



VRAN-Vaccination Risk
Awareness Network Winter 1997
P.O. Box 169
Winlaw, B.C. V0G 2J0

Newsletter

VACCINATION RISK AWARENESS NETWORK

Editorial

One More Epiphany About Vaccines

by Meg Edwards

I became aware of the dangers of vaccines when my vet vaccinated my eight year old cat who was suffering from an immune-deficiency disease casually called feline AIDS. My cat was sick and paralyzed hours after the shot. He died slowly and painfully over the next week.

The vet told me that even though he had been aware of my cat's disease and his weakened state, he decided to vaccinate to test the cat's immune system. The vet thought that the shot would either make the immune system stronger, or kill him. He never warned me about the possible fatal consequences when he insisted on the vaccination.

Some interesting points about vaccination were made apparent to me:

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A NEW HOME
AND A NEW
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1) The health administrators will not tell you about the dangers of the vaccines.

2) My cat had been vaccinated his whole life against diseases and he still became infected with the mysterious feline AIDS.

3) Despite the cats weakened state he was given a vaccination that would clearly kill him.

I learned a valuable lesson through the death of my beloved cat. When my child was born six months later I knew that I had to reconsider vaccinations. My midwife had never immunized her child so I followed her recommendation to read Vaccines: Are the Safe and Effective by Neil Z. Miller. At first I thought about picking and choosing vaccines, or just putting them off until the child was older. But, as my reading continued I came to the opinion that immunisation has not been proven to be safe or effective. Studies are beginning to show, in fact, that we may be harming our own natural immune system.

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Vaccination and Medical Law - Policies, Politics and Ethics

*Taken from a speech given by
Edda West to the Ontario
Chiropractic Convention,
London, Ontario, September,
1996:*

A troubling dilemma of the vaccination issue is the 'compulsory', aspect of the Immunization of School Pupils Act and the use of the education system as a policing body to enforce this piece of legislation. It seems to me that when one ministry (the Ministry of Health) can impose its will on another, (the Ministry of Education) and compel an invasive medical procedure to be performed on a large population of school children, while

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Read all about it...

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Update.....Page 8**

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Vaccine.....Page 12**

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Vaccinate.....Page 18**

Immunization Information on the Internet

The following is a list compiled by Peter Mancer, an executive member of the Immunisation Awareness Society of New Zealand.

Immunisation Sites

*** New Atlantean Immunisation Resources -**
<http://www.new-atlantean.com/global/vaccine.html>

A very good list of resources and global pro-choice vaccine groups. A good list of 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/vacindex.html>
Very good info which looks 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)



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 vac-

cines and advises them of legal requirements of doctors to report adverse reactions. VRAN also advises parents whose child has reacted adversely and that adverse reactions should precipitate the parent 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 our communities:

VRAN maintains subscription to medical journals and other publications, and keeps in touch with experts and groups of a similar purpose around the world to providing a means of tracking relevant research and its results and any other pertinent information.

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

Disclaimer:

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.

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Awareness Network**
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Toronto, Ontario M5V 1E9

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67 SHIER DR., WINNIPEG, MB R3R 2H2
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Vaccination and Medical Law - Policies, Politics and Ethics

Cont'd...

subjecting parents to fear tactics, harassment, coercion and threats of the loss of their children's right to an education, that fundamental concerns about the partnership between government and the medical monopoly are brought to the fore.

My central concern is that mandatory vaccination laws violate 'informed consent' - a basic tenet of ethical medical practice and must be challenged if we are to stop the regressive erosion of our democratic freedoms. If we, as a society, continue to passively accept the accelerating thrust of enforced mass medication, we may be setting the stage for further draconian measures that will impact destructively on our freedom of health care choices.

In an age when more and more people are leaning toward the many diverse holistic choices available to us in the healing arts,

and as more people embrace health creating modalities such as chiropractic, naturopathy, herbalism homeopathy, oriental medicine, etcetera, one must wonder how it is that our elected governments remain poised to impose on the general population the arbitrary dictates of the medical monopoly that is itself a puppet of the multinational pharmaceutical drug industry.

Last winter's measles vaccination campaign revealed that very few parents knew they had a legal right to exemption for their children - in fact, in most cases, people were told either by school officials or health department personnel that there was no exemption, or that it would be rescinded in September at the beginning of the school year. Parents who had already signed consent forms did not know that they could legally withdraw their consent at any time. Many were afraid of allowing their children

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Editorial

One More Epiphany About Vaccines

Cont'd...

I have made my choice not to vaccinate and I am comfortable with it. But two things prey on my mind. The first is our precarious hold on our right to accept or reject medical treatment. We all know that in some American States vaccinations are mandatory and parents who refuse to immunize find themselves in a custody battle with child welfare authorities. In Canada we still have legal control over our bodies. But we must be vigilant. The notarized affidavit that is required for non-vaccinated children to attend school is the first place to concentrate. It was through the great effort of a group of concerned parents, including Edda West, founder of this newsletter, that the government conceded the right to reject vaccinations. At VRAN, we are keeping a sharp lookout and maintaining the pressure. For example, we would like the word mandatory taken out of vaccination literature. It is false and misleading.

My other concern is the persistent creation of new and bigger vaccines. While there is a growing number of people rejecting vaccines and an expanding data base of vaccine risk information, the general tone of the mass media and public health authorities is pro-immunization. New vaccines are coming out everyday: there is one that sterilizes women, super vaccines that combine all the known childhood diseases in one shot, vaccines for flues, and before you know it, there will be a vaccine for the common cold.

Most perverse of all is the creation of a vaccine for AIDS. Injecting a healthy immune system with the AIDS virus, no matter how diminished, is a terrifying proposition. Injecting an HIV Positive person with the same vaccine would be, in my opinion, a death sentence. We know so little about the immune system that we cannot yet explain why some people can be exposed to a disease and not be infected. One thing we do know, however, is

that vaccines tax the immune system. The toxic cocktail of chemicals, foreign animal protein and disease is a like a tanker of nuclear waste floating through our blood system. We can only hope, for those of us who have been vaccinated like pin cushions, that the tanker does not run aground.

The precariousness of our delicate immune system is especially true for those who have become HIV positive. I do not see the heralded new vaccine against AIDS, still in development, as a cure. It would seem to be an impossible, if not a preposterous task, to create a vaccine that could boost an immune system that is being simultaneously weakened by the same vaccine. We should never have assumed we could tinker with the immune system. We are only beginning to learn about the devastating consequences of our actions. We cannot fight AIDS with the same tool that has wreaked such violence on our immune systems. •

Vaccination and Medical Law - Policies, Politics and Ethics

Cont'd...

to be vaccinated, yet were also fearful of what might happen if their child got measles. The children were also scared to death - literally - as schools were given pre-written scripts by the ministry of health to deliver over PA systems, the looming threat of measles as a killer disease.

Generating a climate of fear, misinformation, denial of legal rights and incomplete disclosure of vaccine risks are common tactics that spearhead vaccine marketing initiatives. These are then dutifully packaged as "essential public health measures" and thrust onto the population by governments who pledge allegiance to orthodox medicine's directives. And parents are expected to comply without hesitation, to an ever increasing arsenal of live viruses and genetically engineered biological agents.

The aggressive politics of vaccine marketing is a global tyranny emanating from the World Health Organization's highly accelerated drive to vaccinate every child on the planet. Known as the Expanded Program of Immunization (EPI) or the Universal Childhood Immunization initiative (UCI), it stands worldwide as the top health programming priority among UN systems. Member countries (Canada included) are committed to an alliance with the WHO'S directives and to abide by its relentless determination to achieve universal coverage.

The World Health Organization has declared its intention to "protect the right of every child to be immunized" (as if vaccination were synonymous with adequate food and nutrition, clean water, and a decent standard of living.)..... to be delivered at all costs, to all populations, with the matter of personal or parental choice now teetering on the brink of extinction.

Such a declaration annoints itself with a special privilege that exempts it from the expectations, attitudes, and ethics of the general body of law that protects the public from possible abuse of medical power. Such a statement is a declaration of war on every intelligent and caring parent who has made a conscious, educated choice to protect her child from a perceived medical assault with viral/toxic material that

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INTERNATIONAL VACCINATION INFORMATION AND NEWSLETTER GROUPS

What Doctors Don't Tell You

4 Wallace Road, London, England, U.K.
N1 2PG

Immunization Awareness
P.O. Box 56048
Dominion Road
Auckland

National Vaccine Info Centre
(Dissatisfied Parents Together)
512 West Maple Street, #206, Vienna
VA, 22180
U.S.A.

Health Care Reform Group
P.O. Box 421
Glebe, New South Wales, 2037.
Australia

The International Vaccination
Newsletter
Krekenstraat 4, B3600, Glenk,
Belgium
Attn: Dr. Kris Glanblomme

The Informed Parent
19 Woodlands Road,
Harrow, Middlesex, England
HA1 2RT
Tel/Fax: 0181 861 1022

Ohio Parents for
Vaccine Safety
251 West Ridgeway Dr.,
Dayton, Ohio - 45459
Tel/Fax: (513)435-4750

Vaccine Information
& Awareness
PO Box 203482
Austin, TX 78720
512-832-4176 (phone)
512-873-8771 (fax)
via@eden.com (email)

Immunization Information on the Internet

* The Hidden Debate -
<http://www.firehorse.com.au/feline/immv/imm.html>
Interesting report

* National Vaccine
Information Centre -
<http://www.909shot.com>
Run by Dissatisfied
Parents Together (DPT)
- good info.

* 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.

Vaccination and Medical Law - Policies, Politics and Ethics

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"When a patient reads, understands, and signs a written consent to treatment or surgery there is express consent..... and express consent is established when a patient declares his willingness to submit to a medical treatment."

Immunization Information on the Internet

* **How to Legally Avoid Immunisation** -
<http://medmarket.com/tenants/reiddds/herbplus/info/noshots.html>
How to avoid immunisation in the USA - interesting reading.

* **Natural Immunity Network** -
<http://www.i-wayco.com/niin/index.html>

Medical Information:
*<http://www.achoo.com>
*<http://www.medscape.com>
*<http://www.healthy.net/library>

can deliver unknown combinations of disease and degrade the immune system.

To enshrine such a declaration effectively mutes all dissenting views, all possible concerns about adverse reactions, chronic health problems, provocation diseases engendered by vaccines, and silences the huge body of international and historic evidence that points to vaccines causing multiple health problems, injury and death.

And at whose urging would such an astounding policy be formulated, to be thrust down the collective throats of all member countries? A glance at the powerful vested interests that dictate international vaccination policies gives us a clue. Dr. Glen Dettman speaking at the 1992 Immunization Awareness Society Symposium (1992) in New Zealand, and quoting from The Lancet (Oct.19/91), advised us that the Children's Vaccine Initiative had five founding agencies who "help guide vaccine decisions" - their names? "WHO, UNICEF, UNDP, The Rockefeller Foundation (which comprises Hearst Newspaper Empire), Chase Bank, all of the Major Pharmaceutical Companies and their subsidiaries, the International Monetary Fund and the World Bank 1" In a humorous aside, Dr. Dettman said "Well may we say with apologies to St. Paul, we wrestle not against flesh and blood but against the might and powers of the pharmaceutical companies and the medical profession."

As individual governments steamroll ahead with coercive vaccination policies, making a mockery of medical ethics that enshrine the right of individuals to self determination around medical procedures, it is somewhat reassuring to know that in Canada, the spirit and intent of medical law upholds a person's rights to autonomy and full participation in the decision making process around any medical treatment. The legal principles and ethics that have arisen out of case law and Supreme Court decisions, comprise a body of knowledge that grants "Every individual's right to information on material risks and the fundamental right of persons to be free from unwanted physical interference. Medical care is

wrongful and a 'battery' unless the patient has given consent to it. It is an essential prerequisite to the provision of medical services." (1) Informed consent is the underlying principle upon which the associated legal tenets are constructed. For example, it is not enough to sign a consent form. "When a patient reads, understands, and signs a written consent to treatment or surgery there is express consent.....and express consent is established when a patient declares his willingness to submit to a medical treatment."

We are told by the authors of "Canadian Medical Law" - a comprehensive text written for physicians, nurses and health care professionals that in recent years, growing concern for patient's rights, resulting in "greater emphasis on patient's active involvement in the decision making process reflects the changing trend in physician/patient relationship from the paternalistic model to participatory model." The physician/patient relationship is in a period of evolution, where the old paternalistic model of the physician holding a stronger position based on a monopoly of power and knowledge, has shifted to emphasis on patient's active involvement in the decision making process and hence perception that the "relationship is becoming more egalitarian and participatory."

The authors of "Canadian Medical Law" point out that patients are becoming more sensitive, more assertive, more knowledgeable, more willing to take control of matters involving their health care and that the 'Doctor Knows Best' attitude is becoming increasingly unacceptable. This changing trend is attributed to factors such as the consumer movement helping raise consciousness in the marketplace, TV & media informing the public of medical issues and treatments, the feminist movement helping increase sensitivity to unequal relationships and the Canadian Charter playing a role in focusing on patient's rights. And then of course, there are the law suits, and court cases that have upheld the fundamental right of patients' self determination and the importance and value that the law attributes to informed consent.

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Vaccination and Medical Law - Policies, Politics and Ethics

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All of these legal tenets, case law and ethics that construct the framework of patients' rights, (and legal opportunity for restitution following medical treatment that has caused further injury to the patient) do not address the ethical and legal principles that need to be considered under the separate category known as "preventive" medicine. So called 'preventive' medicine is top heavy with increasing numbers of vaccines aggressively thrust on the population. From cradle to grave, these active viral and bacterial matter are injected primarily into healthy people who are not in need of medical treatment, to whom full disclosure of material risks is not given, and from whom true informed consent is not obtained. When adverse reactions and health injuries result from the injection of these live biological, the victims are shrugged off by an organized conspiracy of denial, and told that the reaction is "coincidental" and would have happened anyway.

There is no clear ethical dissertation or legal preamble that enshrines the rights of parents to protect their healthy, unsick,

uninjured children from unwelcome medical intervention such as vaccination. Vaccination is an invasive medical procedure, performed primarily on healthy infants and young children, who are not in need of a medical treatment per se, and who must depend on their parents to make the best possible decisions for them. Particularly worrisome is the hazy non-definition of age of minority, where parents reported that during the measles campaign, their children had been manipulated into accepting vaccination at school against the parents' express decision to the contrary. The prevailing mood here is that the state and medical authorities know better than the parents what is good for the child. In a personal communion with Professor John Irvine, co-author of "Canadian Medical Law", he confirmed that "bullying a parent into accepting vaccination for a child is a battery."

Ominous tones are being set: Ohio Parents for Vaccine Safety quoted in a recent newsletter "The American Medical

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Vaccination and Medical Law - Policies, Politics and Ethics

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Association passed a resolution opposing religious exemptions for vaccines because these exemptions violate so-called standard medical practice" and in the same newsletter reporting on legislative hearings in Michigan, "one pediatrician equated failure to vaccinate a healthy child with failing to provide medical care to an acutely ill child." OPVS further reports that generally speaking, vaccine policy makers in North America recommend that parents with children killed or injured by vaccines should go ahead and vaccinate siblings! (2)

In speaking to parents and particularly mothers over the years, and listening to their feelings of trepidation before the baby shots, there is often a gut level, visceral fear that comes up. It is a rallying of primal, protective, maternal instinct to pick up the baby and run. But intimidated by the doctor, or pediatrician, who holds her enthralled with "Doctor Knows Best" and "this is for your baby's protection - not to immunize would be irresponsible", the mothers suppress their inner wisdom, that voice of caution, which says...."MY baby is in glowing good health and I don't feel good or safe about injecting her with these drugs at this vulnerable age...I'll wait a bit and find out more."

The old paternalistic model remains in full force all around the world when it comes to vaccination. Where vaccination is concerned, not only does the "doctor know best", but the state knows best and we are fast coming to a place of zero tolerance for an informed choice not to vaccinate. The prevailing mind set and dogma that is now solidly entrenched has placed vaccination procedures above the law. Unlike any other area of medical service, the enforcement of vaccination on 100% of the population is viewed as the most important, even sacred goal, so sacred in fact, that it seems untouchable by ordinary medical laws and ethics.

From physicians in private practice who do not inform parents of short and long term risks and where there is no written consent form required, to regional health departments who can threaten families with

expulsion from school without clarifying exemption choices available, we have allowed the medical dictatorship to impose its will on the general population. Through propaganda campaigns of fear and coercion, the myth of disease prevention through vaccination is perpetuated without challenge, while the spectre of new diseases being created by mass vaccination remains veiled in obscurity.

The iron curtain of public health policies predicated on vaccination as prevention, allows no other health discipline a voice, nor an opinion, nor an objection, nor open dialogue. Vaccine policies as delivered by the medical pharmaceutical monopolies represent a form of warfare, and a closer analysis reveals a system based on a military model that prides itself on waging war on disease with no system in place for accountability for the health destruction left in its wake. And as in war time, individual rights and freedoms get suspended, regardless of laws intended to protect these rights and freedoms in a democratic society - and regardless of our wishes to choose health creating modalities based on wholism, nutrition, clean food, air and water.

An in depth audit and evaluation of CIDA's (Canadian International Development Agency) investments in the Expanded Program of immunization by Dr. Raymond Obomsawin revealed that there are serious deficiencies in evaluation processes of the effectiveness and impact of these large vaccination programs, and that there is an unresolved issue of ethics. The Universal Childhood Immunization program "as presently conceived and executed represents two major departures from the time honoured ethics and traditions of medicine: a) That all forms of treatment should be individualized particularly when prescribing or injecting substances which carry the potential for disease, disablement, and death and b) The objectively informed patient should always have reasonable opportunity to consider alternatives." (3) •

References:

1. Canadian Medical Law - Introduction for Physicians, Nurses and Other Health Care Professionals - by Barney Sneiderman, John O. Irvine, Philip H. Osborne - Second Edition, 1995. Carswell Thompson Professional Publishing.
2. Ohio Parents for Vaccine Safety - Fall 1995 Newsletter.
3. Exploring Natural Traditions and Current Controversies - The promise of Primary Health in the Developing World, by Raymond Obomsawin.

HEPATITIS B VACCINATION -

Is it really necessary?

By -
Julie M. Shams RN

The hepatitis B vaccine is being touted as one of the safest vaccines available today. There is strong evidence correlating it with chronic disease states, diabetes and death. Recently, hepatitis B became a declared deadly disease which is poised to attack all newborn babies, and/or pre-teens who are about to enter high school. It is believed that the newborns who are at risk are those who come from high-risk mothers, such as intravenous drug users, or prostitutes. Health Care Workers and older high school students who have not yet had the vaccine are also being targeted.

In 1994, the Ontario Government unveiled a six million dollar plan to vaccinate 135,000 grade 7 pupils with the hepatitis B vaccine. The 1996 school year is filled with pressure being placed on grade 7 students upwards to grade 13 to have the 3 doses of the hepatitis B vaccine. When the Ministry of Health was asked as to how much money was being spent this year on the hepatitis B immunization program, representatives answering the general information lines did not have the information available. They also could not quote any

statistical numbers that would reveal how many people contracted hepatitis B in the last 2 years.

One needs to ask the question why this information is not readily available for public inquiries. Pre-teens and older students are being targeted because it seems that they will be sexually active, or perhaps promiscuous in high school years, therefore, needing protection from the disease which is sexually transmitted and can also be transmitted through infected blood, body fluids and secretions.

Safe sexual habits such as the use of condoms is an effective way of reducing the chance of hepatitis B transmission. This disease as a whole is considered to be more virulent than HIV outside the body, which means that it can survive in small or dried up specks of blood and is not as sensitive to climate conditions. I see hospitals at risk for having this susceptibility as it is not uncommon for splashing of blood to occur in such places, but I don't see a school environment such as a classroom at risk.

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Become a member of VRAN

Volunteers are
needed in a
number of
areas including:



- * Researching and writing articles
- * Organizing public meetings
- * Networking with vaccine awareness groups worldwide
- * Sharing the newsletter with friends

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HEPATITIS B VACCINATION - Is it really necessary???

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Furthermore, universal immunization of adolescents is a strategy which is problematic. Adolescents of the highest risk would most likely be the least compliant, and asking adolescents to participate in a three dose immunization series over an extended period of time is likely to result in high drop out rates. The average health care worker's chance of contracting hepatitis B is very small and does not warrant general vaccination. Dienstag and Ryan (1982) [determined in their study] that in the setting of continuous, low intensity exposure to hepatitis B, health workers may become naturally immunized with hepatitis B surface antigen rather than infected with hepatitis B. (Dr. V. Scheibner Vaccination: a medical assault to the immune system.)

When the hepatitis vaccine became available many doctors were concerned that it might be contaminated with a microorganism responsible for the AIDS epidemic. Two thirds of doctors eligible for the hepatitis vaccine have refused to take it. (Neil Miller: Vaccines: are they really safe

and effective?) In Canada this vaccine has been replaced with the Energix-B (Smith Cline and Beecham) and Recombivax (Merck Sharpe and Dome). Both vaccines are said to be synthetically made and therefore are safe from contamination with HIV.

However, the adverse reactions remain the same as with the plasma derived older version of the vaccine. These reactions are as follows: Site soreness, fever, rash, nausea, vomiting, diarrhea, back, neck and shoulder pain, runny nose and cough, upper respiratory infection, influenza, and earache. At first glance these reactions can seem relatively innocuous, but we need to realize that each of these manifestations has been caused by the vaccine which means that it has in some way adversely affected the immune system.

What about the more subtle effects that could be occurring on a deeper level? We just don't know. These effects are warning signs which have been passed off as normal. The above adverse reactions have been inflicted by the vaccine. We must

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According to the Mortality and Morbidity Weekly Report, there were 358 reported cases of Hepatitis B in New York City and 438 cases in Upstate New York for all of 1992. Despite CDC claims that there would be 200,000 cases nationwide in 1992, there were, in fact, only 13,857 reported cases. The vast majority of these cases were contracted through high-risk sex, drug abuse and medical contact. Hepatitis B disease peaked in the mid 1980's and has been declining ever since. Despite these facts, our legislators in Albany are trying to mandate this vaccine for all newborn babies in New York State. The vaccine has been added to the list of mandated vaccines for entry to school.

This genetically engineered vac-

Experimenting on our Children

cine, developed in 1987, is so new that little is known about it. It is not known whether immunity will last until the babies receiving it reach an age when they might engage in high-risk sex or drug abuse. They will find this out after experimenting on our-babies.

The risk, however, are very real. For the 20-month period between November 1, 1990 and July 31, 1992, there were 4,227 reports of side effects from the Hepatitis B vaccine made through the Vaccine

Adverse Effects Reporting System. Of this number, 383 were characterized as serious, 57 as life-threatening, 241 cases resulted in hospitalization, 108 individuals were disabled, and 17 died. These figures represent only the tip of the iceberg, as the FDA estimates

that only 10% of doctors report vaccine injuries and deaths. The number of injuries and deaths will probably soar when this vaccine is mandated for use in all newborn babies. Nothing is known about the long-term effects of this vaccine, as no long-term, large scale, controlled studies have been conducted.

Taken from: The International Vaccination Newsletter, June 1996, with thanks.

HEPATITIS B VACCINATION - Is it really necessary???

Cont'd...

Not only is the hepatitis surface antigen contained in the vaccine but so is aluminum hydroxide and thimerosal (a mercury compound) which is used as a preservative.

Mercury which is a heavy metal poison bio-accumulates in the tissues of the body over time with each exposure and has been documented to cause many diseases such as, central nervous system disorders, kidney problems, and other serious illnesses. (E.Skjei and M.D. Whorton, Of Mice & Molecules).

"One needs to ask why these studies and information are not offered to people who are considering to have the vaccine for themselves or their children."

remember that vaccination injections bypass the bodies first line of defense which is the skin and mucous membrane barriers of the eyes, nose, and throat. Many people are naturally immune to a particular disease and do not have any antibodies circulating within the body, this is because their first line of defense, as stated above, is very strong. The invading organism never gets the chance to enter the body.

Not only is the hepatitis surface antigen contained in the vaccine but so is aluminum hydroxide and thimerosal (a mercury compound) which is used as a preservative. Mercury, which is a heavy metal poison, bio-accumulates in the tissues of the body over time with each exposure and has been documented to cause many diseases such as central nervous system disorders, kidney problems, and other serious illnesses. (E.Skjei and M.D. Whorton, Of Mice & Molecules). The body has no means to remove heavy metals and the body doesn't have to deal with these additional burdens when exposed to the disease in natural conditions. The reason this vaccine is classified as synthetic and safer is because they use a process of recombinant DNA technology. It is my understanding that this process involves the cloning of the virus by genetic engineering into *Saccharomyces cerevisiae* which is a genus of yeast fungi. The yeast cell is then disrupted and extraction of the surface antigen occurs. (Compendium of Pharmaceuticals and Specialties; 1992) It does not reveal where the original donor cell was obtained from. That is, the cell which was cloned. Was it a human source or an animal source? Also, is there not a danger of transferring or cloning a defective gene or a memory of a contaminating virus to the clone? It is well documented that the minute amounts of substances found in Homeopathic remedies affect the body and the immune system, therefore, it seems that any trace contaminant in a vaccine could affect the body as well.

The word synthetic is defined as a substance which is produced by artificial means. So, the hepatitis B surface antigen in produced artificially, but the clone is

identical to its donor which is organic in nature, meaning that the clone is organic too (not inorganic or artificial). It was the process in which reproduction occurred that was artificial. The end product remains the same. The bottom line is that if there is a risk of contamination during natural processes (ie. Plasma derived vaccine) then there are these same risks with unnatural processes. A clone is a clone; it is identical.

Dr. H. B. Classen President and Chief Executive Officer of Classen Immunotherapies, Inc. in Baltimore, Maryland believes that a large epidemic of diabetes which occurred in New Zealand in 1988 was caused by a large Hepatitis B immunization program. He also believes that this vaccine may be causing epidemics of other autoimmune diseases for which registries do not exist. Dr. Classen maintains that there was a 60% increase of diabetes following the mass immunization program in New Zealand. He states that "The FDA has gone on record that hepatitis B vaccines cause the autoimmune disease alopecia." It seems that this vaccine as well as others can potentially induce insulin dependent diabetes through the release of interferons since interferons have been implicated in causing autoimmune disorders. (Diabetes and Vaccines, letter by Dr. H. B. Classen & New Zealand Medical Journal, 24 May 1996). Perhaps this vaccine is not as safe as we are led to believe. One needs to ask why these studies and information are not offered to people who are considering to have the vaccine for themselves or their children.

Dr. Morris Sherman, an expert in the natural history and epidemiology of hepatitis B, maintains that people who are chronic carriers of the disease are the ones who potentially infect others. His studies show that chronic carriers are primarily those that have been born to infected mothers. Moreover, the older the person is who gets infected, the less likely they are to develop chronic carrier status. He emphasizes that although young adults are at risk of contracting hepatitis B, there is a less than 5% chance of becoming a chronic carrier and

Continued on page 11

HEPATITIS B VACCINATION - Is it really necessary???

Cont'd...

"The chief concern is that if children receive this vaccine the disabilities could manifest as difficulty in creating new memories, failure to recall stored memory, loss of mathematical abilities, sleep dysfunction, petit mal seizures, visual defects, and chronic brain and physical dysfunction. "

only a 0.1% risk in dying from the disease. If most chronic carriers have developed the disease in early childhood or infancy than it seems ridiculous and almost laughable to vaccinate in early adolescence. Perhaps what this is telling us is that we should expect to see the target range reduced to early infancy with a booster in the pre-teen/teen population. In fact, it is recommended in the product insert to have a booster after five years.

It would seem that there is more to this vaccine than meets the eye. Dr. Byron M. Hyde, chairman of the Nightingale Research Foundation discovered very quickly that there are people who have been seriously damaged from this vaccine. In fact, he became aware of 57 individuals who believed they developed a chronic disease state after receiving hepatitis B immunization. Some symptoms caused resembled Myalgic Encephalomyelitis (M.E.) and Chronic Fatigue Syndrome. Permanent neurological damage, blindness, deafness and death have also been reported. The chief concern is that if children receive this vaccine the disabilities could manifest as difficulty in creating new memories, failure to recall stored memory, loss of mathematical abilities, sleep dysfunction, petit mal seizures, visual defects, and chronic brain and physical dysfunction. These children would have the benefits of good health throughout life removed from them.

The Nightingale Research Foundation reports that those individuals who fall ill with hepatitis B and subsequently die (and who are not IV drug users, male homosexuals and chronically ill aging Asian and African immigrants) may be as low as 1 death per 5 or even 10 million in Canada or 1-4 Ontarian deaths per year. They also estimate that the potential cost of immunizing the 9-10 million Ontario citizens against Hepatitis B, and other related medical costs would exceed 2 billion dollars. This organization feels that even 1 bil-

"although hepatitis B virus usually occurs as an acute illness, up to ten percent of people have symptoms which linger for up to years later, and as we have already seen these are the people who become chronic carriers."

lion dollars is a very high cost to save a potential one or two Ontarians in low risk groups from Hepatitis B death, particularly if more than this number of Ontario citizens may be disabled and even die as a result of the same immunization. (The Nightingale Research Foundation - Press Release, October 6, 1994). Dr. Hyde documents that although The Ministry of Health has been informed of these complaints, it is his opinion that they have not followed through with their commitment to adequately investigate the issue. The Ministry of Health maintains that this vaccine is safe. It seems to me that every person, even those who are considered high-risk can choose to take precautions that will protect them from contracting the disease. The precautions can be any of the following: partake in safe sexual practices such as the use of a condom, abstinence, high-risk people such as IV drug users can make sure that they don't share needles and health care workers can follow the Universal Precautions procedures that are found in health care agencies. Perhaps this is a better solution.

When I was in school I learned that the hepatitis B virus was referred to as a latent or persistent virus. This means that al-

though hepatitis B virus usually occurs as an acute illness, up to ten percent of people have symptoms which linger for up to years later, and as we have already seen these are the people who become chronic carriers. Slow viruses are related to this group of diseases and it is well documented that slow viruses as well as persistent or latent viruses cause destruction in the form of auto-immune disorders which in turn develop over time into chronic debilitating diseases like cancer, and rheumatoid arthritis. It seems obvious to me that if hepatitis B is capable of doing this all on its own, then it is possible that the vaccines against it can perpetuate the same occurrence. This implicates all other childhood vaccinations because "...childhood immunizations, having released billions of bacterial and viral antigens into our body and consequently into

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Vaccines In Bananas?

DNA Vaccines and Genetic Engineering

By
Edda West and
Meg Edwards

Listening to Quirks and Quarks on CBC radio the other day I was surprised to hear that a new vaccine has been created that can be hosted by a vegetable or fruit. Through fantastic scientific technology, viral material has been successfully bonded to foreign cells through genetic engineering. The professed benefit of this new development is the happy avoidance of needles. Most journalists tend to emphasize the child's fear of needles and the wonder of painless vaccines. But actually the avoidance of hypodermics may be due to the spread of diseases caused by reused or improperly cleaned needles.

The most disturbing element of this new vaccine invention is the invisibility of its administration. It is already disturbing to think that our food may be pumped with chemicals, antibiotics and possibly animal growth hormones. But will you know whether the banana you are feeding your child has an untested vaccine in it? A vaccine that carries manipulated and abnormal genes, and could alter the genes in your

child's body?

In June 96 the Economist published an article entitled "Spiralling To A New Vaccine", in which the sophisticated reader is introduced in detail to the complex bio-technologies that are about to take the world of immunology by storm. According to the article, molecular biologists can make genetic copies of viral matter, splice these into pieces of bacterial DNA known as plasmids, and inject these substances into, say, bananas, to carry the genetic information that will elicit an immune response.

Plasmids are rings of autonomous, self-replicating DNA that have a strange symbiotic relationship with bacteria. The plasmids, carrying the viral genetic information find their way into the host's cells, which then copy the viral gene into protein fragments that are then stuck on to the cell membranes where the immune system will respond to it. The old vaccines lived among the cells and set

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HEPATITIS B VACCINATION - Is it really necessary???

Cont'd...

*If you would like additional information regarding hepatitis B for a cost of \$3.00, please send a cheque payable to:
Vaccination Risk Awareness Network
439 Wellington St.
West. Suite #5 Toronto,
ON M5V 1E7.*

our cells may have progressively debilitated the natural immunity of generation upon generation of children for the last 200 years." (Jamie Murphy: What every parent should know about childhood immunizations)

If anyone is contemplating having this vaccine, but feels unsure about what to do, one good place to start is by asking their physician to give a written guarantee that the vaccine will not cause any adverse reactions to themselves or their child. It is probable that a physician will not agree to do this as he would be held liable if something did happen. The important conclusion that comes out of an exercise such as this one is not so much that a written guarantee is obtained, but that one becomes aware that if a doctor can not swear by the vaccines

safety than there is a good chance that adverse reactions do/can occur. It would also be good sense to request from him the product insert which is enclosed with the vial of vaccine. This piece of paper does provide good information as to possible adverse reactions, who should not have the vaccine and also what other components are contained within it. If a doctor is unwilling to provide this, it can be obtained from the manufacturer directly.

Our telephone lines have been ringing and the calls are primarily parents and health care workers wanting to know their options and the risks involved with this vaccine. At the moment parents can refuse this vaccine for their children without needing to obtain an exemption form because it is not considered mandatory yet. It will be soon. •

Vaccines In Bananas?

DNA Vaccines and Genetic Engineering

Cont'd...

"Injecting active genes from foreign organisms is not, self-evidently, a safe procedure."

The Economist

"Further problems will emerge with vaccines produced by genetic engineering. Vaccines such as these can have such an unfavorable effect on the balance between virus and immune defenses that a disease will be enhanced rather than weakened."

off the immune system by being within the system. The new vaccines actually get inside the cells.

"...the infected cell attaches bits of protein from the pathogen to its own outside surface, thereby signalling that, for the protection of its host, the cell needs to be killed...This attracts the attention of killer T cells to eliminate the infected cells and prevent the infection from spreading."

Making the delivery of the DNA vaccines even easier a 'double layer of synthetic phospholipids' called a cochleate has been developed. A protein or DNA can be captured by the cochleate and wrapped up inside, so that the vaccine can be given orally. The cochleate can shield the DNA they carry, protecting it from the fierce gastric juices of the stomach and deliver it unharmed to intestinal cells. We are told that 'preliminary experiments' show that this is enough to turn on the immune response.

The frightening possibility that these technologies could be used to automatically deliver mass vaccinations to populations through the food supply brings to mind the issue of our drinking water - a toxic combination of fluoride and chlorine that is imposed on us by our government. Regardless of the studies that link these chemicals to cancer, our water continues to be poisoned, for our own good, and in the interests of the chemical industries. It is not a huge leap to see our fruits and vegetables tampered with in the same way.

The conclusion of the Economist article expressed the dangers implicit in genetic engineering: "Tantalizing stuff. But none of it will be useful if it turns out not to be safe in people. Injecting active genes from foreign organisms is not, self-evidently, a safe procedure. They might end up as a permanent fixture in the chromosomes of the cells in which they take up residence. This could cause problems, such as turning cells cancerous. Nor have other possible problems yet manifested themselves. Although antibodies to the DNA have been reported, they do not seem to interfere with the body's ability to distinguish self from non self. Such interference could cause auto-immune diseases such as lupus or rheumatism, in which the immune system starts to attack the body it

evolved to defend."

Researchers have been cautioning about this for a number of years now. In an article about mumps in *Vaccination for Diseases - Science* (1991, 25-195-8), Hans Ulrich Albonico refers to the work of S. Oetheon; "Further problems will emerge with vaccines produced by genetic engineering. Vaccines such as these can have such an unfavorable effect on the balance between virus and immune defenses that a disease will be enhanced rather than weakened."

In view of such observations, J. Lederberg, who won the Nobel Prize for his work on bacterial augmentation in 1990, suggests that we have to expect further "major disasters such as AIDS because there is too much intervention in the natural relationship between humans and viruses." (*J. Lederberg - Emerging Viruses - Emerging Threat.* Science 1990 24-279-80)

Dr. Hertel, President for Europe of the World Foundation of Natural Science, spoke at the Berlin Biochemical Health Association Congress in Sept 95 about DNA experimentation. He expressed concern about genetic engineering, which he says is serving money and power and not humanity. He predicted unforeseeable, but far reaching and irreparable consequences in the form of biological chaos and degradation of life wherever it is carried out. Hertel compared it to nuclear energy and the resulting radioactive pollution. According to Hertel, genetic engineering is already in use without effective safeguards against possible disasters and increasingly so - in the manufacturing of vaccines." (From article by Erwin Alber, IAS Newsletter Vol 8 #4)

Dr Buchwald at the same congress voiced his concerns - "Vaccination permanently burdens the organism with pathological information in the form of proteins such as viruses, bacteria and fungi, the organism then tries in vain to get rid of it. Vaccination with genetically engineered substances harbours the additional danger of burdening the human organism with modified, abnormal pathological combinations of genes that the body may not be able to deal with because it is not programmed to recognize such unnatural substances." (from article from by Erwin Alber in IAS Newsletter).

Social Manipulation and Compulsory Vaccines

March 27, 1996

Dear People,

I am a doctoral student in medical sociology at the University of New York at Albany, and I am working on a dissertation about compulsory childhood vaccinations. My contention, which I am sure that you support, is that vaccination is neither safe nor as effective as the public is led to believe. I feel that vaccination is unique in that it is so routinely practiced and so completely unquestioned by most people. In fact, my research shows that even articles in the 'radical' press support vaccination and merely take issue with the lack of access for the poor.

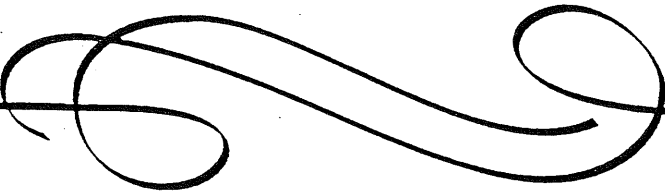
My main interest is what seems to me to be the social control that takes place around the issue. the scheduled appearance in the pediatrician's office for the 'well child care', of which vaccination is part, brings the mother and child under medical scrutiny and habituates them to the use of medicine for the solving of problems. Mandatory vaccination laws allow school officials and child welfare authorities to flex their muscles and demonstrate that they really have the best interests of the child at heart, even more so, in their view, than the child's own parents. Physicians and research scientists that dare to offer alternative views of healing and/or sound an alarm about the potential dangers of vaccination are silenced by name calling and the inability to bring their views to light in the professional literature. In a society which seems to pride itself on freedom of expression, there seems to be enormous suppression of discussion of this issue. In a society which seems to value people's right to choose, children are subject to medical assault with little recourse.

I am writing to you in the hope that you will be able to put me in contact with people who have had to deal with these issues. I am interested in hearing from:

- 1) Physicians, other health practitioners, (nurses, chiropractors, etc.) and vaccine researchers who are either opposed to vaccination or have voiced any kind of doubts about vaccination policy. I am particularly interested in learning about professional sanctions they have been subject to.
- 2) Parents who have refused vaccination for their children. Here I am specifically interested in what types of coercion have been used against them, both psychological and legal.

I hope that you can help me in my effort to tell this important story. I thank you in advance for your assistance.

Lucy Pulitzer
5 Hawthorne Avenue
Delmar
Ny 12054



Letter To Parents

Dear Parents,

Advocacy for Parents Inc., is a new paralegal service for parents offering comprehensive information about the legislated responsibilities and rights of parents concerning the vaccination of their children.

As the director of Advocacy for Parents it is my opinion that parents have the primary responsibility for the health care and education of their children. Although our social values and laws are gradually losing sight of this fact, there is still enough recognition in our society of the rights of parents to resist the almost forcible entry of public officials into personal medical decisions. However, if things continue as they are going now, this recognition of parental rights may deteriorate.

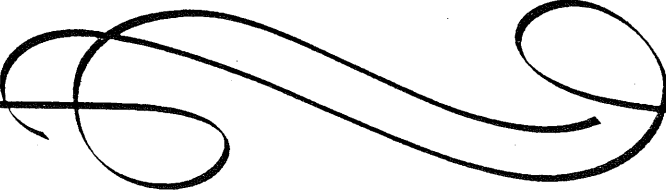
It is crucial, in my estimation, for parents to resist the strong legal and social pressures, and to make informed health care choices.

Although you may have heard warnings that your child won't be allowed to attend school if s/he is not vaccinated, you have probably not been told that the Health Protection Appeal Board has the legal authority to overturn a suspension order if your child is barred from school for your non-compliance with the legislation. There is an appeal process that you can choose if your child is suspended.

If you wish assistance in this matter, please feel free to contact me.

Sincerely yours,
Brian Taylor

Tel.: (416) 410-5926



AIDS helped by 'activated immune system'

US Researchers say their finding underscores
'diabolical' nature of virus

The Washington Times
Thursday, May 9, 1996

Page A11

This article was
copied from The
Immunisation
Awareness Society
(V8 # 4)

Boston (UPI)

Government scientists say they have new evidence that when the body's immune cells are stimulated, they become more vulnerable to the AIDS virus.

Building on previous work, researchers at the National Institute of Allergy and Infectious Diseases found that when they used tetanus shots to activate the immune system of 13 persons infected with the immunodeficiency virus (HIV), the amount of viral cells in their blood shot up.

Before dropping back to preinoculation levels after about two weeks, amounts of HIV in their bloodstreams increases two to 36 times, investigators led by Dr. Sharilyn Stanley reported in the New England Journal of Medicine.

In addition, when the researchers drew blood from 10 uninfected study participants and combined it in test tubes with HIV, the samples taken after the volunteers were given tetanus shots were more easily infected than the blood taken before the inoculations.

Dr. Stanley said the results underscore the 'diabolical' nature of the virus. "This virus really plays off of activated immune systems," she said. "it likes to encounter immune systems that are revved up, in order to replicate. In that sense it is like no other virus we know of, and that alone makes it scary, because we haven't seen this before."

She said the results may also explain why people in certain populations around the world may face a higher risk of HIV infection, or if they are already infected, may, develop AIDS symptoms more rapidly than

other people.

Dr. Stanley said it is known that HIV disease frequently progresses faster in developing parts of the world, where people's immune systems are constantly challenged by parasites and other micro-organisms.

Although not many studies have been done on this topic, she said one trial conducted in Israel showed that "Ethiopians who had recently moved to that country had immune systems that were revved up and hyperactivated," apparently because of exposure to environmental pathogens.

Dr. Stanley said the NIAID results also offer a reason why people who have other types of sexually transmitted diseases are more vulnerable to HIV infection.

Although some STDs cause genital sores that open a pathway for HIV, she said, "we know that even STDs that do not cause genital ulcers are associated with greater HIV risk." Dr. Stanley said it seems that is because people with STDs "have more immune cells in their genital tracts."

She said the findings indicate anything that activates immune cells, including respiratory infections and immunization shots, may temporarily boost the chance of HIV infection among people who engage in high-risk activities.

For those with HIV, "we're not recommending against immunization, because the good they do still outweighs the bad," she said. But researchers are exploring the possibility of giving such people short term regimens of anti-AIDS drugs such as AZT or DDI.

"This virus really plays off of activated immune systems," she said. "it likes to encounter immune systems that are revved up, in order to replicate. In that sense it is like no other virus we know of, and that alone makes it scary, because we haven't seen this before."



New Books

New Atlantean Immunization Resources

P.O. Box 9638
Santa Fe, NM 87504
505-983-1856 (telephone and fax)
Web Site: <http://www.new-atlantean.com/global/vaccine.html>
e-mail : global@new-atlantean.com

New Atlantean Immunization

Resources is a publisher and distributor of uncensored vaccine information. The Web Site links you to resources all over the world, including vaccine support organizations and compensation lawyers. Vaccine studies are published, articles are posted and alternatives to vaccines are listed. They are open to contributions; articles or health-related news.

Immunizations; The People Speak!

Questions, Comments and Concerns
About Vaccinations
By Neil Z. Miller
Forward by Dr. Robert C. Martin
Published by Atlantean Press.
Address given above
505-983-1856
\$8.95 plus \$3.50 shipping

Neil Miller, whose book *Vaccines: Are They Really Safe and Effective?* is now in its 7th printing and has sold more than 70,000 copies, has a new book just out. *Immunizations; The People Speak* is a collection of hundreds of questions and answers that Miller has gleaned from his years of research and appearances on radio and television talk shows. It is described as a concise handbook offering fully documented information on vaccine data, safety issues, legal rights, personal stories, and health options. Some of the questions asked are ; can unvaccinated children spread disease to vaccinated people; is it ethical to allow a child to contact a disease that we have a vaccine to prevent; and what are the long-term impli-

cations of injecting live-virus vaccines into the body? This is a good book for somebody who is new to the vaccination issue and a fast read for those more well versed in the subject.

The Immunization Resource Guide

by Diane Rozario

Reviewed by Richard Moskowitz, MD
Patter Publications
P.O. Box 204
Burlington, IA 52601
\$9.95 plus \$2.00 p&h for single copies
1-800-356-9315

Designed as a handy reference for parents considering whether or not and to what extent to vaccinate their kids, this slim booklet is packed with information and resources covering virtually every aspect of the subject and from almost every point of view.

"Many thanks are due to Ms. Rozario for this thorough bibliographical reference and for the even-handed, dispassionate tone she maintains throughout. It is an important service that homeopathy and other health practitioners may well want to make available to their clients."

Dr. Richard Moskowitz.

The author, Diane Rozario is a member of Dissatisfied Parents Together (DPT), a national vaccine organization which lobbies for safer vaccines.

This book is a valuable addition to your library - packed full of information.

Support Circles

We are setting up regular support group meetings. Please call Julie or Heather for information. Everyone is welcome to come and discuss their own interests around vaccination, ask questions and meet like minded people. •

Why We Did Not Vaccinate

by
Julie M. Shams RN

"In school I was taught that vaccines were only 75-80% effective, and it has been well documented that all vaccines can cause horrible reactions in children who are susceptible."

Five years ago I was a dramatically different person than I am today. I was a student in nursing school, I did everything I was told to do and I questioned nothing. I was going to be a professional in a great field, a healer, or at least aid in some sort of healing process.

When I graduated school I was filled with delight because I was ready to apply my knowledge and be successful in my profession. I realize now that I was conforming to who they wanted me to be. An obedient attendant of the doctor and a servant to the system. On January 6, 1994, my eyes opened in disbelief and the spell that controlled my consciousness broke. That was the day that my daughter was born prematurely, weighing a fragile 2 pounds nine ounces (1180g).

I was told that it was nobody's fault that she was born early; it was just one of those things. Wrong, she was born because the birthing specialist, my obstetrician, and a hospital nurse made two very dangerous mistakes. The obstetrician ignored a routine ultrasound for four weeks before informing us that something was wrong and, once I was admitted to hospital, the attending nurse insisted that I get out of bed, (after the doctor told me to stay on complete bed rest to prevent labour), even after I asked her to double check with my doctor.

Getting up and walking augments labour. Because of these two very grave errors, my precious daughter's life was jeopardized. We were very fortunate that she was not perma-

nently damaged from being born so early. Some babies incur brain damage, nervous system disorders, or visual and auditory deficits, to name only a few complications. At that fragile age, some do not survive very long at all, causing much grief in the parents and siblings of the newborn. It is most definitely a roller-coaster ride that I would never want to experience again.

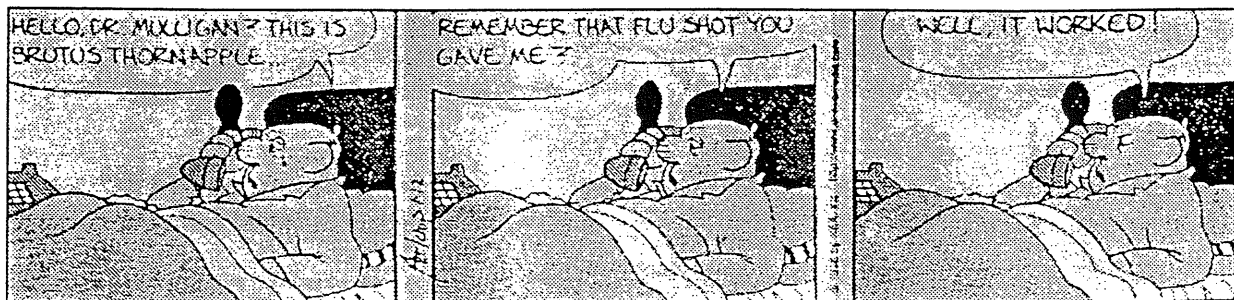
I share this story with you because it is very much related to the vaccine dilemma. Parents who expect happy, healthy children are fooled into believing that the doctor knows best and then, after all is said and done, some parents are left with a precious child who has been damaged, or they are left with no child at all.

The theory behind vaccines, simply put, is that they confer immunity to common childhood diseases and they protect our children from potentially fatal illnesses with little or no risk. It is my opinion that this is only a theory and I find it difficult to believe that it holds much truth. In school I was taught that vaccines were only 75-80% effective, and it has been well documented that all vaccines can cause horrible reactions in children who are susceptible.

We try to prepare our children for the 'real world', we caution them to be on the lookout for opportunistic people who can take advantage of the inexperienced. How many jokes are told about untrustworthy lawyers or plumbers? Can doctors become members in this cliché as well? If not the doctors

Continued on page 19.

BORN LOSER



Why We Did Not Vaccinate

Cont'd...

"There is no way to test if a child is going to have an adverse reaction. Parents only find out after one has occurred."

Clinic Burned After Vaccine Kills Children

Angry villagers ransacked and burned a government-run health clinic in Dbogram village in India's West Bengal State where 11 children died and 38 others fell ill after taking oral polio vaccine recently. At least 34 children are in serious condition in local hospitals, Press Trust of India news agency said Tuesday.

Taken from The Orange County Register WORLD 5/4/95 by The Informed Parent newsletter Spring 96. (U.K.)

themselves, how about the medical establishment which is self-regulated, and holds the only power regarding what is accepted and adopted as medical truths. Are they in it for the money or are they in it to heal disease? Perhaps both mentalities exist, but how do we decipher who is who?

Also, how many diseases have been actually cured? Not very many. Most people with disease are simply treated for the symptoms of the disease. If there is pain, a pain reliever is given. If there is swelling, an anti-inflammatory is given. It seems that the underlying cause is always there and never dealt with. Pharmaceutical drugs are given by doctors to suppress the symptoms. Each time a drug is prescribed, the revenue for the pharmaceutical company increases. If no diseases are ever cured than that would mean that these companies are guaranteed revenue.

How do vaccines fit in? Well, in two ways. One is that there are always children being born and going in to doctors offices for well-baby check ups and vaccinations. Secondly, since vaccines can damage susceptible individuals and create short and long term diseases, there will be a need for other pharmaceutical drugs and services. How can doctors condone this? Medical practitioners simply want to believe in them. I know that as a nurse I wanted to believe in them. In theory they sounded excellent; a historical breakthrough!!

In truth, it did not take me long to realize that they were causing damage and the effectiveness was questionable. My conscience could no longer support it. When I questioned it I was told that only .01% - 1% went on to have irreparable damage. This percentage seems almost insignificant doesn't it? So why worry? Well, I worked it out: in a population of four hundred thousand people, assuming that one third are children, there will be 1,333.33 affected children at worst and in the least, 13. What numbers do we get when looking at the global picture? Who are those children? I feel that even one child is too many to sacrifice. There is no way to test if a child is going to have an adverse reaction. Parents only find out after

one has occurred.

Putting aside safety for a moment, let us look at vaccines in relation to the immune system. I have often heard in school that the scientific community knows so little about the immune system, which is why HIV and other immune diseases and disorders are so perplexing. Why then do they choose to bombard an infants immune system with very toxic compounds? When looking at an infant we realize that this is a human being that is not yet mature. The liver is immature which explains why jaundice can occur. It needs to become regulated with practice and eventually the jaundice resolves and the liver functions normally, and it only reaches full maturity when growth is complete. The lungs are immature and have not reached their full development until approximately 8 years of age. The brain is not mature, it still needs fat intake to complete the nerve cell growth, and this process takes at least 2 years. The nervous system is immature, we can see this simply with the age that toilet training can occur. We can see immaturity in an infant in all aspects of the body and health. They can not walk, talk, reason, or see very clearly. These things occur with time during a systematic occurrence of events.

The immune system is just the same; it is immature in an infant. Should there be such a concoction of harmful chemicals, preservatives and viral or bacterial components injected into this immature being? And when the first line of defense is bypassed - that being the skin and mucosal barriers of the eyes, nose and throat - by injecting directly into muscle tissue, the immature immune system is left with few tools to cope with such an onslaught. I think there are many other ways to strengthen and support the system to ensure optimum health in the case of infection.

The immature immune system relies on mother's milk to offer much protection. It relies on a relatively stress-free environment to allow it to grow. If the immune system is tied up dealing with this foreign invasion, it will have very little left over to handle any other small imbalance that may occur in the body, like an earache or stomach malady.

Continued on page 20

Variance has a New Home and a New Name

Our new address and phone numbers are:

439 Wellington St.
W., Suite #5
Toronto, Ontario
M5V 1E7

416-280-6035
(Info. Line)

250-355-2525
(Edda West).

The Measles campaign last spring encouraged an influx of newcomers to Variance. Thanks to Julie Shams and Heather Stephen, who woman the phones and send out the information packs, we have dealt with a renewed interest in vaccine risk information and alternatives. More people are becoming aware that there is a controversy surrounding vaccinations and are making an informed decision.

Our core group at Variance is quite excited about all this new energy, and we want to ensure that this momentum keeps growing. We have lots of changes to report, and we are hoping some of you feel the same pas-

sion we do and want to become more involved. There is a lot to do!

First of all, we are in the process of incorporating and changing our name to Vaccination Risk Awareness Network (VRAN).

We will be taking on office space at the Canadian Natural Health Association and working with them on joint marketing activities. We have already participated with them at the Parent Show in July and the Vegetarian Food Fair in September.

Continued on page 21

Why We Did Not Vaccinate

Cont'd...

Let's face it, anti-body levels don't indicate immunity, they are an indication that infection has occurred.

Society is very concerned with our polluted external environment - it is time that people opened up to the fact that pollution of a child's micro-environment is happening every day with vaccination. Children and youth are taught to stand up against the pressures of peer influences, but school officials and the medical establishment continue to isolate children as young as 13 years of age asking them to accept vaccination if their parents have indicated that their child is not to have one done. (i.e. recent measles campaign).

Often the child is given scare tactic accounts of possible death and is pressured to comply with the status quo. What is the difference between this and a drug dealer soliciting a vulnerable child or a peer pressuring for sexual relations? It is harassment in my opinion and it should be dealt with accordingly. A youth does not have the life experience or maturity to make decisions regarding their health. Especially, if the risks of

the vaccines themselves are not disclosed.

My daughter is now approaching three years of age and she has never been vaccinated. She is very intelligent and healthy. We fully expect her to come into contact with these diseases, and perhaps develop them fully, but we firmly believe after 3 years of research that there are health benefits that come out of all viral and bacterial infections and that she will be able to build much needed protection to pass on to her children.

I use alternative treatments for any illnesses she has had and she has never had any antibiotics (except at birth, which I couldn't refuse because of hospital policy and the threat of children's aid involvement), consumes little refined sugar, is fed with organic grains and vegetables and is raised as a vegan child, meaning no dairy products. I continue to nurse her and follow natural nurturing and child-led weaning. She came into this world eager to teach my husband and I some very valuable lessons we would never have stumbled across had she been the full-term baby we had expected. •

RESOURCE & INFORMATION LIST

Immunization: History, Ethics, Law & Health
by Catherine Diodati. Best new book about vaccines. Please order from VRAN

Cost: \$35 + \$5 postage

Immunization—The Reality Behind The Myth
by Walene James.

What Every Parent Should Know About Childhood Immunization
by Jamie Murphy

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