**MYTH:** The flu causes over 36,000 American deaths every year.

**FACT:** The flu causes relatively few deaths.

Flu and pneumonia deaths are lumped together giving the false impression that thousands die of the flu. However, according to official US government figures:

- In 2002 the total number of flu + pneumonia deaths was reported at 65,984.
- Out of those 65,984 deaths only 753 were from the flu or 1.1% of the total.
- In 2001 the total number flu + pneumonia deaths was reported at 62,123.
- Out of those 62,123 deaths only 267 were from the flu or .4%.

[www.cdc.gov/nchs/data/nvsr/nvsr51/nvsr51_05.pdf]

**MYTH:** If I have flu symptoms I have the flu.

**FACT:** Most people with flu-like symptoms do not have the “flu.”

Most people suffering from fever, fatigue, cough and aching muscles may think they have the flu, but instead have an “influenza-like illness” or ILI. ILI are associated with over a hundred non-flu germs such as rhinoviruses, parainfluenza viruses, respiratory syncytial virus (RSV), adenoviruses, Chlamydia pneumoniae, Streptococcus pneumoniae and many others, but not the flu virus. [MMWR. 2001;50(44):984-986.] In one study the CDC found that only 13.4% of people who had flu symptoms actually had the flu. The remaining 86.6% had an ILI.


**MYTH:** The flu shot protects babies.

**FACT:** The flu shot is ineffective for babies.

In a review of more than 51 studies involving more than 294,000 children it was found there was no evidence that injecting children 6-24 months of age with a flu shot was any more effective than placebo.

[www.cochrane.org/reviews/en/ab004879.html]

**MYTH:** The flu shot protects children's immune systems.

**FACT:** Repeated vaccination at a young age increases the risk of influenza in older age.

This may be due to overall weakening of the immune system from the unnatural way the vaccines enter the body. It is only natural flu infection that strengthens the immune system.


**MYTH:** The flu shot protects asthmatic children.

**FACT:** There is no evidence the flu vaccine helps asthmatics.

In one study 400 children with asthma were given flu vaccine and 400 children with asthma did not receive the influenza vaccine. The two groups were compared with respect to clinic visits, emergency department (ED) visits and hospitalizations for asthma. The study failed to provide evidence that the influenza vaccine prevents pediatric asthma exacerbations.


**MYTH:** The flu shot protects against the flu.

**FACT:** There is no proof that flu shots protect against the flu.

J. Anthony Morris, Ph.D., former Chief Vaccine Control Officer, US Food and Drug Administration (FDA) said, “There is no evidence that any influenza vaccine thus far developed is effective in preventing or mitigating any attack of influenza. The producers of these vaccines know that they are worthless, but they go on selling them anyway.”

For example, the product insert for a 2011-2012 flu vaccine from GlaxoSmithKline states: “There have been no controlled trials adequately demonstrating a decrease in influenza disease after vaccination with FluLaval®.”

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[www.cochrane.org/reviews/en/ab004879.html]
**MYTH:** The flu shot will prevent my child from getting serious illness.

**FACT:** The flu shot increases the chances your child will be hospitalized.

Not only is the flu shot useless for children, it is dangerous. At the 105th International Conference of the American Thoracic Society in San Diego, May 20, 2009, it was reported that “Youngsters who had received the flu vaccine had three times the risk of hospitalization, as compared to children who had not received the vaccine. For kids with asthma, there was even a higher risk …”


In spite of these findings The Centers for Disease Control and the American Academy of Pediatrics continue to recommend annual influenza vaccination for all children 6 months to 18 years and The National Asthma Education Program continues to promote annual flu vaccination of asthmatic children.

**MYTH:** The flu shot protects adults.

**FACT:** The flu shot is more or less useless for adults.

In a review of 48 reports involving more than 66,000 adults, the benefit of getting vaccinated was minimal (if any). At most the researchers felt that “vaccination of healthy adults only reduced risk of influenza by 6% and reduced the number of missed work days by less than one day (0.16) days. It did not change the number of people needing to go to hospital or take time off work.”

[www.cochrane.org/reviews/en/ab001269.html]

**MYTH:** The elderly are protected by the flu shot.

**FACT:** The elderly are not protected by the flu shot.

In a review of 64 studies, for elderly people living in nursing homes, flu shots were non-significant for preventing the flu. For elderly living in the community, vaccines were not (significantly) effective against influenza, ILI or pneumonia.

[www.cochrane.org/reviews/en/ab004876.html]

A common problem in nearly all medical research is the bias of the researchers. For example, in one famous study, researchers revealed that even though immunization rates in the elderly increased from 15% in 1980 to 65% there has been no decrease in deaths from influenza and pneumonia.

**MYTH:** The flu vaccine is well-researched.

**FACT:** No one knows how dangerous the flu vaccine is because it has not been properly studied.

Flu vaccines have not been evaluated for their ability to cause cancer or mutations or whether they can cause reproductive problems such as sterility. It is not known whether flu vaccine can cause fetal harm when administered to a pregnant woman or can affect future reproductive ability. It is not known whether flu vaccine is excreted in human milk. Animal fertility studies have not been conducted.

According to the manufacturers the flu vaccine should not be administered to anyone with hypersensitivity...
to any flu shot components. Most people do not know if they are sensitive to any of these ingredients in the flu shot until they are given the shot.

**MYTH:** The flu vaccine is safe.  
**FACT:** There have been reports in Europe of narcolepsy as well as reports of seizures and convulsions following the flu vaccine.

In Australia, a flu vaccine was banned in April 2010 for children after dozens of reactions of vomiting, high fevers and convulsions, among other severe reactions.

[www.medicalnewstoday.com/articles/200044.php]  
[www.naturalnews.com/029586_Australia_vaccines.html]

Injuries that may take weeks or months to surface will probably not be recognized as related to the shot. A partial list of possible vaccine reactions includes: hot flashes/flushes, chills, fever, malaise, shivering, fatigue, asthenia and facial edema. In rare cases, hypersensitivity reactions have lead to anaphylactic shock and death. Other reactions include: diarrhea, nausea, vomiting, abdominal pain, headache, dizziness, neuralgia, paraesthesia, confusion, febrile convulsions, Guillain-Barré Syndrome, myelitis (including encephalomyelitis and transverse myelitis), neuropathy (including neuritis) and paralysis (including Bell’s Palsy).

[Package insert. Influenza Virus Vaccine Fluvirin® 2010-2011 FORMULA 6.3 Postmarketing Experience]

**MYTH:** Flu shots are not linked to brain damage.  
**FACT:** Flu shots are linked to Alzheimer’s disease.

According to Hugh Fudenberg, MD, the world’s leading immunogeneticist, the chances of getting Alzheimer’s disease is ten times higher if an individual has had five consecutive flu shots. Dr. Fudenberg states that the mercury in the shot is the ingredient that causes the brain damage. Multidose vials of the flu vaccine contain mercury.

[Hugh Fudenberg, MD. Presentation at the National Vaccine Information Center’s First International Conference on Vaccination, September 1997, Arlington, VA.]

Dr. Fudenberg’s findings were given more weight in another study that found that Alzheimer’s brains have more mercury. Researchers found twice as much mercury in the brains of those who died of Alzheimer’s as controls. An area of the brain that deals with memories and sensations had 4 times the mercury as controls.


**MYTH:** The ingredients in the flu shot are safe.  
**FACT:** The flu shot contains mercury and other toxic chemicals.

There are 25 micrograms of mercury per dose in most flu shots (multidose vial). That level is judged safe by the FDA for a 550 lb. person.

In 1999, government agencies called for the removal of mercury in vaccines. In 2001, the American Academy of Pediatrics stated, “mercury in all of its forms is toxic to the fetus and children.” Despite these actions, many of this year’s flu vaccines still contain mercury.

[http://www.organicconsumers.org/2006/article_3400.cfm]

**MYTH:** It’s safe to vaccinate during pregnancy.  
**FACT:** Vaccination during pregnancy is dangerous and useless.

Researchers found that vaccinating mothers does not reduce respiratory illness in their infants nor reduce respiratory illness in their newborns. “Maternal influenza vaccination did not significantly affect infant outpatient and inpatient visits for acute respiratory illness.”

### Some flu shot ingredients

**Chicken embryos** – those allergic to chicken, including eggs and feathers, can become seriously ill from the vaccination  
**Sodium phosphate** – can affect heart and central nervous system  
**Sodium deoxycholate** – a tumor promoter and DNA damaging agent  
**Mercury** – a brain and nervous system toxin  
**Formaldehyde** – cancer causing  
**Beta propiolactone** – toxic to the liver and to the intestinal tract  
**Gentamicin sulfate & polymyxin** – antibiotics  
**Neomycin sulfate** – antibiotic  
**MSG** (monosodium glutamate) – causes brain damage in experimental animals  
**Gelatin** – obtained from selected pieces of calf, pork and cattle skin  
**Polyethylene glycol-p-isooctylphenyl ether** – spermacide (kills sperm); can cause chills, confusion, dizziness, fever, lightheadedness, muscle aches, peeling of the skin; causes severe eye irritation; harmful if swallowed, inhaled or in contact with skin. Manufacturer states: FOR RESEARCH USE ONLY. NOT FOR HUMAN OR DRUG USE.
Why do pediatricians recommend pregnant women eat less tuna to avoid mercury but also recommend the mercury-laden flu shot?

**MYTH:** Acute illness damages your body and is bad for you.

**FACT:** Acute illness is historically considered beneficial.

For thousands of years healers have recognized the necessary role of acute infectious illness. Hippocrates, the “Father of Medicine,” recognized the role such illness played in the larger picture of health. He 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 may be 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. [Schlehoper B et al. Role of medical history in brain tumor development results from the international adult brain tumor study. *International Journal of Cancer.* 1999;82:155-160.]

**MYTH:** Lowering fever shortens the duration of an illness.

**FACT:** Lowering fever keeps you sick longer.

Fever is one of your body’s most powerful healing mechanisms. In one study flu sufferers who took aspirin or acetaminophen were sick an average of 3.5 days longer than people who did not take the drugs. [Plaisance KI et al. Effect of antipyretic therapy on the duration of illness in experimental influenza A, *Shigella sonnei,* and *Rickettsia rickettsii* infections. *Pharmacotherapy.* 2000;20(12):1417-1422.]

**MYTH:** The flu vaccine is changed every year to combat the next flu.

**FACT:** No one knows what flu will be circulating next season.

It’s impossible to predict with any precision what vaccine will work when flu season starts. It is not possible in advance of the influenza season to predict what vaccine will be needed to match the flu strain that is circulating. In some years when vaccine and circulating strains were not well matched, no vaccine effectiveness was demonstrated. As one study reported, “Vaccination may not provide overall economic benefits in most years.” [Bridges CB et al. Effectiveness and cost-benefit of influenza vaccination of healthy working adults: a randomized controlled trial. *JAMA.* 2000;284(13):1655-1663.]