

# Mandating Vaccines: A Cause for Concern



City of Toronto Archives, Fonds 1244, Item 2517

*"We and our children have been and are the victims of a carefully orchestrated, programmed propaganda campaign in which **maximum publicity** is repeatedly given to **rare complications** from one of the childhood diseases while **actively suppressing** the cases of morbidity and death **caused by vaccines**."*

*"This **active suppression** is used to quietly terrorize any professional who does honest research and reports negative or adverse effects from mandated vaccines."*

~ Dr. Thomas Stone, MD Pediatrician

## Media Information Package

Prepared by

**Vaccine Choice Canada**

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*"Do not think it worthwhile to produce belief by concealing evidence,  
for the evidence is sure to come to light."*

~ Bertrand Russell

## Dear Member of the Media

We need your help to protect and preserve our **rights and freedoms** as citizens of Canada.

### A Significant Challenge to Our Rights

There is a significant challenge to our rights as citizens of Canada. Legislation and other coercive measures are being considered to impose an invasive medical procedure upon *unwilling* and *non-consenting* Canadians. The Canadian Medical Association (CMA), various provincial governments and health authorities, and even school districts have declared their intention to impose mandatory vaccinations.

These actions are designed to deprive Canadians of their Charter rights to fundamental **freedoms of conscience and religion**, their legal right to **security of the person**, and their medical right to **informed consent**.

This well organized and carefully orchestrated effort to impose artificial immunization upon all citizens is potentially **THE** most serious and controversial action to occur in Canada.

A decision of such significance and impact should require **thoughtful dialogue** supported by **extensive and rigorous clinical evidence**. Instead we have a one-sided conversation that is **fear-based** and **adversarial** rather than **evidence-based** and **thoughtful**.

If there were ever a time for the media to rise to the occasion and facilitate thoughtful dialogue that relies on sound and rigorous evidence, **this would be the time!** The media play a critical role in a free and democratic society. You have the **ability** and the **responsibility** to inform citizens on important matters and to hold institutions, industry, and governments accountable.

The media also serve an essential role in forming and deepening the understanding and attitudes of a community.

We require a modern day **Edward R. Murrow**. Murrow was the news director at CBS television during the McCarthy era in the United States. Murrow distinguished himself by using television to **thoughtfully, respectfully and courageously** challenge Senator McCarthy during a time when many were intimidated into silence by the McCarthy investigation in to “un-American activities”.

*‘A Nation of sheep  
soon begets a government of wolves.’*

~ Edward R. Murrow

## Vaccine McCarthyism

We have a **McCarthy-like challenge** today. Many, including the media, are intimidated into silence by the actions of the medical/pharmaceutical industry and government organizations that are intent on imposing artificial immunization upon all citizens, both children and adults, **with or without their consent**.

Any physician, scientist, nurse, public health advocate, politician, academic, journalist, or parent who questions the long-term safety and efficacy of artificial immunization is immediately attacked, ridiculed, and bullied into silence.

*But what if the artificial immunization paradigm is not as **evidence-based** as we have been lead to believe?*

*What if **the science is not settled**?*

*More importantly, should science ever be considered settled?*

*“The fatal tendency of mankind to leave off thinking about a thing when it is no longer doubtful, is the cause of half their errors.”*

~ John Stuart Mill, 1859

Included in this package is information that has been carefully collected and documented by scientists, researchers, and concerned citizens. These individuals have no profit motive. Rather, their motive is to ensure our children and adults, both today and in the future, have the greatest opportunity to live long and healthy lives and continue to enjoy their rights and freedoms as citizens of Canada.

We hope you will carefully consider the information we are bringing to your attention. We recognize this is not easy information to receive. This information has the potential to undermine the confidence you may have placed in our medical industry and government authorities.

It is our belief that if the media were better informed on the concerns about the long-term safety and effectiveness of artificial immunization and the impact mandatory vaccinations would have on our rights and freedoms, they would take a leading role in **facilitating** debate and **demanding** industry and government **accountability** for their claims.

Thank you for your thoughtful consideration of this information.

*Vaccine Choice Canada*

## The Status of the Vaccine Debate

### Well Intended and Uninformed

Our assumption is the editors, producers, and journalists in our Canadian media are well intended in their efforts to address the vaccine issue. We're assuming there is no individual financial or political conflict of interest that would overtly bias your ability to present a fair and thorough exploration of vaccine safety and effectiveness.

We also assume that editors, producers and journalists are **no more informed** than most Canadians on the issues of the long-term safety and effectiveness of artificial immunization. Unless a family member has been personally affected by vaccine injury most Canadians simply accept as fact the promotional messages developed by the medical/pharmaceutical industry and delivered by Health Canada.

We also know that the pharmaceutical/medical industry is one of the **largest sources of advertising revenues** for media. This industry is also the **largest lobby group** in North America, spending twice as much as the oil and gas industry and four times the amount spent by the military-industrial complex to lobby governments. These advertising revenues and the capacity to influence politicians, researchers, and academia create the potential for significant **bias and distortion**.

### A Story Without Clinical Evidence

There is a cultural story that the world is safer because of artificial immunization. We are told – *"Millions of lives have been saved. Vaccines are safe and effective. The benefits far outweigh the risk."* While this is a wonderful story, unfortunately this story has **not** been substantiated by **clinical** evidence and **biological** science. <sup>1, 2, 3</sup>

*"In spite of the widespread notion that vaccines are largely safe and serious adverse complications are extremely rare, a close scrutiny of the scientific literature does not support this view."*

~ Dr. Lucija Tomljenovic

### A Self-Imposed Censorship

Unfortunately a **self-imposed censorship** exists in the media that precludes thoughtful discourse on this important issue. There is the **active suppression of concern** about the safety of artificial immunization. The media has either been **captured** by the medical / pharmaceutical industry or **intimidated into silence**.

Neither of these situations will serve us well.

## The Status of Our Children's Health

We have a medical crisis today. The amount of chronic childhood illness is increasing at a dramatic rate. Today **one in ten Canadian children** have one or more **life threatening** afflictions. In the last 25 years there have been huge increases in the following childhood illnesses:

- **Autism** – increased more than one thousand fold in less than a generation  
**Autism spectrum disorders** - now affects approximately 1 in 50 children <sup>4</sup>
- **Impact on Development** - Over 27% of Canadian children fall short on at least one measure of physical, emotional or cognitive development by age 5
- **Attention Deficit Hyperactivity Disorder (ADHD)** – 1 in 10 children <sup>4</sup>
- **Learning Disability** – 1 in 6 children affected
- **Severe Mood Dysregulation** – 1 in 30 children affected
- **Allergies** – increased 6X since 1980 <sup>4</sup>
- **Anaphylactic Food Allergies** – doubled in the last decade <sup>4</sup>
- **Eczema** – 1 in 5 children affected
- **Asthma** – 1 in 8 children affected
- **Obesity** – 25% of Canadian children are overweight/obese
- **Juvenile Diabetes** – more than 100% increase since 1980

At the same time North American children are now **the most vaccinated** children in the developed world. Since 1980 Canadian vaccine schedules have **more than doubled** the number of vaccines given. Public health authorities now recommend 32 - 41 doses of **13 to 16 different vaccines** in the first 18 months alone. Some provinces start injecting babies at birth. By the time a child is six years old he or she will receive approximately **49 doses** of vaccines. <sup>5</sup> Health Canada now recommends vaccines be given to **pregnant women** even though no evidence exists on the safety to the developing fetus.

What role does artificial immunization play in the substantial increase in chronic illness in our children? Without properly designed clinical trials that compare a vaccinated population with an unvaccinated population, we may never know the answer. **Its time we knew!**

The medical establishment considers vaccines effective if they suppress a few targeted illnesses – but at what expense? An emerging body of evidence indicates that artificial immunization **damages a child's developing immune system and brain**, leading to life-threatening and debilitating disorders like autism, ADHD, asthma, life threatening allergies, juvenile diabetes, and SIDS, death itself. <sup>46</sup>

*'For the first time in history...children are sicker than the generation before them. They're not just a little worse off, they are precipitously worse off, physically, emotionally, educationally and developmentally.'* <sup>4</sup>

~ Judy Converse, MPH, RD, LD

## A Silent Epidemic

There is a major epidemic today, and contrary to government and media reports, the epidemic is not measles, influenza, polio, or whooping cough. Rather it is **neurological and immune system disorders** such as ASD (autism spectrum disorders), ADD and ADHD, learning disabilities, life threatening allergies, juvenile diabetes, and autoimmune diseases like arthritis and Parkinson's as well as ASIA – or 'Autoimmune/inflammatory Syndrome Induced by Adjuvants'.

Polio was considered a major concern when 1 in 10,000 children developed symptoms of a paralytic condition. Today, it is estimated that **1 in 42** boys will develop autism spectrum disorders <sup>6</sup> and **1 in 10** children will have severe allergies, asthma, diabetes, epilepsy, and other life threatening conditions. <sup>7</sup>

*Autism, which has no known cause, prevention, or cure  
has never ever been described as 'a crisis' by any official  
in the government or the American Academy of Pediatrics.*

Despite of the severity of this current state of our children's health, Health Canada claim they have no idea what causes autism. Do vaccines cause autism? The truth is we don't know. **We should know.** Neither government regulations nor corporate responsibility is doing a very good job in protecting our children from autism.

The medical industry claims there is no link between vaccines and autism. At the same time more than **123 independent studies** have found a link between vaccines and autism. <sup>8</sup> Is the failure of the vaccine industry to find a vaccine-autism link because there is no link or is the research intentionally designed **not to find a link?**

*"We've missed ten years of research because the CDC is so paralyzed right now  
by anything related to autism. They're not doing what they should be doing  
because they're afraid to look for things that might be associated."*

~ Dr. William Thompson, CDC Sr. Scientist, August 2014

*"It is difficult to get a man to understand something  
when his salary depends upon his not understanding it!"*

~ Upton Sinclair

## Two Different Responses

If my child develops a serious illness or dies from a tainted food product, governments take immediate action. Food processing facilities are closed, products are recalled, health inspectors begin testing all products and equipment, media make public announcements, medical treatments are provided, and financial compensation is offered.

Compare this response to the response when a child develops a serious injury or dies as a result of a vaccine. No government inspectors are called. No vaccine manufacturing is suspended. No products are identified and recalled. No public announcements are made. No medical treatment is provided. No financial compensation is offered. Instead there is **silence and denial**.

### **No Independent Oversight**

The system as it is currently constructed has **no independent oversight**, no **independent evaluation of risk**, and **no effective counter balance** to the drive for more and more vaccines to be “recommended” by the medical / pharmaceutical industry. Witness the doubling of the number of vaccines recommended since 1980 from 23 doses by age eighteen **to more than 50 today**. And there are 271 more vaccines under development by the pharmaceutical industry.<sup>9</sup>

**No Legal Liability** - The vaccine industry in the US is exempt from legal liability for the safety of their products. In Canada, the industry enjoys *de facto* exemption due to the requirement that both ‘negligence’ and ‘causation’ be proven.

**No Independent Government Oversight** - There is no independent government oversight monitoring vaccine safety. Vaccine safety trials are conducted by the vaccine manufacturers.

**No Media Oversight** - The media has been told the “*science on vaccines is settled*” and giving voice to vaccine safety concerns is irresponsible journalism. Therefore balance in reporting with regards to vaccines is **neither warranted nor required**.

### **The Result**

NO **industry** accountability.  
NO **government** oversight.  
NO **legal** accountability.  
NO **media** oversight.

The system is perfectly designed to encourage and enable an unlimited number of vaccines to be “recommended” and ultimately mandated without informed consent. **We are on the path to medical tyranny.**

*“I never imagined myself in this position, least so in the very beginning of my Ph.D. research training in immunology. In fact, at that time, I was very enthusiastic about the concept of vaccination, just like any typical immunologist. However, after years of doing research in immunology, observing scientific activities of my superiors, and analyzing vaccine issues, I realized that **vaccination is one of the most deceptive inventions** that science could ever convince the world to accept.”*

~ Dr. Tetyana Obukhanych, Ph. D., author of the [Vaccine Illusion](#)

## The Science is Not Settled

1. The safety of the current childhood vaccine schedule has **never been proven** in large, long-term clinical trials. <sup>16</sup> Most safety trials are limited to a few weeks. <sup>17</sup> Combined vaccines have not been tested for carcinogenicity, toxicity, genotoxicity, mutagenicity, or for long-term adverse reactions.
2. Most effectiveness trials are limited to the measurement of anti-bodies/titers in the blood rather than producing **verifiable evidence** that the vaccine **actually prevented** the targeted disease. <sup>1, 18</sup>
3. The current vaccine schedule has **never been tested for safety** in the real world way in which the schedule is implemented. No safety trials exist that confirm the safety of giving **multiple vaccinations at once**. <sup>19</sup>
4. No large safety trials have been undertaken that use an **unvaccinated population** as the control group.
5. There is no long-term **clinical evidence** that vaccinated children **have better overall health** than unvaccinated children. There is a growing body of evidence that the opposite is true. <sup>20 48</sup>
6. **No clinical proof** exists to support the claim that artificial immunization is primarily responsible for the decline in infectious diseases, let alone the claim of millions of lives saved. <sup>2</sup>
7. There is **no** independent biological science that shows injecting mercury into humans is safe **in any amount**. <sup>46</sup>
8. **No** clinical studies have been conducted to establish the safety of using aluminum in vaccines. The neurotoxicity of aluminum is well documented, affecting memory, cognition, psychomotor control, and damage to the blood brain barrier. <sup>21</sup> The amount of aluminum used in vaccines **regularly exceeds** the maximum amount permitted by the FDA. <sup>47</sup>
9. Most vaccine safety trials use control groups consisting of other vaccinated populations or placebos containing aluminum and other vaccine ingredients. **This is not a true placebo**. A true placebo is a substance that is known to be harmless or neutral. <sup>21</sup>
10. The use of a false placebo undermines the integrity of vaccine safety claims because it effectively compares a vaccine with itself.
11. The US Vaccine Court has awarded more than **\$ 3.2 billion dollars** in compensation for vaccine injury and death since 1988.

12. The US Vaccine Court has awarded compensation to more than **83 families** whose children developed **autism** following vaccination. <sup>19</sup>
13. Artificial immunity is **not life long**. Infectious disease outbreaks regularly occur in **fully vaccinated** populations. Recent whooping cough outbreaks are caused by **vaccine failure**, not a failure to vaccinate. <sup>49</sup>
14. A 2014 report released by the **Council on Foreign Relations** revealed **the most highly vaccinated populations** are also those with **the greatest number of outbreaks** for those same infectious diseases. <sup>20</sup>
15. The **Office of Medical and Scientific Justice** suggests the theory of 'herd immunity' is "*failing or was flawed to begin with*". They offer several possibilities to explain the findings:
  - 1) Vaccines are causing 'immune dysfunction'.
  - 2) 'Vaccine antigen responses' may be reprogramming viruses while **weakening the immune systems** of the most vaccinated individuals. <sup>20</sup>

Just as the overuse of antibiotics caused an increase in antibiotic resistant organisms, a similar phenomenon appears to be occurring with viruses and bacteria targeted by vaccines. <sup>14</sup>
16. The **2012 Cochrane Collaboration Report**, after reviewing more than 65 clinical trials / studies on the MMR vaccine determined - "*The design and reporting of safety outcomes in MMR vaccine studies, both pre- and post-marketing, are largely inadequate*". <sup>22</sup>
17. There is **no independent government oversight** monitoring vaccine safety. Vaccine safety trials are conducted by the vaccine manufacturers.
18. A 2011 Canadian study showed that **1 in 168 children** needed hospital Emergency care after receiving the MMR vaccine. Several children died during the study. <sup>23</sup>
19. The disclosures by CDC scientist Dr. William Thompson reveal the CDC has known for more than a decade that children receiving the MMR vaccine *on schedule* are **significantly more likely to regress into autism** compared with children whose parents decided to withhold the vaccine until the child was older. The risk was even higher amongst African American boys. <sup>24</sup>
20. The 2013 - 14 influenza vaccine accounted for over **93,000 adverse reactions**, including 8,888 hospitalizations and 1,080 deaths according to the US Vaccine Adverse Events Reporting System (VAERS). <sup>25</sup>

*The great tragedy of science – the slaying of a beautiful hypothesis by an ugly fact.*  
~ T.H. Huxley

## Unanswered Questions

There are a number of questions **responsible journalists** ought to be asking with regards to artificial immunization:

1. Is it **reasonable or responsible** to continue to inject human beings, particularly pregnant women, with mercury when mercury is a known neurotoxin and **mercury has never been tested by the FDA for safety?**
2. Why is it that we don't hold those individuals recently vaccinated with a live virus (chicken pox, measles, mumps, rubella, intranasal influenza, shingles) responsible for the spread of diseases due to **viral shedding?**
3. Should the U.S. Center for Disease Control be trusted on issues of MMR vaccine safety given one of their own senior scientists, Dr. William Thompson, has come forth as a federal whistleblower alleging **scientific fraud** and the destruction of data on the MMR vaccine-autism connection? <sup>24</sup>
4. Should vaccine manufacturer Merck be trusted given two of their own employees have come forth as federal whistleblowers alleging **scientific fraud** on MMR vaccine effectiveness studies? <sup>26</sup>
5. Is the breadth and depth of the studies done on the safety of the current vaccine schedule adequate given the research is primarily done by those with a conflict of interest - they either **profit from the sale of vaccines** or are **responsible for increasing vaccine uptake?**
6. Have the children who have gotten sick, disabled, or died from vaccine reactions been studied to identify their vulnerabilities or the vaccine's defects so that we can identify other vulnerable children or the vaccine's limitations and **prevent further tragedies** and loss of life in the future?
7. Do we have a responsibility to those children, their families, and potential vaccine victims to conduct **independent vaccine safety studies?**
8. How many children are we willing to sacrifice in pursuit of the **theory** of 'herd immunity' or 'the common good'. Who will decide?
9. Why is it that **no long-term clinical study** has been conducted to compare the health of **vaccinated vs. never vaccinated individuals?**
10. Why is the **low incidence of autism in non-vaccinated** children rarely reported by the media?

*"Has it become bad form in media  
to ask inconvenient questions?"*

## The Unvaccinated & The Risk to Others

Medical authorities and the media love to scapegoat the unvaccinated. They accuse those who choose not to vaccinate or to delay vaccinations of being responsible for the spread of disease. This is the justification given for the elimination of personal rights and the removal of personal exemptions to vaccines. <sup>10</sup>

The idea that the only plausible reason people contract infectious disease is because some parents don't get their children vaccinated is **a powerful marketing strategy**, but **scientifically flawed**. The facts are:

- The protection conferred by vaccines is **temporary** and wears off after a few months or years and varies from person to person.
- Vaccines do **not** eliminate susceptibility to disease and may actually increase susceptibility. Influenza vaccines are known to increase the risk of susceptibility to contracting pandemic strains of influenza viruses. <sup>12</sup>
- Not all vaccines are designed to prevent the transmission of disease. Some vaccines are only designed to mitigate symptoms of the disease. Not being vaccinated for these diseases does **not** alter the safety of public spaces. <sup>11</sup>
- Many vaccines contain live viruses and these live viruses can be transmitted to others due to **viral shedding**. Viral shedding can occur up to six weeks post vaccination.
- Rather than quarantine children receiving live viruses, we quarantine healthy unvaccinated individuals who pose no risk to others.
- Herd immunity is a **theoretical concept** based on natural immunity. There is no evidence herd immunity can be achieved with artificial immunization.
- The decline in natural immunity due of the widespread use of vaccines actually increases the likelihood of disease outbreaks in the future.
- An unintended consequence of the vaccination program is a new generation of children who are even more vulnerable to disease. <sup>13, 14</sup>

In an open letter to US legislators, immunologist Dr. Tetyana Obukhanych, Ph.D addressed the question of whether unvaccinated children pose a higher risk to the public than vaccinated children. Dr. Obukhanych states:

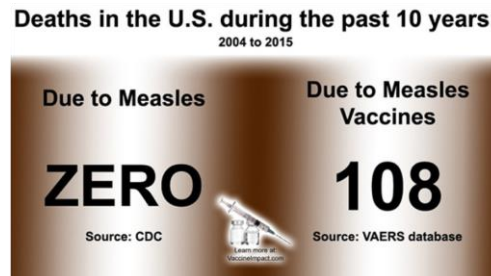
*"It is often stated that those who choose not to vaccinate their children for reasons of conscience endanger the rest of the public, and this is the rationale behind most of the legislation to end vaccine exemptions currently being considered by federal and state legislators country-wide.*

*You should be aware that the nature of protection afforded by many modern vaccines – and that includes most of the vaccines recommended by the CDC for children – **is not consistent with such a statement.***

***Discrimination against children who are not vaccinated is completely unwarranted as (they) pose no undue public health risk."***

## Consensus Science

The argument made by mainstream media for suppressing discussion about the safety and effectiveness of artificial immunization is there is consensus in the scientific community with regards to the safety and effectiveness of vaccines. But is there consensus? And is consensus the business of **science** or **politics**?



The truth is the mass vaccination program is an **uncontrolled experiment**. This is not good science. This is **not ethical science**. This is **not responsible science**. In fact, this is not science. Vaccination has become a political issue rather than a scientific issue. Anyone who states: “*The science regarding vaccinations is clear*” is either **not a scientist** or is **not being honest**. This is a **promotional** statement, not a **science** statement.

The biomedical literature relative to causes of disease contains 1) good honest research, 2) poor honest research, and 3) 'manufactured' research. There are an unknown numbers of articles 'manufactured' to show there are no links between products being studied and serious disease.<sup>15</sup>

*“Let’s be clear: **the work of science has nothing whatever to do with consensus**. Consensus is the business of politics. Science, on the contrary, requires only one investigator who happens to be right, which means that he or she has results that are verifiable by reference to the real world.*

***In science consensus is irrelevant.***

*What is relevant is reproducible results. The greatest scientists in history are great precisely because they broke with the consensus.*

*There is no such thing as consensus science. If it’s consensus, it isn’t science. If it’s science, it isn’t consensus. Period.*

***I regard consensus science as an extremely pernicious development that ought to be stopped cold in its tracks. Historically, the claim of consensus has been the first refuge of scoundrels; it is a way to avoid debate by claiming that the matter is already settled.”***

~ Michael Crichton, M.D.

## The Co-Opting of Science

Science once offered us a high degree of confidence that a statement, fact, or conclusion was likely to be true because it was based upon **a rigorous and verifiable** process using the **scientific method**. Unfortunately the scientific method has been corrupted for economic and political gain.

Science, like other aspects of our society, has been co-opted by power and politics and is no longer in service to the truth. It is in service to those with enough money or power to determine the outcome of scientific research. Research is plagued with **dogma, politics, corporate interests** and other biases. These pressures force scientists to only study certain areas and publicly admit certain “beliefs”.

*“Science cannot have an agenda,  
and it appears that this science does.”*

~ Bruce Stillman, President of Cold Spring Harbor Lab

Consider these two statements from editors of prestigious science/medical journals:

*“It is simply no longer possible to believe much of the clinical research that is published or to rely on the judgment of trusted physicians or authoritative medical guidelines. I take no pleasure in this conclusion, which I reached slowly and reluctantly over my two decades as an editor of the New England Journal of Medicine.”<sup>27</sup>*

~ Dr. Marcia Angell, Drug Companies and Doctors: A Story of Corruption

*“The case against science is straightforward: much of the scientific literature, perhaps **half** may simply be **untrue**. Scientists too often sculpt data to fit their preferred theory of the world. Or they retrofit hypotheses to fit their data. Science has taken a turn toward darkness.”<sup>28</sup>*

~ Richard Horton, Editor in Chief, Lancet

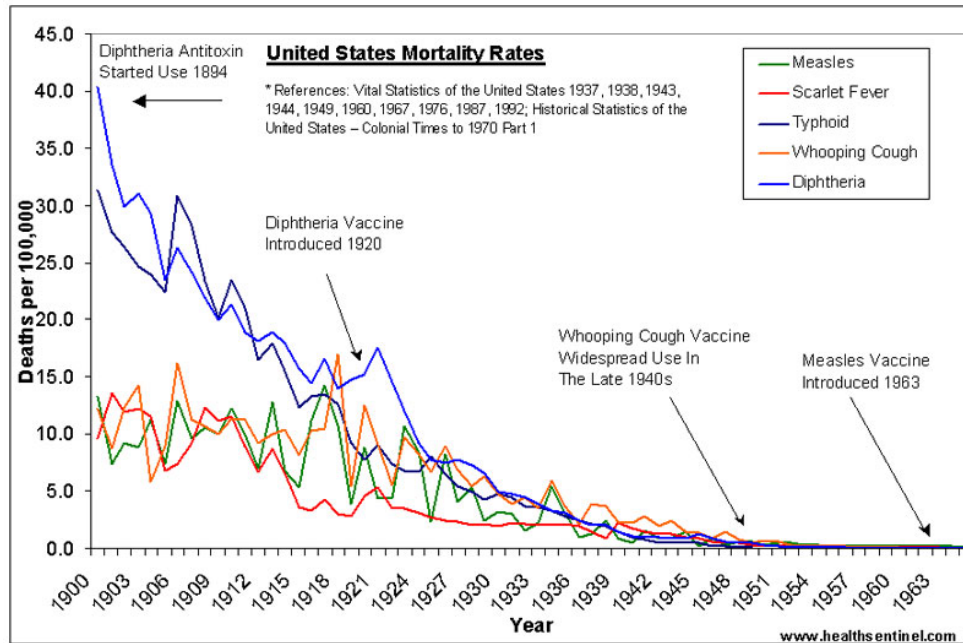
## The Co-Opting of The Media

*“Severe constraints are placed on the media in the name of ‘responsible journalism’ with the result that the American public very seldom hears both sides of the vaccination story, and comes to have an unquestioning faith in vaccinations as our greatest hope against future imagined disease plagues.*

*In this fear-based scenario, **the questioning voice of reason** is drowned out amid the hysteria surrounding the emerging ‘killer infections,’ which are such a favorite media topic. The propagation of fear by the media and by its sources in the public health industry has resulted in a **growth of power in this industry far beyond the usual checks and balances of our democracy.**”*

~ Dr. Philip F. Incao MD

## A Long Term Perspective



Vaccines have been given credit for the decline in mortality from major infectious diseases. Yet, historical epidemiological data shows that major declines in disease mortality took place in the western world **before** the introduction and common use of specific vaccines.

*"The decline in diphtheria, whooping cough and typhoid fever began fully fifty years prior to the inception of artificial immunization and followed an almost even grade before and after the adoption of these control measures.*

*Claims about the historical life-saving impact of immunization programs appear to be assumptive and not factual."*

~ McCormick W.J., Archives of Pediatrics, Vol. 68, No. 1, January 1951

*"The best evidence offered by those promoting (vaccines) is that there has been a reduction in the incidence of certain diseases against which vaccination is now commonplace. **This is not evidence.**"*

~ Dr. Vernon Coleman

*"There is not a single disease on the planet that vaccines have wiped out. Some infectious diseases persist . . . at even higher levels now than before (the) vaccines. Nutritional status, not vaccination, has the most profound impact on illness severity."*

~ Dr. Judy Converse, MPH, RD, LD

## Assumptions of Artificial Immunization

1. **Artificial** immunity is better than **natural** immunity.
2. **Temporary** immunity is better than **life long** immunity.
3. Vaccines are one uniform, homogenous group of drugs.
4. **All vaccines are safe and effective**, regardless of the manufacturer, manufacturing process, or ingredients.
5. Support for vaccinations is dichotomous. You are either 'pro-vaccine' or 'anti-vaccine'.
6. **Expressing concern** about vaccine safety is 'anti-vaccine'.
7. Heavy metals such as mercury & aluminum do not accumulate in the human body or cause neurological damage.
8. Conferring immunity through the placenta and breastfeeding is **not sufficient**. Babies need to be vaccinated at birth.
9. One uniform vaccine schedule is **appropriate for every child**. Every child has the same immune response regardless of age, gender, or weight.
10. A fully developed immune system is **not needed** for vaccines to be safe or effective.
11. The benefits of vaccination far outweigh the risks and **no clinical proof** is needed to substantiate this claim.
12. The benefits of vaccinations far outweigh the risks for all vaccines, both now and those under development for future use.
13. All Governments, both now and in the future, **can be trusted** to make the right decisions for our children's health and well-being.
14. The medical / pharmaceutical industry, both now and in the future, can be trusted to make the right decisions for our children's health and well being.
15. **The motive of profit** does not affect the integrity of vaccine decisions.
16. Although the US Supreme Court has deemed vaccines "*unavoidably unsafe*", there shall be **no product liability** against vaccine manufacturers, even if there is evidence that vaccines can be made safer.
17. **Parents can't be trusted** to make the best decision for their children's health and well-being.
18. **An individual's body does not belong to them.**
19. An individual has no right to decide what is injected into his/her body.
20. Vaccinations are a unique medical intervention and the medical ethic of **informed consent does not apply**.

*"Any possible doubts, whether or not well founded, about the safety of the vaccine cannot be allowed to exist."*

~ Federal Register. Vol 49, No 107  
June 1, 1984

## The Consequences of Mandating Vaccines

While **no vaccines are mandatory in Canada**, intense efforts are underway to eliminate the voluntary and informed consent status of vaccinations and make some or all vaccinations mandatory for both children and adults.<sup>45</sup> Mandating vaccinations in Canada would require a change to the **Canadian Charter of Rights and Freedoms**, as well as our medical laws that ensure the right to **informed consent**. The media rarely acknowledges this fact.

If we are seriously considering the idea of making vaccinations mandatory it is important we be aware of the consequences this change would mean. It is also important to identify safeguards that ought to be in place **prior** to any consideration of this significance.

### Loss of Personal Self-Determination

Mandatory vaccinations would mean that individuals no longer have **self-determination** over their own body or that of their children. Instead industry and government agents would have the authority to forcibly impose medical interventions upon unwilling citizens. This is effectively '*medical assault*'.

This action would establish a very dangerous precedent. While the context of the current debate is about vaccines, the potential impact is more significant. This decision extinguishes our right to decide what goes into our body and the body of our children. It declares that **our body does not belong to us**.

### A Significant Change in Medical Ethics

Mandatory vaccination would also mean a significant change in how medicine is practiced. Presently every physician embraces the ethic – '*First do no harm*'. As a community we uphold the principle - ***If there is risk, there must be choice***. Forced vaccinations would disregard these principles and ethics.

Vaccination is an invasive medical treatment with known risks including death. In 2011 the Supreme Court in the United States deemed vaccinations "***unavoidably unsafe***",<sup>42</sup> meaning that even when used as directed an unknown number of individuals will be injured or killed by vaccines.

Our current medical ethics supports the right that no one should be forced to undergo an invasive medical procedure **without his or her informed consent**. We condemned the forced sterilization of individuals with developmental disabilities, the Tuskegee experiments that infected black inmates without their knowledge or consent, and the Nazi practices that included involuntary euthanasia, experimentation, and sterilization. **Today we are considering medical practices similar to those we previously condemned.**

## Mandatory Prerequisites

Prior to any consideration of making the injection of a vaccine mandatory, a number of prerequisites ought to be in place. These prerequisites include:

### 1. Mandatory Reporting of All Adverse Effects of Vaccinations.

Much of the data we have about the frequency of adverse effects of vaccinations comes from the Vaccine Adverse Event Reporting System (VAERS) in the United States. VAERS is “**a passive reporting system**”<sup>29</sup> and there is no enforcement or penalties for failure to comply with the vaccine safety informing, reporting, and recording provisions when there is a vaccine injury.<sup>30</sup> It is estimated that **only two to ten percent of actual vaccine damage incidences are reported.**<sup>31, 32</sup>

In Canada reports of vaccine injury are documented under two reporting systems - the Canada Vigilance (CV) Database and the Canadian Adverse Events Following Immunization Surveillance System (CAEFISS). Unfortunately the publically accessible **CV Database** contains only a small fraction of the data on vaccine injury, while the more complete **CAEFISS** database is not available for public scrutiny.<sup>33</sup>

- ❖ **A rigorous and accountable system with full public access needs to be implemented to ensure the documentation of all adverse reactions to vaccines.**

### 2. Mandatory Training of Physicians to Diagnose and Treat Vaccine Injury

Currently physicians receive **no formal training** on how to diagnose or treat vaccine injury.<sup>32, 34</sup> How can citizens trust vaccine injury data when they know medical practitioners have not been trained to recognize vaccine injury? Is it ethical to subject our children to the risk of vaccine injury and then not be able to treat the injury?

- ❖ **Physicians require mandatory training in diagnosing and treating vaccine injury.**

### 3. Mandatory Compensation for All Vaccine Injury.

Currently there is **no national vaccine injury compensation program** in Canada.<sup>35</sup> Canada and Russia are the only countries in the western world without a vaccine injury compensation plan.<sup>35, 36</sup> Is it acceptable to force families to expose their children to the risk of vaccine injury or death and then fail to compensate families when injury or death occurs?

While the United States has had a Vaccine Injury Compensation Program since 1986, the US Vaccine Court has been criticized for its reluctance to acknowledge vaccine injury and provide compensation, and for the lack of transparency and accountability of its vaccine court masters.<sup>37</sup>

- ❖ **A Canadian compensation system needs to be developed and provide easily accessible compensation for all vaccine injuries.**

#### **4. Evidence of Long-term Vaccine Safety and Effectiveness.**

Currently there are **no long-term clinical trials** that demonstrate vaccine safety.<sup>16</sup> Most safety trials are limited to a few weeks.<sup>17</sup> Most effectiveness trials are limited to the measurement of anti-bodies/titers in the blood rather than producing verifiable evidence that the vaccine actually prevented the targeted disease.<sup>18</sup>

No safety trials exist that determine the safety of giving multiple vaccinations at once.<sup>19</sup> No large safety trials exist that use an unvaccinated population as the control group.<sup>38</sup> Evidence is growing that vaccines actually increase the risk of contracting diseases in the future.<sup>13, 14</sup>

Most safety trials use control groups consisting of other vaccinated populations or placebos containing aluminum and other vaccine ingredients. The failure to use a proper neutral placebo undermines the integrity of vaccine safety claims. Without adequate safety trials how can we accurately assess benefit/risk?

- ❖ **The long-term safety and effectiveness of vaccines needs to be determined. We need to know whether the total health outcome of vaccinated individuals is better than unvaccinated individuals.**

#### **5. Hold Vaccine Manufacturers Liable.**

The ability to take legal action in Canada against vaccine manufacturers for producing unsafe products is severely compromised due to the legal requirement that both '*causation*' and '*negligence*' be proven. This is an unnecessary barrier to holding vaccine manufacturers liable for the safety of their products.

In the United States vaccine manufacturers were exempted from vaccine injury liability by the Federal government in 1986 due to the substantial number of liability cases against vaccine manufacturers. The vaccine industry is the only industry, other than the nuclear industry, that is not legally liable **for the safety of their products.**

Without the risk of product liability, vaccine manufacturers have no need to make the safest products possible and the public has no means to hold manufacturers accountable for making unsafe products.

- ❖ **Hold vaccine manufacturers to the same level of product liability as the producers of other pharmaceutical products.**

## **6. Oversight by An Independent Body.**

A judicial body needs to be established to provide **independent** evaluation of product safety claims, as well as evaluate the justification for imposing medical treatments without informed consent. This body ought to be independent of both industry and government influence and have the investigative powers of the judiciary.

- ❖ **Develop an independent judicial body to evaluate the validity of vaccine safety and effectiveness claims.**

## **7. Mandatory Reporting of All Research Trials and Outcomes.**

Currently pharmaceutical manufacturers **are able to withhold evidence** of research trials and outcomes and publish or acknowledge only those trials that produce outcomes favorable to their cause.<sup>43</sup> Research trials that produce unfavorable results can and are withheld from public and governmental scrutiny.<sup>27</sup> How can we make informed decisions of benefit/risk when important research data is being withheld?

Efforts are underway in Europe to require pharmaceutical companies to disclose all research trials and outcomes.<sup>39</sup> This same level of transparency is needed in Canada.

- ❖ **Mandatory registration of all research trials and outcomes.**

## **8. Mandatory Quarantine of All Individuals Receiving Live Viruses.**

Vaccines containing live viruses have the ability to transmit these viruses to the general population up to six weeks following vaccination due to viral shedding.<sup>40</sup> If we are genuinely serious about stopping the transmission of viruses individuals vaccinated with live/attenuated viruses (*chicken pox, measles, mumps, rubella, intranasal influenza, shingles*) must be quarantined following vaccination. It is vaccinated individuals who risk the transmission of viruses, not the unvaccinated.

- ❖ **Mandatory quarantine of individuals receiving live/attenuated viruses.**

## Thoughtful and Vigilant

The media needs to be **thoughtful and vigilant** before endorsing the position that government and the pharmaceutical industry be given the power to mandate an invasive medical procedure **without informed consent**, especially where the **motive of profit** can distort the value and benefit of such medical procedures.

### Vaccination Is a For-Profit Business

Vaccine manufacturers operate as for-profit businesses. Their goal is to have the highest financial return possible, eliminate competition, use advertising and propaganda to promote their products, and they employ lobbyists to influence governments to provide them a favorable position in the market. **The vaccine industry is not accountable to the public.** It is accountable to shareholders.

Vaccines are the fastest growing sector of the pharmaceutical industry with **271 vaccines under development**.<sup>9</sup> The vaccine industry is enjoying spectacular growth. The global vaccine market tripled in value from \$5 billion in 2000 to almost \$24 billion in 2013, and is projected to rise to \$100 billion by 2025.

Quadrupling its profits over the next ten years can mean only one thing: the pharmaceutical industry intends to lobby for the removal of vaccine exemptions for children and intensify efforts to force other sectors to implement compulsory vaccination as a requirement of employment. **Everyone will be targeted.**

We ought to be extremely careful when a for-profit business is given influence to decide what goes into our bodies. We also ought to be extremely vigilant to ensure governments are not being **corrupted and co-opted** by industry money. Currently there exists **no significant separation** between industry and government.

### Vaccines and Immunology Are Complex Issues

Not all vaccines are the same, made the same, contain the same ingredients, made by the same manufacturers, or given to children at the same age with the same immune capacity. Yet the medical establishment and the media consistently describe vaccines *as if* they are **one uniform, homologous drug**. They act *as if* all vaccines have the same effectiveness and safety, and *as if* all children have the same level of immune response (one size fits all). This is obviously untrue.

Saying, “*All vaccines are safe and effective*” is like saying “*All prescription drugs are safe and effective*”. Such statements *are without scientific integrity* and are therefore **meaningless**.

*“Immunology is not rocket science.  
It is more complicated than that.”*

*"All vaccines are not created equal.  
Discussion of both the benefits and the risks of **individual** vaccines is needed.*

*The authoritative medical bodies must end their arrogant stance and take an honest look at  
the literature they have suppressed. The public deserves better.*

*Negative effects must be honestly brought to light.*

*Legislative bodies need to do their homework and **reject any thought  
of mandating vaccinations.**"*

~ Ralph Campbell, MD, a now-retired board-certified pediatrician

*"One size fits all approach for all vaccines and all persons  
**should be abandoned.**"*

~ G. A. Poland, MD, MACP, Editor in Chief of the journal Vaccine

### **Being Concerned About Vaccine Safety Is Not Anti-Science**

Not trusting Health Canada and the pharmaceutical industry is not anti-science. Rather, questioning and demanding **clinical evidence** of vaccine safety and effectiveness is **pro-science**, as well as being **responsible parents and health consumers**.

The failure of the vaccine industry to provide **clinical and biological evidence** of long-term vaccine safety is **anti-science**. Saying there is no need to conduct long-term safety trials is irresponsible and unacceptable.



A decision of the significance of mandatory vaccinations and the loss of informed consent requires **more conversation**, not less. **More information**, not less. **More evidence and scrutiny**, not less. **More caution**, not less. **More oversight**, not less. Unfortunately the opposite is occurring.

## What We Want from the Media

### 1. Respect and Preserve Our Legal Rights and Freedoms

The media has a responsibility to respect and support the Charter rights to **fundamental freedoms of conscience and religion**, the **legal right to security of the person**, and the medical ethic of **informed consent**, not **erode** them. The media has a responsibility to inform their listeners, viewers and readers, rather than **suppress** and **deny** them access to information.

### 2. Recognize All Children Are Important

We want the media to recognize that all children are important. Currently there is a **noticeable absence of concern for vaccine-injured children**. We want these children to be just as important as the immuno-compromised child who is the justification for imposing vaccinations against one's will. We want the media to advocate for the health of all Canadians, not just for some.

### 3. Tell the Truth About Vaccine Safety Data

We want the media to **tell the truth** about the current status of the vaccination program including the fact that we have no way of knowing whether the benefits of vaccination outweigh the risks because adequate clinical research on the long-term safety of the current vaccine schedule does not exist.

### 4. Admit Their Bias

If the media has a political conflict of interest in these matters, or receives revenue from the pharmaceutical industry, we want the media to declare this conflict of interest each and every time they report on vaccine issues.

### 5. Relevant Journalism

We challenge the media to be more **responsible** to victims of vaccine injury, be thorough in their research, learn the facts, **honestly** challenge the claims made by the pharmaceutical industry, **demand** evidence, and be a force for **truth, health, and choice** in Canada.

We owe it to the children who have been vaccine injured to find the truth.

## 6. Respectful Labeling

In other debates over controversial issues, (e.g. abortion rights) the media treats the two perspectives with a degree of respect, allowing each to name itself (pro-choice and pro-life). The movement that is raising concerns about the safety of vaccines is neither pro or anti vaccination. Rather **this movement is characterized by a commitment to safeguarding the right of Canadians to make voluntary and well-informed decisions** about health care.

This movement also demands **independent scientific evaluation of vaccine safety and effectiveness** including the comparison of the long-term health outcomes of vaccinated and unvaccinated individuals.

The cause that unites us is we support *'the right to know'* and *'the right to choose'*. In the interests of elevating this discussion the media ought to name this perspective - **"Advocates for Informed Consent"** or **"Advocates for Independent Science"**. Both of these rights should be respected.

Calling this movement *"anti-vaccine"* is dishonest and disrespectful.

## 7. Declare Intentions

We want to know how the media intends to respond to these threats to our Charter rights and our medical safety. **What efforts will the media undertake to move beyond simply repeating the promotional claims of the pharmaceutical industry?** What efforts will be made to engage in true investigative journalism and address the concerns of vaccine safety?

## 8. Allies, Not Adversaries

We are looking for allies, not adversaries. We are looking for your help in securing our **rights and freedoms** as citizens of Canada. We are looking for your assistance in holding our governments and the medical/pharmaceutical industry **accountable** to make safer products and to identify protocols that will ensure the long-term health of all of our children.

We have a responsibility to the Canadian people to get this right. Short-circuiting the dialogue on vaccinations won't serve us well. Forcing vaccinations upon unwilling citizens will undermine our democracy. Taking away personal rights and freedoms will change Canada forever.

Mandating vaccines is a serious decision that affects **every Canadian**, now and for generations to come.

## Who Is Vaccine Choice Canada?

**Vaccine Choice Canada(VCC)** — Vaccine Choice Canada is a federally registered not-for-profit educational society solely supported by donations from its members. VCC was founded by families whose loved ones have suffered severe vaccine reactions which have resulted in brain and immune system injuries, chronic debilitating diseases, and death.

VCC formed in response to the growing concern about the safety of the current vaccination program. As a public information and resource group we are committed to protecting children's health by informing parents of the existing and emerging scientific literature evaluating the risks, side effects, and potential long-term health effects of artificial immunization.

VCC works to **protect the right of all people** to make fully informed and voluntary vaccine decisions for themselves and their children. Our mission is to empower individuals to make informed health care choices and **to defend the medical ethic** of Informed Consent.

VCC maintains that **we have the right to know** and understand what we are putting in our bodies, and **to refuse unwanted medical treatments**, whether 'preventive' or 'therapeutic', as articulated by the Universal Declaration on Bioethics and Human Rights; Article 6 – Consent:

*"Any preventive, diagnostic and therapeutic medical intervention is only to be carried out with the prior, free and informed consent of the person concerned, based on adequate information. The consent should, where appropriate, be expressed and **may be withdrawn by the person concerned at any time and for any reason without disadvantage or prejudice.**"*

Vaccine Choice Canada continues the work of Vaccination Risk Awareness Network (VRAN) and the Committee Against Compulsory Vaccination, which in 1984 won an exemption for reasons of conscience from vaccines required by Ontario's 'Immunization of School Pupils Act'.

### Our Mandate is to:

- **Empower** families to make **voluntary** and **informed** health care decisions
- **Support** individuals in their right to **health freedom**
- **Protect** and further the individual's freedom from enforced medication

Contrary to government and media statements, **vaccination is NOT mandatory in Canada**. Vaccines are 'recommended' and all provinces have vaccine exemptions. **Our goal is to keep it this way.**

## VCC Website

Vaccine Choice Canada maintains a website to provide a national and international overview of the vaccine issue with links to the many vaccine information consumer groups around the world. Our extensive Science page provides access to scientific articles on this topic. <sup>41</sup> We publish an acclaimed newsletter with articles and research on this subject from international sources.

For more information: [www.vaccinechoicecanada.com](http://www.vaccinechoicecanada.com)

To contact Vaccine Choice Canada: [info@vaccinechoicecanada.com](mailto:info@vaccinechoicecanada.com)

## We Are Passionate Amateurs

*"Passionate amateurs are motivated by **necessity** and inspired by **love**.  
Someone or something they care about is vulnerable, under siege or in trouble,  
and they have no choice but to respond.*

*Passionate amateurs don't quit. **They can't quit.**  
They are prepared to pour their life's energy into resolving a challenge.  
Their commitment is freely given.*

*They are on the front lines, spotting and dealing with injustice years  
and sometimes decades before the issue seeps into the consciousness of organizations  
and institutions. **They experience or witness the barriers and system failures first-hand.***

*They know that slow, incremental change isn't good enough for the people, places and  
creatures they love"*

~ Al Etmanski, Author of Impact

*"When I tell the truth it is not for the sake of  
convincing those who do not know it, but for the  
sake of defending those that do."*

~ William Blake

What will you say to your children and grandchildren when they ask:

*"Where were you when the government  
took away our rights and freedoms?"*

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*Some scientists turn the trust they are given into  
"a lucrative trade as experts for hire, paid to convince the rest of us  
that we have nothing to fear from whatever product or process  
their benefactor designates."*

~ Michael Riordan,  
Author of Bold Scientists: Dispatches from the Battle for Honest Science