

VRAN Newsletter

Winter/Spring 1998

Do Homeopathic Vaccines Work?

The Question of Homeoprophylaxis—By Patty Smith, DHM (Pract.)

Homeopaths have long recognized that vaccinations actually create disease by stressing the immune system and have serious short and long-term effects. The purpose of this article is not to discuss these negative consequences, but to provide parents with an alternative approach to vaccination. It may help parents in their difficult decision about vaccinations to know that they have a safe and effective alternative in the use of homeopathy for their children.

There are a range of options available to people who have to make a decision about vaccinations, from deciding to vaccinate, to deciding not to vaccinate at all, with options in between those two extremes. And each of those decisions carries with it its own set of ramifications. While it is clear that vaccinations are not desirable from a homeopathic perspective, homeopathy provides a range of approaches that can

be used depending on the parents' choice.

For example, homeopathy can be used prior to vaccinations to possibly lessen the toxicity and chances for adverse reactions, it can help treat the diseases and chronic infections created by vaccines, it can help treat disease or infections in non-vaccinated children, and it can help prevent diseases or infections (in cases of epidemics) in future cases. Fundamentally, constitutional homeopathic treatment boosts the immune system and makes the individual stronger, in this way making the individual less susceptible to disease. But there is also a history of the preventative use of homeopathy, in which individuals are treated specifically for a disease or infection that is, as of yet, unknown to his/her immune system.

This option is termed homeoprophylaxis—casually called 'homeopathic vaccination.' Homeoprophylaxis (or HP) is defined as the use of potentised substances (homeopathic remedies) in a defined way to prevent the development of the characteristic symptoms of infectious diseases.

The concept of HP is one that is not entirely understood or appreciated by some homeopaths. Even those who have heard of the procedure may not know quite how to apply it, or they may not consider it

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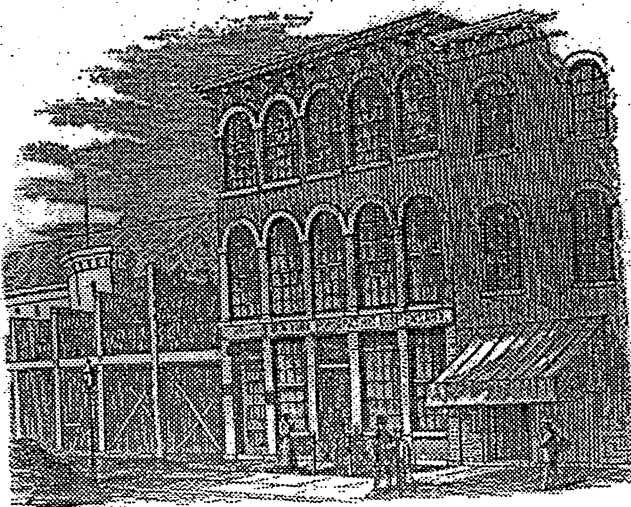
Editorial

By Meg Edwards

Parents that decide not to vaccinate must defend their decision constantly, acquire (and have notarized) the exemption form, and search in vain for a sympathetic doctor. While we are legally entitled to reject vaccinations, we are not officially recognized in our society. Our opinions are considered 'fringe' and therefore unacceptable. But the scientific and anecdotal reports on vaccine damage, both immediate and long term, remain. The efficacy and safety of vaccinations has not been proven, and our decision to reject this particular product should be recognized by our medical community.

We get many requests at VRAN for the phone numbers of doctors who are open to non-vaccination. Although we do know a handful of doctors who will acknowledge their suspicion that vaccinations are not health creating, we are unable to give out phone numbers or names.

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VRAN NEWSLETTER

VRAN BC

Vaccination Risk Awareness Network
P.O. Box 169, Winlaw, B.C. V0G 2J0
Phone Line with 5 Minute Outgoing message
and answering machine :
416-280-6035

Director: Edda West
eddawest@netidea.com
250-355-2525

Newsletter Editor: Meg Edwards
dallas@the-wire.com
416-923-4571

Core Members of VRAN:

Edda West, Meg Edwards, Julie Shams,
Heidi Schaeffer, and Eric Fink
With thanks to Catherine Orfald
for the newsletter layout.

Statement of Purpose

VRAN was formed in October of 1992 in response to growing parental concern regarding the safety of current vaccination programs in use in Canada and generally in North America. We are now a public information and resource group with a commitment to helping other parents protect their children from the risk of current vaccination programs.

We also act as a "watchdog" organization that gathers and shares information from both local and international sources.

VRAN maintains that the injection of toxic and viral materials into vulnerable infants and young children is not a health creating measure. We hold the belief that all parents are entitled to draw on a broad information base when deciding on drugs offered their children and in particular drugs that carry potentially serious health risk factors. Vaccines are such drugs.

VRAN offers counsel to concerned parents who do not feel adequately informed and who wish to gather additional information to facilitate an "informed decision". VRAN helps parents identify adverse reactions to vaccines and advises them of the legal requirements of doctors to report adverse reactions. VRAN also advises parents whose child has reacted adversely to take a cautious stance if considering revaccination. VRAN is committed to support people in their fight for health freedom and to maintain and further the individual's freedom from enforced medication.

VRAN is committed to facilitating the gathering and dissemination of relevant information and resources that contribute to the creation of health and well being in our families and in our communities.

VRAN publishes a newsletter regularly as a means of distributing information to members and the community.

Suggested annual membership fees, including quarterly newsletter and your on-going support to the Vaccination Risk Awareness Network:

\$25.00 Individual
\$50.00 Professional

We would like to share the personal stories of our membership.

If you would like to submit your story, please contact our editor, Meg Edwards:
dallas@the-wire.com

VACCINES: THE OTHER SIDE OF THE STORY

A video from the National Vaccination Information Centre now available from VRAN.

- Do you know how to prevent a vaccine reaction?
- Do you know what questions to ask a doctor?
- Do you know your rights under the law?

This video will give you information which doctors rarely discuss with parents before their children are vaccinated.

Please make out cheque to "VRAN Vaccine Info Videos"

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(\$5 retained for shipping and handling)
Please send cheque or money order to:

VRAN—Vaccine Info Video

c/o Laurie Murray
4 Purdy Place,
Kingston, Ontario
K7M 1B3

VRAN NEWS

All further correspondence about memberships or inquiries about vaccination should be addressed to the new western branch of VRAN which will be directed by one of the original founders of VRAN (once VARIANCE), Edda West. We will maintain our phone line and continue the newsletter from our Toronto base, but the administration, correspondence, membership list, outreach and organization of talks and lectures will be centred in British Columbia.

Edda's address is: VRAN BC, P.O. Box 169, Winlaw, B.C., V0G 2J0. Her phone number is (250) 355-2525, and email address is: eddawest@netidea.com.

Nancy James, the founder of The Winnipeg Association of Vaccine Damaged Children, is also volunteering to answer questions about vaccination. Her address is: VRAN MB 67 Shier Drive, Winnipeg, Manitoba, R3R 2H2. Mary's phone number is (204) 895-9192 and her email address is: tjames@autobahn.mb.ca

Support Circles Update

Kara Braun and Andrew Tietzan had a successful Support Circle in Kingston on October 15th. The eleven families that participated in the meeting were looking for support for parents making decisions about vaccination, as well as a resource group for healing tips when children are ill. According to a participating member the group benefited from having two chiropractors join the group who had older, unvaccinated children, and who were very informative about the subject. Anyone interested in future meetings, please call Kara at 613-531-9552.

Other VRAN members interested in setting up Support Circles in their neighbourhoods are:

Ellen Fisher—Bathurst and Steeles
(416) 512 - 7072

Dr. Alan O'Connor and Dr. Jeff
Winchester—Waterloo
(519) 632-9040

Sheryl Rubinoff—Bayview
(905) 886-7678

Terry Wiltschek—Hamilton/Burlington
(905) 304-4024

Jackie van Overdijk—Bayview/Finch
(416) 250-0272

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The contents of this publication reflect the opinion of the authors only. The authors are not licensed to practice medicine, nor are the opinions in any way to be construed or intended as medical information. This publication is for informational purposes only and should not be construed as medical advice. The particulars of any person's concerns and circumstances should be discussed with a medical doctor prior to making any decision which may affect the health and welfare of that individual or anyone under his or her care.

The First International Vaccination Conference

Conference Review by Edda West

North America's First International Public Conference on Vaccination drew a larger audience than had initially been expected, with about 500 people attending the two day event held in Alexandria, Virginia, an historic suburb of Washington D.C. Parents of vaccine injured children, representatives from the many consumer education groups who inform the public about vaccine risks and injury, health care providers, and many specialists gathered to lend their voices to the conference. Many different issues of vaccination were brought to light: sickness engendered by vaccines, critical questions of bioethics, informed choice in medical matters, and the successes of a new breed of health care providers practicing integrative and complementary medicine.

The conference was hosted and sponsored by The National Vaccine Information Center, renowned for its heroic work over the past 15 years in drawing attention to the dangers of vaccine damage. The NVIC has always been on the cutting edge of new research linking the destructive impact of multiple vaccines on human health. Their stated goal is to "promote examination and open discussion of what is and is not known about vaccination in order to encourage well designed scientific research into the biological mechanism of vaccine injury and death; the long term, chronic effects of multiple vaccination on individuals and on the public health; the identification of high risk factors; and the development of therapies to reduce or eliminate vaccine induced neurological immune system dysfunction."

Conference delegates heard an impressive line-up of experts in the fields of immunology, neurology, gastroenterology, genetics, and biochemistry. The specialists delivered their

messages of concern about the risks of vaccination. Theories were discussed in which vaccines were said to provoke chronic diseases and neurological disorders such as autism, attention deficit disorders, and learning disabilities.

Presentations on alternative and molecular therapies that are bringing new hope of healing and recovery to vaccine injured families highlighted the revolution that is occurring in health care today. One such practitioner, Dr. Patricia Kane, who is an expert in nutritional pharmacology (specializing in autistic spectrum disorders, traumatic brain injury, and intractable seizure disorders), presented an overview of her innovative treatment methods for neurologically injured children. Her treatments are highly effective and light years ahead of the conventional therapies.

One very moving speaker, Dr. Arno Bernier, specializing in pediatric chiropractic talked about the 'shifting winds of change' that will move us from invasive medicine to a more wholistic health creating philosophy. Said Bernier, "It is only a matter of time before vaccines join the medical junkyard and will be abolished." He predicts that "the DNA vaccines will be the downfall as the scientific community does not know the exact mechanism or the long term effects."

Dr. Andrew Wakefield, a well known British researcher whose findings have connected Crohn's disease in children to measles vaccine, apologized that he could not present his scheduled topic on the link between measles vaccine and autism because of a perceived threat that his research would be rejected in peer review journals if he spoke of his findings in advance of publication. Instead, he presented a piece on the etiology of SSPE (subacute sclerosing panencephalitis) that causes

'viral inclusions in the brain' and is invariably a fatal syndrome. According to Wakefield, measles can establish persistent infection, without causing a problem, but re-exposure of persistently infected children to measles vaccine can result in SSPE. He also reiterated that antibodies can't get rid of persistent infection in cells. He cited cases where children had either been vaccinated or had subclinical cases of measles, where the virus stayed latent, and then re-exposure by means of vaccination provoked the SSPE. According to Wakefield, Crohn's disease in children appeared in the 1970's after the introduction of measles vaccine. Prior to that time, there were no cases in their pediatric unit.

Dr. Barthelow Classen, a researcher into causes of autoimmune diseases, spoke of the effect of vaccines on the development of insulin dependent diabetes. Dr. Classen said that although vaccines can suppress infectious diseases, they are also altering the immune system. For example, insulin dependent diabetes can be brought on by interferon which is released after vaccination. His data shows that a "large part of insulin dependent diabetes may be caused by vaccination." As more and more vaccines are added, the incidence of diabetes keeps rising.

A New Zealand study of over 100,000 young people under the age of 16 saw the incidence of diabetes rise more than 50% after Hepatitis B vaccine. And in the United States, when Haemophilus Influenza B vaccine was added, the incidence of diabetes rose rapidly, with 50 children of every 100,000 who received the vaccine developing the disease within five years. The BCG (tuberculosis) vaccine is another case in point. When Classen compared the frequency of diabetes in children under the age of 15 in European countries using BCG with areas not using it, the incidence of the disease was twice as high among the

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Dr. Mendolsohn Remembered

by Ruth Lockshin

In his 1979 book, *Confessions of a Medical Heretic*, my father, a successful pediatrician in the Chicago area, told how he began to question almost all of the teachings of modern medicine. He argued that most surgical operations, which he called "Ritual Mutilations", were unnecessary and harmful; that the "miracle" drugs that were once extremely valuable had become extremely dangerous, and that doctors routinely ignored nutrition and other more benign approaches to healthy living in favour of 'better living through chemistry'.

From the time of the publication of *Confessions* until his death in 1988, he spoke all around the world, and spent a good deal of time travelling. He appeared on radio, on TV, and in print, always maintaining his medical practice as well.

For us, his family living in Toronto, and for my sister and her family in New York, this was a fine arrangement. He accepted many invitations to our areas, with the result that we were able to see him frequently, and he really got to know his grandchildren.

I once asked my mother if Dad had really been just a standard medical doctor in the years before his "heresy". She said she thought he always was a little bit different, which made sense to me, since my father always seemed different to me—always more special, more funny, with a little twist in his attitude. Although he knew very little about natural childbirth and breast-feeding in the early 50's, he supported my mother in her efforts with both. Because he was a medical resident in the hospital at the time that I was born, he was able to be in the delivery room with my mother while she was giving birth to me.

When the attending obstetrician told him to switch on the ether, he instead gave her oxygen! Thus I was born without the "help" of analgesia or anesthesia. My mother also breast-fed me, which was unusual in 1954. She had so little outside advice about nursing that she never learned how to nurse in any position except lying down. When we were out, she would stretch out on a bathroom floor to nurse me when necessary. Clearly, my mother was also "special."

My father's support of natural childbirth and breast-feeding flowed from his unshakable belief (which predated that of the Reagan right) in the healing powers of the family. He saw many forces in American society which contributed to family breakdown. Once in Chicago in the 60's, he was giving a talk on this topic, entitled "Parentectomy: Is It Ever Indicated?" He argued (based partly on the Robertsons' research from the early 50's) that hospital practices that separate family members, and particularly those that separate parents from sick children, were dangerous to the health of those family members, perhaps even more dangerous than their illnesses.

After the talk, a woman came out of the audience to talk with him about his ideas and to ask him if he would be interested in being on the medical board of her organization. She was Marian Tompson, the president of La Leche League. Thus began a long association between my father, Marian, and La Leche League. He used to claim that he learned more from those LLL women than they ever learned from him.

Another important influence on Dad at that time was Dr. Herb Ratner, the maverick director of Public Health in Oak Park, Illinois, who joined my father on the medical board of La Leche League. Dr. Ratner questioned the polio vaccine when it was first introduced and was subsequently one

of the few doctors in the profession to draw attention to vaccine-induced polio outbreaks. His eclectic publication, "Child and Family", is still an excellent source of information on the dangers of vaccines, the Pill, and other medical breakthroughs.

My dad gained a great respect for grass-roots organizations by observing La Leche League's great success in improving breast-feeding rates in the United States in a few short years. His admiration for "kitchen table" organizations led him to support many other grass-roots groups. (It was the 60's, after all!)

Besides La Leche League, some of the groups that he supported included HERS (Hysterectomy Educational Resources and Services), NAPSAC (the National Association of Parents and Professionals for Safe Alternatives in Childbirth, a leading authority on midwifery, home birth, and other childbirth alternatives), and DPT (Dissatisfied Parents Together, the main American group that began the fight against compulsory vaccinations). Often these were groups of patients who had been damaged by modern medical treatments and who had acquainted themselves with the latest research in an effort to change dangerous medical practices. My father told patients that these consumer organizations would be a better source of information than either their doctor or standard medical organizations like the Heart and Stroke Foundation or the Cancer Society.

These small groups have had a large effect on people's thinking and even on the medical establishment itself. My father used to encourage his friends who worried about being considered marginal by referring to his own Jewish background. "I've been a member of a minority all my life," he would say, "and if I ever find that I'm not in the minority, I'll know that either I'm wrong, or the Messiah has arrived."

Dr. Mendolsohn continued on page 9

On Pasteur and His Legacy

"As with so many innovators in medical science Louis Pasteur was not a doctor but a research scientist. There is considerable evidence that his place in medical history requires re-evaluation, for doubts have been expressed as to his probity. Indeed some of his greatest 'discoveries' have been attributed to a contemporary scientist of his, Professor Antoine Bechamp. Archie Kalokerinos MD and Glen Dettman PHD have described the controversy thus (International Academy of Preventative medicine Seminar, Phoenix Arizona, August 28, 1977):

Vaccine Profits

The vaccine industry represents a \$4 billion a year global market, with profit margins of nearly 30%. Analysts expect world-wide vaccine sales to increase 15 % per year over the next ten years, mainly due to managed care's "increasing emphasis on preventative care" and the growth of adult vaccines. Pasteur Merieux Connaught is the largest vaccine producer, holding a 35 % global market share.

(Wall Street Journal, 8/5/97, p. C19. col. 1)

Excerpted from the newsletter, Vaccine News, produced by Ohio Parents for Vaccine Safety, Sept 1997.

Modern medicine is based on Pasteur's germ theory of disease—a specific organism causes a specific disease and a specific vaccine gives protection. Shades of doubt concerning the validity of this dogma were seen when we observed that some

Aboriginal children did not get protection and, in fact, died when vaccines were administered.

It soon became obvious that individuals became susceptible to disease for various reasons, and the germs themselves simply take advantage of the susceptible state. Vaccinating susceptible individuals does not necessarily render them immune; it may have the reverse effect. Further light was shed on this problem when it was found that Pasteur plagiarized the work of his great scientific contemporary, Bechamp. According to this astute observer the basis of life is not the cell but a living 'gene' that he called a mycrozyma. Mycrozymas can evolve with changes in the nutritional environment to become viruses or bacteria, harmless or harmful, and although apparently specific viruses can be reproduced as similar organisms, this is only true if specific environmental conditions exist. Under other conditions evolution into other viruses and bacteria can take place.

In the same way, an infection can be endogenous or exogenous, evolving by a process of mycrozymian evolution. The fallacy of vaccines is thus explained and the importance of the nutritional environment of the cell understood."

Excerpted from Vaccination and Immunisation: Dangers, Delusions and Alternatives (What Every Parent Should Know) by Leon Chaitow, Great Britain 1987.



vaccinated group. In a parallel to these findings there is recent data out of Quebec looking at the BCG vaccine that found that school children receiving the vaccine had twice the risk of diabetes compared to the group that did not get the BCG vaccine.

Classen has estimated that if one vaccine can produce 50 cases of diabetes per 100,000 children vaccinated, that over a 10 year period in the U.S. alone, 20,000 children will develop diabetes. Says Classen, "Our studies all indicate that there's probably an added effect, so the more vaccines you give, the more diabetes you get as well—so it's a tremendous number of children."

Dr. Classen reiterated that "Vaccines have never been shown to be safe, only assumed to be safe. Safety studies that have been done only follow up 15 days to 3 weeks. Animal studies are all in resistant animals. The studies are highly skewed in favour of safety." He called for honest labeling, identifying autoimmune susceptibles, and minimum follow up of 5 to 7 years.

Dr. Harold Butram, who specializes in family and environmental medicine and is the author of numerous articles on vaccination and immune malfunction, and environmental toxins and their effect on human development started his presentation with the four basic causes of deterioration in chil-

dren's health : 1) Vaccines 2) Antibiotics 3) Chemicals 4) Commercial food preparations. In his presentation Butram stated, "At present there is an epidemic of autism and learning delay among U.S children. Millions of children are affected in the broad spectrum of neurocognitive difficulties that are the leading health problem in children. It must be brought out if we are to protect our children."

Butram discussed the mechanisms that can lead to autism and learning disorders, naming MMR vaccine as a potential cause leading to injuries of the myelin sheaths that protect the nerve cells. According to Butram, "Measles virus carries proteins similar to those found in myelin sheaths, so that antibodies induced by the measles vaccine may cross react harmfully with myelin" and additionally, "MMR is incubated in chick embryo culture medium, which includes chick myelin basic protein. The genetic imprint of the chick myelin basic protein, which is foreign to the human system because of its chick origin, may be programmed to induce antibodies against human myelin basic protein once injected into the human system." He also claimed that around 60% of autistic children have myelin basic protein antibodies.

In conclusion, Dr. Butram said, "Time may prove that vaccine programs went awry when they deviated from the most basic of traditional med-

ical ethics: the right of a patient to choose or reject medical therapy, and the right of parents to accept or reject medical procedures such as vaccines for their children. The right of free choice provides a system for checks and balances now lacking. As a result, present vaccine programs are going to extremes and are possibly causing more disease than they are preventing. Parents must be allowed perfect right of free choice to accept or reject vaccines for their children."

Dr. Murray J. Cohen, Co-Chair of the Medical Research Modernization Committee and a psychiatrist in private practice has testified before Congress on improving the quality of medical research used to draw scientific conclusions for humans. He concentrates specifically on animal research which he claims is medically unsound, archaic and flawed. According to Cohen, findings from animal experiments are non-transferable from animals to humans and he cited many examples of these errors. Claiming that scientific proof is lacking in 76% of medical treatments, Dr. Cohen criticized the 'entrenched scientists' at the NIH (National Institutes of Health), saying that "Their cause is not human health" and that "Informed choice needs to be the basis of the doctor-patient relationship."

Dr. Philip Incao, an anthroposophic physician, shared his philosophy and observations in his presentation from over 23 years of family practice. He saw first hand, when comparing his pediatric patients, of which there was an equal division of vaccinated and non vaccinated, that the unvaccinated children were obviously healthier. They exhibited visible vitality, glowing skin colour and a generally calm behaviour, whereas the vaccinated children tended to be pale, with deep shadows under their eyes. The vaccinated children seemed to be more easily distracted, with more allergies, earaches and a more fre-

MORE VIDEOTAPES AVAILABLE FROM VRAN...

"DPT: VACCINE ROULETTE"

A 60 Minute Documentary
CBC—The Journal
Discussion with Edda (Goldman) West
on DPT vaccinations
Thorough, provoking, and powerful—will
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immunization.

"DANGERS AND INEFFECTIVENESS OF VACCINATION"

Dr. Viera Scheibner
Maroochydore, Queensland, Australia
1/11/94

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Currently, and historically, doctors face losing prestige or placement in the medical community if they publicly discuss their professional rejection of vaccinations. Doctors who are stigmatized by the medical community as 'anti-vaccine' are often considered 'quacks' or marginalized as 'alternative'. In the case of Dr. Guylaine Lanctot in Montreal, the doctor may even have to defend her right to practice.

Doctors who are working to defend their right to suggest alternative therapies to their patients (such as acupuncture or medicinal herbs) are unable to make any statements regarding vaccination for fear of losing their reputation. Chiropractors and naturopaths also face discipline from their organizations if they make bold statements about the dangers of vaccination.

We recognize the difficulties faced by doctors when it comes to making a stand on the vaccination issue. A doctor may be better able to preserve the health of her patients through quietly and unofficially accepting the rights of her patients to reject vaccination, rather than making a grand stand and losing her position to practice. As well, a practicing doctor who quietly accepts the dangers involved with vaccination, may privately suggest the careful use of vitamin C and homeopathic treatments to reduce the risk of vaccine damage, without causing undue alarm in the medical community.

Our doctors have been forced into a difficult position, and we are sympathetic. But it is sad that we at VRAN are unable to put together a list of medical practitioners who are non-vaccinators or at least open to a non vaccinating stand. While we know it is our legal right to search out information and distribute it, we are caught up in the cycle of repressive silence. In the vaccination risk

awareness movement our silence makes us part of the problem. As long as we are uncomfortable to talk to our neighbours or doctors about vaccine risk information, we are complicit in the many cases of vaccine damage.

In this issue of VRAN we honour

Dr. Mendelsohn, who made a stand against vaccination and kept on practicing medicine for a full career. And we acknowledge the many doctors who have followed him, such as Dr. Moskowitch, for their work in disseminating information about the dangers of compulsory vaccination.

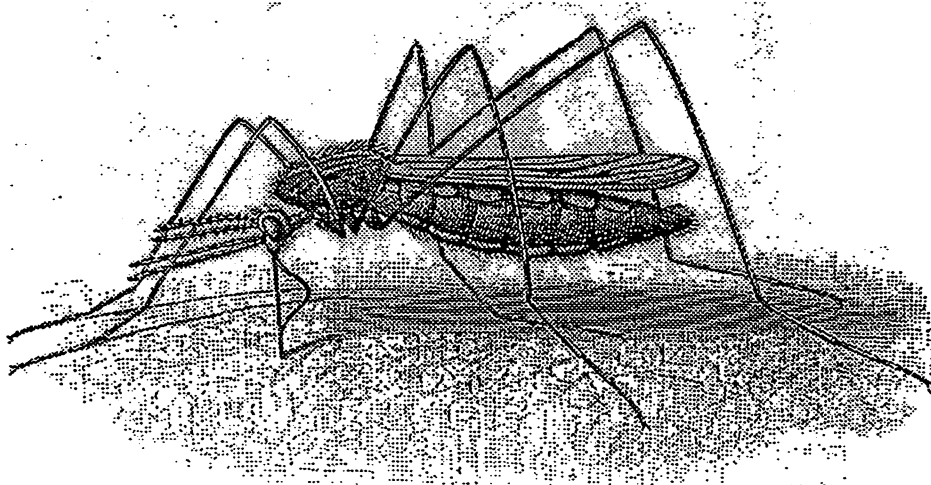
The Resurgence of Malaria

by Ellen Ruppel Shell
The Atlantic Monthly
August '97

This article documents the resurgence of malaria and the quest for an anti-malarial vaccine. Shell describes the difficulties in creating a vaccine and some successful alternatives. In the past the most effective battles against malaria were fought with common sense. After the Spanish Civil War the ponds and rivers were stocked with gambusia, a fish that eats mosquito larvae, leaving Spain virtually free of malaria. In China, malaria was successfully battled by draining swamps and with traditional Chinese and Western medicine.

The concluding remarks of Shell's article question the efficacy of vaccines:

"But in the West, early success in controlling infectious disease has bred arrogance and a belief in whooping big solution—vaccines and antibiotics that wipe out rather than contain. We know successful pathogens to be highly evolved and clever creatures, but we bluster about, attacking them as though they were the dumb, plodding aggressors that perhaps we ourselves are. When a microbe mutates around our onslaught, we go off in search of a bigger weapon with which to blast it. But like all re-emerging disease, malaria has managed not only to dodge the bullets but also to turn the revolver back on us."



necessary. The root of the problem lies in our homeopathic training. We have been taught to match a patient's symptoms during illness with a remedy that caused those same symptoms in a healthy person when the remedy was tested (or proved). Looking to cure a disease or infection that has not yet created any symptoms in a healthy body could be considered outside of the homeopathic philosophy. At present there is no consensus on the desirability of HP among homeopaths.

Generally, most homeopaths feel that enhancing the functioning of the immune system with the person's constitutional remedy is the best way to fight off bacteria and viruses, thus eliminating the need for any kind of "vaccination", homeopathic or not.

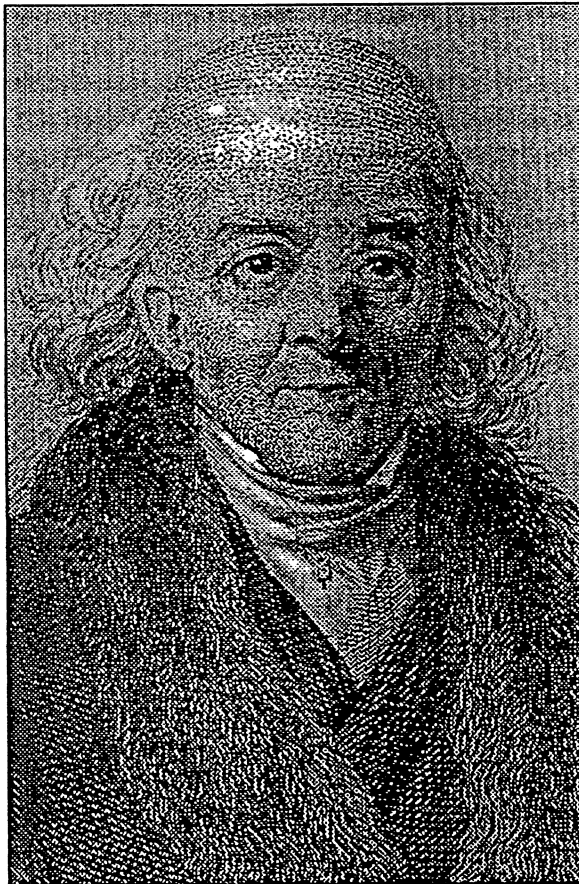
However, prevention is a valid part of any medical system and has a long history in homeopathy. In 1801 the founder of homeopathy, Dr. Samuel Hahnemann, wrote about his findings on Belladonna. He claimed that when uninfected family members were given Belladonna in a scarlet fever epidemic they were completely protected. Our homeopathic literature is replete with subsequent cases and examples of the efficacy of using remedies for protection against specific infectious diseases, such as influenza, measles, smallpox, diphtheria, whooping cough, cholera, and malaria.

I am fortunate to have a friend and colleague, Isaac Golden from Australia, who has done extensive research and writing on the subject of homeoprophylaxis. He has spent the last 13 years conducting extensive research on the subject and he claims that his results are successful and effective. HP sort of works like a vaccination, except that it actually works!

While we have no hard and fast answers about exactly how HP works, Golden suggests that it changes the

level of susceptibility to various infectious diseases. He gives the analogy, "We know that if a patient is sensitive to the physical and dynamic stimulus of Rhus tox trees (poison ivy), then by taking appropriate potencies of Rhus tox the patient will be rendered less sensitive to this stimulus. Similarly, a patient may be rendered less idiosyncratic to the physical and dynamic stimulus of any other substance - including viral and bacterial material."

Golden's program involves giving



remedies that have been shown to be extremely effective in the prevention and treatment of major diseases and epidemics, using nosodes that are made directly from the vaccine material or the infectious agent itself. They are given in ascending potencies over a period of months in a systematic manner.

Even if homeopaths don't necessarily feel the need to use such an elaborate system as Isaac Golden's, it is quite common to provide homeopathic reme-

dies in individual cases such as epidemics, anticipated exposure to disease agents (as in travel to a developing country) or possible exposure to the microbe producing tetanus. For example, if a child on a farm in the summer happened to incur a puncture wound, the homeopathic preventive treatment would be the remedies Ledum and Hypericum.

Parents who have made the difficult decision to reject some or all vaccines do not have to feel as if they are without a safety net. For parents who are fearful of disease, and feel safer with a preventative vaccination plan, HP could be the healthiest alternative. Even without the use of HP, parents can be secure in the knowledge that homeopathy has treated infectious diseases for over two hundred years with highly effective results.

For more information on HP, I recommend Isaac Golden's works: a booklet, "Homeoprophylaxis: A Practical and Philosophical Review" and his book, "Vaccination? A Review of Risks and Alternatives." They are available from Minimum Price Homeopathic Books in BC at 1-800-663-8272.

Patty Smith is a practicing homeopath, fully dedicated to Samuel Hahnemann's medical system, Heilkunst. She is on the Board of Directors of NUPATH, Canada's National United Professional Association for Homeopaths, serves as the Dean of Admissions

and Student Affairs for the British Institute of Homeopathy Canada and serves as co-director of HomeoNet, the international telecommunications system for homeopaths and students of homeopathy since 1993.

Patty Smith can be contacted at:
Norsana, 1445 St. Joseph Blvd.
Gloucester, Ont.
K1C 7K9
613-834-2516
patty@web.net

quent use of antibiotics.

In quoting Dr. Vigman, co-founder of anthroposophic medicine with Rudolph Steiner, he said "Anyone who truly understands what it means to be healthy would not be in favour of vaccination. Chronic disabilities doubled from 1960 to 1982 and from then until now (1997) have increased three times more. Health is the balance between acute inflammatory disease and chronic degenerative disease. By suppressing acute childhood diseases, you move the balance of the immune system to the chronic degenerative, and most U.S. kids are already on the chronic side and will increase."

Barbara Loe Fisher in a brilliant and moving keynote address, spoke of the "fundamental betrayal of public trust" by medical science, government, and industry that has known for more than 50 years that vaccines can cause injury and death, but has never conducted the "basic science research" to evaluate the true background rates of seizure disorders, mental retardation, learning disabilities, autism, diabetes, asthma, arthritis and cancer. Instead, health officials now "forward the idea that children who die or are brain damaged following vaccination have an underlying genetic disorder and that the vaccine simply triggered the inevitable, or that these children were predestined to die or become brain damaged that day, even if no vaccines had been given.

Without empirical evidence and having conducted no studies to identify genetic markers, this seductive and dangerous mantra is repeated to pediatricians and parents alike when referring to children with vaccine associated health problem—underlying genetic disorder—and everyone is preconditioned to accept the idea that the vaccine is not responsible, the doctor is not responsible, the vaccine manufacturer is not responsible—the genetically defective child is responsible."

Says Fisher, "Without any large scale safety studies, the mass use of multiple vaccines is essentially a 'defacto scientific experiment' and represents a violation of the ethical concept on which principles of Informed Consent have been constructed. The post World War II concept of the right to Informed Consent has centered on an acknowledgment of the inviolability of the individual's human right to autonomy and self determination. This ethical concept, born out of unparalleled tragedy, has emerged as the single most important force in shaping modern bioethics."

Bioethicist Arthur Kaplan has said "The Nuremberg Code explicitly rejects the moral argument that the creation of benefits for the many justifies the sacrifice of the few. Every experiment, no matter how important or valuable, requires the express, voluntary consent of the individual. The right of individuals to control their bodies, trumps the interest of others in obtaining knowledge or benefits from them."

The climate in the United States has become totalitarian in its drive to implement mandatory and punitive vaccination laws. Not only are health care choices being endangered but the moral and ethical principles that are fundamental to protecting individuals from medical/scientific experiments are under assault. This ominous climate is being exported world wide—and Canada as a U.S. satellite, is dutifully poised to impose this tyranny.

The conference brought to light the dangers of vaccines and the obvious imperative to maintain our right to an informed choice on medical intervention. Barbara's appeal is a rallying call. We are responsible for our children's welfare, we are their voice, and we should be allowed to make a rational, informed, voluntary decision about vaccination.

Because of VRAN and its predecessors, we in Ontario are the envy of non-vaccinating parents throughout the continent, and even the world. I have overseas friends who contact me about the trouble they have when they choose not to inoculate their children. When I tell them that in Ontario I merely have to sign a form registering my conscientious objection, I think with pride of the accomplishments of this organization. I know Dad would agree.

Robert S. Mendelsohn, M.D.
(1926–1988) practiced medicine for over thirty years.

His book, *How To Raise A Healthy Child... In Spite of Your Doctor Is a must read for every new parent. His newsletter, 'The People's Doctor', was influential in the vaccination awareness movement.*

Editor's Note (Addendum):

The medical form referred to has three exemption categories: medical, religious or conscientious objection. You can obtain this form from the Ministry of Health or Public Health Nurse, and in some cases from certain daycare providers or schools.

Your signature on the form does have to be legally witnessed, which generally costs about \$10 by a Notary Public or may be freely provided by other recognized signatories.

Please be aware that in many cities, Public Health offices routinely send out notices to parents through schools stating, for example, "By law, the Ontario Ministry of Health says that every child under the age of 18 years must be immunized. Children who are not up to date with their immunization may be suspended from school. That is why we want to work with you in keeping your child healthy and safe."

Remember, we do have the right here to choose how we keep our children "healthy and safe". This is a right we deserve which should be protected!

'Meningitis Epidemic' in Waterloo, Ontario

by Meg Edwards

The last few months of 1997 saw a massive vaccination campaign against 'meningitis' in Waterloo, Ontario. Two young women died of the disease. The news coverage was generally limited to information about when and where to get the Hib shots. Very little time was spent educating the public on the nature of the disease. According to one report the second fatality had been given her vaccination a week before she became ill with flu symptoms. Her father called the doctor and was told to give his daughter a few Tylenol and put her to bed, as it was probably the 'flu. The daughter went into a coma and died.

The general public is taught to believe that a vaccine will save them from any further worries about the disease. In this false sense of security we forget common sense approaches to disease like avoiding contact with sick people and increasing our ability to fight infection through nutrition, rest, homeopathy, and herbs or vitamins. Medical practitioners seem ill informed as well. Widely published reports have stated that the vaccine may cause the patient to be susceptible to the disease, and that the vaccine is not expected to protect the patient for up to three weeks after the vaccination. Why was the doctor unaware of these facts when contacted by the parents of the sick woman?

If in fact there was an 'epidemic' of a highly contagious disease, why would we gather large parts of the population in buildings for their vaccination treatment—isn't there a fear of the disease spreading? If the disease has similar symptoms to the flu, shouldn't all people with 'flu

symptoms be treated carefully and tested for the disease immediately? These are just a few of the questions that come to mind after the recent vaccination campaign in Waterloo.

Some facts about hemophilus influenza type b:

"Hemophilus influenza type b (Hib) is a bacterial disease that has been known to cause upper respiratory and ear infections, inflamed sinuses, pneumonia, epiglottitis (swelling of the throat that may interfere with breathing), and meningitis (inflammation of the membranes covering the brain and spine cord). It occurs most often in Eskimo, Native American and Negro children."

"In 1985 the Hib vaccine was approved for general use in the U.S. and was recommended for use for all children two years old or older. It has no efficacy in children younger than 18 months and uncertain efficacy in children 18–23 months old. But the peak attack period is between six months and one year, and 75% of all cases occur before the age of two years."

"The Hib vaccine is referred to as the 'meningitis' or 'spinal meningitis' vaccine but these terms are misleading. The Hib vaccine was only designed to offer some protection against the Hib bacteria, but meningitis has several causes (like the pneumococcus and meningococcus germs, and some viruses). Conversely, the Hib germ may also cause upper respiratory infections, ear infections, and sinusitis, but the vaccine is not effective against these conditions."

"Doctors have been warned by the CDC that cases of Hib may occur after the vaccination, 'prior to the onset of the protective effects of the vaccine'. Other studies warn of 'increased susceptibility' to the disease during the first seven days after vaccination."

"...in two recent and separate

studies, researchers found that the disease does not spread easily. In fact, out of 772 children who came in contact with an infected child, none of the 185 children in the first study, and only one of the 587 children in the second study, contracted the disease."

"Because of the controversy over the safety and efficacy of the vaccine, the AAP approved new guidelines recommending that doctors use their own discretion regarding whether or not to continue giving the Hib vaccine to children."

"In 1988 a new conjugated Hib vaccine was approved for use in children at least 18 months old. By 1991 its recommended use was extended to infants as young as two months. Today it is mandatory in 44 states. The conjugated vaccine is expensive and its protection is temporary. Thus, doctors are recommending four shots: three doses two months apart beginning at two months, and another booster at fifteen months."

"Authorities remain concerned about an increased likelihood of contracting the Hib disease during the first several days after receiving the vaccination. Another experimental Hib vaccine, made from human blood products, is under consideration."

Information taken from: Vaccines: Are they Really Safe and Effective? A Parent's Guide to Childhood Shots, by Neil Z. Miller.

What's Happening at VRAN...

We were a presence at the Parents and Kid's Show again this year and hope that we were able to raise the health consciousness of the visiting parents. Our thanks to Heather Stephen, who ran the table.

VRAN attended the First Regional Conference for NUPATH, the National United Professional Association of Trained Homeopaths in November. Patty Smith, the co-ordinator, gave a talk about homeopathy and vaccines and was kind enough to write an article on the topic for VRAN NEWS in this current issue.

Edda West is busy on the West Coast. She attended the ALIVE conference at the Healthy Living Expo, and her lecture on vaccinations was well received.

Health Survey

Dr. Colette Harman, who volunteered to create the health survey that will document the health of unvaccinated children, is looking for feedback and suggestions from professionals in the health field. Her address is 890 Queen Street, Kincardine, Ontario, N2Z 2YZ. Her phone number is 519-396-6474. Further along, we will be looking for scientists and researchers, medical students looking for a PHD thesis for example, who will be able to study the data we have collected.

Thanks to...

We would like to thank Jennifer Barnes for volunteering to create a book keeping system for us.

Website Help Required

A website is being planned. Please contact Nancy James at tjames@autobahn.mb.ca if you would like to help.

Dr. Moskowitch—An End to Compulsory Vaccination

Dr. Moskowitch's lecture at The Old Mill on November 9th was a great success. Dr. Moskowitch carefully covered the recent history of vaccination studies. His main emphasis was that an acute reaction to an illness or infection, such as a high fever, is a sign of good health. Anecdotal evidence over the many years of his medical practice has shown him that vaccination damage is most obvious in a slow, labouring chronic reaction to illness or infection.

The Naturopathic Association that hosted the lecture must have been pleased with the results: the hall was full, and many small babies added their tiny voices to the lecture. VRAN set up a table at the lecture and was rewarded by the response. Many people came by to ask questions and buy information packages and newsletters.

A Request From a Journalist:

I need information, phone numbers and e-mail addresses of as many vaccination victims as possible—anyone who has been damaged by an inoculation. I know journalists in Kingston, Hamilton, and Vancouver. I need victims who are local to these communities and willing to speak on camera.

Please spread the word and my e-mail address, Nick Leach niknak@ionsys.com

VRAN RESOURCES & INFORMATION LIST

Vaccination: 100 Years of Orthodox Research Shows That Vaccines Represent a Medical Assault on the Immune System

Viera Scheibner Ph.D.
Koran Publications 1-800-537-3001
fax: 215-567-5601

The Immunization Resource Guide

by Diane Rozario
also available from Koran Publications

Legitimate Immunity Versus Medical Chaos: Transcending the Futile Dream of Universal Immunization

Dr. R. Obomsawin
Canadian Natural
Health Society
P.O.Box 92, Westmount, Que. H3Z 2T1

Immunization: The Reality Behind The Myth

Walene James

What Every Parent Should Know About Childhood Immunization

Jamie Murphy
Earth Healing Products, 120 Poplar St.,
Boston, MA, 02131.

Vaccinations: Are They Really Safe and Effective?

Neil Z. Miller

Vaccinations and Immune Malfunction & The Dangers of Immunization

These excellent booklets describe immune system function & how vaccines impair immunity.

Philosophical Publishing Co. Box 220,
Quakertown PA, 18951 (215) 536-5159.

How To Raise a Healthy Child In Spite of Your Doctor

Dr. Robert Mendelsohn
This book is a classic, a must for every parent who wishes to take back responsibility for the health of the family. It has a full chapter on childhood illness and vaccines.

The Immunization Decision: A Guide for Parents

Dr. Randall Neustaedter.

Vaccination, Social Violence and Criminality: The Medical Assault on the American Brain

Harris L. Coulter
A penetrating work by a renowned medical historian.

Resources continued on page 12

A Shot In The Dark

Harris L. Coulter & Barbara Loe Fisher
A thorough research of DPT Vaccine and adverse reactions.

Vaccinations and Immunization: Dangers, Delusions and Alternatives

Dr. Leon Chaitow.

This book examines the history of vaccination. It explores alternatives and enhancement of immune system function.

Vaccinations: The Rest of The Story

A selection of articles, letters and resources.

publ. by Mothering Magazine. P.O. Box 1690—Santa Fe, New Mexico—87504.

The Case Against Immunizations

Dr. Richard Moscovitch

available from American Institute of Homeopathy—1500 Massachusetts Ave. N.W. Washington D.C. 20005.

But Doctor, About That Shot

Dr. Robert Mendelsohn

available from the Doctor's People, 1578 Sherman Ave. S., 318 Evanston 11. 602201.

What About Immunizations? Exposing the Vaccine Philosophy

Cynthia Cournoyer

Nelson's Books P.O. Box 2302 Santa Cruz CA 95063.

NOTE: Many of these titles are also available from Parent Books in Toronto (416) 537-8334
fax (416) 537-9449

IMMUNIZATION INFORMATION ON THE INTERNET

The following is an updated list compiled by Peter Mancor, an executive member of the Immunization Awareness Society of New Zealand:

New Atlantean Immunisation Resources

<http://www.new-atlantean.com/global/vaccine.html>

A very good list of resources; global pro-choice vaccine groups; books, tapes and videos from around the world.

Vaccination Information and Awareness

<http://www.eden.com/~via>

A good site with many links to other sites including vaccine manufacturers.

Vaccination Information Paradigm

<http://www.cco.net/~trufax/vaccine/vaccine.html>

Very good information which seems to be updated regularly.

Dispelling Vaccination Myths

<http://www.livelinks.com/sumeria/health/myth2.html>

Well documented report that is revised periodically (last July 14th, 1996)

The Hidden Debate

<http://www.firehorse.com.au/feline/imm/imm.html>

Interesting report

National Vaccine Information Centre

<http://www.909shot.com>

Run by Dissatisfied Parents Together (DPT)

Global Vaccine Awareness League

<http://www.pages.prodigy.com/gval/>

Started by a mother whose 33 month child died just after a DPT shot—moving story.

How to Legally Avoid Immunisation

<http://medmarket.com/tenants/reiddds/herbplus/info/noshots.html>

How to avoid immunisation in the USA

Natural Immunity Network

<http://www.iwayco.com/~niin/index.html>

<http://www.newagenet.com/lightparty/health/vaccine.html>

<http://home.sprynet.com/sprynet/Gyrene/Home.htm>

Good information on SIDS from Concerned Parents for Vaccine Safety.

<http://www.unc.edu/~aphillip/www/vaccine/informed.html>

Includes testimonials from parents of Vaccine damaged children.

<http://www.ozemail.com.au/~theswami/vaccineccdanger.html>

Ramon's health page includes vaccine info.

<http://www.pnc.com.au/~cafmr/index.html>

Campaign Against Fraudulent Medical Research. Harris Coulter, PhD, co-writer of books about vaccines, is a member of this group.

see [~cafmr/online/vacc.html](http://cafmr/online/vacc.html)—vaccine report.

<http://www.smalpia.net/galleria/wallace/home.htm>

What Doctors Don't Tell You magazine website. Very good alternative medicine information as well as vaccine updates.

<http://www.healthy.net/clinic/familyhealth-center/children/vaccination>

Vaccination Information Resources includes information on books such as The

Vaccine Guide: Making an Informed Choice by Dr. Neustaedter, and other books.

<http://www.panix.com/~iayork/immunology/index.shtml>

A PRO-vaccination site, but the arguments for are not very good in my opinion (are they ever?)

<http://www.genweb.com/Dnavax/main.html>

Leading edge research—what's new in DNA vaccines (the latest and greatest). What are they? Find out!

<http://www.gn.apc.org/inquirer/jan.htm>

The Web Inquirer—so called: the first international investigative magazine on the web—an interesting article on vaccination.

<http://www.holonet.net/homepage/1v.htm>
Vaccine Weekly magazine—the only weekly magazine that covers vaccination.

For the medical world—interesting new stuff. You can even get e-mailed every time a new vaccine is out if you would like to know!

<http://www.ozemail.com.au/~shotinfo/VAN>—a pro-choice group in Australia.

<http://home.earthlink.net/~emptherapies/>
Dr. Harris Coulter's own web site. He has written books about vaccination and medical research.

noshots@sprynet.com

Concerned Parents For Vaccine Safety

Medical Information:

<http://www.achoo.com>

<http://www.medscape.com>

<http://www.healthy.net/library>

Immunisation Awareness Society

<http://www.netlink.co.nz/~ias/ias.htm>

VRAN MEMBERSHIP AND ORDER FORM

Suggested Annual membership - \$25 or \$50 professional

Includes Newsletter 4X a year & ongoing support of vaccination risk education

P.O. Box 169, Winlaw, BC, V0G 2J0 – phone/fax: 250-355-2525. E-mail: eddawest@netidea.com

Name/Organization: _____

Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Reason for Interest _____

Your Questions, Personal
Stories _____

(Please use back of page or additional paper if necessary.)

INFORMATION PACKAGES & FUNDRAISING

_____ General information package \$7.00 + \$2.50 (postage)

_____ Hepatitis B info. Package \$5.00 + \$2.50

(If ordering both the general & hepB information package, postage is discounted to \$3.00)

_____ Set of 9 back issues of VRAN Newsletter.....\$15.00+ \$3.00

_____ Y2K-AWAKENING Poster \$13.00+ \$2.00 postage

- 2-5 posters, please add \$3.00 for postage

- more than 5 posters, add 5% of cost of order for postage

*10% discount applies to bulk orders of more than 5 maps.

VRAN's special fundraiser for 1999 is the beautiful Y2K AWAKENING poster. Designed as an educational tool, the poster details the critical areas of concern arising from the year 2000 computer crisis. Even if you don't own a computer, chances are that Y2K will touch your life. Meticulously researched, the poster offers a global overview of the facts, follies, possibilities, probabilities and certainties that we as a community will face. It is a vast and complex problem – perhaps the greatest challenge modern, technological society has yet had to face. The poster details a global overview of mission critical systems, and is an essential resource to help map the pathways in preparation for the many levels of challenges ahead.

