

## Overview of Concerns

### 1. Rate of Autism

Prior to 1970 the rate of autism was less than 1 in 10,000. Today, autism affects more than 1 in 66 Canadian children (age 5 – 17) and 1 in 36 in the U.S. At the current rate of growth, autism is projected to affect 1 in 2 children by 2032. <sup>17</sup>

The impact of autism on our education, medical, social support systems and families is catastrophic. Yet our governments, the medical industry and mainstream media virtually ignore this epidemic.

*“The science now exists – in abundance. Its up to the adults in the room to read it, understand it, and change those devastating policies as soon as possible in order to end the autism epidemic.”*

~ J. B Handley, [How to End the Autism Epidemic](#)

### 2. Infant Mortality

Canada is experiencing an unacceptable level of infant mortality. Canada has a higher rate of infant mortality than some third world countries. All European OECD countries have a lower infant mortality rate than Canada's. <sup>1</sup> We can no longer afford to ignore this reality or claim ignorance.

A study comparing the rate of vaccination with the rate of infant mortality in first world countries identified a relationship between the number of vaccines given in the first year of life and the rate of infant mortality. The more vaccines given, the higher the rate of infant death. <sup>11</sup> In July 2017, the U.S. Court of Federal Claims ruled that there was “*preponderant evidence*” supporting the claim that vaccines “*actually caused or substantially contributed*” to Sudden Infant Death Syndrome (SIDS). <sup>12</sup>

### 3. Toxic Ingredients in Vaccines

Researchers have established without any doubt that aluminum adjuvants in vaccines can be transported into the brain and provoke ongoing chronic brain inflammation. With the 2018 vaccination schedule, high quantities of aluminum are injected into an infant's fragile microenvironment during these highly sensitive early years of brain formation. An infant in Canada can receive more than **7,210 micrograms** of aluminum in the first year alone.

We now know that the brain has its own immune cells (the microglia), which play a crucial role in brain development. These immune cells are highly sensitive to inflammation. Vaccinations, *by design*, creates inflammation which then triggers the

microglia to secrete highly toxic chemicals that can lead to a chronically inflamed state in the brain resulting in the destruction of connective synapses. <sup>4 5</sup>

This inflammation can result in life-long brain injuries, ADHD, mental illnesses, seizures/epilepsy, schizophrenia and autism. A large field of study has identified that cytokines, triggered by excessive immune activation, are involved in brain injury leading to autism. The scientists at *Vaccine Papers* extensively discuss the impact of inflammation on the brain during fetal and early life brain development. <sup>6</sup>

*"In particular, aluminum in adjuvant form carries a risk for autoimmunity, long-term brain inflammation and associated neurological complications and may thus have profound and widespread adverse health consequences."* <sup>7</sup>

~ Chris Shaw PhD and Lucija Tomljenovic PhD., Neuroscientists

Vaccines still contain mercury in spite of its known neurotoxicity. Vaccine manufacturers use mercury in the production of whooping cough, tetanus, meningococcal and Hepatitis B, and as a preservative in multi-dose vials of the influenza vaccine. Mercury is the most toxic substance known that is not radioactive.

The acceptable limit of mercury in drinking water in Canada is 1 part per billion. A liquid with 200 ppb is treated as toxic waste. Several brands of the infant influenza vaccine have 25,000 ppb. Many of the regular influenza vaccines have 50,000 ppb of mercury. It is scientific fact that brain neurons permanently disintegrate in the presence of mercury.

*"In fetuses, infants and children, low-dose exposure to mercury can **cause severe and lifelong behavioural and cognitive problems**. At higher exposure levels, mercury may adversely affect the kidneys, the immune, neurological, respiratory, cardiovascular, gastrointestinal, and haematological systems of adults."* <sup>8</sup>

~ Canadian Medical Association

Additionally, mercury and aluminum work synergistically such that their impact is significantly greater when given close together. Both of these neurotoxins are known to cause permanent neurological damage in humans. **No clinical studies** have been conducted to establish the safety of injecting aluminum adjuvants into infants and children. To continue to inject our fetuses, children and adults with mercury and aluminum is immoral and needs to stop.

*The CDC's repeated assurances that all of these ingredients are safe are hardly persuasive or even credible, since they have failed to provide any evidence of the slightest attempt to investigate them.*

~ Dr. Richard Moskowitz, MD  
Vaccines – A Reappraisal

#### 4. Lack of Evidence of Vaccine Safety

Of great concern is that vaccines are not studied against a neutral placebo. Most vaccine safety trials use control groups consisting of other vaccinated populations or placebos containing aluminum, formaldehyde, polysorbate 80, MSG, and other vaccine ingredients. These are not true placebos. Vaccine safety trials that are conducted without a neutral placebo *cannot* determine if a product is safe. None of the vaccines on the current childhood vaccination schedules were tested against a neutral placebo.

The failure of the vaccine industry to use a neutral placebo undermines the integrity of health agency claims that vaccines have been proven safe and effective. It is dishonest to make the claim that the immunization program “*has been developed using the best scientific evidence available . . . and overwhelming scientific evidence shows the safety and effectiveness of immunizations*”.<sup>9</sup> There is persistent criticism in the scientific literature that the methodology to “safety test” vaccines is carefully calculated to not show safety issues.

In 2017, the *Journal of Translational Science* published the first independent, non-industry funded study comparing the overall health of vaccinated and unvaccinated 6 to 12 year old children in the United States.<sup>10</sup> The results of the study reveal that while vaccinated children were significantly less likely to have chicken pox or whooping cough, they were **significantly more likely** to have pneumonia, allergies, otitis media (ear infection), eczema, a learning disability, Attention Deficit Hyperactivity Disorder (ADHD), Autism Spectrum Disorder, neuro-developmental disorders (NDD), and chronic illness. The conclusions of the study were as follows:

*“ . . . the strength and consistency of the findings, the apparent “dose-response” relationship between vaccination status and several forms of chronic illness, and the significant association between vaccination and NDDs all support the possibility that some aspect of the current vaccination program could be contributing to risks of childhood morbidity. **Vaccination also remained significantly associated with NDD** after controlling for other factors . . . ”*

Vaccines have not been tested for the ability to cause cancer (carcinogenicity); the ability to damage an organism (toxicity); the ability to damage genetic information within a cell (genotoxicity); the ability to change the genetic information of an organism (mutagenicity); the ability to impair fertility; and for long-term adverse reactions. This is clearly stated in the vaccine product information inserts. For a vaccine to be administered without adequate safety testing is nothing short of medical malpractice.

The medical industry has not been able to provide substantive evidence that children receiving the current vaccine schedule have better overall health than those who don't. Research conducted by Dr. Peter Aaby found that DPT vaccines increased mortality in African children by a factor of five. “*All studies of the introduction of DTP have found increased overall mortality.*”<sup>18</sup>

Until large, long term *vaccinated vs. unvaccinated* research is conducted, any claims of vaccine safety and effectiveness is an *assumption* and not scientifically proven. Further, many pre-licensure trials do not include patient populations most at risk of serious adverse events. This is not responsible science. In fact, this is not science.

## 5. A Higher Standard

In the '**Open Letter from International Organisations to the WHO on the Issue of Vaccine Safety**' (September 21, 2018) <sup>13</sup> signed by more than 200 international organizations:

*"Recently, independent researchers and laboratories have discovered that many vaccines are contaminated with retroviruses and polluted by nanoparticles. High levels of aluminium associated with vaccine adjuvants have been found in the brains of autistic children or in people suffering from neurological disorders such as Alzheimer's disease." "To restore confidence lost, we insist that before any kind of recommendation or authorisation is issued, ALL vaccines pre-qualified or recommended by the WHO will be submitted to:*

- *Extensive clinical trials conducted by bodies independent from the manufacturers*
- *Middle and long-term studies on efficiency and safety, not 'days'*
- *Tests for carcinogenic properties*
- *Tests around fertility issues*
- *Tests on pregnancy, spontaneous abortion and the developing foetus*
- *Mutagenic effects (changes induced in the DNA)*
- *Tests for effects on the neurological system and development of the brain*
- *Real inert placebo testing, which is almost never done on vaccines*

*We also insist that the WHO should provide studies on:*

- *Adjuvants and preservatives such as aluminium and mercury and their bioaccumulation*
- *Other toxic material used, such as polysorbate, Tween 80, formaldehyde*
- *Vaccine safety and the age of vaccine administration*
- *The impact of full vaccine schedules on the global health of a population*
- *The comparison of vaccinated versus unvaccinated populations in global health terms*
- *Viral transmission of people recently vaccinated with live virus vaccine such as measles, mumps, rubella, varicella, influenza or oral polio vaccine for example.*
- *In particular, we ask that the use of combined vaccines and the same-day administration of multiple vaccines be thoroughly investigated."*

Canada's citizens deserve no less of a standard of oversight.

## 6. Lack of Legal Oversight

Justice Sotomayor and Justice Ginsburg, in their dissent of the 2011 Supreme Court ruling (RUSSELL BRUESEWITZ, ET AL., PETITIONERS v. WYETH LLC, FKA WYETH, INC., FKA WYETH LABORATORIES, ET AL.), correctly pointed out that vaccines free from liability give no reason for vaccine makers to improve design, to mind how they are distributed, or to even keep up with basic or emerging science.

They stated:

*“Vaccine manufacturers have long been subject to a legal duty, rooted in basic principles of products liability law, to improve the designs of their vaccines in light of advances in science and technology. Until today, that duty was enforceable through a traditional state-law tort action for defective design.” This “**decision leaves a regulatory vacuum in which no one ensures that vaccine manufacturers adequately take account of scientific and technological advancements when designing or distributing their products.**”*

The vaccine products our children receive today are “*liability free vaccines*”. These vaccines are a fundamentally different product line, subject to minimal oversight, and vaccine makers have no legal or financial impetus to design them well or even manufacture them cleanly. We all ought to be philosophically opposed to our children receiving ‘liability free’ vaccine products.

## 7. Fraud, Corruption, and Deception

It was recently revealed as a result of a Federal court subpoena that Health and Human Services (HHS) in the United States failed to provide even one bi-annual safety report to Congress as was required under the 1986 National Childhood Vaccine Injury Act that gave legal immunity to vaccine manufacturers.

*This legal immunity was not designed to protect citizens.  
It was designed to protect the pharmaceutical industry.*

A further recent development is the disclosure by Robert F. Kennedy Jr. with **Children’s Health Defense** that Department of Justice lawyers representing the Department of Health and Human Services (HHS) involved in the 2007 Omnibus Autism Proceedings committed fraud and obstruction of justice.<sup>14</sup> These actions led to a denial of justice and compensation for over 5,500 families who filed claims for vaccine induced brain injuries resulting in an autism diagnosis.

The fraud by the two DOJ attorneys directly influenced the 2011 *Bruesewitz v. Wyeth* Supreme Court decision, which prevented families seeking redress for vaccine injury in the civil court system. Since this miscarriage of justice, roughly one million children have been diagnosed with autism in the US. Canada’s vaccine policy has

largely mirrored the recommendations by the Centre for Disease Control in the United States.

In 2014, senior CDC scientist Dr. William Thompson revealed the Centre for Disease Control fraudulently withheld research data with the express intention of misleading the public about the vaccine-autism link. Dr. Thompson has released more than 200,000 pages of documents to support his claim.

We rely on government to ensure that vaccines are safe and assume that federal and provincial licensing and regulation are reliable assurances that the vaccines we receive are effective and safe. It is evident that protecting the reputation of vaccines is more important to health officials than ensuring the products are safe.

*It appears that our mission is being influenced and shaped by outside parties and rogue interests... and Congressional intent for our agency is being circumvented by some of our leaders. What concerns us most is that it is becoming the norm and not the rare exception.*

*We are often directed to do things we know are not right.*

*These questionable and unethical practices threaten to undermine our credibility and reputation as a trusted leader in public health.*

*~ CDC Scientists Preserving Integrity, Diligence and Ethics in Research  
August 29, 2016 <sup>15</sup>*

Dr. Peter Gotzsche, world-renowned scientist, medical doctor and founder of the Nordic Cochrane Collaboration states – “*The main problem with our healthcare system is that the financial incentives that drive it seriously impede the rational, economical and safe use of drugs.*” Dr. Gotzsche adds - “*Drug companies have deliberately hidden lethal harms of their drugs by fraudulent behavior, both in research and marketing, and by firm denials when confronted with the facts.*” “*The morally repugnant disregard for human lives is the norm.*” <sup>16</sup>

Dr. Gotzsche is not alone in his claim that the drug industry has bought doctors, academics, journals, professional and patient organizations, university departments, journalists, regulators, and politicians. This co-opting and corrupting of science, regulatory agencies, media, doctors, and politicians must end.

*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.*

*~ Dr. Marcia Angell, MD  
Editor - The New England Journal of Medicine*

## References

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<sup>12</sup> [https://ecf.cofc.uscourts.gov/cgi-bin/show\\_public\\_doc?2013vv0611-73-0](https://ecf.cofc.uscourts.gov/cgi-bin/show_public_doc?2013vv0611-73-0)

<sup>13</sup> <https://childrenshealthdefense.org/child-health-topics/policy-safeguards/open-letter-from-international-organisations-to-the-who-on-the-issue-of-vaccine-safety/>

<sup>14</sup> <https://childrenshealthdefense.org/child-health-topics/righting-wrongs/request-for-congressional-investigation-fraud-and-obstruction-of-justice/>

**<sup>15</sup> The CDC Is Being Influenced By Corporate and Political Interests.**

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**<sup>17</sup> Meta-Analysis madness in vaccine-autism science**

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