence

You may want to take the time to research this and think about this very, very carefully.

Especially if you believe that vaccines are the best way to protect your child’s health,

Because if you live in California, and SB 277 passes as it now reads…..

And you change your mind later……

If you want to send your child to public school, you will not that choice...

And that’s only 2016.

In 2013, Senator Pan said that he would never take away the parents right to choose...and that was only 2 years ago...

He said that he just wanted you to be able to make an educated decision....that’s pretty scary considering that when he was asked during a recent senate committee meeting, what was in the vaccines, he said that he did not know.

For those of you in the medical profession, or media or legislative body, it is your absolute duty to at least attempt to genuinely look at the complexity of this issue. For as you know, you are shaping the way in which the average person takes in information about this subject...and you are shaping the world that your children and grandchildren will have to grow up in.

If you are a person attempting to be thoughtful and really learn about the ins and outs of vaccines, it is helpful to step back from the information and truly analyze it, as opposed to just taking it all in.

I still do this. I read and I regularly stop and think. As I mentioned, even during this recent process of review, I came across a person that I respect immensely, John Robbins, and his questioning if vaccination may be helpful in developing countries. I read his words, and because I truly honor him, I paused and reflected on this I questioned this. I thought of the recent tragedies
in India…and so many others, in similar situations, and I came back to “no”, I still do not think that vaccination, even in this case, is the answer.

To genuinely bring health we must get to the roots of disease through such basics as improved sanitation, pure water supply, sound nutrition, etc.

For those of you who support mandated compulsory vaccination…and think that there is no science behind questioning vaccines…and yet are unwillingly to look at any science that we do show you, you have changed my stance on vaccines slightly….I realize that for you, we may still need vaccines.

I realize that you want them. You really, really want them…you fight tooth and nail to get them and to defend them and unfortunately as I read the countless articles, supporting vaccination, most of you refuse to address any of the valid concerns that we have or mountains of scientific data that exists on the futility and danger of vaccines.

From history, we can see that the premise of SB 277 and similar legislation… namely the promises that the harm caused by adverse reactions is less than the harm caused by not vaccinating, and that vaccination is the number one tool for creating health in the larger community, is simply not true.

So, I will not say not to vaccinate. I will only say to educate. But please, do not ask me to vaccinate...especially if your only comment is that there is no science behind my words.

For those of you who already know this, it is vital that we continue to learn and grow. This does not look as if it is going to end any time soon. Legislation in California is now discussing mandated adult vaccination, for particular occupations....there is also the pending federal legislation that I mentioned earlier….I do not even think it stops there but can be in other countries as well, though we in the U.S. seem to take the cake in most vaccines on the list. We need to realize this and not burn out. We need to learn to channel our deep and rightful emotion into effective action....and to keep expanding our knowledge.

For those of you, who think that you will move out of California, should SB 277 pass, please consider this. This is a nationwide and possibly a worldwide push. How many times do you potentially want to move? Did you ever hear the “joke” of the man who wanted to move away from war? The story goes that he found a beautiful, isolated island........Guam.

For those of you who have told me that you will or have in the past in other states like Montana, persuaded a doctor to sign off your child on a medical waiver, please consider expressing your opinion as well. We could really use your active support. Please consider making your voice heard now, so that this infringement of our freedom does not worsen.

Currently, there are vaccination points at school entry, and then again in the seventh grade...and then again for an increasing amount of colleges. To top it off, I talked to a young woman who had
made it without getting vaccinated until she was thirty, and then if she wanted a particular job, she had to get vaccinated.

And to the last audience, whom I deeply honor, and who are quite common in our town...those that believe in all that is good and just and feel that there is no way that this can pass. Please consider that we can all have good thoughts and intentions but we have to get real. A plant left outside in the sun, without water, will die...a hungry child will cry until fed. If you are able to make those things happen by your thoughts alone, this does not apply to you. If you cannot, please know that we must not only have good thoughts but we must act in this world. As Ghandi said

“...... Be the change that you wish to see in the world.....”[]

What did Ghandi do? He had peaceful thoughts and....he acted..... non-violently and with deep integrity.......but he did act.

On that note......

It is helpful to not only learn about the realities of vaccines but to focus on the powerful tools of natural healing and to question the nature of health in general. What builds health? How does one support health even in such things as whooping cough? How does one protect against complications of these illnesses should they occur? When would a pharmaceutical or medical intervention be truly warranted?

This will help us to not to be fair weather in our stance on vaccination but to rest solidly, in our decisions.

There are a wide variety of Doctors of Chinese Medicine, Chiropractors, Naturopaths, Medical Herbalists and MDs who are versed in complementary medicine. These are invaluable resources. And as we grow in our knowledge we can be more prepared and assured, should illness arise.

It is also so very important that we share our stories and experiences and remember that individuals that oppose mandatory vaccination and individuals that support vaccination have many common goals and ideals. To most of us, the primary goal is to keep our children healthy, vital, and alive. And yet at the same time we have each had different exposures and experiences which have shaped and created our ways of thinking.

The implications of mandatory vaccination are far reaching and need to be carefully and dutifully looked at...pushing aside bias, with an objective eye.

From those that support vaccination, I am reminded that things such as whooping cough are very, very intense diseases and go on for weeks....a battle for even robust and strong children...let alone a baby....This is very real and very humbling.
And yet when the tdap has been proclaimed one of the most dangerous vaccines, is that a risk that I am willing to take? No. You may make a different choice. But I do not.

I have seen scientific data that leads me to a different conclusion.

**And it is because of this that I ask for the scientific proof.**

**I ask for the science that has the irrefutable knowledge that my son will not be negatively impacted by vaccines.**

I ask for the science that shows how mercury, formaldehyde, and aluminum are safe.

I ask for the science that a high antibody count always guarantees protection against a disease.

I ask for the science that shows that vaccination gives lasting immunity.

**I ask that all the science that has shown the harm of vaccines be addressed** and not brushed aside.

And most importantly, I **ask where is the science that vaccines make my son a healthier individual?**

On that note, I would like to end with a tribute to a scientist that I hold in great esteem and to do so I will share one last story. The other day I was sitting at my son’s martial arts class, re-reading Dr. Tim O'Shea D.C.’s book, *Sanctity of the Blood Immunization is not Vaccination*. [30]

My son’s teacher, a wonderful man, came up and asked me what I was reading.

I told him,”... A book on vaccines...”

He then sat down and said, “...Oh.....what is that one vaccine?......the MMR? .....People thought that it caused autism but that doctor turned out to be wrong??.....” (Sound familiar?)

I looked at him and touched his arm and said, “....That doctor...Andrew Wakefield.....is a great man....”

Because he is so humble, the teacher laughed and said, “ ....and I only watched one documentary....”

What I did not tell him is that Dr. Wakefield was a highly respected gastrointestinal surgeon, who has written over one hundred and thirty peer reviewed medical papers.

In his original study, he NEVER said not to vaccinate.
After sharing concerns of the MMR with the editor of the Lancet, a press conference was scheduled and he was virtually cornered and asked if he would use the MMR during this press conference...He stated that it may be better for children to receive each of the three (measles, mumps and rubella) vaccines as individual shots rather than a trivalent, or three shots together, until further research could be done.

Thank God that there are those in such a position that question.

When Dr. Wakefield said this, you could get the shots separately in England. Ironically while some blame Dr. Wakefield for a spike of measles after this statement; it was the government that stopped producing the single vaccines, months later, after Dr. Wakefield’s statement.

When I read all the hype around the “anti-vax movement” being ignited by Dr. Wakefield, it was ironic because like I mentioned, when I decided not to vaccinate my son, years ago, it was not based on autism or Andrew Wakefield’s study.

In fact, it was not until last year, when I cited his original Lancet study, on a discussion board, that I specifically focused on Dr. Wakefield. Of course someone jumped right on that, and told me that this particular study had ben retracted.

This is when I began looking into Dr. Wakefield and had the honor, of learning about his life.

I must admit that during the research for this paper and looking at the critics’ review of Dr. Wakefield, I first learned of Robert Barr, a lawyer who critics said had paid Dr. Wakefield to smear the MMR and that his retracted study was a result of his attempt to do this, creating a conflict of interest. Critics also mentioned that Dr. Wakefield had plans on marketing his own vaccine. Again, another conflict of interest.

At first, I thought, “Oh God, is this true?” I paused and I thought and I did more research.

And then I was able to find this article based on a 12 hour interview with Dr. Wakefield. This information led me to other information.


And again I can say that after taking this pause, I came back with even greater knowledge and clarity that Dr. Wakefield is ....a great man....a true hero.

The most telling of his work to me personally was the documentary” Selective Hearing.”


If you have any question about Dr. Wakefield, please consider watching this.
In it, many of the parents, of the children that Dr. Wakefield worked with were given an in-depth interview. It is important to note that Dr. Wakefield was accused of wrongly soliciting these children and as well as unethical treatment.

And yet each of the parents interviewed expressed how they had contacted Dr. Wakefield after being ignored by their other doctors and expressed their deepest gratitude to Dr. Wakefield and his team, repeatedly.

But perhaps the most impactful and telling about the extent of the lies and defamation behind the story of Dr. Wakefield was when Brian Deer, the journalist that really got this story going, is seen interacting outside the courthouse with the parents of the children from the study.

**These parents with children who will never fully function in the world. That were born healthy and bright and normal....**

As he looks at a photo of a son....and a mother is telling Brian to look at the gastrointestinal disease, Deer says, with complete authority and condescension, **that he does not see any gastrointestinal disease.**

**“I do not see any gastrointestinal disease....” [121]**

This is taped...and there is no mistake of Brian Deer’s words.

The boy in the photo............ this woman’s son....... is emaciated and........ is wearing a colon bag, which is smeared with diarrhea.

We, as a people, must learn to question, to research, and to look beyond the words of standard information outlets, when much of our mainstream informational sources, including mainstream medical journals, insists on supporting lies, and utter ignorance, of this magnitude.

This is my story as an anti-vaxer. Just one of the many diverse people that fall under this category.

If you have persisted this far you are to be commended. Though as I said, one could truly study this subject for an entire lifetime. I hope to hear more stories from those that agree with me and those that do not. I would like to hear your experience and what has shaped your views.

I know that it is so easy to get heated with this conversation. For many of us, this is about our children, who we love so very deeply. I hope that more and more, we are able to remember our united goal of truly wanting the best possible health for our children. In this, we are truly united. Perhaps if we remember that this is the goal...for healthy children... and healthy human beings...we can then look at all of this diverse information and truly make an educated decision as to how that can be best supported.
Blessings to you all.

Below are my notes. I am indebted to the many wise people and their words that I have drawn on for this paper. Because I am doing this by hand and there are many citations...and it is taking bloody ages....and I am concerned that this bill is going to pass before I so much as get the paper out, I am going to get all of the main studies, and individuals down fully and properly and then for the other things put the website where I found them. I will be continually working on this until it is finished and will gladly look up any citation, should you have any issues finding any info. For CDC information I looked online at the cdc website. Thank-you.


<www.ncbi.nlm.nih.gov/pmc/articles/PMC2603088/>


<http://www.merckmanuals.com/home/infections/viral-infections/chickenpox>


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<http://www.doctormosk.com/Articles/vaccination.html>


[64] See citation 30 pg 22

< http://www.soilandhealth.org/02/0201hyglibcat/020119hadwin/020119hadwenrallytalk.html >


see citation 71


[79] http://www.cdc.gov/vaccines/about/terms/glossary.htm#c


[82] see citation 41


[101] Merck Home Health Handbook see citation 71, pg 1093


[103] Merck Home Health Handbook see citation 71, pg 1494


[105] citation 104, pg 36-37


[108] Dr. Blaylock, Russell see citation 80


[114] see citation 112


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[118] see citation 97


