Disease v Vaccination

Where does the risk really lie?

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1. Introduction

This report is written by a parent for other parents. I spent months researching both the pro and anti stances of vaccination. My goal was to determine whether the risk of disease was greater than the risk from vaccination, living in a first world country, today. Simply put, which is riskier – the disease or the vaccine. You would think the answer is pretty straight forward, but you would be surprised.

The benefit risk ratio is an important decision in anyone deciding whether to vaccinate or not. Contrary to popular belief and marketing, childhood diseases in a developed country are not as dangerous as we are led to believe. Catching a particular disease does not mean you will die from it. I will show how vaccines were actually introduced at a time when diseases had already declined to a low risk level. This fact is proven, scientifically.

Plus, vaccines are known to have side effects, some of them minor but some major and even fatal. There comes a time when the risk of taking the vaccine is greater than the risk from the disease itself. This probably sounds strange to you and something most people never consider because we are told differently, but that scenario is now playing itself out in our society.

Recent findings and court cases are showing that the adverse effects of vaccines are real. Many have been kept under cover over the years but some high profile cases are now bringing them to light. More and more physicians are questioning the issues around vaccines.

The power of the pharmaceutical companies is immense and their influence extends to all walks of life including doctors, governments and media. The Pharmaceutical Business is the most profitable US industry. Unfortunately in the world we live in, with money comes power and inevitably corruption.

In the USA the Vaccine Injury Compensation System, setup in 1988 has paid out $1.8 billion so far to settle claims of vaccine induced damage or death (HRSA statistics report June 1, 2009, awards paid).

Injury or death due to the DTP & MMR vaccines were top of the list for the number of compensations (HRSA statistics report, Claims Filed and Compensated or Dismissed by Vaccine May 1, 2009).

There are still thousands of claims outstanding and these figures do not include any claims for Autism, as the link between Autism and vaccines has supposedly not been proven. I will show you reports that will convince any normal person that the link is quite obvious.

However, because vaccine manufacturers and the federal government are not required to admit responsibility, even when a claim is paid, they are able to assert that "the settlement of a claim does not necessarily establish liability."
The FDA (Food and Drug Administration) admits that the 12,000 reports it receives annually on side effects from vaccines represent only a fraction of what actually occurs. They estimate that only about 10% of adverse reactions are reported (Reported by KM Severn, R.Ph.D. in the Dayton Daily News, May 28, 1993. Ohio Parents for Vaccine Safety, 251 Ridgeway Dr., Dayton, OH 45459), a figure supported by two NVIC investigations (National Vaccination Information Center "Investigative Report on the Vaccine Adverse Event Reporting System").

In fact, the NVIC reported that in New York, only one out of about 40 doctor's offices (2.5%) confirmed that they did report a death or injury following vaccination.

This is something that cannot be contended – vaccines do cause harm. So, are you sacrificing your child unnecessarily? Even though you are not told so, that is potentially what you are doing every time you vaccinate.

The Manufacturers, the FDA (Food and Drug Administration) and Governments know the dangers but the greater good is more important to them (Herd Immunity). Children will die because of vaccines but that's the sacrifice you are expected to make in order to rid our world of disease. I'm sure vaccination programs have never been marketed in this way, but that is the truth.

This report is essentially about 4 things;

1) Showing the history of diseases from the year 1900 onwards and the introduction of vaccines. You'll be surprised by what you see.
2) Showing how statistics are used to persuade you. For the same event you can prove the pro view and the anti view and be correct at the same time. It's about manipulating, excluding or being selective with statistics. Happens all the time in our world, from medicine to politics. You'll read the paper and see the news in a different light after reading this.
3) I will showcase some doctors who have been instrumental in bringing forth the truth about childhood diseases, their risks and the risks of vaccination.
4) And I will finish with a section on the importance of nutrition in building natural immune systems for our children.

I have chosen just a few diseases to highlight, as detailing them all is beyond this report. I have chosen the common ones and also the new Cervical Cancer Vaccine. I have gone for what I feel a parent would look for. References for further reading are provided throughout.
2. About Me

I started researching this subject before the birth of my first daughter. I wanted to make an informed decision about vaccination. I was not anti-vaccination but what I discovered concerned me and as a result we have not vaccinated our children.

Every day I am grateful that I thoroughly researched this and made the decision I did. I can sleep at night without any guilt and with a clear conscious. The reason I say this is that as soon as someone makes it known they do not vaccinate they are accused of many things; anything from abusing their children to risking the lives of every other child.

Once you read this report you will see how absurd that statement is, it comes from the medical institutions, governments or the uninformed.

There are far more factors involved in protecting your child from disease than just vaccines. Vaccines have become the 'easy' solution but they come at a price, maybe not now, but you have no idea of the long term effects. No one does in fact, because NOT ONE study has been done on the long term effects of vaccines!

I have spent many hours researching this subject and feel very passionate about it. The pro-vaccination side is all that is offered in the media, schools, doctor's offices and government publications. I am giving you the other side here in this report. Not hearsay or myths but solid scientific facts, which will shock you. Facts which could not be discredited by top pro vaccination experts, in legal proceedings (although they tried, very hard).

This subject is huge and I have included many references for further reading. Luckily the internet has brought information to our screens and it is easily accessible. This is a relatively short report and serves as an introduction. I am assuming you are familiar with the argument for vaccination and present here facts that contend the normal view and statistics given. The reader is advised to further investigate themselves and to make sure they know what they are getting their child into.

I cover this subject from the perspective of a parent. I have attempted to bring the information that parents need to know. Not what doctors, scientists or politicians think you want to know or indeed what THEY would like you to know.

We are real people and our children are precious to us. But it seems that the drug companies and governments have forgotten that; we have become numbers in the war to control the market.

If a parent tells you that their child was developing normally and then they had vaccinations and their child screamed for 24 hours and then never uttered a word again, you would be shocked. If a thousand people repeated the same story you’d expect an investigation. Not so, doctors deny that it could be the vaccine and that it is just a coincidence. First response seems to be denial. This happens all the time. Check out the internet.

The science of observation does not exist in the vaccination debate. Parents who say their children reacted after vaccination are dismissed and told there is no proof your child’s reaction had anything to do with the vaccine.
These reports are never included in statistics. But if you put all these reports together in front of a jury, I'm almost certain you would be believed.

But 'science' won't accept it. It is no wonder that people talk about cover-ups and conspiracies, are you surprised when you get such a reaction. The real people are not being taken seriously and 'science' and medicine is doing a gross injustice to these people and their children.

I will show you doctors who have actually observed, not just concluded results from statistics. These mean more to me than any scientist who makes a conclusion based on figures only. Of course if a reaction happens even 1 second after a vaccination you probably cannot PROVE that the vaccine caused it. But you 'know'.

Vaccines are given to entire populations without any consideration to individuality and when adverse reactions happen this is actually used as a defense by the drug companies and doctors. There always seems to be an underlying condition which they could not have possibly known about. Of course not, they never checked and don't want to.

I would ask that you pay particular attention to the sections on Dr Jayne Donegan and Dr Archie Kalokerinos. The stories of these two alone will show you the proof you require. The section on Nutrition also gives insight and information as to what we should be doing instead of just relying on vaccines.

Please feel free to forward this report to anyone you think would be interested in it. I would like as many people as possible to read it and to start asking themselves what really is the truth. I would like parents to take control and research for themselves this very important subject. The future of our children depends on it.
3. **Statistics**

This is the one tool that has been used to show that vaccinations work and also that vaccinations do not work. If you are to view the evidence on offer to you then you need to understand how using statistics work. It can be applied to almost everything we are told these days; by Media, Governments and Medical institutions.

I found so many facts and figures that supported both sides of the argument that I was completely baffled as to how you could have both? Someone must be lying surely? But no, they show you only what they want you to see.

As an example;

Looking at Graph 1 it would seem obvious that the vaccine had a substantial impact on the reduction of death by Measles. But if you look at graph 2, the story is very different.

Graph 2 starts in 1900 not just 1960 and quite clearly shows death by Measles was well in decline before the vaccine was introduced. It's all about scale. Graph 1 looks much more impressive starting 1960 but not so starting 1900. You see how you can present a solid argument in your favor just by what scale you choose. Neither is lying.

Amazingly, similar examples can be found for Diphtheria, Whooping Cough and Polio. You will see examples of some of these later.

I found that anti vaccination proponents generally show graphs beginning at least 1900 and pro vaccination proponents show graphs starting at around 1944. As you see above it is quite clear why that is.
Another method used when stating facts is to state a global fact rather than a local one. For example the instance of cancer x is y% in the world. This ploy is used all the time. The stats you are given probably don't apply to your child, in your country. My daughter does not have the same risk of catching disease z as someone in the third world. And certainly not the same risk of dying from it. But the propaganda used to try and get me to vaccinate her will be whatever sounds the worst, in order to scare us.

For example “242,000 children die annually from Measles”. They won't give you a local figure for this in a developed country, because that's too low and doesn't have the desired impact. From the Centers for Disease Control and Protections (CDC) own statistics you'll see that in 2006 there were 66 deaths attributed to Measles in the USA.

In 2006 in the UK there was one measles death (in a 13 year old male who had an underlying lung condition and was taking immunosuppressive drugs).

Prior to 2006, the last death from acute measles was in 1992. (Office for National Statistics. Health Protection Agency). 1 death in 14 years from Measles! In the same period there were still over 70,000 incidences of Measles, but they didn't kill anyone. There is no way you can say that this disease is riskier than the vaccine in this case. MMR vaccine side effects are well documented.

By 2007 the chance of anyone in England and Wales dying of measles if no one were vaccinated was less than 1 in 55 million. Your chances of being struck by lightening are higher, in fact 30 to 60 times higher: Tornado & Storm Research Organisation

If children in third world countries are dying from measles, you could very reasonably conclude that this might not tell you much about what your child's risk might be. There are obviously differences in circumstances, and at least some of those children might not have access to the healthy food, good sanitation and the medical care you do.

When seeing statistics for outbreaks of disease be aware that when figures are quoted they rarely mention how many infected are actually already vaccinated. Vaccination does not give you immunity; the word immunization should be struck from any literature related to vaccinations.

One point made by anti vaccination people is that these diseases were all well in decline before vaccinations were introduced. This fact is dismissed by pro vaccination doctors and scientists, but no evidence provided to back that up. These graphs and many others exist (they have been taken from scientific data, national statistics etc) and have been shown to be correct. Dr Jayne Donegan used them successfully in her trial.

Also, from the pro vaccination side they will always quote that after introduction of a vaccine the said disease decreased rapidly. What they don’t say is that the uptake of that vaccine is never immediately high and takes years before it hits a level where any decline in disease can be attributed to the vaccine.

Every pro vaccine graph shows these steep declines and you assume that the vaccine did it. But even the decline on their graphs is due to something else.
For example;

**Diphtheria** – Vaccine introduced in 1941. Up to 1947 disease mortality and incidence declined considerably. But by 1947 only 36% of school children and 19% of younger children had been immunized. Other factors must have been involved of course. Maybe the compulsory education for 5-15 year olds introduced in 1944, ensuring children from low-income families received free meals and milk?

**Measles** - Great credit was given to the introduction of measles vaccine in 1968 for the lowering of measles notifications in the UK, however, with an uptake of only a 33% in that year, and a level that did not get above 55% until 1980 (*Dept of Health 1996*), when incidence and levels were already well down, other factors were obviously involved.

You will see from the graphs that follow it is quite clear that the diseases were well in decline before the introduction of vaccines and they continued their decline alongside the vaccines which didn’t have a high coverage for years to come.

Pro vaccination material will generally show you incidence rates rather than mortality rates. As you’ll see from the graphs mortality is not so impressive if you’re trying to persuade people to vaccinate. Incidence rates are obviously higher numbers and quoting these figures has more impact even though the threat of death is used to make you vaccinate! But incidence alone doesn’t make the disease dangerous.

Death (mortality) is the most extreme form of adverse effect of disease. If mortality reduces like this (as in the graphs), then it is a reasonable and a scientific hypothesis to predict that other harmful effects of a disease to have reduced in a similar fashion as time has gone by. We have seen many infectious diseases diminish in a similar fashion without any vaccines being required, such as cholera and typhoid. It is nothing new.
4. How deadly are Childhood Diseases?

We are told all sorts of horror stories about what will happen if we do not vaccinate and our children were to catch one of these diseases. Thousands of deaths could occur if we don’t vaccinate. However, if we look at figures from offices for National Statistics there is a very different picture.

For instance death from Measles between 1900 and 1965, in the UK, declined 99.4%. The vaccine was introduced in 1968. Similar scenarios occurred for other diseases, Whooping Cough for instance 99% reduction for this before vaccine was introduced. The following graphs all show this, and they are real and proven.

The mortality rate for tuberculosis fell no differently in countries that did and did not use the BCG vaccine. Scarlet fever, rheumatic fever and typhus were deadly killers. They all disappeared without a vaccine.

Seeing these figures and the graphs below it is clear that these diseases were already in major decline before the introduction of the relevant vaccines. The main reasons obviously being better food and clean drinking water. Added to that improved sanitation, less overcrowding and better living conditions.

These points are ridiculed by pro vaccinators but no counter evidence ever presented. But people are almost brainwashed into believing that the diseases are far more dangerous than any ‘minor’ side effects from a vaccine. In my research I was quite astounded at the belief system in place and even started to question myself. But the evidence was too overpowering and I know now, because I have researched and do not just repeat the medical literature.

Next you will see a selection of graphs showing the truth behind this theory; the graphs across USA, UK and Australia amazingly all show the same story.

When looking at the graphs see what happened to the diseases before the 1950’s. After this time most of the vaccines were introduced, Diphtheria being the exception (1941). In the UK Measles was introduced as late as 1968.

Also, don’t forget that the uptake on these vaccines early on was low, around 30%. The Measles vaccine didn’t achieve 55% rates until 1980!
United States Mortality Rates Per Age


United States Mortality Rates


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To see an excellent report on this and more graphs visit; Vaccines Did not Save Us - 2 Centuries of Statistics

It is pretty clear that the effects of these diseases were well in decline before the introduction of vaccines.

**Contradictory definitions of ‘science’**

There have never been any studies that PROVED the vaccines actually did cause the eradication of any disease; it has only been assumed by the fact that the epidemics seemed to have ceased (relationship).

The CDC uses the concept that a relationship does not prove causality to deny the Autism-MMR link, yet ironically, they don’t apply the same standard to the relationship between vaccination usage and the end of an epidemic.

> "Up to 90% of the total decline in the death rate of children between 1860-1965 because of whooping cough, scarlet fever, diphtheria, and measles occurred before the introduction of immunisations and antibiotics.*

Dr Archie Kalokerinos MBBS PhD FAPM.

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5. Disagreeing with the ‘Experts’

I discovered through my research that there exists a very strong one sided acceptance of vaccination. If you question it then you are hounded and attacked. I was quite shocked by the things I was reading. Mostly you are labeled a paranoid conspiracy theorist and told you are in a sect. It is quite absurd what nonsense comes out of the mouth of so called ‘experts’.

The general belief is that these diseases are deadly and that vaccination is the only way we will be saved. No one believes that you can just catch the disease and live through it and be fine. If you say you do not vaccinate your child then you are not only killing your child but every other child in the world. I even read one comment where a woman said that even if vaccines do cause autism she would rather have a child with autism than her child die from disease. That’s the kind of fear that exists.

When reading articles and responses on the internet, it is important to give very little attention to who and what the people say they are, rather focus on the evidence they present. If the opinion is full of attack and emotional language you can safely ignore that persons’ response. They obviously feel threatened by the opposing views and have not actually researched the subject.

Truth does not fear investigation, and if vaccines are so provably useful for enhancing the health of our children, then doctors shouldn’t mind people asking questions or even openly debating the merits of vaccination programs. And yet what you see with vaccines today is a cult-like worship of vaccines that despises scrutiny or even solid science. Vaccines are good because they tell us so, and that should be sufficient reason, we’re told. To me it almost looks like some of these professionals have been brainwashed and don’t have a mind of their own.

The common thing you see is that they say “I am a physician and I think x.” or “My doctor, who went to Yale, says y.” – people with decades of experience and education have been, and will always continue to be mistaken about things. What matters are the studies and methodologies, and not who said what and what their qualifications are.

The Doctor/Medical System Disease

How many people die each year due to physician error? An article in the Journal of the American Medical Association (JAMA) states that;

Doctors are the third leading cause of death in the US, killing 225,000 people every year! 106,000 of those deaths are due to negative effects of drugs.

Doctors are the third leading cause of death in the US

Those people were killed by doctors who made mistakes. Let us stop believing that doctors are here to deliver us from disease – they are just people who trade in medicine, and they are sometimes right, and sometimes wrong. This was in 2000, now they are the number one cause! See;

Doctors are the leading cause of death in the US
It seems that doctors are far more dangerous than some diseases.

One Los Angeles physician who refused to vaccinate his own seven-month-old baby said: "I'm worried about what happens when the vaccine virus may not only offer little protection against measles but may also stay around in the body, working in a way we don't know much about." His concern about the possibility of these consequences for his own child, however, did not cause him to stop vaccinating his infant patients. He rationalized this contradictory behavior with the comment that "As a parent, I have the luxury of making a choice for my child. As a physician... legally and professionally I have to accept the recommendations of the profession."

Many respected and well known experts have gone against the norm only to be attacked and victimized.

Later in this report you will see more details on one such person – Dr Jayne Donegan. This is a landmark case as she successfully defended herself against the General Medical Council, who even after attacking her with their top vaccination experts had to back down and accept her evidence as accurate. She proved that the risk from vaccination is higher than the risk from the disease. She proved that the introduction of vaccines had little or no effect on the decline in childhood diseases.

Of course this has not been publicized widely but you can read about it here; Dr Jayne Donegan GMC Trial

This is from her website which has other very interesting articles and you can also buy her ebook Vaccinatable Diseases & their Vaccines. I cannot recommend this enough. This one report alone will convince you.

I cannot do it justice here as Dr Donegan has researched for many years what is in this report, it is comprehensive and very detailed. Plus, it is the report that couldn't be 'broken' by the GMC’s own expert. It is all the proof you need. If you do one thing when you’re researching vaccination read this report, it is very cheap to download.
6. Vaccinations

“There is a great deal of evidence to prove that immunisation of children does more harm than good.”
[Dr J Anthony Morris, former Chief Vaccine Control Officer, US Food & Drug Administration (FDA)]

You will be amazed to hear that there have never been any long-term controlled studies of any vaccine published in any of the world’s medical journals. And that no one has done a study to see what happens when you give all these shots in a short period of time.
Guess which country has the highest rate of Autism? The country with the most vaccinations, the USA. The increase in the number of vaccines in the USA is quite amazing and also the increase in disease.

Approximately 4 million children in the U.S. are vaccinated each year. Of these, approximately 12,000 adverse reactions are reported to the Center for Disease Control and Prevention. About 15 percent of these are serious enough to result in hospitalization, life-threatening illnesses, permanent neurological damage or death.

Today, there are 68 vaccines mandated for use before a child is eighteen years old in the USA.

In the last 30 years - As the flu mortality has increased so has the number of flu vaccines given. You cannot show that the flu vaccine has lowered mortality or indeed that it actually works.

There is a common assertion is that if you do not vaccinate you are protected by the ones who are vaccinated, hence you are getting something for nothing. What they really mean is, we have to risk our children why shouldn’t you?

**Herd Immunity**

In immunology, herd immunity refers to a situation in which a high percentage of a population is *immune* to a disease, essentially stopping the disease in its tracks because it cannot find new hosts.

For example, if Person A had a disease and exposed Person B who was immune (because of vaccination), Person B would not get ill and could not pass on the disease to Person C when she comes into contact with her. So even if Person C is not vaccinated, she indirectly gets protection from the disease.

But this is not true with regards vaccination. *Vaccination does not make you immune*, that is the problem. Everyone can still get the disease, including the vaccinated, that’s why all the pro vaccinators are scared.

Even accounting for the non 100% effectiveness of vaccines there should really not be a huge problem. You should be safe in the knowledge that your vaccinated child who is 95% protected by the vaccine, will be ok. Because the idea is that even if you do catch the disease it won’t be so bad (because of the vaccine), so you should have nothing to worry about. But the vaccines don’t do what they should do, hence all the fear.

If you take the above example, Person B is not immune and can still get the disease. So, you need a 100% vaccination for the theory to work because you do not have an immune group in the above chain.

But even if you had a 100% vaccination we would still have these diseases (that’s my opinion). Outbreaks have been shown in very highly vaccinated groups, in fact they occur all the time in vaccinated groups. Because of such vaccine failures they have included more and more shots in the schedule to try and counteract the failures, where will they stop?
I would like to ask those pro vaccinators who have this opinion whether they consider the world as a whole, negligent? The USA has twice the amount of vaccinations as any other country in the world; does that mean the rest of the world is not doing its job? Because surely 36 should be the number of vaccinations you need no matter where you live, otherwise why have them, that’s what you mandate, how can any less be effective?

“The belief in herd immunity leads to many delusions. One of them is that when the number of immune people in a community drops below a certain point, it will make the next epidemic come sooner. In 1976 in Britain the vaccination rate for whooping cough dropped from 76% to 42%, because there had been publicity of bad side effects from the vaccine. The medicrats expected that the drop in the vaccination rate would make the next whooping cough epidemic come sooner, as well as expecting it to be worse. The whooping cough bacteria paid no attention to human theories, and the disease followed the usual timing of its natural cycle of virulence. Medicrats expressed surprise that the epidemic did not come sooner. There were also fewer cases and fewer deaths during this epidemic. The much lower vaccination rate of 42% made no difference to the long term decline of whooping cough, which had been happening for a hundred years. [2005] Raising A Vaccine Free Child by Wendy Lydall ”

**Placebo Research Studies**

There have been no randomised placebo controlled trials of any of the vaccines in use in the last 20 to 30 years where vaccinated children are compared with unvaccinated children given an inactive placebo (sterile water or normal saline). [Dr Elliman (GMC vaccination expert & prosecuting witness) under cross examination conceded that this was true, at the trial of Dr Jayne Donegan]

There are plenty of trials out there showing vaccine reactions are not that much greater in a vaccinated group compared with a non-vaccinated placebo group. But read the paragraph above, that doesn’t make sense, does it?

It does when you see what the trials consider a ‘placebo’.

A Swedish trial of Pertussis (Ad Hoc Group for the study of pertussis vaccines: Placebo-controlled trial of two acellular pertussis vaccines in Sweden-protective efficacy and adverse events. Lancet 1988 Apr 30;1:955-960) compared a new vaccine to a placebo. The conclusion of the trial was that the side effects of the new vaccine were mild.

However, the ‘placebo’ used was the vaccine ‘vehicle’, the liquid that carries the vaccine. Not sterile water or normal saline, but a mixture of; thiomersal, formalin and aluminium phosphate.

The side effects from the toxic ‘placebo’ as recorded, were ; floppiness, vomiting, inconsolable crying for more than one hour, fever and drowsiness.

The addition of the whooping cough component did not cause much more, hence the conclusion!
Placebos are supposed to be inert or non-reactive substances but studies and trials (normally supported by drug companies) make their own placebos. And sometimes even the levels of chemicals in the vaccines for the trial are not actually the same levels as those in the actual vaccine.

You can achieve any result you require with the right determination.
7. **Measles**

In England and Wales the annual death rate of children (under age 15) from measles declined from over 1,100 per million in the mid-nineteenth century, to a level of virtually 0, by the mid 1960's. **Before the vaccine was introduced.**

Looking at the graphs it is quite clear that what the drug companies say is simply untrue. The statement that vaccinations has been responsible for eradicating infectious diseases and saving millions of lives is at best questionable and otherwise a blatant lie.

The UK data shows that:

- for over 100 years measles mortality was falling without vaccination
- the single measles vaccine was introduced into the UK in 1968
- the vaccine made no discernible difference
- measles mortality continued falling after 1968 just as it had before
- there is no discernible difference in the falling trend before and after measles vaccination in 1968
- if there has been any contribution to reducing mortality, it is very small and difficult to calculate especially with the falling rate without vaccination being so much larger and rapid
Measles outbreaks are cyclical, that means they come and go (same as whooping cough). Regardless of vaccination they still come about every 3 to 4 years. But, it doesn’t mean if you catch it, you will die from it. But that’s exactly what you are led to believe.

By 2007 the chance of anyone in England and Wales dying of measles if no one were vaccinated was less than 1 in 55 million. The chance of being struck by lightning is 30 to 60 times higher: Tornado & Storm Research Organisation

Death (mortality) is the most extreme form of adverse effect of disease. If mortality reduces like this, then it is a reasonable and a scientific hypothesis to predict that other harmful effects of measles to have reduced in a similar fashion as time has gone by. We have seen many infectious diseases diminish in a similar fashion without any vaccines being required, such as cholera and typhoid. It is nothing new.

So if children were to catch measles today and there were lots of cases it doesn’t mean there is anything to worry about. In our current day just because you catch it doesn’t mean something horrendous is going to happen to you, far from it.

Well nourished first world children are now unlikely to die from or be harmed by Measles.

The worst outbreak in the last 20 years was in 1990, when there were 27,786 cases and 89 deaths. That's a 0.32 percent chance of dying on top of a 0.0115 percent chance of coming down with the disease in the first place. Vox Day

Because the number of measles cases was 12 times greater than normal in 1990 and the fatalities occurred in people of all ages, a child under 5 is approximately 800 times more likely to develop autism than die of measles in an average year. Other diseases for which vaccinations are provided are barely worth mentioning, since children almost never die from tetanus or rubella.
8. **Polio**

All the talk and statistics about showing the decline of Polio has to be taken with a pinch of salt. The reporting parameters and diagnosis of Polio were redefined once the vaccine was introduced, plus the numbers were fixed. The vaccine actually increased Polio.

During the 1962 U.S. Congressional hearings, Dr. Bernard Greenberg, head of the Dept. of Biostatistics for the University of North Carolina School of Public Health, testified that not only did the cases of polio increase substantially after mandatory vaccinations (50% increase from 1957 to 1958, 80% increase from 1958 to 1959), but that the statistics were manipulated by the Public Health Service to give the opposite impression.

According to researcher-author Dr. Viera Scheibner, 90% of polio cases were eliminated from statistics by health authorities' redefinition of the disease when the vaccine was introduced, while in reality the Salk vaccine was continuing to cause paralytic polio in several countries at a time when there were no epidemics being caused by the wild virus.

In Great Britain, the polio epidemics peaked in 1950, and had declined 82% by the time the vaccine was introduced there in 1956. It is important to understand that the polio vaccine was not universally accepted, at least initially. Despite this, polio declined both in European countries that refused mass vaccination as well as in those that employed it.

Six New England states reported increases in polio one year after the Salk vaccine was introduced, ranging from more than doubling in Vermont to Massachusetts' astounding increase of 642%. In 1959, 77.5% of Massachusetts' paralytic cases had received 3 doses of IPV (injected polio vaccine).

In 1985, the CDC reported that 87% of the cases of polio in the U.S. between 1973 and 1983 were caused by the vaccine, and later declared that all but a few imported cases since were caused by the vaccine--and most of the imported cases occurred in fully immunized individuals.

In 1956, soon after the Salk polio vaccine was introduced, officials decided to determine how safe and effective it really was. The results of this study -- the now infamous Francis Field Trials -- would help determine the feasibility of continuing to vaccinate millions of young children.

What they discovered would have stopped most ethical people from continuing: large numbers of children were contracting polio after receiving the vaccine. Clearly, the vaccine was unsafe or ineffective. Instead of removing the vaccine from the market, however, officials decided to exclude from the statistics all cases of polio that occurred within 30 days after vaccination on the pretext that such cases were "pre-existing."
Man wins polio case

Actually those vaccinated against polio are the carriers and are a danger to everyone. They put the polio virus into the world.

“Father sues pharma for getting polio from daughter after she was vaccinated and wins!”

(NaturalNews, June 2009) A New York jury has concluded that pharmaceutical company, Lederle Laboratories, was responsible for the injury to a man who contracted polio from a vaccine 30 years ago, and ordered it to pay him $22.5 million.

Dominick Tenuto became infected with polio in 1979, shortly after his daughter received a vaccine made by Lederle from a live polio virus. Tenuto alleged that he had been exposed to the live virus while changing his daughter’s diaper.

According to the Centers for Disease Control and Prevention, a total of 144 people in the United States became infected with polio from live vaccines between 1980 and 1998. While the majority of these were the vaccine recipients themselves, the number includes 51 who contracted the disease upon contact with a vaccinated individual.

Tenuto became paralyzed from the disease and ended up spending months in intensive care, breathing through a hospital ventilator. Even after two years of rehabilitative therapy, he remained partially paralyzed and to this day cannot get around without a wheelchair. Because the Wall Street office where he worked was not wheelchair accessible, Tenuto lost his job. In 1981, he filed a lawsuit against Lederle.

Shortly before the verdict came down, Lederle offered Tenuto a $10 million settlement agreement, which he rejected upon the advice of his lawyers.

"You need the money," lead counsel Benedict Morelli told him, "but before that, you need vindication."

After one day of deliberation, the jury ruled that Lederle had not only made a vaccine that was unreasonably dangerous, but that it had also failed to sufficiently warn doctors about the vaccine's risk. It ordered the company to pay Tenuto $5 million for medical and rehabilitation expenses and lost earnings, and $17.5 million for past and future pain and suffering.

Lawyer Martin Edelman, who has been working on the case for his entire legal career, said that he was "relieved" at the verdict. Tenuto’s lawyers had advanced him $500,000 worth of work over the course of the case.
In 1977 Dr Jonas Salk (inventor of the Salk polio vaccine) testified with other scientists that 87% of the polio cases which occurred in the US since 1970 were the by-product of the polio vaccine.

The Sabin oral polio vaccine (OPV) is the only known cause of polio in the USA today.

The peak in Polio cases before the vaccine was introduced corresponds to the time that pesticides were introduced en-masse, particularly DDT. When DDT was discovered to cause nerve damage, paralysis and death it was phased out. Polio declined in direct proportion. The USA continued to produce DDT and export it, as it was banned in its own country. The countries with the highest rates of Polio today are also the countries that use DDT.

At the time Dr. Morton S Biskind had the composure to argue what he thought was the most obvious explanation for the polio epidemic: Central nervous system diseases (CNS) such as polio are actually the physiological and symptomatic manifestations of the ongoing government and industry sponsored inundation of the world's populace with central nervous system poisons.

Polio is very rare in developed countries and any cases can be almost always attributed to the oral vaccine.

"Official data have shown that the large-scale vaccinations undertaken in the US have failed to obtain any significant improvement of the diseases against which they were supposed to provide protection."
Dr A. Sabin, developer of the Oral Polio vaccine (lecture to Italian doctors in Piacenza, Italy, December 7th 1985)

"Live virus vaccines against influenza and paralytic polio, for example, may in each instance cause the disease it is intended to prevent..."
Dr Jonas Salk, developer of first polio vaccine (Science 4/4/77 Abstracts)
9. Whooping Cough (Pertussis)

In England and Wales the annual death rate of children (under age 15) from whooping cough declined by roughly 98.5 percent in the period covering 1868 to 1953, after which the Pertussis vaccine became generally available.

England actually saw a drop in pertussis deaths when vaccination rates dropped to 30% in the mid 70's. Swedish epidemiologist B. Trollfors’ study of pertussis vaccine efficacy and toxicity around the world found that “pertussis-associated mortality is currently very low in industrialised countries and no difference can be discerned when countries with high, low, and zero immunisation rates were compared.” He also found that England, Wales, and West Germany had more pertussis fatalities in 1970 when the immunization rate was high than during the last half of 1980, when rates had fallen.

In the New England Journal of Medicine July 1994 issue a study found that over 80% of children under 5 years of age who had contracted whooping cough had been fully vaccinated.

Whooping Cough (and Measles) has periodicity. That means the disease comes and goes every 3 or 4 years, regardless of whether vaccination levels are high or low. The vaccines make no difference to this periodicity.
10. Gardasil HPV Cervical Cancer Vaccine

The introduction of this vaccine shows you exactly how a vaccine is introduced when the need for it is questionable. But I'm sure history will show it as being the main cause of the decline in Cervical Cancer. However Cervical Cancer has been dramatically reduced by the Pap Smear and further enhancement and use of this would do the trick, there's no need for a vaccine.

The FDA news release of March 31, 2003 acknowledges that “most infections (by HPV) are short-lived and not associated with cervical cancer”, in recognition of the advances in medical science and technology since 1988.

This is the vaccine that the drug companies and governments want young girls to take in order to prevent Cervical Cancer. This vaccine costs more than any other vaccine to buy.

Cervical Cancer accounts for about 2% of all cancers worldwide, 80% of this 2% are in low-income countries. So, if you live in the USA, UK or Australia the incidence and death rate is less than 1%. Less than 6% of these deaths occur in women aged 35 and under, the majorities are in women over age 75.

Cervical Cancer mortality rates are 74% lower than in 1941 when the Pap Smear was introduced.

CDC figures - As of May 1, 2009, there were 13,758 VAERS reports of adverse events following Gardasil vaccination in the United States. Of these reports, 93% were reports of events considered to be non-serious, and 7% were reports of events considered to be serious (that's 963 serious events).

As of May 1, 2009, there have been 39 U.S. reports of death among females who have received the vaccine.

Millions of dollars have been spent by governments to introduce this vaccine into their countries. For example New Zealand has spent $180 million of tax payer money to put this vaccine in place. The governments own literature states that by introducing this vaccine they hope to save 30 lives a year, in the long run. It would seem that ensuring a better uptake of Pap Smears would be more effective and much cheaper. One has to ask why this vaccine has been introduced when it is obviously not cost effective. In New Zealand statistically you have less than a 1% chance of contracting or dying from Cervical Cancer. The same applies for the USA and UK and other developed countries. This is a rare disease.

In the USA the drug companies tried to get this vaccine made mandatory. As far as I can see there are no justifications for this. It is obvious that this disease is of no real threat and the only reason to make it mandatory would be to make guaranteed returns. It is all about money and that is clear. Thankfully there was an outcry and that didn't happen, except in Texas. But the motive of the drug companies is quite clear.

Yet again we have an example of a vaccine being introduced once the incidence and mortality rate is already low and the risk is minimal. But propaganda would tell you otherwise.
In The Centers for Disease Control and Prevention Statistics, Cervical Cancer does not even register in their top ten cancers for women

### Death Rates

#### Top 10 Cancer Sites: 2005, Female, United States—All Races

- Lung & Bronchus: 40.6
- Breast: 24.0
- Colon & Rectum: 14.5
- Pancreas: 9.5
- Ovary: 8.6
- Non-Hodgkin Lymphoma: 5.5
- Leukemias: 5.4
- Corpus & Uterus, NOS: 4.1
- Brain & ONS: 3.5
- Liver & IBD: 3.2

Rates per 100,000*

### Incidence Rates

#### Top 10 Cancer Sites: 2005, Female, United States—All Races

- Breast: 117.7
- Lung & Bronchus: 55.2
- Colon & Rectum: 41.9
- Corpus & Uterus, NOS: 23.4
- Non-Hodgkin Lymphoma: 15.9
- Melanomas of the Skin: 15.1
- Thyroid: 14.9
- Ovary: 12.4
- Kidney & Renal Pelvis: 10.4
- Pancreas: 10.0

Rates per 100,000*

#### Cervical Cancer Government Statistics

More than 90% of Cervical Cancer cases are curable if the disease is detected and treated early enough. Routine exams such as Pap smears can greatly reduce your risks of contracting and dying from cervical cancer. The Pap Smear has reduced the death rate by 74% since introduction. The test is considered the most successful cancer screening technique ever discovered.

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This table shows the progress made already in combating this disease.

<table>
<thead>
<tr>
<th>Rate per 100,000 females</th>
<th>Age Group</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>25-34</td>
</tr>
<tr>
<td>1950-1952</td>
<td>1.9</td>
</tr>
<tr>
<td>1998-2000</td>
<td>1.3</td>
</tr>
<tr>
<td>percentage decrease</td>
<td>27.0</td>
</tr>
</tbody>
</table>

**What THE EXPERT says**

**Dr Diane Harper** is a scientist, physician, professor and the director of the Gynecologic Cancer Prevention Research Group at the Norris Cotton Cancer Center at Dartmouth Medical School in New Hampshire. She was contracted by Merck (makers of the vaccine) to head the clinical trials for "Gardasil" because of her credentials; 20 years of HPV vaccine research and development.

She is internationally recognized as a pioneer in the field, Harper has been studying HPV and a possible vaccine for several of the more than 100 strains of HPV for 20 years - most of her adult life. You don't get a better authority than this and the drug company contracted her to be in charge of the trials.

Even she says:

- There is not enough evidence gathered on side effects to know that safety is not an issue.
- Giving it to 11 year olds is a great big public health experiment. All of her trials have been with subjects ages 15-25. In her own practice, Harper believes the ideal way of administering the new vaccine is to offer it to women ages 18 and up. At their first inoculation, they should be tested for the presence of HPV in their system.
- The idea is to inoculate them before they become sexually active, since HPV can be spread through sexual intercourse. But that idea no matter how good the intentions behind it, is not the right thinking, Harper said. The zealously to inoculate all these younger girls may very well backfire at the very time they need protection most, she said. "This vaccine should not be for 11 year old girls", she reiterated. "It's not been tested in little girls for efficacy at 11, these girls don't get cervical cancer - they won't know for 25 years if they will get cervical cancer."
"Also the public needs to know that with vaccinated women and women who still get Pap smears (which test for abnormal cells that can lead to cancer), some of them will still get cervical cancer". The reason she said, is because the vaccine does not protect against all HPV viruses that cause cancer - it's only effective against two that cause about 70 percent of cervical cancers.

**For months, Harper said, she’s been trying to convince major television and print media to listen to her and tell the facts about this vaccine. "But no one will print it", she said**

*It is not a cancer vaccine or cure.* It is a prophylactic - preventative - vaccine for a virus that can cause cancer

*It is not 100 percent effective against all HPVs.* It is 100 percent effective against two types that cause 70 per cent of cervical cancers

Therefore, for example, if a girl is positive for HPV 16 when she is inoculated with the vaccine at any age, she will not be protected against it later, Harper said, "That means it's a failure and those people are at risk for getting the HPV 16 and 18 cancers later".

So what happens if the girls are vaccinated anyway, not knowing whether they were carrying the virus at the time of their inoculation? "They will not be protected if they were positive for the virus at the time they are vaccinated," Harper said.

That is why it is important to note that the vaccine has not been tested for efficacy (effectiveness) in younger girls, she said. Instead the effectiveness was "bridged" from the older girls to the younger ones - meaning that Merck assumed that because it proved effective in the older girls, it also would be effective in the younger ones.

Merck was required to put together a database on the effectiveness in children before Gardasil was approved, Harper said. But instead, the company put together four studies that "are not necessarily representative, and may not even have enough numbers to determine what they need to know".

I am shocked that we are expected to vaccinate our girls for a minuscule at-risk group, with a vaccine that only covers four out of the possible 100 HPV viruses, and offers only five years immunity. But most importantly, it hasn't even been proven to prevent cervical cancer.

And most importantly it seems to be dangerous. Google 'gardasil side effects' and you will see. Again the common thing coming through is that when a side effect is reported it is immediately denied.

But, these are real cases and we’re talking about our daughters. You can’t cover these up and say you can’t prove that the vaccine did it. If you have a perfectly healthy girl and she has the vaccine and then can’t walk anymore then the vaccine needs to be investigated. It doesn’t take a rocket scientist to see it was caused by the vaccine.
It’s just not worth the risk of damage to take a vaccine that is not necessary.

They are testing this vaccine on our daughters; the research has not been done!

Before you vaccinate ask your local medical center / authority for research studies done on 11 year old girls with Gardasil, there aren’t any! The vaccine is too new, there are no long term studies done.

Click below to see this video for further enlightenment.

Urgent Warning about Gardasil
11. Studies comparing vaccinated to unvaccinated

There's only one!

Children who receive the entire 3-shot series of Hepatitis B Vaccine have a 9x higher rate of developmental disabilities than unvaccinated children.

Hepatitis B triple series vaccine and developmental disability in US children aged 1-9 years
Toxicological and Environmental Chemistry, September 2008
Carolyn Gallagher and Melody Goodman

Excerpt:

"The odds of receiving EIS [special education services] were approximately nine times as great for vaccinated boys (n=446) as for unvaccinated boys (n=47), after adjustment for confounders. This study found statistically significant evidence to suggest that boys in United States who were vaccinated with the triple series Hepatitis B vaccine, during the time period in which vaccines were manufactured with thimerosal, were more susceptible to developmental disability than were unvaccinated boys."

Note: This is the only published study we know of in the world that compares vaccinated children to unvaccinated children.

"I observed that my unvaccinated children were healthier, hardier and more robust than their vaccinated peers. Allergies, asthma and pallor and behavioral and attentional disturbances were clearly more common in my young patients who were vaccinated. My unvaccinated patients, on the other hand, did not suffer from infectious diseases with any greater frequency or severity than their vaccinated peers: their immune systems generally handled these challenges very well."--Incao's Hepatitis B Vaccination Testimony"
One study found the peak incidence of SIDS occurred at the ages of 2 and 4 months in the U.S., precisely when the first two routine immunizations are given, while another found a clear pattern of correlation extending three weeks after immunization.

Another study found that 3,000 children die within 4 days of vaccination each year in the U.S. (amazingly, the authors reported no SIDS/vaccine relationship), while yet another researcher's studies led to the conclusion that half of SIDS cases--that would be 2500 to 5000 infant deaths in the U.S. each year--are caused by vaccines.

"My suspicion, which is shared by others in my profession, is that the nearly 10,000 SIDS deaths that occur in the US each year are related to one or more of the vaccines that are routinely given to children. The pertussis (whooping cough) vaccine is the most likely villain, but it could also be one or more of the others."

Dr R Mendelsohn, Author and Professor of Paediatrics (How To Raise A Healthy Child In Spite Of Your Doctor)

In the mid 1970's Japan raised their vaccination age from two months to two years; their incidence of SIDS dropped dramatically; they went from an infant mortality ranking of 17 to first in the world (i.e., Japan had the lowest infant death rate when infants were not being immunized).

England's vaccination rate temporarily dropped to about 30% at about the same time following media reports of vaccine-related brain damage. Infant mortality dropped substantially for about 2 years, then rose again in close correlation to rising immunization rates in the late 1970's. Despite these experiences, the medical community maintains a posture of denial. Coroners don't check the vaccination status of SIDS victims, and unsuspecting families continue to pay the price, unaware of the dangers and denied the right to make an informed choice.

Pro vaccinators will say that it is just a coincidence and that it is not proof.
This is a very emotional subject and much has been publicized about the connection between the MMR (Measles, Mumps & Rubella) vaccine and Autism.

The authorities have been quick to close down this argument. Dr Wakefield being a point in case (see later section). However, there is much more evidence than that. It is clear that vaccines in general not just MMR are the probable cause of autism.

If you look at USA data you will see that there has been an exponentially increasing trend since the early 1970s - the same time that the MMR vaccine was first used to vaccinate children in the US. Since then more and more vaccines have been given to the children in early childhood and the trend graph starts to shoot upwards around the 1980s when this increase in types of vaccination started to occur.

The proof that vaccination does not cause autism comes from the statement that there is no proof that vaccination DOES cause autism!

Saying that something hasn't been shown to be a cause doesn't mean that it isn't a possibility.

Check this out;

Secret British MMR Vaccine Files Forced Open by Legal Action

One more very important observation to note in regard to Autism is that the Amish do not vaccinate their children, and their children have virtually no existing incidence of Autism. Scientists still stick to their theories but will not observe and investigate what is staring them in the face. Perhaps the medical community is unwilling to admit to any wrongdoing in order to prevent a landslide of lawsuits that would surely ensue?

Hannah Poling

This is a landmark case but somehow still has not managed to bring the debate to the foreground.

In 2007 US Government experts conceded, in the US Federal Court, that the vaccinations Hannah Poling received WERE linked to her autistic symptoms. Not just MMR but vaccines in general. This was well publicized in the US in the media and was the first hint that what governments and medical experts had been saying may not be true. Regardless, the Government continued in the same vain, ignoring this. The link today is still denied!

The medical profession still sticks to the claim there is no proof of a link between MMR and Autism but the US government have conceded at least 10 similar court cases in the past 18 years linking autism to vaccines. Vaccines in general, not just MMR.
By 6 months of age most American children receive 19 vaccines through 3 visits to the doctor. It’s worth noting that many kids also receive a birth dose of Hepatitis B, boosting this number to 20 vaccines. So, of the first 20 shots given to kids, how many have been studied for their relationship to autism? The answer may surprise you: ZERO.

That’s right, because only one vaccine, the MMR, has ever been studied for its relationship to autism. The MMR is a vaccine first administered to American children at 13 months of age.

The United States has the highest number of mandated vaccines for children under 5 in the world (36, double the Western world average of 18), and the highest autism rate in the world (1 in 150 children, 10 times or more the rate of some other Western countries), and places 34th in the world for its children under 5 mortality rate. 1st place means you have the lowest death rate, 34th is a disgrace for a ‘developed’ country.

VACCINE SCHEDULES, AUTISM RATES, AND UNDER 5 MORTALITY FOR SELECT COUNTRIES

<table>
<thead>
<tr>
<th>Country</th>
<th># of Mandatory Vaccines (&lt;5 years old)</th>
<th>Autism Rate</th>
<th>US Autism Rate Multiplier</th>
<th>Mortality Rates per 1,000 Children Under 5 years old</th>
<th>Mortality Rate Worldwide Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>United States</td>
<td>36</td>
<td>1 in 150</td>
<td>7.8</td>
<td>34</td>
<td></td>
</tr>
<tr>
<td>Iceland</td>
<td>11</td>
<td>1 in 1,100</td>
<td>7.3x</td>
<td>3.9</td>
<td>1</td>
</tr>
<tr>
<td>Sweden</td>
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<td>1 in 862</td>
<td>5.7x</td>
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</tr>
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<td>3.2x</td>
<td>4.2</td>
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</tr>
<tr>
<td>Norway</td>
<td>13</td>
<td>1 in 2,000</td>
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<td>4.4</td>
<td>5</td>
</tr>
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<td>1 in 719</td>
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<td>4.7</td>
<td>6</td>
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<td>1 in 613</td>
<td>4.1x</td>
<td>5.2</td>
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<tr>
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<td>1 in 1,000</td>
<td>6.7x</td>
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<tr>
<td>Denmark</td>
<td>12</td>
<td>1 in 2,200</td>
<td>14.6x</td>
<td>5.8</td>
<td>18</td>
</tr>
</tbody>
</table>

Special Report Autism

But still no one believes there is a link between Autism and vaccines!

"...The conclusion of the research report was: Children who received all of the AAP (American Academy of Pediatrics) recommended vaccinations were 14 times more likely to become learning disabled and 8 times more likely to become autistic compared with children who were never vaccinated.  Donald Meserlian, P.E., VOSI Chairman & ASTM Member  March 2002"
Japanese Data shows Vaccines Cause Autism

Here you see data from formal peer refereed medical papers showing that vaccines caused autism in Japanese children and will be doing the same to children around the world. The number of Japanese children developing autism rose and fell in direct proportion to the number of children vaccinated each year. For full report see Japanese Data shows Vaccines Cause Autism

ASD - Autistic Spectrum Disorders.

China had no Autism until 1999, when the DTP vaccine arrived from America, now they have 1.8 million 'Autistic Children'. (Tracking Vaccinations, Allison Jones)

"I am no longer "trying to dig up evidence to prove" vaccines cause autism. There is already abundant evidence......This debate is not scientific but is political."

David Ayoub, M.D.
14. Dr Jayne Donegan

The August 2007 trial of Dr Donegan by the GMC (General Medical Council) is a very important case in the scientific debate over vaccination. In fact I would say it is one of the most important cases ever, which shows the benefit risk ratio swings in favor of the disease over the vaccine. No one else has managed to show this and at the same time prove it using valid scientific references. The GMC’s top vaccination experts were unable to discredit her findings.

Dr Donegan testified in a case where two sets of parents disagreed over vaccinations of their children. Two witnesses provided evidence for the fathers from the view of the Department of Health. Dr Donegan testified for the mothers. She provided a report which concluded that a perfectly rational parent making a decision about vaccination for their own child might well have some valid fears about the integrity and strength of some aspects of the underlying science.

Because of this report she was subjected to a ‘Fitness to Practice Procedure’ and charged with serious professional misconduct, and with bringing the profession into disrepute. The case was brought by the GMC itself; no one had made a complaint.

The stated charges were that she had written a medical report about the underlying science for the court that:

1. Gave false and/or misleading impressions of the research which you relied upon,
2. Quoted selectively from research, reports and publications and omitted relevant information,
3. Allowed your deeply held views on the subject of immunization to overrule your duty to the court
4. Failed to present an objective, independent and unbiased view

Actually it was the best thing that could have happened and probably the GMC wishes it hadn’t taken this route now. As Dr Donegan was able to show what a farce the original trial was and that her evidence was solid scientific fact.

In August 2007 Dr Donegan, with her lawyers presented their case and won. The GMC had no option but to drop all charges and state that they had been wrong. It was quite clear that the doctors presenting opposing evidence in the trials had actually been guilty of the charges that were laid against Dr Donegan but the GMC never took any action against them!

Dr Donegan was not just exonerated: her defense was found proven and her vaccination information shown to be soundly based on valid conventional medical literature.
I personally feel that if you read her report you have all the evidence you need in one place to convince you of the truth. AND, no one can discredit this now, she has been tried and even a biased and corrupt system was unable to charge her and discredit her facts. **Vaccinatable Diseases & their Vaccines**

The entire transcript of this August 2007 "trial" is now available online. A detailed reading of the transcripts (particularly Days 8, 9 and 10) provides an interesting commentary on science.

The unfortunate thing is that this case showed the length that medical and government institutions will go to in order to ‘shut’ up any decent. There was quite clearly bias in the initial case on the part of the judge and he treated her differently from the experts from the Health Service. The judge actually called her evidence junk science!

A case in the end which the mothers lost and their children were forced to be vaccinated. Dr Donegan’s evidence in that court case was never taken seriously and showed exactly the cult like defense of vaccination. It was actually junk justice.

The media jumped on the case, especially Dr Donegan then being charged by the GMC. However, the media were not so quick to jump on her winning her case. You have to wonder how far the web of the pharmaceutical companies spreads.

For instance The [Daily Mail](http://www.dailymail.co.uk) newspaper was quick to report on the case when she was charged but never followed up with a story when she was cleared. It would have been a different story if she had lost. Is this fair reporting? The GMC website also reported nothing of her being cleared. **The media coverage after her win is startling in its absence.**

Dr Donegan in her report used some of the very same graphs that you see in this report. She has shown them to be correct.

The word epidemic is freely used today but epidemics were what your saw in the early 1900’s not what occurs today. She has shown that the risk from vaccines is higher than the risk from the disease itself. And she successfully showed that vaccines have been credited for the decline of disease whereas actually it had already happened before the vaccines were introduced.

Visit her [website](http://www.jayne-donegan.co.uk) to read her story and to download her work.
Here’s the story of another doctor who dared question the effectiveness of vaccination. Dr Wakefield was the lead author of a research study published in 1998. In this he hinted at a possible link between the MMR vaccine and Autism. He said, "If you give three viruses together, three live viruses, then you potentially increase the risk of an adverse event occurring, particularly when one of those viruses influences the immune system in the way that measles does." He suggested parents should opt for single jabs against measles, mumps and rubella, separated by gaps of one year.

Immediately the good old GMC put him under investigation for professional misconduct. He was attacked by the Times newspaper, he was called a fraud, an incompetent scientist, accused of conflicts of interest, taking bribes and performing unethical experiments!

It is interesting to note that Dr Jayne Donegan endorses Dr Wakefield. Having known him for 30 years she says that “He is an honest and caring doctor whose only concern is for the health and safety of children in the UK and worldwide.” For an in depth analysis of the interests of those investigating him, view this report;

The case against Wakefield dissolves

What occurred amounted to little more than a witch hunt. His case has been ongoing for 3 years! The journalist commissioned by the Times to attack Dr Wakefield continues to this day to do that, via press and the internet.

In 2001 Dr Wakefield resigned from his job - he said he was told to go.

I simply highlight this case to show what can happen if as a doctor or scientist questions the validity of vaccines. Similarly, as in Dr Jayne Donegans case and others. Of course I can see why this is. A person of the public who questions the vaccinations can be easily discredited but when a professional says something they have to be knocked down immediately before their theories gather some speed and authority.

In both cases these doctors were highly regarded in their fields. Dr Wakefield was awarded the Fellowship of the Royal College of Pathologists in 2001; he is medical advisor to the United Kingdom charity Visceral, and sits on the board of the U.S. charity Medical Interventions for Autism.

He is now the director of Thoughtful House Center for Children in Austin, Texas. It is a center to help children with Autism. His motives to me are quite clear.
Dr Archie Kalokerinos is an Australian doctor who fought for the wellbeing of the Aboriginals. Up until 1975 he was the Medical Superintendent of Collarenebri Hospital in New South Wales, Australia.

He wrote down his experiences in a book entitled ‘Every Second Child’. But his work was ridiculed and ignored by authorities. His theories probably considered too simple and too cheap to administer.

When Dr Kalokerinos started out he was a convinced vaccinator, like most doctors. But through clinical observation of the Aboriginals his views were to change forever, and his path in life.

At first he noticed that many infants, after receiving their routine shots became ill. Some seriously and some in fact died. He observed this actually happening. He then started to look into why this was happening. He found it more likely to happen in children who were ill already, who had been ill, or who were incubating an infection when receiving their vaccines.

He realized that because the children were either ill or malnourished that the vaccines were killing them. Not only that; but the adverse reactions they were having were not listed in the literature.

He started to treat these children who were getting seriously ill and having these reactions. To him it was obvious that the children were dying because of an acute Vitamin C deficiency provoked by the vaccines. He actually found that he could reverse these reactions by giving large amounts of Vitamin C intramuscularly or intravenously. He achieved a dramatic drop in the death rate of infants in the area using this method. However, the authorities were not interested and became hostile towards Dr Kalokerinos.

“This forced me to look into the question of vaccination further, and the further I looked into it the more shocked I became.” – Dr Kalokerinos

In 1975-1976 there was an event that convinced him. He received a phone call from a politician in the Northern Territories. The politician was concerned that the infant death rate had doubled in one year in the Northern Territories. What had changed? In order to improve Aboriginal mortality they had stepped up the vaccination campaigns! They were vaccinating sick and malnourished children and killing them. Dr Kalokerinos immediately flew to the Northern Territory to explain to them what was happening. No one would listen!

They were rounding up children and forcing them to have vaccinations. They would chase them on foot or by Land Rover and grab the kids and vaccinate them. If they survived the first vaccine then they would be back with a booster and then with more and more vaccines.
In 1976, whilst working in Cape York he observed that when the Health Department came around and vaccinated the Aboriginals against flu, that a lot of them just dropped dead shortly after receiving the vaccine. So Dr Kalokerinos flew the bodies to Cairns for autopsies, they had had heart attacks. He found the same experience in Townshall a few weeks later. However, he was the only doctor in Australia that recognized these combinations of events, but it was happening all over Australia!

When they announced that in Africa they were going to mass vaccinate Dr Kalokerinos tried to get the BBC to run a program with his views but they wouldn't. He tried to tell them that not only was it dangerous to vaccinate malnourished and sick children he predicted that they would spread more disease because they wouldn't use disposable needles. It would explain why AIDS spread so rapidly.

To quote Dr Kalokerinos himself;

“I can show some slides about measles and how they misrepresented the situation in Africa. You cannot immunize sick, malnourished children, and expect to get away with it. You'll kill far more children than would have died from the natural infection. There are other ways to deal with things like measles. If they gave them intramuscular or perhaps intravenous injections of vitamin C and a bit of other nutritional support then you can virtually forget about nine tenths of your problems. I would not say all of them because a lot of these kids are so sick and so malnourished, I mean, they are like vegetables and nothing is going to save them, let us face up to it. But the ordinary child who gets measles, even the child with a moderate degree of malnutrition and so forth, if you give intravenous vitamin C supplementary to other forms of treatment, the response very often, not always, is absolutely dramatic If you get them early enough. You must get them early. If you delay, and they have been unconscious let us say for days, or a day or two, you cannot reverse it. The damage is permanent. If you get them early, give them this treatment and there is no problem. And that makes me very, very angry, because they talk about "Oh, we must stop these kids getting measles" and so forth. Well, all right, I can fix them if they get measles.”

"if you want to see what harm vaccines do, don’t come to Australia or New Zealand or any place, go to Africa and you will see it there." – Dr Kalokerinos

Dr Archie Kalokerinos took his medical degree from Sydney University in 1951 and then spent six years in England. On his return to Australia he was appointed Medical Superintendent of Collarenebri Hospital where he served until 1975.

He is a Life Fellow of the Royal Society for Health, a Fellow of the International Academy of Preventive Medicine, Fellow of the Australasian College of Biomedical Scientists, Fellow of the Hong Kong Medical Technology Association, and a Member of the New York Academy of Sciences. He is also the Honorary Medical Advisor for Aboriginal Health. In 1978 Dr Kalokerinos was awarded the A.M.M. (Australian Medal of Merit) for 'outstanding scientific research'.

He has authored and co-authored books with profound orthomolecular medicine implications entitled Every Second Child (1974) and Vitamin C: Nature’s Miraculous Healing Missile (1993), as well as writing many scientific papers.
"One research worker in the laboratory had been immunizing animals against diseases like tetanus and Diphtheria. His experience showed that after being immunized, some of the animals died suddenly within 24 hours. These deaths had been attributed to anaphylaxis. Authorities the world over had decided that this was so (it is a severe allergic reaction). I suggested that vitamin C deficiency was the cause. The animals involved did not make their own. Like primates they required it in their diet. To discover the truth only required a simple experiment.....The result was definite, unquestionable and final. Half of a group of animals were supplemented with vitamin C before being immunised. None died. The un-supplemented half continued to die at rates equal to those found in previous experiments. The importance of this discovery can hardly be stressed. In Australia and all over the world, infants were being immunised. Those whose vitamin C status was low were at risk. Here, at last, was experimental evidence that supported my claims that stepping up immunisation campaigns among Aboriginal infants increased the death rate." Every Second Child by Dr Archie Kalokerinos, M.D. (p.139-140)"
If maybe science and the medical profession had learnt from this case we may instead live now in a society less dependant on drugs.........

The Hopewood children

In 1942, Mr Leslie Owen Bailey, a great philanthropist and founder of the Natural Health Society of Australia, accepted guardianship of 85 children whose mothers were unable to care for them. Raised in accordance with Natural Health principles, and cared for in the Hopewood House at Bowral, NSW, they were to become well known as the Hopewood children.

Many of these children were young babies, and because breast feeding was not possible, they were reared on goats milk. The older children were initially given unpasteurised cows milk, but due to mucous problems in some children, fresh fruit and vegetable juices were substituted. From age two onwards, the diet of these children consisted of fresh fruit, root and green vegetables, salad, eggs, nuts, rice, porridge, wholemeal bread and biscuits, dried fruits, unsalted butter, lentils and soya beans etc. Between meals, only fruit or fruit juices were allowed, and children were encouraged to drink plenty of water, which, coming from the local water supply was pure and fluoride free. Treats consisted of 'Hopewood lollies' made from carob, coconut, dried fruits and honey.

The Child Welfare Department, who were overseeing the children's health insisted that the children be given 'meat', but when it was served to the children, they refused to eat it. Nutritionists from the Sydney University analyzed the nutritional content of the Hopewood diet and the results showed adequate, even superior levels of protein, carbohydrate, fat and minerals in the food compared with orthodox diets. After the results of these tests were made known, the Child Welfare Department no longer insisted that the children be fed meat.

It is noteworthy that amongst these 85 children, no serious illness ever occurred, no operative treatments were ever performed, no drugs of any kind were ever taken or used, and NO VACCINATIONS were ever given. The only malady that occurred was when 34 of the children developed chicken pox. They were immediately put to bed and given only pure water or fresh fruit juice. They all recovered quickly without after-effects. Investigations revealed that these children whilst at school, had been swapping their healthy lunches for unhealthy conventional foods, so this outbreak was not altogether surprising.

In 1947, Dr N.E. Goldsworthy, a medical doctor and head of the Institute of Dental Research in Sydney, wanted to investigate the dental health of the Hopewood children. Dr Goldsworthy and his team conducted an extensive survey of the children's teeth over a ten year period. This survey showed that the Hopewood children had 16 times less decay than other Sydney children the same age. Where Sydney children had had on average 9.5 decayed, missing or filled teeth per child, there was only 0.58 in the Hopewood children. To use Dr Goldsworthy's own words, the results were "little short of miraculous". The Hopewood children were credited with having the highest standard of dental health ever studied, even surpassing New Guinea native children who were supposed to have the best teeth in the world.
The Medical Profession also took an interest in the Hopewood children with Sir Lorimer Dodds and Dr D. Clements, Head of Child Nutrition at Sydney University, monitoring their health for over 9 years. They examined both tonsils and adenoids and said they had never seen a group so free of trouble as the Hopewood children. Also, child psychologist, Zoe Benjamin, an expert of the day, spent time with the Hopewood children and expressed amazement at their independent personalities and contentment as a group.

Most remarkable of all was the fact that many of these children inherited poor health due to a history of illness and malnourishment in their mothers. Despite this, and the fact that they were never breastfed nor could enjoy the normal bonding of mother to child, they were able to grow into sturdy, self-reliant children.

The Hopewood children serve as an inspiring example for all those parents who would like to raise their children naturally, and without drugs and vaccines. These children are testimony to the truth and validity of Natural Health. The full story of the Hopewood children appears in the Natural Health magazines, Volume 5, No's 3, 4, 5 and 6 and Volume 6, No 1, published by the Natural Health Society of Australia.
18. What are Toxins?

We cannot wipe out every disease on the planet. Many parents feel that it may be more sensible to focus on strengthening our children's immune systems to deal with the increasing number of different "superbugs" created by inappropriate and massive use of antibiotics than to inject numerous foreign materials into their delicate, developing bodies. An increasing number of parents are not willing to accede to a point of view that goes against their core beliefs about health and wellness.

- If a child develops measles, chicken pox, whooping cough, mumps, rubella or any of the other common childhood infections, it is not because of germs, but because of the accumulated toxic waste within its body, a condition known as Toxaemia. It therefore stands to reason that the prevention of childhood infection is only possible by preventing the development of toxaemia, or in other words, by preserving or restoring the PHYSIOLOGICAL HEALTH of the body.

- Physiological health is a bodily state in which all of the inner organs and cells are working at full capacity and where there are no genetic or hereditary defects. It is a state in which the musculoskeletal system is in correct balance and alignment, a state in which there is correct nutritional status and blood alkalinity, and a state in which the cells and tissues are free from accumulated waste products.

- On a physical level, this is what true health is all about, and when a child's body is in this condition, then no matter how many germs it is exposed to, it cannot and will not get sick! The reason being is that the child's body does not carry the accumulated toxic wastes that would allow the germs to thrive and flourish, and out of which infection arises. Not only will the child be immune to all infections, but when the child's body is in this condition, it will experience maximum vitality which is essential if the child is ever to fulfill its true potential. It is therefore necessary for parents to be aware of those measures which preserve or restore the physiological health of the body.

- Those measures include; exclusive breastmilk in the infant, and after transition, a diet in which at least 80% consists of fresh fruit and salad vegetables (preferably organic), the drinking of pure unfluoridated water, daily exposure to sun and fresh air, correct breathing habits, physical activities which promote strength and fitness, sufficient rest and sleep, and above all else, a state of happiness - cause if you ain't happy, you ain't healthy! Needless to say, this is easier said than done but then if optimum health is one's goal, then one must know the path.

- Parents should also realize that if there is sickness in a child, regardless of its type or nature, the adoption of these measures can greatly improve the child's quality of health. With regard to conditions like asthma, allergies, eczema, hyperactivity, recurrent infections, attention deficit disorder and many of the other common childhood illnesses, then the adoption of these measures can lead to complete recovery.

"It should always be borne in mind when thinking of complications, that they too often wait, not upon the original disease, but upon the treatment of it."

British Naturopath and Author, Harry Clements
19. Nutrition

"Diseases are crises of purification, of toxic elimination. Symptoms are the natural defences of the body. We call them diseases, but in fact they are the cure of diseases."

(Hippocrates)

A society that views food as taste-bud entertainment rather than a basic of well-being was always bound to run into health problems. But with obesity now afflicting 300 million people, and diabetes set to reach similar numbers within two decades, the problems borne of food abuse are emerging as more than a glitch. They amount to a profound loss of direction in our understanding of both food and medicine.

"Let food be thy medicine and medicine be thy food," said Hippocrates, the father of modern medicine two-and-a-half thousand years ago. Yet today's medical profession barely works with diet, instead majoring in the prescription and distribution of high-power drugs, designed to right the wrongs of decades of body mismanagement.

Instead of scribbling off prescriptions willy-nilly, doctors would better serve the aims of achieving healthy patients by drawing food and diet into their repertoire.

"With nutritionally-depleted foods, chemical additives and our tendency to rely upon pharmaceutical drugs to treat what's wrong with our malnourished bodies, it's no wonder that modern society is getting sicker. Food Matters sets about uncovering the trillion dollar worldwide 'Sickness Industry' and gives people some scientifically verifiable solutions for curing disease naturally."

See this great DVD for a wake up call - Food Matters

See the trailer here - Food Matters Trailer

This is great film and one that everyone should watch. It will give you a new outlook on the drug industry and the role you play in it.
20. Your child's Immune System

With our busy lives it has become difficult to ensure we and our children eat properly. There seems to be no time to prepare food properly or indeed to grow our own. Instead microwave ovens and pre-packaged foods are the order of the day. It is vitally important for your child to build their immune system in order to live a healthy life. Vaccinations will not do that for them. Sweet snacks and white bread certainly won't.

We were fortunate that we were in the 'health' business, having started our own whole food cafe and juice bar. Our daughter started life in a healthy way and you can already see the results of that. She is 2½ years now, unvaccinated and has had only one fever in her whole life. She got rid of that in two days without any intervention. She starts her day with a freshly squeezed vegetable juice and porridge. Her diet is similar to what you read in the HopeWood children section. She never gets sick and is a very energetic child.

I myself have not been to a doctor in 20 years. I've had the flu once in that time. I get the odd cold but my body deals with it. I do not pop a pill at the first sign. In fact I haven't popped a pill in that whole time. We practice what we preach.

Give your child an extra chance by thinking about what you give them to eat and drink.

Here are some suggestions for strengthening your child's immune system naturally:

- Avoid partially hydrogenated fats (contained in packaged snack foods) because they promote inflammation and prevent healthy fatty acids from being incorporated into cells. Read labels of prepared foods and you will find that these fats are everywhere: in crackers, chips, cookies, and desserts. Avoid French fries and other deep fried foods from McDonald's and the other burger palaces. The oils in these foods are rancid. Supplement your child's diet with omega-3 fats that prevent inflammation.
- Avoid foods with added sugar, i.e., sugared breakfast cereals, sodas, cookies, and ice cream. Corn syrup is especially difficult for the body to metabolize. Corn syrup is everywhere so read the labels. Use fruit spreads instead of jam, and other lots of fresh and dried fruits or fruit rolls. Use whole grains and whole wheat bread rather than products made with "wheat flour," which means white flour. Use organic foods whenever possible, and your child will not be eating pesticides that injure the liver.
- Breastfeeding is the best protection you can provide for your child. The longer you breastfeed, the more your child will benefit. Breastfeeding prevents infections and the complications of childhood illness. Breastfed babies are immunized; children who are injected with viruses and bacteria are vaccinated.
- Do not give antibiotics unless absolutely necessary.
- Avoid Decongestants, they suppress the body's immune system and add more harmful chemicals to your child's body, prolonging infections and causing hyperactivity.
“45 percent of measles deaths associated with low weight and poor nutrition.”
Malnutrition is to blame for more than half of all the deaths of children around the world -- including deaths caused by diarrhea, pneumonia, malaria and measles, researchers said on Thursday. Poor nourishment leaves children underweight and weakened and vulnerable to infections that do not have to be fatal, the team at the World Health Organization and Johns Hopkins University in Baltimore found. They estimated that feeding all children worldwide an adequate diet would prevent about 1 million deaths a year from pneumonia, 800,000 from diarrhea, 500,000 from malaria, and 250,000 from measles..... They estimate that 52.5 percent of all deaths in young children were attributable to undernourishment, with nearly 45 percent of measles deaths and more than 60 percent of deaths from diarrhea associated with low weight and poor nutrition. [Media, Jun 17 2004] Better Nutrition Could Save Millions of Kids-Study

This says it all really.

We can help protect children in the third world not just from measles but from other diseases by making available the vitamins and minerals which help children's immune systems to work all by themselves, thereby protecting children from a much wider range of disease threats.

Using this knowledge surely we can develop treatments for diseases by researching how nutrition aids in combating disease and developing treatments based on the administration of vitamins, minerals, other nutrients and supplements?

Drug companies in general are not keen on this. What is more, they have not been doing it because it is against their financial interests even though it is in the public interest for every human man, woman and child in the world.

Alternative forms of medicine are therefore a significant potential commercial competitor to the pharmaceutical industry. As many products vitamins, minerals and herbal medicines are freely available and not patented, it could be difficult for drug companies to benefit from developing new treatments based on nutrition, even though we could help the third world and their children considerably.

Additionally, nutritional remedies have a great safety record compared to pharmaceutical industry drugs. And that makes sense. Good food does not tend to kill people so treatments based on good nutrition is unlikely to either.

In contrast, we see constant attacks on nutritional, herbal and alternative medicine in the media and political lobbying efforts to introduce new laws to make it more and more difficult for all forms of medicine which do not rely on modern pharmaceuticals to continue for the good of humanity. This is not good for your health, your children's health or that of your friends and relatives.

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"Knowing that measles often leads to vitamin A loss, we had begun to wonder if Africa's high death rates from measles might also be connected with vitamin A deficiency. To test this, children hospitalized with measles in Tanzania were given vitamin A capsules. The **measles death rate fell by half**. It was at this point that we discovered, to our astonishment, that a similar experiment had been conducted 50 years earlier in a London hospital - with the same results: **medicine too has doors it did not enter, paths it did not take.**"--**Dr. Alfred Sommer**

What would actually help Africans is infrastructure development: proper sanitation, safe water, basic medical care and plentiful, nutritive food. This is simple, clear and logical. What's astounding is that the UN is recommending just the opposite.

“In 1999 the UNAIDS commission gave its official recommendations to a meeting of finance ministers representing various African countries. The UN's exact recommendations to African nations: to redirect billions of dollars from health, infrastructure and rural development into AIDS - condoms, safe sex lectures and deadly pharmaceuticals. This is not what these already suffering people need to be healthy and successful. This is exactly how to propagate death, disease and poverty. Dr. Christian Fiala [2003] **Africa: Treating Poverty with Toxic Drugs By Liam Scheff** “
22. Conclusion

My life and my view about vaccination will never be the same again after having conducted this research. I am thankful for that. I would have hated to have gone along with the herd and vaccinated my children only to discover the truth later. It is clear to me that the risk from vaccines is now greater than the risk from the disease, where I live.

Not only that, it is ok to catch these diseases, because you won’t die from them as we are told. We are so scared these days that even catching the disease spells doom and gloom, but that is just not true. People catch these diseases all the time and are fine. However, people in the third world do die more often, not because of the severity of the disease but because of their personal situations.

Is Measles stronger in Africa than in the UK? No, the people are weaker. If you are healthy and live in the first world I truly believe that the risk of vaccination is far higher than the risk from the diseases. Risks that have been shown to have deteriorated before even the vaccines were introduced.

I have researched this thoroughly and I have done it for the good of my children. I am confident I have made the right decision for their future. Not only that, I have combined it with ensuring their health is optimal by the food we feed them and the environment we create for them. One thing doesn’t do it alone, it’s a combination.

Most people blindly follow the herd and vaccinate, it’s not surprising given the propaganda. Those who do not are actually the ones who are asking questions and researching and finding answers. The ‘herd’ is sick and that should tell you something is wrong.

Our society has been brainwashed into believing that injecting disease and carcinogens and other toxic sludge into infants is “healthy” and to allow the child’s immune system to function properly without vaccines is considered “dirty”.

I would say to those who are quick to criticize, first do your research. Do not believe everything you read. News these days about drugs is usually a press release created by the drug companies themselves. Media believes it must be true and prints it without question. Doctors get their facts from drug company literature. No one questions it.

But 106,000 people a year in the USA die from adverse effects of pharmaceutical drugs. That is a ridiculous statistic. Still, we spend millions on vaccinating our 11 year olds for a minor disease with an unproven vaccine, but one that has killed 39 girls already!

I really hope more and more people question what is happening in our world today and do something about it. You can only start with yourself, that’s where you still have choice, please take it.

And then think about the alternatives. Start to think about nutrition. Healthy, happy people don’t get sick. Look into the food in your fridge; look into what you consume and how much sugar is in it. Look into homeopathic treatments for when you do need treatment. Check it out, don’t just trust what you see on the TV or read in the Newspaper. Certainly don’t just trust what your government tells you, they don’t have a great track record, in any country.
Finally, I would like to give a special thanks to Dr Jayne Donegan who gave me hope and faith with her work. She has done and presented the research that justifies you not vaccinating. She did this against the odds and showed great determination. No pro vaccinator can stand up against her work. Even the General Medical Councils top expert couldn't. Everyone should read her report.

I look forward to meeting her very soon for an interview for our blog.

"I once believed in Jenner;
I once believed in Pasteur.
I believed in vaccination.
I believed in vivisection.
But I changed my views
as the result of hard thinking."

Dr Hadwen MD