

CHILDHOOD VACCINATION

What you need to know to make an informed decision

Investigate the ingredients, duration and effectiveness of vaccines before blindly trusting unsupported information. Discuss this brochure with your local GP.

Judy Wilyman (BSc,MSc,Dip.Ed)

Some Questions and Answers

Did vaccines control childhood diseases?

No. Childhood diseases are still present in developing countries (and aboriginal populations) with poor living conditions. These countries have had vaccine programs for more than thirty years but the diseases are still rife (1) (2).

Do prominent Australian public health authorities of the twentieth century claim vaccines controlled these diseases?

No. By 1950, prior to the use of most vaccines, infectious diseases were considered to be very low risk in Australia (3). Prominent Public Health officials claimed improvements in sanitation, hygiene, nutrition, smaller families and improved living standards were the main reason for the decline of infectious diseases (4) (5) (6) (7) (8) (9).

What is in a vaccine?

Ingredients include preservatives such as thiomersal (an organic mercury compound), formaldehyde and phenoxyethanol. Antibiotics such as neomycin and polymyxin B. Adjuvants such as aluminium hydroxide and aluminium phosphate. Foreign proteins from the manufacturing process such as human diploid cells, calf, bovine and monkey kidney cells. These substances are known causes of allergies, anaphylaxis and autoimmune diseases (10) (11).

Is there an increased risk of reactions when multiple vaccines are used in individuals?

Yes because there are increased amounts of chemicals injected into the tissues. Furthermore the effects of chemicals can be synergistic. They react together to become more potent. The current schedule recommends 12 vaccines by 18 months of age (12).

When do reactions to vaccines occur?

They can occur immediately after the injection and later on. Animal studies show delayed reactions to the ingredients of vaccines. A reaction may occur days, weeks, months or years after an animal/human is exposed to the chemical (13).

Are there any human studies that have investigated the long-term health effects of 12 vaccines in vaccinated and unvaccinated children?

No.

Are there any animal studies that have investigated the long-term health effects of the 12 vaccines recommended on the childhood schedule?

No.

Does the Health Department publicise the vaccination status of cases of infectious diseases that are admitted to hospital?

No. This would be the strongest evidence for the effectiveness of vaccines. This information is not collected and publicized in the media.

Can vaccinated children get the diseases they are vaccinated against?

Yes. Viruses/bacteria can revert to virulence and also the antibody response is not stimulated in 100% of individuals (14).

Does the Health Department publicise the socioeconomic status of cases of infectious diseases?

No. Yet it is known that disease incidence is higher in communities with lower living standards.

Do genetics and the environment play a role in the expression of disease?

Yes (15)

Is there a link between vaccines and diseases which are increasing in children such as asthma, allergies anaphylaxis, autism, ADHD, learning difficulties, diabetes, speech delay, cancer and other chronic illness?

It is possible there is a link because the studies mentioned above have not been done. In Australia in 2001 chronic illness affected 44% of 0-14year olds (Dept. Health, 2005). This is a huge cost to parents and the health system. However, scientists are not seriously looking to see if vaccines could be the cause of these diseases.

Do pharmaceutical companies influence the areas of research and funding of vaccine safety and efficacy studies?

Yes. The majority of vaccine safety and efficacy studies are funded by pharmaceutical companies. They also control the areas of research. Practices within these companies are designed to sell drugs and the methods they are using have been described as 'institutionalized deception' (16).

References:

- 1) The World Health Organisation (WHO)
- 2) O'Connor K, 1989, A History of 75 years of baby health services in NSW. NSW Department of Health.
- 3) Commonwealth Department of Health, 1945 – 1986, Official Yearbook of the Commonwealth of Australia, (Com.Year) No. 37 – 72.
- 4) Burnet, M.,1952, The Pattern of Disease in Childhood, *Australasian Annals of Medicine*, Vol.1, No. 2: p. 93.
- 5) Cumpston JHL, 1927, The History of Diphtheria, Scarlet Fever, Measles and Whooping Cough in Australia 1788-1925, Commonwealth of Australia Department of Health, Service publication No. 37, Green HJ, Government Printer, Canberra.
- 6) Lancaster, H.O. 1956a, Infant Mortality in Australia, *The Medical Journal of Australia*, 2: p.100-108.
- 7) Lancaster, HO., 1956b, The Mortality of childhood in Australia: Part 1 Early Childhood, *Medical Journal of Australia*, 2: p. 889-894.
- 8) Lewis MJ., (ed.), 1989, Health and Disease in Australia: A History by JHL Cumpston, Australian Government Publishing Service Canberra.
- 9) Gillespie J.A., 1991, The Price of Health: Australian Governments and Medical Politics 1910 – 1960, Cambridge University Press, Cambridge, UK.
- 10) Eldred BE et al, 2006, Vaccine components and constituents: responding to consumer concerns, *Medical Journal of Australia*, 184: No. 4: pp.170-175.
- 11) Commonwealth of Australia, 1991, National Health and Medical Research Council (NHMRC), Immunisation Procedures (fourth edition), Australian Government Publishing Service, Canberra.
- 12) Greville, RW. , 1966, Recent and Future Development in Immunising Vaccines, *The Medical Journal of Australia*, May 21, p. 908.
- 13) Food and Drug Administration, 1982 as cited in Kirby, 2005, Evidence of Harm, St. Martins Griffin, New York.
- 14) Smith A.M., 1999, "Analysis and expression of important vaccine antigens of *Bordetella pertussis*" (manuscript), PhD thesis, University of Wollongong.
- 15) Ravel G, Christ M, Horand F, Descotes J, 2004, Autoimmunity, environmental exposure and vaccination: is there a link? , *Toxicology*, 196(3): 211-6, Mar 15.
- 16) Petersen M, 2008, Our Daily Meds: How the pharmaceutical companies transformed themselves into slick marketing machines and hooked the Nation on prescription drugs, Sarah Crichton Books, New York.

Further Information Contact:
judy.wilyman915@uowmail.edu.au

Childhood vaccines protect children from a variety of serious or potentially fatal diseases, including diphtheria, measles, mumps, rubella, polio, tetanus, whooping cough (pertussis) and others. If these diseases seem uncommon or even unheard of it's usually because these vaccines are doing their job. Still, you might wonder about the benefits and risks of childhood vaccines. Here are straight answers to common questions about childhood vaccines. Is natural immunity better than vaccination? Concerns about Childhood Vaccinations. Health Canada states that vaccinations are one of the most cost-effective interventions available. However, some people are concerned about the side effects of immunization and are questioning the necessity of vaccinating their children. Others also question the need to continue to vaccinate children against diseases that are rare in Canada. Every year, children in Europe die of vaccine-preventable diseases. Is it time to make childhood immunisation mandatory or would this be counter-productive? Pneumonia: Protecting older people as COVID-19 continues to spread. Pneumonia: Protecting older people as COVID-19 continues to spread. Coronavirus vaccine: Ramp up adult vaccination plans now. Coronavirus vaccine: Ramp up adult vaccination plans now. COVID-19: How young health professionals are weathering the storm.