

THE *informed* PARENT

JANUARY 1994 THE BULLETIN OF 'THE INFORMED PARENT GROUP' ISSUE 6

DEVASTATED FAMILY

Little Michaela Neighbour was a golden-haired, adorable little girl... until, that is, she was given her MMR shot.

She changed from an outgoing, happy child into the sad little figure she is today - and her parents are devastated.

Michaela's tragic story was told on Meridian television which broadcasts to about 750,000 regular viewers in the south and south east of England.

The programme showed an amateur video of the 15-month-old Michaela before the MMR vaccine, running about, smiling for the camera and generally enjoying life.

Film for the television company's Health Watch slot showed a different Michaela 18 months on.

Her father explained that after the vaccination

- she withdrew into herself
- there was no eye contact
- all her communication skills disappeared
- and she seemed in total confusion within herself

"She didn't know who she was, or what she was doing," said her father David Neighbour from the family home in Reading.

The Neighbours say that they were never warned about any risks from the vaccine and nor were they asked any family history.

"I can't believe if they know the possible side effects, even if there's one in a million chance, I would think it is their duty to tell us because they are looking after our health - that's their job," said Mr Neighbour during the television programme.

Dr Peter Dixon, director of public health for Berkshire was asked if parents were given enough information.

"Of course they should be given adequate information," he said. "And there is clear guidance on what the doctor or

nurse who is dealing with the mother, should say in terms of giving information and making it quite clear what the contraindications might be."

The interviewer Liz Wickham, then went on to say that all the parents she had spoken to said they were only asked: "Does the baby have a cold?"

"They don't go into the medical history of the family," she said.

"The guidance is quite clear," answered Dr Dixon, "and there are certain questions which should be asked about the medical history."

Liz Wickham went on to say that when the damage was done the medical profession seem to be able to offer little help and indeed Michaela's family, after certain tests had been carried out, were told to come back in two years.

"I was absolutely gutted," said Michaela's father. "We were there, hoping for some sort of explanation for her condition. And it seemed as though we were just being thrown in the bin and I was very angry about that."

The programme told viewers that the Department of Health and the World Health Organisation urge parents not to be afraid to have children vaccinated because measles can cause inflammation of the brain, convulsions and pneumonia, mumps can lead to viral meningitis and a pregnant woman with rubella can have a blind, deaf or brain-damaged child.

"But two brands of the MMR vaccine have already been banned and parents of vaccine damaged children feel differently," said Liz Wickham.

At the end of Health Watch Ms Wickham suggested that concerned parents may want to get hold of The

Informed Parent newsletter and showed a copy on screen asking viewers to write for a fact sheet.

Speaking to The Informed Parent some weeks after the programme Liz Wickham said: "We expected a lot of flack from doctors but only one practice nurse contacted us to complain. We had hundreds of replies from all kinds of viewers and we were amazed at the response."

The Informed Parent discussed vaccination with a highly-qualified practice nurse who told us that usually, in the practice where she works, the doctor gave the first vaccinations and any questions parents might have were directed at the doctor. The practice nurse may well give all the follow-up vaccinations - including the MMR - and the nurse we spoke to maintained that she had hardly ever been asked a question by a parent.

"In any case," she said, "I honestly don't know of any contra-indications connected with the MMR and as far as I can remember, I haven't been told that I should ask any questions about the family history."

**See page five for information about JABS - an organisation being set up in Cheshire for parents of children allegedly damaged by MMR.*

VACCINE DAMAGE IN JAPAN

After 17 years, the families of 22 children who died or became permanently ill from mandatory vaccination won their case. The Nagoya High Court awarded 2 billion yen (£568,181) to the families of children vaccinated against polio, diphtheria and whooping cough. Nine died, 14 grew up with nervous disorders, inflammation of the brain and other painful side effects. The judge said parents suffered indescribable stress, anxiety and agony.

Taken from the Asahi Evening News, Japan 28.7.93.

PHARMACIST'S VIEWS ON VACCINATION

Linda Dobraszczuk, a member of The Informed Parent and a pharmacist gives her views on vaccination after reading Leon Chaitow's book "Vaccination And Immunisation Dangers..."

On the back cover of Leon Chaitow's book there are three questions and answers:

Q. Are immunisation and vaccination procedures as safe and effective as we are told?

A. They do offer some protection but generally far less than is generally supposed and at a cost, in terms of short and long term hazards.

Q. What are short term hazards?

A. Cot death, brain damage, polioarthritis, convulsions, allergic reactions.

Q. Long term hazards?

A. Impaired immune function, schizophrenia, allergies, auto-immune diseases, latent viral diseases, cellular genetic changes possibly resulting in cancers and much much more."

Doubts about the effectiveness of vaccines and surprise at some of the reported nasty side-effects have made me review my own children's vaccination programme.

Of course some doctors, especially those who have worked in third world countries, might say: "I have seen loads of children die of measles" – and this is true.

If your child is likely to be living on the equivalent of a third world diet e.g. burgers, chips and nutrient-depriving fizzy

drinks, then you may as well go for the long term damage (as mentioned by Leon Chaitow) in case your child does not survive any of the infectious diseases which kill many, many children under five in poorer countries.

If they actually get to five then they are in with a better chance. If on the other hand, you are breast-feeding your child on demand and have managed to put up a good resistance to the child-orientated adverts for junk food on the television then you may wish to consider the long term options.

My main objection to the vaccination programme is that it is aimed at the population as a whole and in the supposed interests of the poorly fed majority while ignoring the sometimes fatal consequences for a minority.

It also avoids responsibility in the government for making good food for all an absolute priority while the drugs companies put lots of taxpayers' money back into the government's hands for its own use.

Your GP also will only receive payments if a certain percentage of vaccination is achieved within the community so their interest is not wholly health-orientated.

Don't make your decision about vaccination on my comments alone – discuss the matter with your own GP, read Coulter* and Chaitow* and read the literature from The Informed Parent. Then decide. Either way you will have made an informed choice.

My own daughter had allergic rhinitis, a constant runny nose and a cough after her first set of vaccinations. We went to a homeopath and a day later they cleared up until the day after her measles vaccination. (It is believed by some to lie dormant in the nerves once introduced into the body and awake on the trigger of an illness e.g. a cold virus). A friend of a friend locally believes her child's muscle paralysis began after a severe reaction to the MMR vaccine.

The advice is to have your child vaccinated at two, three and four months. (To prevent a high temperature reaction you might be advised to give paracetamol, previously only recommended for full-term

babies over three months.) The rationale behind this is that if the vaccines are given close together the parent is more likely to complete the vaccination programme. Also protection from pertussis (whooping cough) is not complete until the third vaccination.

There is nothing to stop you having your baby vaccinated at three, four and five months – the tetanus vaccine gives greater protection with a longer gap between vaccinations.

Also consider that the MMR does not give lifelong protection. Your child will be most vulnerable to these illnesses just as they reach child bearing age when most damage can be done to the foetus or testes. Catching the disease gives lifelong protection and in most cases is not serious.

For myself, my youngest child was given the triple vaccine (DTP) and polio but I breast fed for two years and decided against HIB and MMR.

What you decide is up to you.

**Vaccinations and Immunisation: Dangers, Delusions and Alternatives by Leon Chaitow (1991) published by C.W. Daniel, Saffron Walden, Essex.*

DPT A Shot in the Dark by Harris Coulter and Barbara Loe Fisher (1987), Avery Publishing Group, Garden City Park, New York.

Vaccination, Social Violence and Criminality by Harris Coulter (1990), North Atlantic Books, Berkeley, California.

All three books are available from Minerva Books, 6, Bothwell Street, London, W6 8DY. Telephone: (071-385-1361).

SORRY...

for any delay in processing new memberships or dealing with requests for information. Our efforts are all voluntary and we are all busy, working mothers too – so we do our best!

We are very grateful for all your comments, letters and support because we do work hard to ensure a responsible information service to members.

• We now have a new reading list which will automatically be sent to new members. Other members are welcome to apply for a copy by sending an SAE to: Reading List, The Informed Parent, 19 Woodlands Road, Harrow, Middlesex HA1 2RT.

OPEN MEETING

**January 14th 1994 at 7.30pm
Wigan New Town Hall
(Hewlett St. entrance)
Library St. Wigan,
Gt. Manchester.**

Speakers:

**Rosemary Fox, Secretary of
Association of Parents of
Vaccine Damaged Children.**

**Ian McCartney MP,
Front bench Shadow
spokesperson on health.**

**Dr. Gideon Smith, Consultant
in Public Health medicine and
communicable disease control.**

**Ann Coote from Bolton, parent
of vaccine damaged child.**

**This meeting has been arranged
by JABS (Justice Awareness &
Basic Support).**

THE HIDDEN CAUSE OF HUMAN ILL-HEALTH

The one aim of any business is to make money and the success of a manufacturing industry depends upon sales. With the structure of the economy geared towards continual "growth", this means producing and selling ever greater quantities of that being made.

When these basic fundamentals are applied to the makers of pharmaceutical drugs and vaccines, it is clear that, by necessity the survival of this industry is dependent on people being persuaded that their health rests entirely on the consumption of petro-chemical drugs and vaccines and the necessary "growth" can only come about if increasing numbers of people are persuaded similarly.

Clearly drugs are of no use to healthy people – although this does not concede that drugs are necessary to the sick, for largely they are not – and so health is not something of much importance to the makers of drugs, with the bottom line being that a healthy population means a sick drugs industry.

The desired situation for the vaccine manufacturers is compulsory vaccination, as is the case in America. (See *The Informed Parent Bulletin* No. 5) In the UK, similar noises are being made by some doctors and health authorities who also call for compulsory vaccination.

In America, 151 million doses of eight major vaccines were distributed in 1981, which generated more than \$300 million for the drug industry, although the vaccine market in the UK is naturally much more modest – worth a mere £44 million annually. Along with a seemingly never-ending list of "breakthroughs" in vaccine development, calls for compulsory vaccination will inevitably grow louder.

Unfortunately the problem is not just that vaccines and drugs are prescribed by those whose medical thinking was and still is, dictated by the pharmaceutical industry: A thinking which is based on Pasteur's erroneous 'germ theory' i.e. the incorrect notion that germs are the cause of disease – but also that doctors themselves often have a

vested interest in keeping vaccination and drug prescription levels high.

This is not so preposterous considering that more than one million prescriptions are written every day in this country and that doctors who achieve 90% vaccination take-up rate among patients qualify for a £1,800 bonus. At the same time there are also reports of GPs striking off from their lists, parents who refuse to allow their children to be jabbed.

Massive documentation is available proving that the deluge of petro-chemical drugs, vaccines and other toxins is causing the most devastating and systematic damage to health ever. And the media lackeys of the chemical/ medical / vivisection syndicate have managed to brainwash the population into believing that animal experiments are essential for the "safety

testing" of drugs and vaccines, just as easily as they have managed to brainwash the public into believing that these drugs are necessary in the first place.

Very simply these "tests" provide them with an alibi for the day when a drug's uselessness and/or dangerousness can no longer be concealed; to allow its makers to say in court that all "safety" tests have been done, despite the many honest doctors who throughout this century have stated that animal tests can never give an indication of how a drug will react in a human patient.

This explains why drug manufacturers refuse to abandon these "smokescreen" tests in favour of more reliable tests, usually based upon human cell and tissue cultures. In reality, if these genuine safety tests were used, then the vast majority of new drugs – or indeed of the myriad chemical compounds introduced every year after the same useless "safety" tests – would never be allowed to reach the market place.

This would obviously be a disaster for the profit-motivated chemical empire and hence all steps are taken to ensure it doesn't

happen, whatever the cost to human lives.

How many people who willingly allow their children to be vaccinated know just what is being injected; *that the smallpox vaccine is made from the pus and scabs scraped from the deliberately inflicted wounds made on calves; or that monkey and canine kidneys, eggs from disease-ridden battery sheds and mercury, aluminium and formaldehyde are the unsavoury ingredients of others?*

How many parents know that each batch of DPT vaccine is "tested" by injecting the vaccine into mice, who are then "challenged" with pertussis bacteria (whooping cough) injected into the brain?

The vaccine's potency is judged on the basis of how many mice die and how many survive. To determine how safe the vaccine will be for children, the vaccine is injected into the abdomens of young mice, which are observed to see if they gain weight. If they gain a specific amount of weight the vaccine is deemed safe.

With this in mind, is it really any wonder that vaccines are known to cause or are suspected to causing, a whole range of devastating illnesses, from cancer to cot deaths?

These are diseases which the public are soothingly reassured will only be conquered by more animal experiments, although of course animal experiments are responsible for it all in the first place.

The new anti-vivisection movement, going under the title of "scientific anti-vivisectionism" and based upon the works of Swiss medical historian Hans Ruesch: works, incidentally, which were hastily withdrawn from the shelves of bookshops in democratic America and Britain, is campaigning for the immediate and total abolition of vivisection, due to the massive health damage being caused by a medicine based upon a pseudo-scientific mode of "research" and which is rapidly bringing about the creation of a chronically sick society.

ARK, PO Box 82, Kingswood, Bristol BS15 1YF.

**Chris Pedlar, from ARK
(Animal Research Kills)
gives his views on animal
testing and the
connection with vaccine
production**

THE PRICE WE PAY

I HAVE spent many years studying the ill effects of vaccinations and many hours discussing vaccinations with parents who have vaccine injured children – people who want to know why this happened and have not been given reasonable explanations.

These are people who believed they were doing the right thing by their children and when their children are harmed and they look for answers, they are ridiculed. They are ridiculed by health authorities and by their own families for believing that something that is supposed to be good could harm or kill.

We have all grown up with a good promotional campaign that implies we have rid this planet of killer diseases such as diphtheria and whooping cough through the miracle of vaccination. If that were true – the fact that vaccinations do protect against disease – then there would be no fear surrounding unvaccinated children. But this is so intense in America that you can be hauled into court, charged with child abuse and your children can be banned from entering school.

The campaign has been so effective that when talking to some people and discussing the issue of vaccination, some comments I hear are: "I would never forgive myself if my child got measles," or "if I have given my child the vaccine and they get sick then I feel like I have done everything I could for them."

It doesn't matter if I give parents concrete evidence that the vaccine has higher risks than the disease in both death and complications – vaccines are seen as a panacea rather than a poison.

I am one of the lucky few. I grew up with parents who had an absolute distaste for injections of chemicals and that included vaccinations. I have never been vaccinated, I have travelled Asia and Africa with no fear and have sailed through the childhood illnesses with no problems.

My father's only reasoning at the time was that "we are born with everything we need to survive the onslaught of microbes and that no chemical could give us as good a protection as that which our own bodies can."

His reasoning seemed good enough for me.

As I grew older and entered college and the debates over vaccinations raged I had to start studying why I hated vaccinations. The explanation that "God is smarter than man and He wouldn't give us an enemy we can't see without adequate defences," just didn't stand up to scrutiny by a bunch of scholars.

My father is a chiropractor and an ex-pharmacist and my mother is a nurse. They are both highly educated. I am also a chiropractor. I see my role as an educator – it is not my job to force you not to vaccinate – that would bring me to "their" level.

Currently we are forced through legislation and coerced through propaganda and societal

pressure to vaccinate. Hygiene is not forced on us individually through legislation – we are educated in good hygiene practices, and when helping third world countries hygiene is one of the first things we educate people about. Not so with vaccinations.

My view is biased. I am against vaccinations – any vaccination. However, I urge you to study the facts because ultimately you as a parent have to live with the consequences. My main area of interest is the childhood vaccinations however, most of what I am about to discuss can be applied to any vaccine.

Let me tell you briefly about the function of certain parts of the immune system and how vaccinations act in the body.

The body has an adequate defence mechanism that begins with the bacteria that is on our own skin. These bacteria actually produce an antibiotic chemical that protects us against disease-causing micro-organisms. Then there are our skin and mucous membranes – a very effective barrier to bacteria and viruses. Circulating through our skin and mucous

membranes is a substance called Immunoglobulin A. This acts to identify organisms that do not belong to self and brands them. This then stimulates the next line of defence which stimulates the next and so forth until the organism is defeated. Each step of the last defence relies on the previous one to stimulate it. The last line of defence is Immunoglobulin G. It is this that produces the so called "antibody response" that scientists try to measure to see if a vaccine has "taken".

Immunoglobulin A which brands the bacteria so the body can recognise the bacteria as non self is completely bypassed. The immune system is in no way alerted to an attack. Imagine putting food straight into your bowel, bypassing the mouth and its enzymes which alerts the stomach, which breaks down the food further so that the intestines can absorb the food for us to use as fuel etc. This is what is happening in the body when you vaccinate – it bypasses all the proper mechanisms.

When vaccinated, several physiological processes take place in the body. I will go through the one that has been most heavily researched and most widely accepted. It is called the general adaptive syndrome and was researched by a Canadian scientist named Hans Selye. He researched the effects of stress on the body. His research included the effects of chemical stress. Remember that all vaccines are made from serums which contain chemical compounds.

What he found was that when injected with a chemical, three major changes take place in the body every time. The first is an increase in gastrointestinal activity, this can lead to petechiae on the lining of the stomach – enough stress and

this produces stomach ulcers.

Could the common colic of babies be a symptom of chemically-induced stress? Remember that our first chemical injection begins within hours after birth – Vitamin K. Despite its natural sounding name, this injection is actually a chemically-synthesised compound.

The next thing that happens is depressed thymacolympathic function. This means that the immune system stops working effectively. The thymus, a very important part of the immune system, actually involutes – becomes smaller. A common autopsy finding on sudden infant death syndrome is small blood clots on the thymus.

The other organ to be affected by chemical stress is the adrenal cortex. This actually increases in function. The adrenal cortex produces two hormones called glucocorticoids and mineralocorticoids. An increase in these hormones affects

1. Metabolism of carbohydrates, proteins and fats.
2. Vascular reactivity.
3. Cardiac and skeletal muscles.
4. The nervous system – so much so, that reported problems here can lead to disorders from insomnia to psychosis to eating disorders etc.
5. Inflammatory response towards infection and tissue injury – this can prove fatal by allowing contained infection to spread.
6. Sodium, potassium and calcium levels in our system – this can lead to muscle weakness and tetany and nerve malfunction.

Here in Australia Dr Viera Schiebnerova has been researching cot death. She and her husband developed a non invasive monitor which records the breathing pattern of babies when they are asleep. She found that when under stress children exhibit what she termed a "stress-induced breathing pattern." This pattern includes periods of hypopnea and apnea (shallow and no breathing). If exposed to cigarette smoke, babies exhibit these breathing patterns at night. If exposed to emotional stress

One in a Hundred...

Gretchen Griffith-David, a member from Rhyl, North Wales, writes: "It was lovely to make contact with you and rest assured, The Informed Parent has my fullest support. I am spreading the word as much as possible. Sadly, my words sometimes fall on deaf ears but if one in a hundred is stirred into thinking before leaping onto the vaccination bandwagon, all will have been worthwhile."

Those of us who have opted not to vaccinate the most precious thing in our lives, our child, after great soul-searching and research are indeed very isolated in society today. We are often openly mocked and ridiculed by the public, threatened by the medical profession and looked upon with horror by other mothers.

In my opinion, the vaccination programme is a Pandora's Box of ills, guaranteed to compromise one's immune system. I want no part of it."

within the home the same thing happens.

The night before a baby comes down with a cold or flu it exhibits the same type of pattern. When vaccinated, the babies exhibit this pattern for a period of up to three months, not just one or two nights, but for a period lasting three months. Her work is becoming instrumental in linking SIDS with these vaccines.

In Japan they have now postponed some of their vaccine programmes until a child is two years old – and their SIDS rate has dropped.

Now for a bit of history. Most of the illnesses that we vaccinated against had stopped producing problems for us long before vaccines were on the scene – contrary to current propaganda. There had been a 90 per cent decrease in deaths and complications to these illnesses before vaccines were introduced.

Yet we are led to believe that these miracles of modern medicine are responsible for ridding us of these illnesses.

And when confronted with government statistics, the reply is that vaccines are keeping these illnesses down.

NOT TRUE.

America has had compulsory vaccination against measles for 20 years with some areas having a 99% vaccination rate. Even these areas are now having epidemics with higher deaths and complication rates than they have seen for 20 years. In Gambia in 1967 the WHO declared it measles free due to a massive vaccination campaign. By 1972 that country was having massive epidemics with higher mortality and complication rates. Rubella is given to prevent birth deformities. Even the WHO recognises that congenital rubella is higher with vaccination than without.

At times when there have been huge drops in vaccinations and epidemics have increased, mortality and complication rates have been low.

England in the 1970s is a classic example of that. Reports say there was a 75 per cent drop in the use of the pertussis (whooping cough) vaccine. Newspaper headlines heralded the epidemic and onslaught of problems associated with whooping cough. Statistics from England reveal that there were no more than 23 deaths due to the whooping cough epidemic and no cases of brain injury associated with it. SIDS and brain injury associated with the vaccine are higher than those figures.

There is strong evidence pointing to the fact that these childhood illnesses actually trigger our immune system to better performance and they may actually protect us from degenerative disorders later on in life.

Women who have had mumps (not the vaccine) have a lower ovarian cancer rate. Diabetes has been associated with this vaccine. Manufacturers used to warn against vaccinating children with asthma or a family history of asthma.

Now the warning is if the child is on any corticosteroid treatment – this includes asthmatics. Vaccinations have been closely linked with asthma. Children born with asthma, eczema or chronic respiratory infections have been known to be improved or even cured after a dose of measles – the vaccine doesn't do this. Here in Australia the figures are that one in four children

are asthmatic and we are still vaccinating.

Rubella vaccine is associated with arthritis – one in 100 children under 16 is arthritic.

The serums contain chemicals that are used to fix and preserve the vaccine. These chemicals include mercury – a known carcinogen (cancer is the number one disease killer in our children), formaldehyde – a known convulsant (one in ten people are epileptics.) The bugs are grown on animal tissue cultures.

We are not aware of every known virus in this world. A classic example is the polio virus which is grown on the kidneys of green monkeys. The green monkey has two viruses indigenous to them which had never been identified in humans. One was the SIV virus which is very similar to the HIV virus.

Is the SIV virus a mutation that was implanted into us through the polio vaccine? The jury is still out on that one.

The second virus is the SV 40 virus that is now identified in humans as causing brain tumours – thanks to the polio vaccine. Are there other viruses that have combined and mutated while we were cultivating these bugs on animal tissue for injections?

What is the price we are paying for polluting our planet with chemicals? This same price is what we are paying for polluting our internal environment. As one report by a group of doctors in Switzerland states: "Recent studies concerning the appearance of new diseases with immune deficiency as a consequence call for caution. Everything leads to the belief that a reliable equilibrium exists between the human immune system and natural viruses."

We are living in a fools paradise to believe that artificial is better than natural. Artificial immunity is just that – artificial. Because of this we are finding that children who are breastfed are not receiving adequate immunity from their vaccinated mothers – diseases which primarily hit two to five year olds are now showing up in babies.

Their mothers don't have adequate immunity because of vaccinations and therefore cannot pass on their immunity to their children.

The prices we are paying due to chemical vaccination – that we know of – is cancer, arthritis, SIDS, diabetes, brain injury, encephalitis, learning disabilities, muscular disorders, immunological disorders such as asthma, eczema and allergies and an increase in epidemics with increased mortality and complications and possibly even AIDS.

A report by Dr Grmek, a medical history specialist, concludes after collating a thousand scientific articles

"The suppression of disease by medical techniques remains the essential pre-requisite for the appearance of AIDS."

So what is the answer? The answer is health. A healthy attitude. We are now finding that a healthy attitude or state of mind does affect our physical condition. A good disposition increases and boosts immune function. A healthy diet. There has been more than enough research and discussion into the effects of different foods on our health and wellbeing. Exercise is also an essential requirement. All of this means taking responsibility for your own life and health. There are other measures you can take to boost immune

function.

Research in the United States has shown that regular chiropractic care boosts immune function by a minimum of 100% over the rest of the population. It also has shown that within 20 minutes of an adjustment (the term for chiropractic treatment) there is a boost in substance P – an essential element for immunity.

You can also visit your naturopath and homeopath. Other important areas of health care also can include meditation. All of these measures mean that you need to take action and not rely on a magic bullet. They don't exist. Health is qualitative not quantitative. Health is a constant process. It does not mean you have to be fanatical about what you eat and how much you exercise etc., but it does mean taking action.

My plea is always that you educate yourself – don't believe me and do not let fear guide your footsteps. Health care is too important to allow fear to make your decisions. Think about what I have just discussed with you and then think about this: If a body can not survive an infection how can it possibly survive an injection?

One that bypasses all the proper mechanisms for defence and with a serum that contains dangerous chemicals.

There is much more stress to the body associated with a single injection (that usually contains three infections) than there is should a child suffer a single infection – an infection that just might help prevent further illness later on in life.

Think about it. Listen to all sides of the debate. Search for what is true for you and then go with your own gut reaction. A reaction that will be based on an informed choice, not on fear.

A mother from Warrington, Cheshire is setting up a group called JABS after her son was allegedly damaged by the MMR vaccine.

Jackie Fletcher's son Robert was vaccinated just over a year ago at 13 months. Ten days later he had a convulsion. He has been diagnosed as epileptic although the normal criteria for epilepsy developing - ie family history etc - do not apply. An advertisement in the Wigan and Leigh newspapers brought a response from 21 families who believed their children had been affected by the MMR vaccine. Jackie is looking at the current legal aid situation, has contacted her MP Ian McCartney, front bench shadow spokesman for health. Of the 21 families who responded, reaction to the vaccine from the children was consistent with about half developing convulsions and a half arthritis. For further information contact Jackie at 1, Gawsorth Road, Golborne, Warrington, Cheshire, WA3 3RF.

VACCINES OUT-VITAMINS IN

I suppose it was about 1944 when I came across The Vaccination Enquirer, the quarterly review of the old Anti-Vaccination League.

Given the general acceptance of smallpox vaccination as "a very good thing" I was astonished to read, for example:

- That it was so effective in the First World War that the Tommies were being done every three weeks - to no avail

- That doctors on a 'plane returning from France were spotted signing each other's vaccination certificates

- That VIPs were often whisked through airport controls with a blind eye turned to their vaccination status

- And that some children are incapable of developing antibodies, yet can suffer a normal attack of say, measles, make a normal recovery and show continuing resistance to infection.

Over the years The Enquirer chronicled events in the vaccination sphere. It spelt out the connection between the introduction of alum-precipitated diphtheria vaccines in the '40's and the appearance of paralytic polio, and pursued the issue through parliament until eventually there was an enquiry and The Lancet admitted the connection.

The Salk vaccine, the Sabin vaccine - The Enquirer covered them all, showing the claims made to be suspect and using official figures to do it.

For me, one of the most important pieces in The Enquirer was an extract from an article on vitamin C in Archives of Paediatrics.

It noted a decline in incidence of, and mortality from, infectious diseases and that the usual explanation was the forward march of medicine, whereas it was clear there was little connection.

The decline in, for example, TB had begun long before any special measures. And likewise the decline in diphtheria, whooping cough and typhoid fever had started 50 years prior to the inception of artificial immunisation and followed an even trend before and after the introduction of this practice.

Scarlet fever, mumps, measles and rheumatic fever followed the same general pattern, yet no special control measures had come into use.

Moreover, puerperal and infant

mortality had declined steadily in line with infectious diseases, thus indicating the effect of some general factor.

The author came down firmly in favour of increase in resistance through change in nutrition and was

convinced that this derived from a steady increase in consumption of foods rich in vitamin C.

He provided instances from clinical experience suggesting the beneficial effect of this vitamin in TB, pneumonia, diphtheria, rheumatic fever, whooping cough and other diseases.

So vaccines were out and vitamins were in where I was concerned.

I recall our doctor trying to persuade me to at least have our first child done for tetanus if nothing else, as we lived next door to a farm. And I recall refusing a

tetanus jab for my son on two occasions when he came off his bike and sustained "dirty" wounds. I also recall signing a form which made it clear that the jab had been offered but refused.

Yet though a refusenik and a reader of The Enquirer for 18 years, I still had doubts - such is the effect of the daily drip of the vaccination campaign.

Like the National Anti-Vaccination League itself, The Enquirer is long gone and although I am sad so little has changed that such organisations as The Informed Parent and The Immunisation Awareness Group have had to come about, I'm glad that they have and that their publications are carrying on the good work of setting down the other side of the equation.

Retired engineering editor Harry Clarke from Derbyshire, tells why his three children, now in their late twenties, were not vaccinated.

Case Histories

We would like to consider starting a dossier of cases of children who have been affected by vaccinations - from the smallest reaction to the worst. We feel it is one way we can bring to the attention of the public the range of risks with vaccination. With documented evidence there is a better case to put before professional people, the government and the drug companies.

If your child has been affected please write to us at :19, Woodlands Road, Harrow, Middlesex, HA1 2RT marking your envelope Case Histories.

We will log these onto our computer with names and addresses but these will be confidential when we use the material. Names and addresses will not be given out without the approval of the member concerned.

Allergy and Aluminium

The October 1993 bulletin of The Informed Parent carried a letter from a Leamington Spa member whose daughter had suffered an adverse reaction to the aluminium in the tetanus vaccine. A large patch of changed skin had developed on the child's thigh with black hair growing out of it and granules were apparent under the skin. The member has discovered that her daughter is allergic to aluminium and that the tetanus vaccine is delivered in an aluminium solution.

We asked for feedback from other members and a mother from Andover, has written: "I chose to have my daughter immunised against polio and tetanus in 1990 when she was six months old. Within 12 hours of the tetanus injection she developed hard nodules under the skin at the injection site in her thigh. She was a small baby and the 'lumps' looked alarmingly large so I took her back to my GP who said that 'lumpy leg' was a fairly common, harmless reaction and it would soon clear up.

"I was told her reaction was not a contraindication to further immunisation.

"It took about a week for my daughter's leg to go back to normal. I consented to one further booster shot but she reacted again and I could not bring myself to allow her to have any more.

"In the light of your correspondent's much more serious experience, I would very much like to know more about this apparently unpublicised side effect. What is the connection between the allergy to aluminium and the deposition of the mineral in the tissues?"

We will be asking one of our health experts to reply to this in the next bulletin, but in the meantime, we would be pleased to hear from any other member who knows of a similar reaction.

CONTROVERSY OF THE WHOOPING COUGH VACCINE.

A father's opinion, a case study which suggests whooping cough no longer exists and a doctor's indisputable facts about the pertussis vaccine...

Whooping cough or the pertussis vaccine, is perhaps one of the most well-known vaccines for causing damage to children.

In our July 1993 issue we reported how an Irish mother had won a 20-year battle for compensation for her son – now 23 – who was a victim of the vaccine. Her award amounted to £2.75m against the drug company, the Wellcome Foundation.

One of our members, Mr William Wain, BEM who lives in the Isle of Wight continues to fight for his son Paul, now 31 and vaccinated for whooping cough on June 18 1962. Mr Wain, who has received £10,000 interim payment under the Vaccine Damage Payments Act 1979 for his son, has also campaigned tirelessly.

He writes: "In our particular case, having experienced a number of tragedies, including the loss of two children, it must be accepted that had we been warned that there was the remotest possibility that our son could have suffered brain injury by the pertussis vaccine then he would most certainly not have been vaccinated. When my wife took our son to the clinic she took him for the diphtheria vaccine only...but she was told that she could not have diphtheria alone as it was then incorporated into the 'Three in One' vaccine." Paul was vaccinated once and suffered brain damage four hours later.

"It was our decision to decline the offer of further inoculations and we took this

decision after seeing our son after he had been in a convulsion for 45 minutes, when his skin appeared to be marble as he lay there limp and practically lifeless."

Mr Wain claims that in the clinical trials for the pertussis vaccine, from 1948 to 1956, at least 66 children suffered severe brain damage rendering them more than 80% disabled. But, he claims, those conducting the trials were not concerned about the disastrous side effects of the vaccine but merely to record whether or not the child had contracted whooping cough.

The whooping cough vaccination programme commenced nationally in July 1957 and a circular from the ministry made no reference whatsoever, says Mr Wain, to the fact that the vaccine could cause brain damage.

From 1957 to 1968 the vaccine used was Plain Vaccine and during the period 1957-1962, 118 babies suffered severe brain damage as a result of the vaccine.

"What has never been considered," claims Mr Wain, "is the fact that the Department of Health, knowing full well from its clinical trials that the vaccine had caused severe brain damage, still went on recommending its use and the number of children rose from 66 during the trials to over 800. The department said that the benefits outweighed the risks. It must be accepted that those who were brain damaged did not receive any benefit from the vaccine and it cannot be accepted that any Government policy which inflicts such dreadful injuries on tiny babies can be justified.

One wonders at what stage it will be regarded as negligent – 800, or 8,000 babies, or 80,000 babies? At least the

parents should have been informed to enable them to make their own reasoned decision."

HEALTH MEMO

by Dr Vernon Coleman
Taken from *The People* 31.10.93

I have received many letters wanting more information about the controversial whooping cough vaccine. Readers complain their doctors simply insist the vaccine is perfectly safe and won't even discuss it. This may be because many doctors know only what they're told by Government.

One recent survey showed that less than half of GPs understand when the whooping cough vaccine can be dangerous. Here are some undisputable facts:

- Some parents of children allegedly brain damaged by the vaccine want to sue doctors.
- The number of deaths caused by whooping cough fell well before the vaccine was widely available.
- The vaccine does not guarantee protection.
- The Government claims the risk of a child's being brain-damaged by the vaccine is no higher than 1-in-100,000. But reports have been published showing the risk of brain damage may be 1-in-6,000.
- Whooping cough is no longer a major killer disease.
- Most victims of whooping cough are babies who would have been too young for the vaccine anyway.
- Doctors in other countries are wary of the vaccine due to the risk.
- Reports have been published linking the vaccine to the development of serious brain damage.
- Since 1979 hundreds of parents have received £10,000 to £30,000 from Government because of claims children were brain damaged by the vaccine.
- In recent years the number of children allegedly brain-damaged by the vaccine has exceeded the number allegedly killed by the disease.

CASE STUDY: FROM 'WHAT DOCTORS DON'T TELL YOU'..

We have four children, none of whom has been vaccinated. Five weeks ago they all suffered cold and cough symptoms. In the case of two, it developed into whooping cough a month later.

This was diagnosed and treated by our homeopath. Our two year old is still very unwell and suffering acute coughing spasms every hour throughout the night. I took her to our GP, prepared to face a reprimand for "neglecting" to vaccinate. However the doctor diagnosed asthma and prescribed Ventolin.

I was so unconvinced by this

diagnosis that I consulted another GP within the practice. To my amazement he insisted that whooping cough no longer exists (due to mass vaccination) and confirmed the diagnosis of asthma. I pressed for a sputum test to prove or disprove the existence of whooping cough. The doctor had never tested for whooping cough before and sought further information.

I later received a patronising phone call following his discussion with our local consultant microbiologist. *They do not test for whooping cough because it does not exist..*

I then asked, should the condition

clear up in a few weeks, presumably asthma would have been an unlikely diagnosis/ To which he replied, "We now have a new condition called viral asthma which is similar to whooping cough." He said they see many children with this condition. He added, "Since they stopped testing for whooping cough there have been no recorded cases in our area."

Since they no longer test for whooping cough, it will seem as though vaccination has caused its decline. -

E.G. Leigh-on-Sea

Taken from *What Doctors Don't Tell You*, Volume 4 No. 4.

THE ROLE FOR HERBAL MEDICINE

How glad I am to know the Informed Parent exists. Thank you for creating this much-needed outlet for views on vaccination.

My first questions about vaccination were raised when I became vegan and looked into vivisection. I was against vaccinations on the grounds of their causing animals suffering in development. I was not surprised later on to find that they don't actually work in anything like the manner claimed for them by their manufacturers and distributors (i.e. drug companies and orthodox medical network.)

My objection to the methods of vaccine production became even stronger on the matter of vaccine usage. I worked at an animal rescue centre and noticed how, time and time again, very young or very old animals died within hours or days of vaccination. My own dogs and cats have not been vaccinated in years and despite being exposed to vaccinated animals at the rescue centre they have never been ill. Animal re-vaccination of pets is the vet's bread and butter so they are not likely to question it.

Later, when our daughter was born, there was never any question that she would be vaccinated. The health visitor soon realised we knew what we were talking about and dropped the issue. Morgaine is now three years old and despite being exposed to chicken pox and rubella definitely (and possibly a lot else besides) she has never had more than a slight fever or a runny nose - normal manifestations of healthy children dealing with infection and building up their immunity.

I would like to offer heart to all parents agonising over the very difficult question of whether or not to vaccinate. I sleep soundly at night knowing that Morgaine has been spared the possible short and long-term side-effects of

vaccination; that whatever problems she has to deal with in life, they won't be on the list. This is contrary to the usual soft focus advert of parents beaming with confidence over their child's safety because they've just subjected him or her to a syringe full of poison.

I notice your publication seems to be pretty big on homoeopathy. I am a third year student with the School of Herbal Medicine in Sussex.

On qualifying, after my fourth year, I will become a Member of the National Institute of Medical Herbalists, the leading professional body of herbalists in the western world. Herbs have much to offer in promoting a sound immune system and in dealing with insults to the system such as vaccination.

Used in conjunction with a healthy diet, good exercise, a happy emotional life and a stimulating mental life, herbs have an independent role to play in the prevention and treatment of disease in children and adults.

If any readers would like to know more about herbal medicine they can contact me. I am also available to give lectures and teach short introductory courses in the subject.

Peter Conway-Grim, 55, Strand Meadow, Burwash, Etchingham, East Sussex, TN19 7BP.

A letter from Peter Conway-Grim pointed to our unintentional leaning towards homoeopathy and suggested we take a look at herbal medicine too. Here we reproduce Peter's letter and offer some information about herbalism..

THE TRAGIC CASE OF SARAH...

In the last newsletter we highlighted the tragic case of a six-month-old baby who died of meningitis and septicaemia caused by Haemophilus B.

We have had several letters in response to the article but due to lack of space, we have been unable to publish them this time. We hope to use them in our next newsletter.

A booklet from the National Institute of Medical Herbalists says:"

Herbal medicine is the treatment of the condition of ill-health by the use of the whole natural plant, a part of the plant such as the leaf, or a preparation of the plant containing all the substances present in the herb, except woody tissues.

The balance of the constituents which may be extracted from the fresh or dried herb is congruous with the human body.

It is understandable that a herbal medicine derived from the processes of life in a plant cell is much more acceptable to meet the need of a human body than synthetic chemicals from the laboratory. Herbal medicine, using the whole plant, is also concerned with the whole person under treatment. Symptoms are indicative of some deeper problem and the function of herbal remedies is the restoration of a healthy state of mind and body rather than the removal of a troublesome symptom.

"Plant medicines are characterised by their low toxicity, by their lack of accumulation and side effects and by the absence of habituation, dependency and withdrawal symptoms..."

During the initial consultation, which is confidential, the herbal practitioner will explore all aspects of the patient's health, undertake a thorough clinical examination and only after careful assessment of all the facts will a diagnosis be made. As each prescription is individually dispensed no treatment is 'ready made'. No two medicines are identical. Under the 1968 Medicines Act it is forbidden by law for any practitioner, whether orthodox or unorthodox, to prescribe without a personal consultation."

For a register of herbal practitioners please send a large SAE to: Mrs M. Chacksfield, Hon. Sec. National Institute of Medical Herbalists, 9, Palace Gate, Exeter, Devon, EX1 1JA.

The views expressed in this newsletter are not necessarily those of the members or founder members. We are simply bringing these various viewpoints to your attention. This organisation is entirely voluntary and non-profit making.

AIMS AND OBJECTIVES OF THE GROUP

1. To promote awareness and understanding about vaccination in order to preserve the freedom of an informed choice.

2. To offer support to parents regardless of the decisions they make.

3. To inform parents of the alternatives to vaccinations.

4. To accumulate historical and current information about vaccination and to make it available to members and interested parties.

5. To arrange and facilitate local talks, discussions and seminars on vaccination and preventative medicine for childhood illnesses.

6. To establish a nationwide support network and register (subject to members permission).

7. To publish a newsletter for members.

8. To obtain, collect and receive money and funds by way of contributions, donations, subscriptions, legacies, grants or any other lawful methods; to accept and receive any gift of property and to devote the income, assets or property of the group in or towards fulfilment of the objectives of the group.

The Informed Parent, 29 Greyhound Road, Sutton, Surrey SM1 4BY.