

## **Vaccines: Analysing the Risk Vs Benefit Argument**

When I started my campaign, sometime in 1985, on the internet from 2001, doctors responded by saying that vaccine safety was beyond question, they were as safe as water. Later as I intensified my campaign and cited peer reviewed published material on risks from vaccines, they modified their stance to; well all medications have some risk. Today they fall back upon the risk-benefit analysis meaning that the benefits outweigh the risks. Today I will touch on this topic in a generalised fashion so that all can comprehend what I am trying to say.

I will start with the human rights aspect. Human rights laws framed after World War II atrocities cover not only medical research/interventions but also therapy. According to them there should be full disclosure for all medical prescriptions and procedures and that the subject has the choice to accept the risk or refuse that is the patient decides what is suitable for her or him. This is blatantly violated by medical practitioners who feel that it is they who should take the decisions. In case of informed consent on matters of vaccines, in developing countries there is no disclosure though there is a hint in immunisation procedure training manuals that health workers should inform parents that there are risks involved which is not done. In case of developing countries there is only token standardized leaflets that do not reveal the full story.

Doctors usually avoid talking on the issue of informed consent. They will stare at you as if you are an alien from another planet if you even broach the subject. But I have been a little persistent. Indian doctors whom I have talked to/corresponded say that even hinting about a risk might prompt parents not to vaccinate their children. This, according to them will severely compromise the vaccination rates. This is a damning statement. Vaccination targets are more important than the life or health of the children. Parents do not deserve to know the risks that their children, whom they have conceived and nurtured for nine months in their womb, on those their entire dreams and aspirations rest, face when they are being administered, singly or in combination.

Now about the risks from vaccines. I have pointed out again and again that vaccine risk is a taboo subject that is always avoided, by manufacturers, policy makers and the medical fraternity. When I complained to the WHO patient safety unit about what they were doing to address the subject of ascertaining vaccine risks they replied that the department is never allotted the required funds to do so. This is the same with the FDA which licenses most vaccines. GAVI & PATH did not even feel the need to answer my queries on the subject. It has recently been revealed that the FDA does not have the required cutting edge research laboratory to conduct credible vaccine safety tests. In an article in "Investigate Hers" - a family magazine from New Zealand, Merck employees have complained that the vaccine safety team employed by Merck is not adequately qualified and that Merck too has not appropriately upgraded its laboratories. They said this was undermining the credibility of Merck, a prominent vaccine MNC.

In case of vaccine testing the onus is primarily on the manufacturer. The procedures followed are highly questionable. The vaccines are tested on hand picked healthy children while vaccines are administered indiscriminately to vulnerable, sick, underweight, preterm, immune compromised infants, a fact pointed out and raised by senior pediatrician Dr T Jacob John in India. In these tests the vaccinated children are compared to another group who are either vaccinated with another similar vaccine, other highly reactogenic vaccines or the vaccine ingredients minus the antigen. This is so the studies can safely declare, "no significant changes were noticed in the vaccinated children vis a vis control groups". The vaccinated children are observed for usually for 14 days, as pointed out by Dr Sherri Tenpenny, or for that number of days till the after effects start appearing. This is a skullduggery that is an insult to the very procedure. Cases of deaths or

very severe adverse effects are often excluded citing that other extraneous factors were behind them. For example, in the rotavirus vaccine clinical trial it was observed that the vaccinated children suffered from respiratory tract infections. However this was ignored as "the vaccine could not have possibly caused that". So these trials are more about hiding vaccine risks rather than trying to identify them.

There is a rule stating that there should be a monitoring mechanism after the vaccine is licenced and released. However this mechanism is very tardy to say the least. There is neither the political will nor the medical endeavour to ensure fair and accurate monitoring. In case of the OPV, the IMA in India made the shocking declaration that doctors were advised to ignore and not report cases of paralysis caused by the vaccine. It goes to the credit of the then IMA chief functionaries led by Dr S K Mittal that such a monitoring was done and it revealed that on an average 500 to 600 cases of Vaccine Attributed Paralytic Polio occur every year. The IMA also reported that the OPV was causing cases of Acute Flaccid Paralysis (a condition indistinguishable from polio) to skyrocket and that a vaccine strain virus had attained virulence and was circulating in the population. While the IMA quoted a figure of 30,000 AFP cases, the JSA reported 1,25,000 up to 2007 and The Telgraph science correspondent G S Mudur indicated a figure of 3,00,000.

The IMA demanded identification, treatment and rehabilitation of the tens of thousands of victims but the health ministry did not pay heed and the matter was allowed to die down. I have reported recently how the cases of intestinal intussusception (an extremely painful condition that may require immediate surgery or lead to death) and intestinal bleeding in children following the rotavirus vaccines are being observed but not reported because it could "scare other doctors" and also hinder the process of including this vaccine into the government schedule. The doctors are thus programmed not to report vaccine adverse effects. They are not informed or taught about serious vaccine risks in their textbooks or are told that serious events are next to negligible. They are also not always knowledgeable about whom to report and are often afraid to do so fearing reprisals from their associations. Only deaths immediately following the vaccines which are brought to the notice of the press ever get reported. But in almost 100% of the cases they are dubbed as "coincidence" or on "program errors" and the vaccine is exonerated. Health care workers will not report vaccine adverse effects as the entire blame is usually put on them and they are punished.

Vaccine adverse effects do not occur immediately but may take weeks or months before manifesting as the process is often slow and insidious though the end result may be catastrophic. Doctors investigating vaccines say that even acute reactions may take from five months to three years to manifest. Thus it becomes very easy to dissociate the event from the vaccine and the cases end up by being termed idiopathic or "cause unknown". Vaccine long term effects may span the lifetime particularly as the inflammatory process set in motion does not stop. Many of the vaccine ingredients lodge themselves permanently in the tissues, fat cells and the brain and continue to inflict a steady and progressive damage permanently. Attenuated live viruses introduced by vaccines may stay dormant for long periods, often mutate, and can become virulent when the immune system becomes weak due to any reason. As vaccines adversely affect the immune system viruses and bacteria present in humans that were not virulent earlier are today causing diseases.

The other very dangerous aspect involves animal and human genetic material contamination in vaccines. Such contamination is inevitable, cannot be controlled, and cannot always be traced as our knowledge about zoonotic (animal) viruses is very limited. Till date, despite the intention not to identify the viruses, there have been traced 100 or so monkey viruses, bovine and avian leukemia viruses, porcine viruses, cytomegaloviruses, the foamy virus and so on. No research has been done on their presence, continuation in the human body and mutation or their

incorporation into the human genome. SV 40, the Simian Virus, the only one researched into for a short time before the researcher was ticked off and the research stopped, is known to be behind many forms of tumours and cancers in the human body. It is also known to be transmitted to the new generation as it has contaminated the human sperm and most probably breast milk as well. Junk DNA and RNA poses a graver threat as they can incorporate into the human genome by a process known as reverse transcriptase. According to medical scientists this form of threat is the most dangerous that vaccines pose and serious concerns raised by medical scientists are being ignored.

Knowledgeable parents who do their own research genuinely worry about vaccines because of many reasons;

1. The nature of vaccine ingredients are highly toxic in nature
2. How these toxins interact with themselves in a process called synergistic toxicity is never studied
3. The child is given not one but many vaccines
4. Often the vaccines are administered simultaneously
5. The safety of such simultaneous administrations are rarely studied
6. The complaints of parents of adverse reactions following vaccines go unheeded and they are often mocked at or threatened for raising the subject
7. Parents today know that vaccine adverse effects may take a long time to appear
8. Whether infants, a category with almost no liver activity, with immature immune systems and low kidney efficacy can really tolerate even one single vaccine shot
9. Vaccine shots have grown in number from 5 earlier to 70 shots of 16 different vaccines, up to 45 of them mandated in the United States
10. Vaccine damage is extremely expensive to address and families go bankrupt trying to take care of their children
11. Doctors do not understand autism and other developmental disorders in children fully and they are programmed to treat them as purely psychological and behavioral disorders of genetic origin. As a result the parents have to research and treat their own children. Doctors who go against the grain and try to biomedically treat these children are being persecuted and branded as quacks.
12. The children suffer from lack of communication and so cannot express their pain and discomfort. They cannot take care of themselves, fall behind in their studies, rebel and run away, throw serious tantrums that are difficult to control, suffer repetitive behaviour patterns, and thus are avoided by teachers and nannies and the burden entirely falls on the mother who suffers endlessly.
13. The presence of such a child in the family causes familial tensions resulting in divorces and separation. There are cases of mothers killing their own children and committing suicide unable to bear the trauma.

14. Compensation is not given, or is extremely difficult to obtain as the procedure goes against the interest of the victims and the scientific apparatus have set conditions that almost negate any chance of compensation. There are cases where the judges have understood the situation but have said that their hands are tied, and have described vaccines as "unavoidably risky".
15. The parents cannot sue the vaccine manufacturers because of a 1986 law passed by Parliamentarian Bill Frist that indemnifies vaccine manufacturers from law suits.
16. Even then \$ 2 billion has been compensated so far to select cases, 83 of them for vaccine induced autism as per expert testimony of those very officials who under oath admit to vaccine damage while negating them otherwise.
17. Even then officials will not admit that vaccines cause autism by offering the explanation that the court awards were for "autism like symptoms" and not autism which is strange as autism is till now a symptomatic disorder.
18. Recent law passed in California has waived parental consent for vaccinating 12 year old children against sexually induced illness, like vaccines for HPV and Hep-B. Other states threaten to follow suit.
19. All efforts are being made to mandate vaccines for school and college admissions and parental exemptions are being made more and more difficult to obtain.
20. There is a revolving door between health institutions and vaccine manufacturers. Dr Julie Gerberding, Head of CDC who had steamrolled many a call for enquiry into vaccine safety, today heads the vaccine division of Merck. Dr Thomas Verstreten of the CDC is today with GSK. Dr Paul Offit of the Childrens hospitable of Philadelphia has joined the IOM, USA. Many health officials and vaccine industry employees have joined the vaccine wing of the Bill & Melinda Gates Foundation.
21. Vaccine decisions are often taken by politicians or bureaucrats, who are influenced by money paid into election funds by vaccine manufacturers.
22. Published studies on vaccine safety and efficacy are conducted by doctors and scientists with conflicts of interest, which are often not declared but later found out through public and activist investigations.
23. Medical journals have their functions conducted by donations from the pharmaceutical industry which severely dilutes their credibility.
24. Pro vaccine books written by doctors and pro vaccine journals are procured in bulk by vaccine manufacturers which are then distributed free to doctors and policy makers involved with vaccines to influence their opinion and to prove that vaccines are scientific.
25. Institutions who form vaccination schedules are heavily financed by vaccine manufacturers and their office buildings built by them or their annual events sponsored by vaccine manufacturers. Individual doctors are also suitably rewarded in the guise of foreign fully paid jaunts for continuing education or gifts to influence their decisions.
26. It is a fact that pediatricians depend entirely on vaccines and the resultant illnesses for their income. Unless this issue is settled we are not going to see any perceivable shift in vaccine policy in the near future.

So the overall picture is that vaccine safety is not even low rung priority of any of the stakeholders, except for the public for whom it is the one and only priority. In India, I have had access to meeting records where vaccine policies are discussed and I can declare that vaccine safety is not usually even touched upon. The whole thrust is on introducing new vaccines and of ways to finance the decisions.

Vaccine effectiveness has been questioned in published literature. According to a published study in medpage, vaccine induced antibodies do not necessarily translate into immunity. Cases of measles, whooping cough and mumps outbreaks in fully vaccinated children have been reported in many countries. Vaccine preventable disease outbreaks are blamed on non vaccinated children without releasing key information about the disease outbreak in vaccinated children. The herd immunity argument used to push vaccines into the maximum number of children has been questioned as it is not based upon scientific evaluation. Whereas countries such as Japan and Sweden concede cases of vaccine adverse effects and pay compensation, those vaccines continue to be administered in other countries. Vaccine batches rejected in developed countries are not destroyed but shipped to developing countries. Currently a large batch of a flu vaccine associated with risks is being considered to be shipped elsewhere. Companies have reportedly even intentionally shipped infected ingredients of vaccines so as to cause global outbreaks of diseases mandating further vaccines.

Thus we are compelled to come to the conclusion that the risk vs benefit analysis that the vaccine lobby tom-toms to promote this highly controversial procedure is, to put it very mildly and politely, seriously flawed.

All that I have commented upon here has been published in various books, journals and is also available on the internet. I have merely collated the information to create awareness about vaccine risks. Parents are advised to do their own research before deciding to vaccinate their children. Always remember, as stated by Dr Ajay Gambhir of India, past Vice President of IAP, and a good friend of mine, that you have a choice and that no one can infringe upon your rights to forcefully vaccinate your child. If that is done please hire a lawyer, a case of assault in the nearest police station against the doctor or institution involved and bring the matter to the notice of the IMA, IAP or the Health Department. There is no law in India mandating vaccines. The government and also the IAP merely recommends vaccines and tries to persuade parents to vaccinate their children through the media and by employing celebrities to send out the message.

Vaccine risks are never revealed.