

VACCINE REPORT

Focus on: The 2009-2010 H1N1 Swine Flu

MYTH: The last time the US government declared a swine flu epidemic, many lives were saved.

FACT: The vaccine killed more people than the flu.

In February 1976, an Army recruit felt tired and weak but went on a long training hike anyway. Within 24 hours he was dead, believed killed by swine flu. Later testing revealed that many soldiers at the base were infected with the same virus but none fell ill.

Based on this one case, President Gerald Ford, listening to his medical advisors, said a swine flu was going to sweep across America: "This virus was the cause of a pandemic in 1918 and 1919 that resulted in over half a million deaths in the United States, as well as 20 million deaths around the world."

Forty-six million Americans followed the President's advice and took the swine flu vaccine. The vaccine killed at least 25 people, left at least 500 paralyzed and many thousands more injured.



We say *at least* because according to the US Food and Drug Administration (FDA) only 10% of the vaccine injuries that occur are ever reported. The actual number of deaths and injuries may therefore be much, much higher.

Even with all the underreporting, so many people were reported hurt that the program was stopped after about two months. Four thousand Americans sought damages of \$3.5 billion.

The swine flu scare of 1976 has been called the "greatest public-health fiasco in the history of the US" by Thomas Stone, MD.

[Stone T. Open letter to pediatricians on flu vaccines. <http://articles.mercola.com/sites/articles/archive/2008/01/02/tom-stone-letter.aspx>]

[Anderson WL. Government and the flu: a short history. *Mises Daily*. January 2, 2004. <http://mises.org/story/1407>]

The evidence shows that we are headed for an even greater flu fiasco in 2009-2010. See the myths and the facts below.

MYTH: Millions died from the flu in the 1918-1919 pandemic.

FACT: Bacterial infections were responsible for many of those deaths, not the flu.

Researchers studying deaths from the 1918-1919 world flu pandemic have discovered that almost all of those deaths were caused by secondary bacterial pneumonia, which swept in after people's bodies had been weakened by the flu virus. Today, due to a better understanding of the disease, bacterial pneumonia is not a big killer. The major bacterial pathogen associated with influenza-related pneumonia in 1918 was *Streptococcus pneumoniae*.

[Brundage JF, Shanks GD. Deaths from bacterial pneumonia during 1918-19 influenza pandemic. *Emerg Infect Dis*. 2008;14:1193-1199.]

MYTH: In the 1918 swine flu pandemic, medical care saved millions from death.

FACT: In the 1918 pandemic, medical care caused millions of deaths.

Under medical care the mortality rate was horrific. The mortality rate in US military hospitals averaged 36%, the mortality rate in US medical hospitals was

30%- 40% and a rate of 68% was reported in medical hospitals in New York City.

[Patterson MM. Osteopathic methods and the great flu pandemic of 1917-1918. *J Am Osteopath Assoc.* 2000;100:309-310.]

However, the mortality rate under chiropractic, osteopathic and homeopathic care was zero to 1%. A death rate as low as one in 8000 was reported by some practitioners.

[Magoun HI. More about the use of OMT during influenza epidemics. *JAOA.* 2004;104(10):406-407.]

[Chiropractic statistics. *The Chiropractic Research and Review Service.* Indianapolis, IN: Burton Shields Press. 1925.]

[Winston J. Influenza-1918: homeopathy to the rescue. *The New England J of Homeopathy.* 1998;7(1):112-115.

Why the difference? Regular MDs suppressed the patient's fever with aspirin. The osteopathic, chiropractic and homeopathic practitioners, in addition to their techniques to promote body health, permitted fevers and symptoms to express themselves.

Frank L. Newton, MD of Somerville, MA who treated patients during the 1918 flu epidemic commented: "There is one drug which directly or indirectly was the cause of the loss of more lives than was influenza itself: aspirin. Aspirin was taken until prostration resulted and the patient developed pneumonia."

[Winston J. Influenza-1918: homeopathy to the rescue. *The New Eng J of Homeopathy.* 1998;7(1):112-115.

MYTH: Taking aspirin and Tylenol™ gets a person better faster.

FACT: Taking aspirin and Tylenol™ keeps a person sicker longer.

Fever is one of your body's most powerful healing mechanisms. In one study flu sufferers who took aspirin or acetaminophen (Tylenol™) were sick an average of 3½ days longer than people who did not take these drugs.

[Plaisance KI et al. Effect of antipyretic therapy on the duration of illness in experimental influenza A, Shigella connei, and Rickettsia rickettsii infections. *Pharmacotherapy.* 2000;20(12):1417-1422.]

MYTH: The WHO (World Health Organization) declared a H1N1 swine flu pandemic because of large numbers of hospitalizations and deaths.

FACT: A pandemic merely means the infection has spread to many countries.

Even though the disease is relatively mild and most people recover without medical care it is considered a pandemic because it has spread over a large area. The term pandemic is not based on severity of illness but on geographic distribution.

MYTH: Swine flu is spreading all over America and killing large numbers of people.

FACT: The swine flu is no worse than, or even milder than, regular flu.

By mid-July 2009 all 50 US states plus the District of Columbia, American Samoa, Guam, Puerto Rico and the US Virgin Islands reported 40,617 "probable and confirmed" cases of swine flu and 263 deaths. By "probable" it is not known for sure if swine flu was the cause of death. The CDC claims that every year there are about 36,000 deaths from the flu. So far this swine flu seems less dangerous than seasonal flu.

According to WHO Director-General Dr. Margaret Chan (June 11, 2009): "Many people are having mild disease, they recover without medicines in some cases and it is good news."

MYTH: Most scientists and medical healthcare practitioners support the use of the swine flu shot.

FACT: Many esteemed scientists see no value in the swine flu shot; many medical professionals are refusing the shot.

According to Tom Jefferson, MD, who was interviewed in Der Spiegel magazine: "In the worst case, the vaccine will be totally ineffectual. In the best of cases, the few decent studies that exist show that the vaccine mainly works with healthy young adults. With children and the elderly, it only helps a little, if at all."

Spiegel magazine: "Is it reasonable to keep vaccinating against seasonal influenza?"

Dr. Jefferson: "I can't see any reason for it."

[Interview with epidemiologist Tom Jefferson, MD. Spiegel on-line international. July 21, 2009. www.spiegel.de/international/world/0,1518,637119,00.html]

Neither can many MDs, nurses and other healthcare workers who are refusing the swine flu shot. Commenting on a report that appeared in the *British Medical Journal*, the *Seattle Times* reported: "About half of Hong Kong's health workers would refuse the swine flu vaccine, new research says, a trend that experts say would likely apply worldwide."

[Half of health workers reject swine flu shot. *The Seattle Times.* August 25, 2009. http://seattletimes.nwsourc.com/html/health/2009736877_apeumedswinefluvaccinerefusal.html?syndication=rss]

They are fortunate to have a choice. There are those who wish to make this dangerous, useless vaccine mandatory!

MYTH: The ingredients in the swine flu shot are safe.

FACT: The swine flu shot contains untested dangerous chemicals.

The new H1N1 (swine flu) vaccine will be made in PER.C6 cells (human retina cells) and contain MF59, a potentially debilitating oil-based adjuvant primarily composed of squalene, Tween 80 and Span85. All oil adjuvants injected into rats were found to be toxic. In testing, all rats developed an MS-like disease that left them crippled and dragging their paralyzed hindquarters across their cages. When injected in humans at 10-20 ppb (parts per billion) severe immune responses, such as arthritis and lupus, were reported.

[Kenney RT, Edelman R. Survey of human-use adjuvants. *Expert Review of Vaccines*. 2003;2(2): 167-188.]

[Matsumoto G. *Vaccine A: the covert government experiment that's killing our soldiers and why GI's are only the first victims of this vaccine*. NY: Basic Books. 2004:54.]

In addition, squalene is linked to autoimmune disorders including rheumatoid arthritis, multiple sclerosis, lupus, ALS (Lou Gehrig's disease) and Gulf War Syndrome (GWS). Research reveals that all GWS patients immunized for service in Desert Shield/Desert Storm had antibodies to squalene while all the Persian Gulf veterans without GWS had no antibodies to squalene. [Asa PB et al. Antibodies to squalene in Gulf War syndrome. *Exp Mol Pathol*. 2000;68(1):55-64.] This year's swine flu shot contains one million times more squalene than the vaccine that caused Gulf War Syndrome in over one hundred thousand soldiers.

[Jacobucci G. Million times more squalene in H1N1 vax than caused GW!! *rense.com/general87/mill.htm*. August 25, 2009.]

MYTH: One shot is all that's needed.

FACT: You'll need many shots to comply with government recommendations.

Federal health officials recommend that most Americans get three flu shots this fall: one regular flu shot and two doses of any vaccine made against the new swine flu strain.

MYTH: The drug companies are standing behind their product.

FACT: Vaccine makers and federal officials will be immune from lawsuits for any harm relating to the swine flu vaccine.

As millions of Americans are being told they should get the swine flu vaccine, the Department of Health and Human Services granted vaccine makers, and

federal officials that tell people to get vaccinated, immunity from lawsuits that result from the vaccine.

[www.huffingtonpost.com/jeffrey-smith/youre-appointing-who-plea_b_243810.html]

If the shot is so safe why did the drug companies request immunity from lawsuits? If you are hurt from the shot you cannot sue the manufacturers. This fact alone is making people question the vaccine's safety.

MYTH: The vaccine is properly tested for safety.

FACT: The vaccine will be administered before safety tests are concluded.

The Associated Press was told by the manufacturer (Novartis) that the vaccine will likely be on the market before the trial finishes.

[http://news.yahoo.com/s/ap/20090805/ap_on_he_me/eu_med_swine_flu_vaccine.]

Because of the great fear of a horrible flu epidemic, a federal advisory panel permitted the FDA to approve the swine flu vaccine before safety trials are finished.

When is a drug ever considered safe enough to put on the market before safety tests are finished?

The fox is guarding the henhouse.

In addition, the research used to test the swine flu vaccine is poor. For example, 6,000 people were tested but they did not all get the same vaccine. Some were given a vaccine grown in chicken eggs, others were given different versions. Some test subjects got the vaccine with an adjuvant, while others did not.

This research is also insufficient to tell us anything useful because not enough people are being tested. How can 6,000 people give accurate information on hundreds of millions? The only true test of this vaccine will be done as "post marketing surveillance." That means after the vaccine is administered we'll find out how safe or dangerous it is.

This rush has not gone unnoticed. In the July 27, 2009 *Guardian* it has been reported: "In a drive to inoculate people against swine flu before winter, many European governments say they will fast-track the testing

of a vaccine, arousing concern among some experts about safety and proper doses.”

[Cheng M. Europe fast-tracking swine flu vaccine. *The Guardian*. July 27, 2009.

[www.guardian.co.uk/world/2009/jul/26/fast-tracked-swine-flu-vaccine]

MYTH: Independent government decision-makers decide who should get the flu shot.

FACT: People with financial ties to the vaccine industry advise government committees.

The Centers for Disease Control’s 15-member Advisory Committee on Immunization Practices (ACIP) makes recommendations each year on who should be vaccinated. For the 1999-2000 season, the committee recommended that people over age 65 and children with medical conditions have a flu shot. Seventy-four million people were vaccinated. For the 2000-01 season, the committee lowered the age for universal vaccination from 65 to 50 years old, adding 41 million people to the list. For the 2002-03 season, the ACIP added healthy children 6 months to 23 months old, and for 2004-05, children up to 5 years old. Almost all the ACIP members who make these recommendations have financial ties to the vaccine industry. The fox is guarding the henhouse.

MYTH: Acute illness is bad for you.

FACT: Acute illness is beneficial for you.

Traditionally healers have recognized the benefits of acute infectious illness. Hippocrates, the “Father of Medicine,” wrote: *Diseases are crises of purification, of toxic elimination. Symptoms are the natural defenses*

of the body. We call them diseases, but in fact they are the cure of diseases.

The cleansing or detoxifying aspect of illnesses such as the flu (fever, vomiting, diarrhea, sweating) are uncomfortable and yet are of great benefit. When properly managed, acute infectious illness leaves a stronger, cleaner, healthier person in its wake.

Researchers have discovered that those who had febrile infectious childhood diseases have less cancer as adults. [Albonico HU, Braker HU, Husler J. Febrile infectious childhood diseases in the history of cancer patients and matched controls. *Medical Hypotheses*. 1998;51(4):315-320.] Another study revealed that “a history of common colds or ... influenza ... was associated with a decreased risk of stomach, colon, rectum and ovarian cancer.” [Abel U, Becker N, Angerer R et al. Common infections in the history of cancer patients and controls. *J Cancer Res Clin Oncol*. 1991;117(4):339-344.] In yet another study the subjects who reported a history of infectious diseases such as colds and flu showed a 30% reduction in risk of brain tumors. [Schlehofer B, Blettner et al. Role of medical history in brain tumor development results from the international adult brain tumor study. *Int J of Cancer*. 1999;82:155-160.]

In Conclusion

- Suppressive medical care such as antibiotics, fever reducers, other drugs and vaccinations can make an illness far worse.
- Comfort the patient with natural healthcare methods such as chiropractic, homeopathy, acupuncture, naturopathy, etc.
- The flu for most is a temporary inconvenience that leaves a less toxic, healthier person in its wake.

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