

Written by renowned expert on vaccinations, Sue Marston, the basic facts in this book are as relevant now as when it was written in 1993. Times and politics may change but the pressure to vaccinate hasn't; in fact, the pressure has grown more intense every year, and the damage caused by increased doses of vaccines will only get worse unless we all fight back against Big Pharma lies and greed and choose health over fear and intimidation.

THE  
VACCINATION  
CONNECTION

By Sue Marston  
Foreword by Emil Levine, M.D.

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## Foreword

The first time I heard Sue Marston speak about vaccines I was impressed. She has a remarkable grasp of the issue and has investigated the subject more thoroughly than most doctors ever will. It isn't the job of the physician to investigate the effectiveness or danger of a vaccine. If it gets by the Food and Drug Administration, most doctors will administer it. The researcher whose job it is to determine the safety or efficacy of a drug cannot draw a correct conclusion until it has been tested on thousands of people. Even then, the effects of the vaccines and other drugs may not present themselves immediately, perhaps not showing up until the next decade or the next generation. Therefore it is your responsibility, as the recipients of these potentially lethal substances, to investigate them for your own sake and for the sake of your children. Ms. Marston has done an excellent job of gathering the facts, with references which can be verified.

The author of this booklet has two important credentials which entitle her to write it. First, she is not a doctor. The fact that she is a lay person is what qualifies her. Whether intentional or not, the attitudes of some physicians who speak publicly intimidate the lay person into believing that only a doctor can know or recommend anything about health. As one of the most powerful lobbies in the country, doctors have succeeded in making it illegal, or at least very risky, for anyone other than a doctor of allopathic medicine (treatment of symptoms) to make recommendations regarding your health. Other oppressive laws are pending as of this writing. Yet doctors don't study health; they study disease. With the exception of very minor references to food in their courses of study, doctors are not even required to study nutrition. It is the responsibility and the right of each individual to make informed decisions regarding his or her own health. You have probably heard one side of the vaccination issue. In this booklet you have the opportunity to read the other.

Ms. Marston's second qualification for writing this booklet is her ability to discern fact from popular fiction. She obviously has invested, too, the hard work and dedication required to locate and interpret the essential reference materials.

Anyone with an open and inquisitive mind can pick up *The Wall Street Journal* and read between the lines when a headline states that an inherited genetic mutation can cause cancer, while another sentence in the same article states that the mutation is believed to have been caused by an environmental agent or diet. What environmental agent? Could it be some-

thing in our air, in our water — in our vaccines? It is in the best interests of the pharmaceutical companies, their sister industries and offspring charities, to convince the trusting public that they need to find a cure for a mutant gene or that they need to conduct expensive tests to find these genes. It is more profitable for them to build more high-tech facilities for conducting these tests than it is for them to clean up the “environmental agent” or admit that our polluted ecosystem, the deleterious effects of vaccines and other petrochemical products, and lack of knowledge about diet are causing the majority of our ills. It is more profitable to convince new parents that their babies need to be injected with blood, sera, bacteria from diseased animals, formaldehyde, and other known poisons, than to encourage them to enhance their babies’ immune systems by feeding them natural and chemical-free whole foods.

Those who benefit from maintaining the *status quo* will try to convince you that the reason the death rate is so high for children in Third World countries (as well as poverty-stricken children in this country) is that they are not vaccinated. They fail to inform you that many of these children live in unsanitary conditions which increase their risk of infection and decrease their bodies’ defenses against diseases. Many of them are undernourished. In El Salvador, for example, where people are often forced to drink the same water in which their clothes are washed, the number-one cause of death in children is diarrhea.

The old era of submitting to the judgment of doctors under the government of the AMA, ADA, NIH, CDC, WHO, HEW, and FDA\* is coming to an end. Many people are beginning to realize that their illnesses are products of man-made external and internal pollution fostered by a profit motive.

The information contained in this booklet introduces a gateway to the new era of individual thought, investigation, and freedom of attaining and maintaining good health.

*Emil Levine, M.D.*  
*Los Angeles, California*

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\*American Medical Association; American Dental Association; National Institutes of Health; Centers for Disease Control; World Health Organization; Health, Education, and Welfare; and Food and Drug Administration.

## Preface

Epidemics of infectious diseases have always come and gone, wherever the conditions existed for disease to flourish, throughout recorded history. Despite a belief (one that we have all been carefully trained to accept) that vaccinations "prevent" infectious diseases and epidemics, the facts retrieved from public health records and medical journals indicate otherwise.

It is undeniably true that there has been deliberate suppression of information and fabrication of data to protect a multi-billion-dollar per year industry: the pharmaceutical/chemical/agribusiness/oil/biomedical research conglomerate. It is readily acknowledged by the author that this conditioning of public opinion has been so successful that some individuals are unable to accept information which contradicts conditioned beliefs about vaccination.

This booklet contains a synopsis of factual data regarding infectious diseases, vaccines, their effects, the reasons why vaccines are heavily promoted, and other vital information that is withheld from the public.

Some say, "But I've been vaccinated and I'm healthy." That, of course, depends on your definition of health and the state of health you are accustomed to. There are various factors involved in maintaining good health. If you live a relatively unstressed existence with reasonably good nutrition, or you are blessed with a particularly hardy immune system and a strong constitution, you may be one of the lucky ones whose only vaccination-initiated healing crises\* have included colds, ear and throat infections, flu, allergies, etc. But there are many more serious dangers to health which have been shown to be caused by vaccination.

Not everyone who lives in an area sprayed with pesticides feels ill or exhibits symptoms at the time of the spraying or for a long time afterwards, nor does everyone who lives near a chemical dumpsite develop cancer, leukemia, or other symptoms of an impaired immune system. But damage *is* done. The same is true of vaccination.

Some also ask, "Why, if vaccinations are so harmful, and not beneficial, do doctors recommend them and defend them, often vehemently?"

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\*NOTE: A healing crisis occurs when the body is dealing with toxins injected, inhaled or ingested, and is using the immune system to try to eliminate the toxins, resulting in symptoms ranging from coughs to cancer. Yes, even cancer is a symptom of the body's efforts to eliminate toxins!

We must remember that doctors in medical school are indoctrinated into a belief in vaccination more intensely than the public at large. And the medical schools teaching drug and vaccine “therapy” are generously funded by the petrochemical/pharmaceutical industry.

In addition, doctors who dare question the practice or advise patients against it risk the loss of their medical licenses and their livelihood for having the temerity to “buck the system” set up by the not-so-ethical ruling powers in medicine and politics today. Most people in any profession find it easier to keep their mouths shut and toe the party line, and doctors are only human, too.

## Acknowledgements

Thanks to the proofreaders and the technical “proofwriters,” especially Francis J. Kovac and Edit Abbott, and to Terrance Sullivan, N.D., who initiated this publication.

A very special thank you to medical editor and historian Hans Ruesch, whose books *Slaughter of the Innocent* and *Naked Empress* inspired the writer to further investigate the information unearthed in those books, which have been suppressed in nearly every country in the world, including our own “Freedom of Speech” U.S.A.

## I.

### VACCINES AND TODAY'S HEALTH PROBLEMS

Most people have not yet made the connection between illnesses and vaccination because this information has not been shared with the public, and sometimes the effects lie dormant and are manifested at a later time (as explained further in this publication). Some of these health hazards from vaccination include cancer, leukemia, multiple sclerosis, autism, lupus, mental retardation, blindness, asthma, epilepsy, cerebral palsy, encephalitis, paralysis, tuberculosis, Sudden Infant Death Syndrome (SIDS), damage to and/or failure of kidneys, liver, heart and other organs of the body (including the pancreas, now linked by some investigators to juvenile type diabetes), arthritis, meningitis, allergies, hyperactivity, mild to severe chronic ear infections, learning disabilities, and various other health problems.

Vaccines contain a cross-section of the following ingredients: decayed animal or animal embryo proteins, pus, blood, diseased mucous, urine, feces, formaldehyde, acetone, mercury derivatives, aluminum, carbolic acid and glycerin.

The term "immunization" suggests that immunity to disease is produced by the practice of vaccinating. This is not true, so the word "immunization" is not used in this booklet, except in quotations included from outside sources.



## II.

### VACCINES AND THE MEDIA: MYTH vs. REALITY

Here are some recent examples of what is reported to the public vs. the facts:

#### *WHAT IS REPORTED TO US:*

The news releases which are approved for the public's eyes and ears claim that measles outbreaks occur because not enough people are vaccinating their children, and are ever urging the public to vaccinate more and more, younger and younger.

#### *FACT:*

The headline of an article in the *New England Journal of Medicine* reads: "Measles Outbreak in a Fully Immunized Secondary School Population," and while the article attempts to explain how fully immunized children could be contracting measles, the conclusion drawn is that "outbreaks of measles can occur in secondary schools even when more than 99 percent of the students have been vaccinated."<sup>1</sup>

#### *WHAT IS REPORTED TO US:*

A national major news release in the Sunday *Parade Magazine* section of major newspapers across the country stated the following: "The pneumonia vaccine (officially known as polysaccharide pneumococcal) provides immunity against the 23 types of pneumococcal responsible for about 90 percent of all pneumococcal disease. Older people are particularly vulnerable to these 23 strains. In fact, the vaccine is recommended for everyone 65 and older by the Immunization Practices Advisory Committee of the U.S. Public Health Service, as well as for 20 million other Americans considered to be at risk. These include people with chronic illness such as diabetes, heart disease, emphysema and other lung diseases."<sup>2</sup>

These news releases urging everyone (high-risk individuals in particular) to be vaccinated with the pneumococcal vaccine persist to this day.

#### *FACT:*

Only three days before the release of the "Parade" magazine article, another report in the *New England Journal of Medicine* told of a "trial test" conducted with the pneumonia vaccine on 2,295 "high risk patients (with one

or more of the following: age above 55 years, and the presence of chronic cardiac, pulmonary, renal or hepatic disease, alcoholism or diabetes mellitus)." The experiment consisted of half the subjects receiving the vaccine and the other half receiving a placebo. The result indicated that more of the vaccine recipients contracted pneumonia or bronchitis and secondary infections than the placebo group. The conclusion drawn by the experimenters was: "We were unable to demonstrate any efficacy of the pneumococcal vaccine in preventing pneumonia or bronchitis in this population. Our data suggest that chronically ill patients who are most susceptible to infection may have an impaired immune response to the pneumococcal vaccine."<sup>3</sup>



*Megan Gresh, Colorado Springs, Colorado, suffered permanent brain damage after receiving a third DPT shot September 4, 1987.*

#### *WHAT IS REPORTED TO US:*

Because of public alarm over the damages caused by DPT vaccine, we have been seeing news releases over the past couple of years declaring that studies show the vaccine does *not* cause SIDS or brain damage, but on the contrary, the vaccine helps "prevent" SIDS and brain damage.

#### *FACT:*

The book *DPT: A Shot in the Dark* by Harris Coulter and Barbara Loe Fisher deals specifically with the deaths and damages caused by the diphtheria, pertussis, tetanus (DPT) vaccine. Parents have carried their healthy babies into the doctor's office and then noticed a distinct difference in the child's health and behavior after the shot, often even before leaving the

doctor's office. The infant's behavior in these cases remained different until death or permanent mental and/or physical damage occurred.<sup>4</sup>

From the *Health Freedom News*, February, 1989: "A study reported in the American Journal of Public Health last year demonstrates that there is a 7.3-fold increase in cases of Sudden Infant Death Syndrome in the interval between zero to 3 days after immunization with the DPT vaccine."<sup>5</sup>

A news item published in 1987 declared that Lederle Laboratories appealed a court case in which they were being sued for paralysis caused to an infant by their DPT vaccine, because, they contended, the DPT vaccine is "unavoidably unsafe."<sup>6</sup>

It was recently revealed in an article in the *Los Angeles Times* that several doctors responsible for such news items "dismissing the likelihood of neurological illness from pertussis vaccines" are "consultants" to manufacturers of the DPT vaccine and have received hundreds of thousands of dollars worth of research grants from Lederle Laboratory and other firms.<sup>7</sup>

The preceding examples are, unfortunately, not exceptions. From the time vaccination became a financially lucrative enterprise, what the public has been told by the mainstream media sources has often directly contradicted the information contained in government health records and private medical reports.

If vaccination merely failed to prevent disease, then its promoters would be guilty only of making huge profits on an equally huge hoax. But the damages from vaccination are numerous and sometimes devastating. As previously mentioned, most people are not even aware of the link between vaccination and various disabilities and autoimmune diseases.\*

Let's take a look at the facts regarding the epidemics we have been led to believe were wiped out by vaccines.

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\* Autoimmune disease occurs when the immune system attacks the cells of one's own body.

### III.

## VACCINES AND EPIDEMICS: THE REAL STORY

### SMALLPOX

Although Edward Jenner is credited with the discovery of this vaccine, he was not the first to use it, but merely the first to garner acclaim for it because he was an astute businessman and public relations artist. Jenner claimed his "cowpox" vaccinations would give lifetime immunity, but this was quickly disproved as people contracted smallpox and often died after vaccination. Thus was born the popular excuse that people must be revaccinated, not just to cover for the vaccination's failure to protect, but also to cover for the fact that the vaccine often provoked the disease in previously healthy individuals.

The decline of smallpox, as with many other infectious diseases, including diphtheria and scarlet fever, coincided with the sanitation reforms which were instituted in the late 1880s. Where obtainable, government health records from around the world showed that during the periods of the most intense and widespread vaccination, the incidence of and death rates from smallpox were highest.

For instance, in Kansas City and Pittsburgh during the 1920s, lawsuits were initiated, and won, against doctors and medical societies for declaring smallpox epidemics when there were none, and for *creating* epidemics with their vaccination drives. Before 1903, smallpox was almost unknown in the Philippines, with occurrences in less than 3% of the population, and that in a mild form. The U.S. military went in and began vaccinating, and by 1905 the Philippines had its first major epidemic. Vaccination was made compulsory in 1910. From 1905 to 1923, the mortality rate ranged from 25%-75%, depending on the count from the various islands. The mortality rate was the highest in the cities where vaccination was most intense. Dr. W. W. Keen reported 130,264 cases and 74,369 deaths from smallpox in 1921. Japan adopted compulsory vaccinations in 1872 when they had only a few cases of smallpox. By 1892 they had the largest smallpox epidemic in their history with 165,774 cases and 29,979 deaths. Australia banned the smallpox vaccine after some children were killed by it, and in the following 15 years in unvaccinated Australia there were only 3 cases of smallpox.<sup>8</sup>

The smallpox vaccine was discontinued in the United States after Dr. Henry Kempe reported to Congress in 1966 that fewer people were dying from the disease than from vaccination.<sup>9</sup>



*Mona Stevenson vaccinated for smallpox shortly after the turn of the century. Vaccinated when five weeks old. Photograph taken five weeks later. Death from "Generalized Vaccinia."*

## DIPHTHERIA AND PERTUSSIS

According to a 1971 report presented at the Presidential Address of the British Association for the Advancement of Sciences, deaths from diphtheria, whooping cough (pertussis), scarlet fever and measles declined from their peak in 1860 by 90%, *before* the common use of DPT (diphtheria, pertussis, tetanus) shots, circa 1940, and antitoxin just prior to that time.<sup>10</sup>

After French children were inoculated in 1941, diphtheria rates rose dramatically to 13,795 by the end of the year. By 1943, cases of diphtheria had increased to 46,750. At the beginning of World War II, when Germany made vaccination compulsory, the rate of diphtheria reached an all-time high of 150,000 cases, while in unvaccinated Norway there were only 50 cases.<sup>11</sup>

The book *Vaccination Condemned*, published in 1981, reports that the "U.S. Public Health Service announced, 'The number of cases of diphtheria so far this year of 10,335 was not so alarming, but it is 2,500 above the recent norm,' and this after the most intense and widespread vaccination with DPT vaccine over the past 45 years."<sup>12</sup>

An article in *East/West* magazine (November, 1988) reports that of 795 cases of pertussis in infants ages 3 to 6 months, 49 percent of them had been vaccinated. That constitutes a nearly 50-50 ratio, which computes to zero protection.<sup>13</sup>

Dr. Robert Mendelsohn, pediatrician, reported in his newsletter, *The People's Doctor*: "When DPT vaccine (in Europe) was widely used, doctors were extremely reluctant to officially report cases of whooping cough (because of the work involved with reporting it to the Health Department)... Of course the same underreporting tends to take place in other diseases - measles, mumps, polio, German measles, etc., *for which vaccines are available*. On the other hand, if a vaccine is abandoned, as in the case of the pertussis vaccine in England and other countries, then doctors, frustrated and enraged at public rejection, strike back with an epidemic of over-diagnosis. Thus, while earlier *real* cases of whooping cough were not reported, now *every* cough is labeled a 'whooping cough.'"<sup>14</sup> So England reported a higher incidence of whooping cough after the pertussis vaccine lost favor, yet researchers at London's Epidemiological Research Laboratory reported in 1977: "Since the decline in pertussis immunization, hospital admission and death rates from whooping cough have fallen unexpectedly."<sup>15</sup>

But why *did* the pertussis vaccine become unpopular in England and other European countries? Because of the damages it causes, including Sudden Infant Death Syndrome (SIDS), retardation, autism, seizures, and paralysis, just to name a few of the immediate and violent reactions.

In his book *The Case Against Immunizations*, Dr. Richard Moskowitz reports the case of a 5-year old boy with chronic lymphatic leukemia. The boy's doctor confided to Dr. Moskowitz (but not to the parents) that the leukemia had first appeared following a DPT vaccination and that, although he had treated the child successfully with natural remedies on two previous occasions, with shrinking of the liver and spleen to approximately normal size and dramatic improvement in the blood picture, full relapse had occurred soon after each successive DPT booster.<sup>16</sup>

According to Dr. Robert Sharpe, in his book *The Cruel Deception*, the diphtheria death rate was well over 1,000 per million children in 1860, but had sharply fallen between 1861 and 1870 to 400, before a vaccine or even an antitoxin were developed.<sup>17</sup>

Some adults who received diphtheria vaccine as children are now coming down with diphtheria. They are being advised by public media to get revaccinated.

Among the "reactions" that admittedly may be caused by pertussis vaccine in the Vaccine Injury Compensation Act of 1984 (H.R. 5810), which

was instituted to take the burden of financial compensation off the shoulders of the vaccine manufacturers and put it squarely on the shoulders of the taxpayers, are:

“Hemolytic anemia	Hypsarrhythmia
Infantile spasms	Reyes syndrome
Aseptic meningitis	Peripheral mononeuropathy
Juvenile diabetes	Sudden Infant Death Syndrome (SIDS)

and such other illnesses and conditions as the Secretary may choose to review or as the Commission under section 2108 recommends for inclusion in such review.”

## POLIO

The statistics and public health records once again refute the claims and extensive media promotion surrounding polio vaccine. According to surgeon and medical historian Dr. M. Beddow Bayley (who also photographed children in hospital who had died of vaccine poisoning from diphtheria shots), the rate of paralytic polio in 1942 was 39 per 100,000 people, and decreased to 15 cases per 100,000 people by 1952, *prior* to the introduction of the Salk vaccine.<sup>18</sup>

In a program shown on PBS-TV, ironically, designed to praise and propagandize the polio vaccine, it was admitted that when the vaccination program was instituted, some of the children received a placebo, apparently without their parents' knowledge, thus “constituting the greatest experiment of the 20th Century.”<sup>19</sup>

Of course, what the people were being told at the time was *not* that their children would be part of a mass experiment. They were told that the polio vaccine would protect their children from polio. The introduction of the vaccine was preceded by a very carefully planned, funded and executed public relations campaign and news media blitz designed to fulfill the real goal of the polio vaccine: profits. (See further details in *The Poisoned Needle*, originally written during the polio vaccine trials in the mid-1950s.)

What effect did the Salk vaccine have on the polio epidemic? Listed below are public health statistics (U.S. Public Health Reports) from the four states which adopted compulsory vaccination, and the figures from Los Angeles, California (similar results in other states available from books listed at the back of this booklet):

## TENNESSEE

1958: 119 cases of polio before compulsory shots

1959: 386 cases of polio after compulsory shots

## OHIO

1958: 17 cases of polio before compulsory shots

1959: 52 cases of polio after compulsory shots

## CONNECTICUT

1958: 45 cases of polio before compulsory shots

1959: 123 cases of polio after compulsory shots

## NORTH CAROLINA

1958: 78 cases of polio before compulsory shots

1959: 313 cases of polio after compulsory shots

## LOS ANGELES

1958: 89 cases of polio before shots

1959: 190 cases of polio after shots<sup>20</sup>

As a result, the Salk vaccine was replaced by the Sabin oral vaccine. Because the epidemic itself had been on the downswing for many years (it continued its steady decline in areas where no vaccination centers were set up), and because the Sabin vaccine went through the normal routes of the body instead of directly into the bloodstream, the fiasco which had been created by the Salk vaccine subsided. However, in yet another pro-polio vaccine article (designed to promote a return to the use of the Salk vaccine), The *Los Angeles Times* spilled the beans when it announced that the *only* cases of polio occurring in the U.S. at the present time (June, 1985) were being caused by the Sabin oral vaccine.<sup>21</sup>

In addition, the Salk and Sabin vaccines had been "cultured" in monkeys, and macerated monkey kidneys constituted an ingredient of the vaccines. Consequently, cancerous brain tumors containing genetic material from the SV-40 monkey virus have been discovered in people who were vaccinated with the polio vaccines and in children born to mothers who had received polio vaccine during pregnancy.<sup>22</sup>

In October, 1988, a news item reporting a new polio outbreak in Jerusalem stated: "Dr. Walter A. Orenstein, director of the immunization division at the Centers for Disease Control in Atlanta, and member of a team of experts in Jerusalem to advise the Israelis, said, 'We're seeing a number of cases in people who had oral polio vaccine in the past'."<sup>23</sup>



So-called “health experts” recommended boosters for everyone under 40 years of age. Over 40 years ago there were no Salk or Sabin polio vaccines. They seem to be admitting that previously vaccinated people are more susceptible to contracting polio than unvaccinated people!

## MEASLES

*Vaccination Condemned* reports that after the largest nationwide measles campaign was staged, “Measles has increased to the worst epidemic in history, with the disease occurring mainly among the vaccinated.”<sup>24</sup> It was not surprising when learned from public health records that in 1979 those states with the most rigid compulsory vaccination laws were the ones with the highest percentage of measles, such as Virginia, with 100% vaccination of children and a measles count of 21,424. In 1961, before the measles vaccination, the measles count for the *entire country* was only 4,283 cases. The 1962 national measles count was even less, with only 3,938 cases. But the measles vaccine, licensed in 1963, increased the measles count to 57,380 by 1980, according to the “Morbidity and Mortality Weekly Report” of the Centers for Disease Control (CDC).<sup>25</sup>

The Measles vaccine also causes post-vaccinal encephalitis, resulting in brain damage and blindness, plus the other illnesses ALL vaccines cause by impairing the immune system. *Vaccination Condemned* also reports that “a new and critical disease developed out of the measles vaccine, which the doctors named ‘atypical’ measles...so now we find that the nationwide use of the measles vaccine is causing a worse disease...this atypical measles is usually accompanied by a high fever (105-107 degrees), cough, chills, sore throat, diarrhea, headache, convulsions, rash, swelling of glands, cerebella ataxia, encephalitis, and sometimes death.”<sup>26</sup>

Measles after vaccination is a worse disease, overall, than measles in unvaccinated children. Its symptoms are generally much more severe, and it is more frequently fatal.

Because many vaccinated children are getting the measles, and some of them are dying, the new battle cry for the “measles epidemic” is, “One shot is not enough!”<sup>27</sup>

The Federal Government Morbidity and Mortality Weekly Report, June 6, 1986, revealed that out of 1,984 non-preventable cases of measles, 80 percent had been vaccinated on or after their first birthday. In the first half of 1989, measles cases increased to 7,335 (over 1,529 cases during the same period in 1988) after vaccinations had been intensified. Once again, over 80 percent of the affected school children had been “appropriately vaccinated.”<sup>28</sup>

## TETANUS

In the 1920s a direct cause of “lockjaw” was tetanus vaccination. Dr. Mendelsohn confided that in his clinical experience he had seen no cases of tetanus from rusty nails, and that the few cases he did see occurred in malnourished derelicts who had not stepped on rusty nails. He also reported that the finding that those annual (or even more frequent) tetanus shots were counterproductive and could even decrease one’s immunity, and that finding led to official recommendations that tetanus boosters not be given more often than once every ten years. He also revealed that the tetanus vaccine has been progressively weakened over the decades in order to reduce the “considerable reaction” caused by it.<sup>29</sup>

An article in the *Archives of Neurology* (1972) describes cases of brachial plexus neuropathy resulting from tetanus toxoid (shots). Four patients who received only tetanus toxoid noticed onset of limb weakness from 6 to 21 days after the inoculation.<sup>30</sup>

Dr. Mendelsohn also reported that an article published in the *Journal of the American Medical Association* tells about the case of a 23-year-old medical student who received an injection of tetanus into his right hand. He later suffered from complete motor and sensory paralysis over the distribution of the right radial nerve.<sup>31</sup>

Dr. H. K. Bourns reported in the *British Medical Journal* (August, 1964) that tetanus antitoxin is unnecessary.<sup>32</sup>

Dr. J. J. L. Albett of Leeds reported in the *British Medical Journal*, April 12, 1971, that tetanus toxoid does not protect, and has a high mortality rate.<sup>33</sup>

Dr. Mendelsohn also shared the following cases: “In Israel a preschool aged child suffered anaphylactic shock due to tetanus toxoid, and another anaphylactic reaction following tetanus ‘immunization’ was reported in Germany. In West Germany a report appeared of nerve damage to the inner ear by tetanus toxoid. In Poland, researchers reported that 13 of 17 children who were given DT ‘immunization’ (diphtheria, tetanus) showed significant changes in their electroencephalograms; the main finding was the appearance of seizure activity for the first time or intensification of previously present seizure activity. In Switzerland, tetanus toxoid given during pregnancy was shown to cause a significant increase in incidence of jaundice in the newborn. And in the United States a report was published of recurrent abscess formation associated with hypersensitivity to tetanus toxoid.”<sup>34</sup>

Dr. Herbert M. Shelton, who vigorously opposed vaccination on the grounds that it is a blood-poisoning procedure, advised that proper cleansing is the most important factor in dealing with cuts or puncture wounds.<sup>35</sup>

## RABIES

As pointed out by Marilyn Gavran (who has conducted extensive research on the subject of rabies and rabies vaccine), "Rabies virus lives in harmony in the throats of wildlife in the same way as the strep germ lives in the throats of people until stress upsets the equilibrium and 'causes' disease." There has never been substantial proof provided that the rabies vaccine prevents rabies.<sup>36</sup>

The Humane Education Committee of New Jersey, Inc., stated that those who submit to the Pasteur treatment for rabies often die from the treatment.<sup>37</sup> There are also cases on file of dogs and cats contracting rabies after receiving rabies shots, without having been bitten by another animal.

Mrs. Gavran collected the case histories of rabies on file between the years 1979-1985. In the majority of cases, the person had no known history of a bite. In other cases people were bitten by fully vaccinated dogs, and in one case the afflicted woman had been taking so-called protective rabies prophylaxis over a period of months prior to contracting the disease. She adds, "You might note there have been apparent human-to-human transmissions of 'rabies' as a result of corneal transplants."<sup>38</sup>

As for laboratories being able to diagnose what is and isn't rabies, the CDC (Centers for Disease Control) reports that "*antemortem* [before death] diagnosis of rabies is difficult and often unreliable."<sup>39</sup>

The Pasteur treatment was hailed as a life-saving miracle after he supposedly "cured" Joseph Meister with it. However, carefully omitted from most mainstream literature on the subject is the fact that others were bitten by the same dog on the same day that Meister was bitten. They did not receive the Pasteur treatment and they did not get rabies.<sup>40</sup>

In his book *Pasteur: Plagiarist, Imposter*, R. B. Pearson reports that in England three thousand people died after being bitten by dogs and then taking the Pasteur treatment. In 1902 a British commission investigated those results, and consequently the Pasteur Institutes were abolished. Subsequently, 2,668 persons bitten by dogs were treated for the bites without Pasteur shots, and none of them developed hydrophobia.<sup>41</sup>

Gavran writes, "The best way to take care of a bite wound is through washing with soap and water. Add C internally and, *voila*, no rabies."<sup>42</sup>

Since 1937 it has been known that Vitamin C inactivates rabies virus. It was reconfirmed in 1975 and again in 1984 at the CDC.<sup>43</sup>

Dogs and cats have suffered hair loss, skin rashes, paralysis, blindness, convulsions, bloat, rabies, auto-immune diseases, collapse, and death from rabies shots. The ever-increasing number of cancer, leu-

kemia, kidney, liver and heart damage cases in companion animals are related to the increased use of vaccines, drugs, pesticides (flea dips, sprays, collars), and to the denatured commercial foods they are consuming.



*The author's father, James W. Marston, Ventura, California, developed a near-fatal illness after a yellow fever shot administered by the U.S. military in 1942.*

## FLU

Flu, like other so-called “infectious diseases,” is a symptom of the body's efforts to cleanse itself of toxins. The author has spoken with literally dozens of people who have contracted the flu after receiving flu shots (and other types of shots), and this is not surprising, since all vaccines contain highly toxic materials. Those who don't experience symptoms after the shots should be even more concerned than those who do, because if the body does not mount an effort to eliminate the toxins, then it is harboring those toxins for more serious diseases such as cancer.

Dr. L. C. Appel wrote, “The fact that vaccination is either (a) adding disease to a body already weighted with disease, or else, (b) the giving of a disease to a perfectly healthy body, is the medical reason why some of us (medical doctors) oppose vaccination and urge its abolition. A perfectly healthy body is proof against natural disease. A diseased or unhealthy body can never be rendered healthy by inoculation or vaccination.”<sup>44</sup>

*Vaccination Condemned* reports that some of the aftereffects or reactions from the shots are: “Fever, malaise, toxicity, tenderness and redness

at site of the injection, wheals (large, spreading swollen spots), respiratory problems, collapse, paralysis which may occur within a few hours after the vaccinations, although many cases do not begin until several weeks or months.”<sup>45</sup>

In an issue of “CFIDS Chronicle” Physicians Forum under “general recommendations” is this advice: “Do not take an annual flu shot. Current theory suggests the risk of adverse reactions may outweigh any benefits.”<sup>46</sup>

It was because of the damage claims filed after the swine flu vaccination program in 1977 (amounting to over 3 billion dollars) that we now have a law mandating that the government (*i.e.*, the taxpayers) pay off the damage claims for all vaccine related deaths and disabilities, while the pharmaceutical industry continues to pocket the profits.

## TUBERCULOSIS

The TB “skin test” implants tuberculosis in otherwise healthy people. The scratch on the skin with some tuberculosis applied does allow the disease-causing agent to enter the bloodstream, causing reactions from mild to severe (including death).<sup>47</sup>

In the Spring, 1992, PRISM newsletter there appears a personal testimony of a victim of the TB test. His “reaction” involved great difficulty in breathing, which progressed to a collapsed lung and hospitalization.<sup>48</sup>

In the absence of the dangerous and often inaccurate TB test, how may people determine if they are infected with tuberculosis? There are usually outward signs if there is an unhealthy condition of the body. An examination by a *competent* doctor is more reliable than a test which can cause disease and also give false readings.<sup>49</sup>

## HIB (Hemophilus Influenzae Type B Disease)

Perhaps you have seen the recent recommendations to vaccinate newborn babies with the HIB vaccine. In a 1986 report in *The New England Journal of Medicine*, the results of a “field trial” conducted in Finland showed that the vaccine “had no efficacy in children younger than 18 months, and uncertain efficacy in children 18 to 23 months old.”<sup>50</sup>

The main topic of the report, however, was an American study of fifty-five children between the ages of 18 to 47 months who had been vaccinated with HIB and who developed HIB disease. It was reported that ten additional cases of HIB disease occurring in vaccinated children were

excluded from the study because they came down with the disease within three weeks of being vaccinated and “there may not have been sufficient time for the production of protective levels of serum antibodies.”<sup>51</sup>

One of the inoculated was an African-American child already infected with sickle-cell disease, and the article admitted “he was known to have a host factor that would have predisposed him to invasive bacteria disease.” Why, then, did they inject him with an infectious agent? Two other children “who had shunts from the central nervous system to the peritoneal cavity may also have predisposed to bacterial meningitis. One of the children with a shunt had been born prematurely and had a history of bronchopulmonary dysplasia and recurrent pneumonia.”<sup>52</sup>

Thirty-nine of these fifty-five vaccinated children developed meningitis, “three of whom died, and six had neurologic sequelae, epiglottitis occurred in nine, cellulitis in two, bacteremia without focus in two, osteomyelitis, septic arthritis and pneumonia in one each.”<sup>53</sup>

The report uses the terms “no efficacy” and, especially, “vaccine failure” numerous times, with never an admission or indication that introducing toxic chemicals, viruses and/or bacteria into the bloodstreams of little children can actually *cause* disease to occur.

## RUBELLA

Readers may have seen the episode of ABC's “20/20” featuring women, most of whom were doctors or nurses, who had developed serious side effects from rubella shots, with symptoms ranging from arthritis to chronic fatigue, and including various other autoimmune disorders. In the course of the program, however, it was recommended that in order to avoid the crippling side effects experienced by adults, the shots should be administered in early childhood. Apparently the producers of the show were not familiar with studies which showed damage caused to children by rubella shots, including the Health, Education, and Welfare report from early 1970, which shared the fact that “as much as 26% of children receiving rubella vaccination in national testing programs developed arthralgia and arthritis.”<sup>54</sup>

But is the vaccine effective? Do the so-called “benefits” outweigh the risks?

In October, 1972, a seminar on rubella was held at the Department of Pathology, University Department, Austin Hospital in Melbourne, Australia. Dr. Beverly Allen, a medical virologist, gave overwhelming evidence against the effectiveness of the vaccine. So stunned was she

with her investigations that it caused her, like a growing number of scientists, to question the whole area related to herd immunizations. Dr. Allen described two trials; the first trial concerned army recruits who were selected because of their lack of immunity as determined by blood tests. These men were given Cendevax, an attenuated rubella virus that is supposed to protect. They were then sent to a camp which usually has an annual epidemic of rubella. This occurred three to four months after they were vaccinated, and 80% of the so-called immune recruits became infected with rubella virus. A further trial shortly after this took place at an institution for mentally retarded people with similar effects. Additional disturbing evidence was sent to us by a Melbourne GP who was in the United Kingdom at the time that Chief Health Officer Sir Henry Yellowlees, had released a press statement (February 26, 1976) informing doctors that, in spite of high vaccination figures, there had been no detectable reduction in the number of babies born with birth defects.<sup>55</sup>

“This misleading immunity from rubella vaccine must be emphasized because of the occurrences of congenital rubella syndrome in infants born of mothers believed to be protected from rubella due to the presence of rubella vaccine-induced antibody as described in “Congenital Rubella after Successful Vaccination” (*The Medical Journal of Australia*, June 12, 1982, p. 514).”<sup>56</sup>

## CHOLERA

The cause of cholera is known, and the only real cure for cholera is to remove the cause. We have heard and read a lot of media propaganda in favor of every type of vaccine imaginable, and cholera vaccine receives its share of adulation in print. The Orange County *Register* carried an article entitled “New Cholera Vaccine Going to South America.” In between the praise and promises, however, was this little addition: “Jan Holmgren, who helped develop the vaccine, said he doubted that it would be able to stop the disease in Latin America,” and the article’s concluding paragraph confirms, “...contaminated water and food transmit cholera.”<sup>57</sup>

We should be learning, at least from the experiences of Drs. Kalokerinos and Dettman in Australia, p.19, that introducing toxic substances into the body is far from the ideal or realistic way to prevent or halt an epidemic of disease that already results from toxemia.

## IV.

### VACCINES AND SCHOOL ADMISSION

Concerning vaccinations you may ask: “Isn’t it true that my child will not be admitted into school without vaccinations?” The answer depends on what state you live in.

There are currently 21 states in the U.S. which allow exemption from vaccination on philosophical grounds. This means one does not need a medical exemption or a religious exemption (required in some other states). The purpose of including such an exemption clause is not altruism on the part of the vaccinators. On the contrary, before the law recently passed that made the taxpayers responsible for their own vaccine damages, the personal beliefs exemption clause proved to be a handy bit of small print which absolved the vaccine labs and the schools from damage suits, for it makes the decision to vaccinate the child the parents’ responsibility. They just don’t tell you it’s there, so if you fail to read the fine print, that’s your fault. And never mind that they lie to us constantly on radio, T.V., and in the printed news media, telling us that children must, by law, be vaccinated in order to be enrolled in public school.

The 21 states that, as of this writing, allow exemption from vaccination for “personal beliefs” are: California, Washington, Idaho, Utah, Arizona, Montana, Colorado, North Dakota, Nebraska, Minnesota, Oklahoma, Missouri, Louisiana, Wisconsin, Michigan, Indiana, Ohio, Maine, Vermont, Rhode Island and Delaware. (The laws pertaining to California are listed on the following page.)

Now that the law absolving vaccine manufacturers of liability in damage cases has appeared, be on the lookout for efforts by the pharmaceutical industry to have personal exemption waivers rescinded.



## V.

### YOUR RIGHTS CONCERNING VACCINATION

For parents in California who wish to file a personal beliefs exemption with their school board, the waiver is in Section 6051 under Article 3 of Title 17 of the Regulations of California School Admissions. State Senate Bill 942 also ensures that children may be enrolled in public or private school with exemption from vaccination. Elben also reports in *Vaccination Condemned* that for those who want to travel without vaccinations, the International Sanitary Regulations of the World Health Organization provides for an exemption in Article 83 of Chapter IV.<sup>58</sup>

For those who live in states which do not have a personal beliefs exemption and for some reason cannot obtain a religious or medical exemption, Elben (*Vaccination Condemned*) recommends demanding a "Vaccination Guarantee," in writing, from the school board and the doctor or nurse administering the shots. This guarantee would hold them financially liable for damages caused by the vaccination.

If this can be drawn up on a paper with a law firm letterhead and signed by an attorney, all the better. Elben cited the case of a lawyer who submitted such a letter, stating the vaccinator(s) and the school district would be responsible for medical costs and punitive damages if his child developed adverse reactions or died after vaccination, and was able to have his child admitted into school without being vaccinated, in a state which did not have a personal beliefs waiver.

Attorney Thomas G. Finn has written that "Officials who advocate compulsory 'immunizations' are, in effect, advocating the taking of one of our basic freedoms from us; that is, the freedom of choice referred to in the Declaration of Independence as the right to life, liberty and the pursuit of happiness."

He also advises parents to remember that the relationship between parents and the pediatrician is contractual, and if the doctor attempts to intimidate you on the subject, you have the option to discharge him or her as your child's doctor. He suggests that doctors may be found on physicians lists obtained from groups like LaMaze, LaLeche, NAPSAC, the Seventh Day Adventist Church, and midwives, and that the doctor should be interviewed "as any other servant" to determine if he or she will conform to your wishes regarding what type of medical treatment your children will and will not receive.<sup>59</sup>

## VI.

### THE REAL SOLUTION: NATURAL HEALTH

People also often ask how they can protect their children from diseases if they don't vaccinate them.

First of all, they are being misled by the deceptive publicity which tells them vaccination prevents disease. But there *are* ways to build strong immune systems and maintain good health, and they are all *natural*.

Information on health-promoting diet is contained in books such as *Vegan Nutrition: Pure and Simple* and *Pregnancy, Children, and the Vegan Diet* by Michael Klaper, M.D. In addition, properly purified water is vital to good health.

It is also of great importance to promote a healthy, positive mental attitude, a clean environment and good stress management.

In countries where the death rates are very high from so-called "infectious diseases," we find that there are corresponding rates of malnutrition and poor living conditions. Wherever the "care" charities go with their food supplies and equipment for improving the living conditions, they are now accustomed to including vaccines in their kits without question.

In his book *Every Second Child*, Dr. Archie Kalokerinos describes the deaths of Aboriginal babies, which he attributes to malnutritional/vaccination interactions: "A health team would sweep into an area, line up all the Aboriginal babies and infants and 'immunize' them...Most infants would have colds. No wonder they died. Some would die within hours of acute vitamin C deficiency precipitated by the immunization. Others would die later from pneumonia, gastroenteritis, or malnutrition. If some babies and infants survived, they would be lined up again in a month for another immunization. If some managed to survive even this, they would be lined up again. Then there would be booster shots, shots for measles, polio and even T.B. Little wonder they died. The wonder is that any survived. I almost shook with horror at the thought of what had been, and still was going on. We were actually killing infants through lack of understanding...I have no doubt that some so-called 'cot-deaths' are in fact acute vitamin C deficiencies, and these can occur even if the diet is adequate...First, there is an increased utilization of vitamin C (after vaccination)...This deficiency lowers immunity, and the immunizing agent adds to this temporary lowering. An infection such as pneumonia or gastroenteritis is likely...thus an infant may die a few days or a few weeks after being immunized."<sup>60</sup>

Proper diet and improved living conditions are necessary to better health. But it seems we cannot render this type of aid to depressed countries without the pharmaceutical industry getting in on the act to sell more vaccines, actually interfering with the good efforts being made to help malnourished and diseased populations.

## VII.

### RESISTANCE TO NATURAL HEALTH: THE ILLNESS INDUSTRIES

New information on the subject of proper nutrition has been coming to the forefront, although it has been contradicted and denied by the meat, dairy and sugar lobbies. Although this type of information has always been in existence, it was suppressed, and derided where it couldn't be suppressed, because there is not a great deal of money to be made by the medical industry, drug industry, and several other large corporations if people know and practice the "secret" of good health.

It is only after the information leaks out (usually by word of mouth) to such an extent that it would be an extreme embarrassment not to acknowledge it, that medical associations and charities not only jump on the bandwagon, but turn around and *take credit* for the "discovery" that proper nutrition leads to natural good health.

The pharmaceutical/chemical/agribusiness/oil/biomedical "research" conglomerate creates a formidable coalition of influence in the media, politics and business, to shape America's (and the world's) eating habits. Thus, while we have children's hospitals for the "treatment" of cancer, leukemia, and other autoimmune diseases (caused by various forms of pollution, poor nutrition and vaccination), these same children's hospitals are setting up burger joints on their premises so the sick children can eat chemical- and antibiotic-laden meat (poisonous in itself, as putrefying flesh always is), and drink sugar- and chemical-laden colas. In fact, one well-known burger franchise, which is destroying the environment by cutting down rain forests for grazing land and marketing toxic food, has their own children's hospital for children with cancer!

It is important to keep in mind that there is currently a plan in motion within the Medical Establishment to take away our freedom to refuse invasive procedures—vaccination in particular. The first testing ground appears to be welfare mothers, as recent news articles have reported that mothers receiving welfare might be refused aid if they don't have their children "immunized."<sup>61</sup>

## VIII.

### OBSERVATIONS ABOUT VACCINATION AND THE MEDICAL PROFESSION

It is hard to resist or ignore the constant headlines and warnings in the media about dire consequences if one is not vaccinated. We hardly ever hear about the damages (until too many people who are suffering damages have compared notes), and when that information is publicized, it is accompanied by assurances that “the benefits outweigh the risks” and that it’s still better to be vaccinated than not vaccinated. Perhaps some of the following revelations will help foster an understanding of why the American public is continuously lied to about the safety and efficacy of vaccination:

“I have been on the staff of the New Jersey State Department of Health, and was in complete charge of the Monmouth County Cerebral Palsy Treatment Center. For the past three years I have been director of the Homestead Rehabilitation Institute (and still am as of this writing). My experiences have enabled me to observe from within the workings of official medicine. At first I could not believe what I saw...Were the truth concerning medical treatment and so-called prevention ever to leak out, the stench of it would obliterate the public confidence in the medical profession and put an end to the fantastic drug profits.”

Dr. Milton Fried, D.C., 1956<sup>62</sup>

“The Rockefeller interests own controlling stock in 80% of the drug industry. **The drug industry controls 90% of advertising media.** Rockefeller Foundation endows medical schools, and ‘he who pays the piper calls the tune.’ Drug interests control the American Medical Journal through advertising. Rockefeller controls every medical health-related agency - Food and Drug Administration (FDA), U.S. Public Health Services (PHS), Health, Education and Welfare (HEW), Center for Disease Control (CDC), and the World Health Organization (WHO).”

*The Voice of Liberty*, Decatur, GA., 1955<sup>63</sup>

“No other profession has anything like the large and well-organized membership and corresponding political power and influence of the medical profession in the body politic.”

E. McBean, Ph.D., N.D., 1981<sup>64</sup>

“This item concerns payments made to U.S. Lawmakers by organizations interested in keeping the present fraudulent medical system going. I have reported that American special interest groups ‘showered a record 22.6 million on candidates in 1976 and that the top donors were the medical associations with \$1,790,879.”

Hans Ruesch, medical editor and historian, 1978<sup>65</sup>

“The public press of today is largely governed by the orthodox rulers in the medical profession.”

Dr. Walter Hadwin<sup>66</sup>

“Even the most independent newspapers are dependent on their press associations for their national news. And there is no reason for a news editor to suspect that a story cooking over the wires of the Associated Press, the United Press or the International News Service, is censored when it concerns health matters. Yet this is what happens constantly... The *Journal of the American Medical Association* (JAMA), the organ of the Medical Syndicate in the U.S., had bragged as far back as January 20, 1940, that the United Press had been induced to issue a directive requiring all articles on cures and human health to ‘be cleared’ through its New York bureau and ‘science editors.’”

Hans Ruesch, 1982<sup>67</sup>

## IX.

### QUOTATIONS FROM DOCTORS AND SCIENTISTS ABOUT VACCINATIONS



*Vicki Hood, Roseburg, Oregon, developed symptoms within ten days of a gamma globulin inoculation. Diagnosed as multiple sclerosis.*

"Vaccines have never had the proclaimed preventive effect on infections. The regression of infectious diseases started over 200 years ago, which means long before the introduction of vaccination, and it was due to the improved social conditions of the population: nutrition and hygiene. Contrary to general belief, the vaccinations have had a negative influence on the decrease of the infective maladies and mortality. Statistics started off at a period when the infectious diseases were already on the downgrade. Careful studies over a period of many years have revealed that each introduction of a mass vaccination has obtained only one result: the immediate recrudescence of the malady that the vaccine should have prevented, but which has solicited instead. The temporary but immediate isolation of infected patients has each time proved sufficient to prevent an epidemic...Vaccines don't protect, but do harm. A scientific proof of their usefulness has never existed, whereas the severe, sometimes fatal, damages they cause are a proven fact."

Gerhard Buchwald, M.D.68

The vaccination modifies the terrain of the vaccinated, driving it towards the alkaline and oxidized terrain — the terrain of cancer. The fact can no longer be denied.”

*Revue de Pathologie Generale et  
de Physiologie Clinique*<sup>69</sup>

“It is necessary only to read on the dials of a physical measuring apparatus the ratings of the 3 characteristics of the blood. The pH, the rH2 and the electric resistance. The findings are that all vaccination has the effect of directing the three values of the blood into or toward the zone characteristics of cancer and leukemia...Vaccines do predispose to cancer and leukemia.”

Prof. L. C. Vincent, founder of Bioelectronics<sup>70</sup>

“I am thoroughly convinced that the increase of cancer is due to vaccination.”

Dr. Forbes Laurie, Medical Director of the  
Metropolitan Cancer Hospital, London<sup>71</sup>

“...But suppose we included in our propaganda a candid account of the various untoward ‘accidents’ which have accompanied the procedure (vaccination): If we boldly told the whole truth, it is doubtful whether the public would submit to inoculation.”

Dr. D. C. Okell, *The Lancet Medical Journal*<sup>72</sup>

“Besides diseases of an acute nature, chronic degenerative diseases have also been reported to follow vaccination. Stovieck (1959), Paffy and Merei (1961), McAlpine (1964), and numerous German authors described the occurrence of multiple sclerosis following the administration of vaccines against smallpox, typhoid fever, paratyphoid fever, tetanus, poliomyelitis, tuberculosis and influenza, and after injection of antidiphtheria serum and gamma globulins. Zintchenko (1965) reported twelve patients in whom M.S. first became evident after a course of antirabies vaccinations.”

Henry Miller, M.D.<sup>73</sup>



“Although the body generally will not make antibodies against its own tissues, it appears that slight modification of antigenic character of tissues (*via* vaccination) may cause it to appear foreign to the immune system and thus a fair target for antibody production [resulting in autoimmune diseases].”

Peterson and Good<sup>74</sup>

\* \* \*

Some M.D.'s and D.V.M.'s declare live virus vaccines as the culprit, and recommend killed virus vaccines. The author agrees with veterinarian Dr. John Saxon that the difference between live and killed virus vaccines is “rather like asking a man about to be hanged whether he would prefer to be dropped six or eight feet!”<sup>75</sup>

Dr. Robert Mendelsohn warned us to beware of “new, improved” vaccines. History has shown us that “new, improved” vaccines have been just as dangerous and lethal as their predecessors.

## IX.

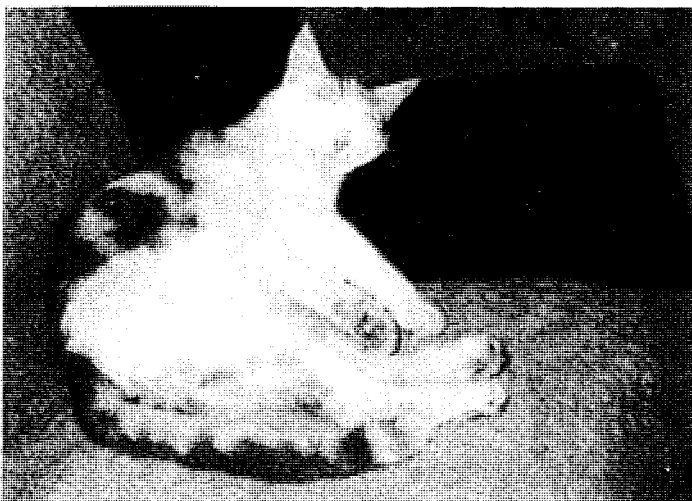
### VACCINES FOR ANIMALS

Allopathic (pharmaceutical, viral, chemical) vaccines are poison. Vaccines for animals are harmful, even deadly, to them, as well. The major causes of disease are stress, unhealthy diet, and exposure to pollutants.

The author has known of many vaccinated, as well as unvaccinated, domestic animals which came down with diseases such as parvo, distemper and feline leukemia. She has also observed the high resistance to disease in animals fed a pure, natural diet, given clean, purified water, and kept away from pesticides and vaccines.

There is also a renewed and growing interest in homeopathy and homeopathic nosodes, which are much closer to the public's concept of what vaccinations are and should do. Homeopathic immunizations boost the immune system and have never been known to cause any disease or side effects. They have also been used to fight off the toxic effects of the pharmaceutical vaccines.

In a report titled "Current Issues on Vaccine Safety and Efficacy," Dr. W. Jean Dodds relates that immune-mediated hematologic disease and transient bone marrow failure and leukemias-lymphomas in dogs have been caused increasingly by vaccination with modified live parvovirus and other vaccines. She adds, "Adverse reactions to vaccination have also recently been reported with increasing frequency in cats, especially kittens."<sup>76</sup>



*Honey Bear, companion cat to Mary Abbey, Santa Paula, California. Received 3-in-1 kitten shot in 1987 and subsequently experienced convulsions, open sores at the site of the injection, permanent hair loss at the vaccination site and neurological damage.*

An article titled "Damage Following Immunization" tells us that bloat, stained teeth, ulcers, chronic gastroenteritis and seizures are also being attributed to vaccination, and that "there is an awakening recognition among veterinarians of the connection between immunizations and various illnesses."<sup>77</sup>

After conducting controlled studies of the effects of both vaccination and homeopathic immunizations for kennel cough in dogs, Dr. C.E.I. Day concluded: "Vaccination against kennel cough is not an advantage to the dog, but, on the contrary, appears to constitute a health risk."<sup>78</sup>



*Sophie, Afghan Hound, Ventura County, California. Received rabies shot May 24, 1991. By June 2, 1991, she was completely blind. No previous history of vision problems.*

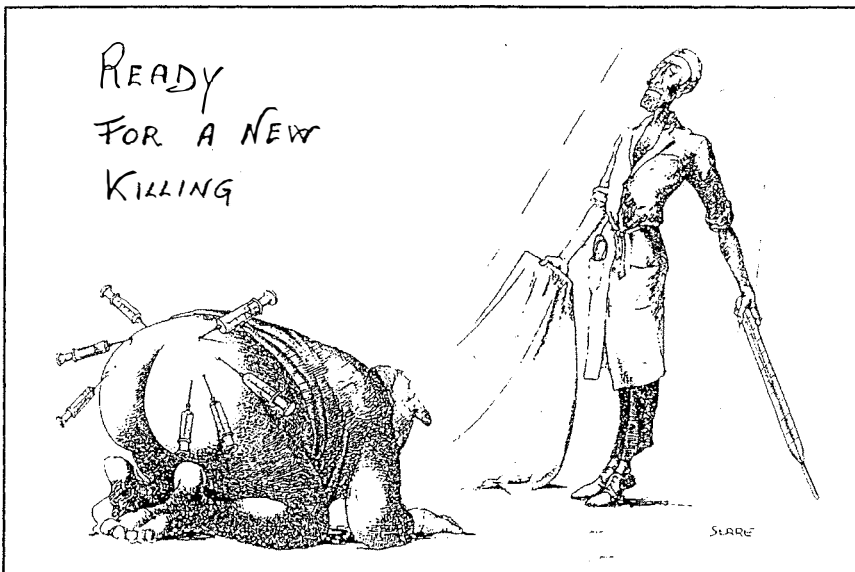
Pamphlet number three of the Florida League for Humane Progress, St. Petersburg, Florida, quoting the Delson Chemical Company, states, "The compulsory inoculation of your dog is unconstitutional, unnecessary, troublesome, expensive, very dangerous, and many dogs develop paralysis, blindness, convulsions, and frequently die... We have had the opportunity of making careful observations of inoculations in canine diseases, and we have been forced to the conclusions that not only are inoculations entirely unreliable, but are exceedingly dangerous."<sup>79</sup>

Dr. J.E.R. McDonough, FCRS, in the June/July, 1981, issue of *Outrage* magazine, wrote, "Immunization with an attenuated virus cannot prevent distemper. The author has treated many dogs which have developed distemper despite two or three injections of the preventative agent... He is of the opinion that fits, chorea hystera, etc., in dogs have become more frequent since the use of distemper vaccine. Successful prevention will never be achieved by inoculation."<sup>80</sup>

## X.

### ADDENDA

A news item titled "Firms Seeking an AIDS Vaccine Ask Protection," subtitled "If serum is discovered, they say, threat of lawsuits could block distribution" appeared in the November 29, 1988, *Los Angeles Times*. The article deals with the fact that the companies producing the swine flu vaccine in 1976 demanded and received impunity from the deaths and damages caused by their vaccine. They apparently knew these deaths and damages would occur because they applied for exemption from liability before the vaccine was distributed. Now prospective manufacturers of an AIDS vaccine have been seeking the same protection against financial liability. And remember, when such protection is granted by the government it is we, the taxpayers, who incur the expenses of the damage suits while the drug companies reap the profits.



Cartoon courtesy of CIVIS

An article dated April 14, 1991, in Los Angeles' *Daily News*, headlined "Three Volunteers in AIDS Vaccine Experiment Died." In the text we find: "At least three of 19 volunteers who took part in a controversial AIDS research project have died, apparently from the effects of the vaccine-like

preparation with which they were inoculated. The three deaths... occurred last year in Paris. But they have never been reported in medical journals. When the French and American scientists collaborating in the experiment published an account of their research last year, they reported that there had been no deaths among the subjects. At the time the article appeared, two of the subjects had died." The report goes on to tell us that the patients had died of "necrotizing vaccinia" and that "the preparation used in the experiments was made from vaccinia, a virus that causes cowpox in cows, into which a piece of the "AIDS virus" had been genetically inserted by scientists at the National Institutes of Health (NIH) in Bethesda, Maryland.

"Vaccinia disease is an extremely rare, and when untreated\*, usually fatal relative of smallpox that eats away skin and tissue and causes necrotic lesions."

A front-page article in the London *Times*, May 11, 1987, headlined, "Smallpox Vaccine Triggered AIDS Virus," reported the spread of AIDS through intensive vaccination promoted by the World "Health" Organization in Africa and Brazil. Upon reaching the Associated Press, United States Press International, and Reuters in the U.S., the report never reached the American public.

In 1978, the hepatitis B vaccine was given to thousands of homosexual men in major cities throughout the United States. According to Dr. William Campbell Douglass, the hepatitis B vaccine "exhibits the exact epidemiology of AIDS" and that, "homosexual males between the ages of 20 and 40 years, who were not monogamous" were targeted for vaccination.

A PBS T.V. documentary (designed to laud the vaccination project) revealed that homosexuals were actively solicited to participate in the experiment by being told that this vaccine would protect them from hepatitis B. Each vaccine recipient was issued a secret number. The PBS program stated that some of the recipients had received a placebo, so it was obviously an experiment, although the vaccine recipients were not told that they were being used for experimental purposes.

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\*(NOTE: There are other types of "vaccinia" besides "necrotizing vaccinia" and, therefore, vaccinia disease is more common than the article suggests. In addition, it is this author's understanding that necrotizing vaccinia is not treatable. If it were, then the volunteers who died, having been under doctors' care, should have been "treated" and survived.)

Dr. William Campell Douglass has written, "The Centers for Disease Control reported in 1981 that four percent of those receiving the hepatitis vaccine were AIDS-infected. In 1984 they admitted to 60 percent. Now they refuse to give out figures at all."

In the PBS program, the hepatitis B vaccine was referred to as a human blood product, obtained from homosexuals suffering from hepatitis B. The program narrative also stated that this blood product was so virulent that if the truck transporting it had gotten into an accident, and the blood product spilled, it would present a most dangerous contamination to the general public.

The smallpox vaccine has always been produced using "calf lymph" or "fetal calf serum." The calves used for producing the vaccine can very often harbor "bovine leukemia virus," which isn't ordinarily communicable to people, but, according to Dr. Robert Strecker, can be when it is attenuated in human tissues to make a vaccine. A book written in 1933, titled "The Golden Calf" (by Charles W. Forward; John M. Watkins, Publisher), contains photographs of people dying of a "wasting" disease after having received their smallpox vaccinations, as well as photographs and descriptions of people having contracted "sleeping sickness" from smallpox vaccinations. Sleeping sickness is now also reported to be at epidemic proportions in Africa.

As covered in the section on polio, the SV-40 monkey viruses have caused cancerous brain tumors in recipients of polio vaccine, and documented reports of different types of cancer and leukemia have followed in the wake of vaccinations of all kinds.

Consider this June 26, 1991, report headline from the *New York Times* News Service: "Child Cancer Rates Climb, Study Finds," subtitled, "Cause of rising malignancies unknown." And how about the October 17, 1990 Associated Press headline: "Increase in Brain Cancer Alarming." Not a hint of the many toxic causes of disease in our outer and inner environments, including vaccination, in either of these articles.

A news release headlined in the *Orange County Register*, "50's Polio Vaccine Could Be Source of AIDS, Scientist Says," and dated March 5, 1992, reported that a researcher named Robert Bohanon discovered "some stocks of polio vaccines used in Chicago in the mid-1950s have tested positive for the monkey virus." He adds, "Prominent polio researchers such as Jonas Salk and Albert Sabin confirm that the vaccines administered to mil-

lions of people around the world were later found to be contaminated with numerous monkey viruses...Bohanon reported last November while doing research at Baylor College of Medicine that he found the monkey virus in the tumor of an AIDS patient who had no known contact with monkeys.”

A report by Daniel Q. Haney, Associated Press, appeared in the *Los Angeles Times* October 25, 1987. Its headline read, “Both Cause and Cure of Multiple Sclerosis Still Elude Scientists.” Yet the *British Medical Journal* reported on April 22, 1967, more than 20 years earlier, “Chronic diseases of an acute nature, chronic degenerative diseases have also been reported to follow vaccination. Stovicek (1959), Paffy and Merai (1961), McAlpine (1964), Morris, and numerous German authors described the occurrence of multiple sclerosis following administration of vaccines against smallpox, typhoid fever, paratyphoid fever, tetanus, poliomyelitis, tuberculosis and influenza, and after injection of anti-diphtheria serum and gamma globulins. Zintchenko (1965) reported twelve patients in whom MS first became evident after a course of anti-rabies vaccinations.”

Dr. William Campbell Douglass’ weekly newsletter, AIDS FAXx, had this to say in the June 16, 1989, issue:

“Researchers have discovered that the blood of people with multiple sclerosis (MS) contains a virus previously associated only with leukemia: HIV-I, or bovine leukemia virus. This cattle virus causes T-cell leukemia in man and also tropical sclerosis, and also tropical spastic paraparesis (TSP), a rapidly degenerative neurological disease similar to multiple sclerosis, except faster in its progression... The source of these HTLV-I infections, and possibly the cause of their multiple sclerosis, is obvious from the scientific literature, but most scientists are reluctant to discuss it because it’s a terrible indictment of all immunizations.

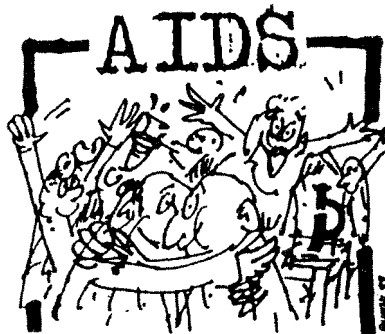
“It is clear from the scientific literature that fetal calf serum, and other animal sera and animal tissues used to make vaccines, are heavily contaminated with animal viruses. The one of most importance in the case of multiple sclerosis is the bovine leukemia virus...a high percentage of calf sera used for making vaccines have been found to be contaminated with this cancer-causing and MS-causing virus. Of equal importance is the contamination of these sera, used for vaccinations, by the AIDS virus itself. The AIDS virus, which is bovine visna virus (BVV) has been shown to be present in a large percentage of the fetal calf serums used for cell cultures.

“HTLV-I, BVV, and possibly other of these pathogenic viruses, cause various neurological symptoms. If six out of six patients suffering from MS in the Lund study were found to be positive for HTLV-I, then one can assume that the patients' multiple sclerosis came from this viral contaminant.”

Dr. Richard Moskowitz has written, “Since routine vaccination introduces live viruses and other highly antigenic material into the blood of virtually every living person, it is difficult to escape the conclusion that a significant harvest of autoimmune diseases must automatically result.”

In August of 1992, the media reported that U.S. troops had returned from the Persian Gulf with strange symptoms suggestive of autoimmune disease. The excuses for these symptoms focused originally on oil fires in the gulf, and by October, 1992, laid the blame on sand flies (Joseph Albright, “1,000 Gulf Vets May Have Parasite Causing Ailments Decades in Future,” Pasadena *Star News*, October 10, 1992). Only once did the author hear a military doctor (interviewed on late night/early morning television news, never to be repeated during prime time) state that one of the causes “might be the immunizations they received.”

The troops sent to the Persian Gulf received not only the standard immunosuppressive shots given by the military, but also a new experimental “biological warfare” vaccine (*Orange County Register*, January 4, 1991, page A26, by Gina Kolata of the *New York Times*). The article, “Troops in Persian Gulf to get Experimental Botulism Vaccine,” states, “On Dec. 21



**Explosion of enthusiasm  
in a research laboratory  
at the discovery of a new funding**

Cartoon courtesy of CIVIS



[1990], the Department of Defense obtained a special waiver needed to require troops to take experimental drugs and vaccines, in case of combat or 'threat of combat.' Although troops must accept standard medical treatments, until now they have not had to accept experimental ones without signing an informed consent agreement."

"Modern science is just beginning to investigate and in some measure to document genetic transcriptions resulting from vaccinations...Dr. Robert W. Simpson of Rutgers University has suggested that immunization programs against influenza, measles, mumps, and polio may actually be seeding humans with proviruses which will then become latent in cells throughout the body. Of diseases that could be caused in this manner, according to Simpson, the chief possibilities are rheumatoid arthritis, multiple sclerosis, lupus erythematosus, Parkinson's disease and cancer.

"American virologists have shown the RNA virus (in vaccines), although not containing DNA material within their structure, are able to form DNA and become integrated with the cells that they infect" (from *The Dangers of Immunization*, The Humanitarian Society, Quakertown, PA, 1979).

"In point of fact, we already practice biological engineering on a rather large scale by use of live viruses in mass immunization campaigns" (Joshua Lederberg, Department of Genetics, to *Science* magazine, October 20, 1967, page 313).

But for researchers receiving government grants to continue experimenting in the alleged attempt to find the causes and cures of autoimmune diseases, for the big business industries which profit from "treatments" for disease, and from products which create disease, two plus two must always be translated into infinitely more complicated equations in order for confusion to continue to surround the issues. If answers were made evident, the funding would stop.

This booklet is intended to give only a brief cross-section of information. For more detailed information, you may want to send for the books listed at the back of this publication.

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