

# **Seven key reasons to worry about vaccinations**

## **Why vaccine safety must remain a priority all over the world**

Vaccinations are always presented to the public as a beneficial and life saving health measure. Nevertheless, major safety issues have never been addressed, whereas the need for vaccines has to be weighed against the tremendous advantages of natural immunity.

## **Vaccination does not equal immunization**

On an individual level, vaccination can never guarantee that the vaccinated will be immune to the disease and thus protected against its complications. Some people do not respond to vaccination at all, others benefit only a temporary protection against the disease. This postpones the occurrence of the disease to an older age, which is often burdened by increased complication rates. The suggestion that a vaccinated child would never catch the disease it has been vaccinated against and, thus, would never die or suffer complications, is simply untrue and misleading. Countless examples have been described in the official medical literature of vaccinated people affected by the disease they were vaccinated against, and of epidemics occurring in highly or even completely vaccinated populations.

Epidemiologically, national statistics have illustrated dramatic decreases in both disease morbidity and mortality in the absence of vaccines.

Basic hygienic measures, clean water supplies, and attention for appropriate nutrition definitely save more lives than any vaccine. In developing countries, vaccination programs often compete with the funds available for these basic health policies.

The goal of global disease eradication has never been met (even smallpox was not conquered by vaccination, but by quarantine measures). In some cases, this is not even desirable, considering the value of some childhood diseases, under controlled conditions, for developing a stronger immune system.

Herd immunity has been a concept copied from naturally occurring epidemics, but never reached after vaccination campaigns. Nevertheless, herd immunity has always been used as a moral argument pressuring those who doubt vaccination into conforming with the majority of vaccinated people.

Recently, European countries with high Gross National Products and high investments in health have experienced large disease outbreaks and had higher incidence of infectious diseases than countries with low GNP \*. The high vaccine uptake in these countries obviously did not prevent the increase in so-called vaccine preventable diseases.

The occurrence of epidemics is blamed time and again on a lowering vaccination coverage. This is absolutely untrue. In recent epidemics, e.g. mumps, all

cases occurred in adequately vaccinated young people. This proves that the entire vaccination program has been a total failure.

### **Vaccine safety cannot be guaranteed**

Vaccination costs lives and causes both short and long term adverse effects.

Not a single vaccine is free of risk for adverse reactions. It suffices to read the insert to find prove of this.

Numerous health hazards, like infections and allergies, are more prominent in vaccinated than in non-vaccinated subjects. A long list of auto-immune diseases (e.g. Guillain-Barré paralysis and multiple sclerosis) repeatedly have been described after vaccination.

The alleged advantages of vaccination mainly are the result of calculations based on theoretical models, rather than factual observation.

### **Valuable alternatives are not being given the attention they deserve**

**Natural immunity**, in the first place, has proven to be invaluable for long term good health.

Natural immunity is way more than the absence of artificial, vaccine induced immunity. It is the result of a combined approach of minimal use of therapeutic drugs and/or vaccines, a balanced diet, alternative and natural therapy in case of illness, and emotional wellbeing.

Many historical examples have shown superior health in children that were risen this way, compared to vaccinated children.

Neonatal tetanus can be avoided perfectly by proper **education** on how to take care of the umbilicus in neonates.

Measles mortality can be virtually abolished by providing vitamin A **supplements** and by avoiding the suppression of fever during the disease.

Vaccines are no substitute for **basic living conditions**. Without sufficient food, healthy water supplies, and basic housing conditions and sanitation, vaccines do not offer a sufficient basis for good health. If these conditions are met, vaccination appears to become of marginal importance only. Especially in underdeveloped countries, the answer to disease and death is primarily a political one, not a medical one.

### **Scientific recommendations for vaccination are often driven by motivations that have nothing to do with concern for public health**

The vaccine industry is gaining billions of dollars every year. Moreover, they are exempted of legal prosecution when things go wrong, e.g. in the USA. The cost for advertising is minimal, as national authorities promote the vaccines. Incorporation into national vaccination schedules guarantee enormous and predictable selling. All this makes the vaccine industry extremely profitable and

attractive.

Even in developing countries, governments have to struggle to buy their vaccines at reduced prices in order not to drain their national funds on one single strategy. The fact that they succeed in doing this means that the same vaccines could have been sold in developed countries at a fraction of the cost that our governments pay for them.

Scientists take enormous advantage of this situation. They collect fame and status in the scientific community with publications sponsored by the vaccine industry. Comparative studies have proven that this kind of publications is biased, and more favorable toward vaccines than independent publications. Thus, money, power and scientific ambition play a major role in the development of vaccination calendars.

### **Vaccine adverse effect victims are left to their own**

Although vaccines are in variably recommended, if not mandatory, victims of vaccine adverse reactions are generally left to themselves. It is hard to find a doctor who takes their stories seriously, and is willing to see the link between the vaccination and the health hazards. As a rule, adverse effects are dismissed as “coincidental”, or eventually “just triggered but not caused by the vaccine”. Even more difficult becomes the victim’s road if he/she tries to get official recognition and compensation for the damage they suffered. Some countries do not have compensation laws at all; those who have make it extremely difficult for the victim to prove a connection between the vaccination and their health problem. Years of great stress and financial efforts discourage many victims, and they give up seeking the compensation they are entitled to.

Even the social environment of the victim (family, neighbors, friends) often turn their backs on parents who are seeking recognition for the link between the harm they suffered and the vaccine administered.

Vaccine pharmacovigilance does not reach the level of efficacy needed. Active post-vaccination surveillance is almost inexistent, or very short term. In many countries, citizens have no means of communicating adverse effects to the authorities. The doctors, who are supposed to do this, are not interested, because they lack the time, or want to protect themselves or their colleagues. The result of all this is that most adverse reactions are left unrecorded, and statistics falsely appear safe.

### **6. Mass vaccination costs gigantic amounts of money**

Vaccination is always presented as very cost effective. The cost of vaccine programs is calculated to be only a fraction of the cost for the treatment of the disease if not prevented by vaccination. This is a hoax, because :

- only the cost of the vaccines is taken into consideration. The cost for the treatment of apparent adverse effects is not considered;
- many of the diseases vaccinated against are basically benign. The cost for

treating these illnesses is almost nil, whereas the cost of the vaccines is considerable;

- very often, vaccines substitute acute, self limiting diseases for chronic illnesses, like asthma, convulsions, or other neurological damage, which need lifelong treatment and medical follow-up. Many victims need specialized care in institutions, even after their parents have passed away. The cost for all this is enormous (consultations, drugs, investigations and interventions), and definitely not considered by pro vaccine publications ;
- the calculations are based on the presumption that vaccination guarantees the absence of the disease vaccinated against, whereas we know this is not the case ;
- when vaccination delays the appearance of childhood diseases, it is well known that those diseases may occur at a later age, with a higher rate of complications and thus higher medical expenses;
- the apparent beneficial effect of acute (febrile) diseases on the development of the immune system, with healthier individuals and less treatment needed, is also not taken into consideration;
- the general public is happy about receiving vaccines “for free”, but forgets that they are paid for to the manufacturers by the state with their tax money.

### **Free choice about vaccination is a basic human right.**

Vaccination interferes with our immune system and, thus, is nothing less than a medical intervention on our health. It is a basic right for everyone to have free choice about which medical interventions we want or refuse. Mandatory vaccinations are a clear-cut breach to this right. It sacrifices the individual’s holy right on physical integrity to the alleged wellbeing of society. *“Infant mortality rates regressed against number of vaccine doses routinely given “* (N. MILLER)

The EFVV members

#### **Sources:**

\* WHO.

[www.euro.who.int/\\_data/assets/pdf\\_file/0017/84302/Seven\\_Key\\_Reasons.pdf](http://www.euro.who.int/_data/assets/pdf_file/0017/84302/Seven_Key_Reasons.pdf)

→→ Le EFVV (European Forum For Vaccine Vigilance) a souhaité réagir, avec ce texte, à la publication que l’OMS a fait paraître à l’occasion de la semaine européenne de la vaccination sous le titre : « *Les Sept raisons essentielles pour que la vaccination reste une priorité dans la région européenne de l’OMS* » (lien indiqué ci-dessus).