



Vaccines: The Clinical Perspective

By Richard Moskowitz, MD

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Priate encounters between physicians and patients are the familiar and comfortable setting where practicing physicians like me do most of our work; and the personal relationships that develop from them are the source of our power to unlock secrets that prove impenetrable otherwise. Although its purview necessarily includes the scientific realm of abstract causes, mechanisms, diseases, and the technical language of abnormalities, the clinical perspective ultimately succeeds or fails in the concrete realm of the here-and-now, the unique, lived experience of individual human beings.

Trusting Our Patients

When parents tell me that their kids have been injured or made sick by vaccines or anything else, it's obviously a crucial part of my job to determine as best I can whether and to what extent that attribution is accurate; and, certainly, there have been my fair share of times when I've had good reason to believe that it isn't. But as the foundation of everything that I undertake on their behalf, my relationships with patients are necessarily built on mutual trust and respect. By that, I don't mean that I always believe or agree with what they say, but rather that I trust what my patients tell me to be the truth as they live it, whether rightly or wrongly, until something happens to convince me otherwise. Indeed, experience has taught me that doctors who question and doubt the official assurances that vaccines are uniformly safe and effective have come to this position out of their commitment to honor that same assumption, while those who would mandate vaccines for everyone without exception often act as if what passes for science these days entitles them to dismiss and override the beliefs and values of patients whom they happen to dislike or disagree with. Similar sentiments prompted the late Robert Mendelsohn, MD,

a beloved professor of pediatrics from an older generation, to insist that parents were the true experts on the health of their children, and that pediatricians who understood that were being marginalized by the extravagant claims of modern science, technology, and the giant industries that control them, in words that ring even truer today:

Parents are better than doctors at managing their children's health. Unless you've passed the half-century mark, you can't be expected to remember the old "family doctor," for today there are very few left. Those who still can are apt to remember them with affection, as friendly, unpretentious, reassuring, and compassionate, someone intimately involved with our families for generations.

He knew each of us as individuals, was sensitive to our attitudes, moods, and idiosyncrasies, and viewed us as human beings in need of help, not clinical subjects for technical and pharmacological interventions. He listened patiently, answered thoughtfully, calmed our fears, and explained simply and clearly. If we needed a pill, we got one, but more often he allayed our fears with calm reassurance and let Nature do its work without interference.

I may have romanticized him, but what he was is what today's doctors should be. Unfortunately, few of them are; so, it falls to you, the parents, to assume that role. How can you do it better than pediatricians? Because you're willing to give your children the time and attention, and your doctor isn't. The typical pediatrician's assembly line spews out 30 or more patients a day, doesn't know your child as you do, and has neither the time nor the inclination to learn. In most instances, all his tests,

shots, and X-rays are no substitute for the common-sense care that an informed parent can provide.

Founded on decades of clinical experience, this distinctly old-fashioned attitude led Mendelsohn to oppose mandatory vaccination at a time when even to question it was already considered proof of heresy:

There is no convincing scientific evidence that mass inoculation can be credited with eliminating any childhood disease. It's true that some diseases have diminished or disappeared in the US since inoculations were introduced, but one must ask why they did so simultaneously in Europe, where mass immunization did not take place.

There are significant risks associated with every immunization. Yet doctors administer them routinely without warning parents or determining whether they're contraindicated for that particular child. No one knows the long-term consequence of injecting foreign proteins into the body of your child, and no one is making any structured effort to find out.

There is growing suspicion that immunization against relatively harmless childhood diseases may be responsible for the dramatic increase in autoimmune diseases, cancer, leukemia, rheumatoid arthritis, Lou Gehrig's Disease, lupus, and Guillain-Barré syndrome. Have we traded mumps and measles for cancer and leukemia?

Doctors for Safer Vaccines, Informed Consent, & Full Disclosure

In the decades since Mendelsohn's book, many other clinicians have come forward voicing similar questions, doubts, and concerns—increasingly backed up by the latest scientific research, but still based on the old-fashioned heresy of trusting our patients and the clinical perspective that is based on it. What is remarkable is not only that there are so many of us out there, but also that our arguments and objections all sound so much alike, because they arise not from theory or speculation, but rather from our shared, cumulative, and hard-won experience in the trenches of everyday medical practice.

I'm thinking of people like Sherri Tenpenny, DO, a dedicated family physician who believed in vaccines and

dutifully vaccinated according to the official schedule for many years, until growing doubts and fears brought her to a conference sponsored by the National Vaccine Information Center in 2000, which opened her eyes to the hidden backstory. Ever since then, she has devoted a major portion of her career to researching vaccines and writing and educating the public about them:

I decided to go to the CDC, and discovered that most of what I'd accepted as the truth about vaccines really wasn't true at all: that vaccines weren't responsible for the eradication of polio and smallpox, and haven't been proven safe; that vaccines deemed "effective" may still not protect against the disease; that research studies use a second vaccine as placebo, not an inert substance; and that vaccines are not harmless, that many thousands have been injured and many hundreds have died as a result of them.

Suzanne Humphries, MD, another physician-activist, is a board-certified nephrologist with many years of clinical experience who took care of several patients with renal failure during the 2009 flu season, and became shocked and disillusioned by the painfully obvious link between the condition and the flu vaccine, which her colleagues flatly refused to acknowledge, a dilemma that led her to give up her successful practice in favor of full-time research into how vaccines act. She has since become a leading advocate for a saner policy regarding their use:

The most memorable event was in the winter of 2009, when the H1N1 flu vaccine was given. Three patients in close succession were wheeled into the ER with total kidney shutdown. When I talked to them, each one volunteered, "I was fine until I had that vaccine."

All three had shown normal kidney function in their outpatient records, and all three required dialysis. Two recovered, and one died of complications several months later.

I began taking vaccine histories on all my patients, and was often startled by what I heard. Several had been admitted with normal kidneys but had their health decline within 24 hours of the vaccine, and even these well-defined and documented cases were denied as vaccine-induced by my colleagues, except for the rare doctor or nurse who would

agree with me in private, when nobody was listening. I resolved to find out everything I could about safety trials for vaccines. What I learned led me to leave my practice and become a fulltime researcher on vaccination and the immune system.

While in charge of the emergency department at Michael Reese Hospital in Chicago, the pediatrician Toni Bark, MD, noticed that a sizable number of kids who had recently been seen at the Vaccine Clinic were showing up at her ER with a variety of ailments, such that she, too, stopped vaccinating without parental consent, and has since become a committed and persuasive advocate for upholding the personal-belief exemption:

Children seen in the vaccine clinic would come to our ER with seizures, respiratory arrest and asthma attacks. I began to realize that not all children respond well to vaccines, and that some die. Later I began to see the fraud and corruption in the Advisory Committees and in how vaccines are marketed.

I had no idea that those killed and injured had no recourse against either manufacturer or physician. Manufacturers enjoy full immunity from lawsuits, and the Vaccine Court is almost a secret, yet has paid out \$3 billion since 1986. The VAERS system is also poorly advertised, and the government admits it receives only 10 percent of the adverse events that occur.

We mandate more vaccines than any other country, and have a higher infant mortality rate than some third world countries. Most kids do OK, but some don't. Genetics and timing are also important; no drug or dosage is right for everyone. Federal cases against drug companies show that safety data are hidden, manipulated, and even fabricated. Most safety studies use fake placebos, like aluminum adjuvant for HPV, or a Meningitis Vaccine for Pneumo. All independent meta-analyses say that real safety studies are needed. There are 200+ new vaccines in the pipeline, and all of them will be

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approved, recommended, and mandated. Isn't enough?

After Nazi Germany, the Nuremberg Code forbade forced medical procedures, and the Helsinki Code is equally explicit that all patients have the right to informed consent before submitting to them.

There's no informed consent for vaccine mandates.

In a workshop on vaccines, Larry Palevsky, MD, another board-certified pediatrician opposing the mandates, explores the very same themes:

I was taught that vaccines were completely safe and effective, and for years I used them. But my experience, and what parents and doctors were telling me, was that vaccines aren't completely safe or effective. We were taught that polio, smallpox, and most infectious diseases went away because of vaccines. But the literature shows that diphtheria, tetanus, polio, pertussis, measles, influenza, TB, and scarlet fever were already waning before antibiotics and vaccines, because of clean water, better living

conditions, sanitation, and nutrition. Other studies show that antibodies aren't how the body is protected, and that some vaccines contain foreign DNA that accumulates in the body and brain, and impairs the immune system. What we have now is a one-sided way of thinking that doesn't allow debate.

It's heartbreaking to see kids who were speaking, doing well, and developmentally normal, who lost their voice, made no eye contact, developed seizures, asthma, and allergies, and had nowhere to go because the doctor said it was a coincidence. The studies that deny any correlation between vaccination and autism don't meet scientific standards.

While theirs are some of the most familiar voices, I could go on and on; as more and more vaccines are introduced and mandated, the roster of family doctors, pediatricians, and other doctors speaking out against mandatory vaccinations and questioning the official dogma surrounding them grows larger by the day. No matter where and in what manner they practice, or

what their specialty, their arguments and objections are all remarkably similar, invoking and elaborating on the very same themes that Mendelsohn presciently identified a generation ago. Rather than opposing all vaccines across the board, they favor a pro-choice position, as I do: they want safer vaccines, expose cover-ups, demand full disclosure by the industry and the CDC, insist on informed consent, and oppose making vaccination mandatory. And hiding behind them stand many more who feel the same way but are afraid to say so openly. In one study that interviewed general pediatricians and pediatric subspecialists, 10 percent of the former and 21 percent of the latter admitted that they would not follow the CDC mandates in vaccinating their own children in the future; 7 many planned to postpone the MMR at least until after 18 months of age, and to reject the rotavirus, meningococcus, and hepatitis A vaccines altogether.



reaffirm the accuracy and validity of the clinical perspective:

Lifelong Guilt

“My son died 40 hours after his 2-month shots. I’d never heard of vaccine injury before. I feel guilty every day because it was the one thing I didn’t look into and wish I did.”

Coercion

“I work for the state, and the insurance is fantastic; but I have to follow their ‘health enhancement program,’ doing physicals, well visits, and things like that. They say it’s a choice; but if you choose not to, the cost triples and I can’t afford that. Luckily our pediatrician doesn’t force the issue. But if childhood vaccines became compulsory, I’d have to drop the insurance, and we’d be screwed.”

Telling Lies

“I’m a nurse and gave the flu vaccine to employees. We were not supposed to get vaccine on our hands. We also had to tell pregnant women the preservative-free shot has no mercury. But it does, and it makes everyone sick. The company I worked for told us we had to tell them it was a coincidence.”

Medical Inattention

“My daughter had a severe reaction to her 18-month shots, and we nearly lost her. I reported it, but they didn’t bat an eye! That’s when I started researching! It was a huge wake-up call. No one in my family will ever vaccinate again!”

Nervous System Dysfunction, and More

“Behavior changes to my four-year-old after her MMR-II and DTaP-IPV are what did it. Eczema, sleep disorder, glassy eyes, drooling, and anger. She wasn’t herself, and the only difference was the vaccines.”

Autism

“Hours after my son’s 12-month check-up, I remember looking back at him in the car; his eyes were rolling back into his head, and he was spitting up in an unusual way. I screamed and drove to the ER like a mad woman. He was hospitalized for three days with a temp of 105.7°. When the nurses put tubes in his head to drain the swelling, they told me to calm down because vaccine reactions like this were normal; but what’s normal

What Parents Know For Sure

The other side of the equation, and the larger and weightier truth that an important part of our job involves simply bearing witness to, encompasses thousands upon thousands of stories of vaccine injured kids and the parents, relatives, and friends who care for and about them. I recently came across a questionnaire devised by Larry Cook, an activist on behalf of the vaccine-injured, and cofounder of **StopMandatoryVaccinations.com**, which he posted on Facebook as a vehicle for collecting as many personal narratives as possible:

How did you decide to start researching vaccine safety and efficacy?

What was the defining moment that convinced you not to vaccinate?

Was it a person or personal relationship, or an educational material (book, article, video, etc.) that started you on this path of investigation?

Have you ever regretted not vaccinating, and if so, why?

What follows is a small sampling of the hundreds of replies that he has received so far, chosen to reflect the broad diversity of their personal histories and motives, and the lifelike quality of their personal narratives, to

about that? And then I vaccinated him again! I just did what I was told.

“But after that, I started reading, and found out that what he went through wasn’t normal; and he hasn’t been vaccinated since. At age five, my beautiful son was diagnosed with Autism Spectrum; it had taken three and a half years before anyone would listen to me. My six-year-old has never been vaccinated. People don’t understand my passion about this.”

Bearing Witness

“I worked in a doctor’s office and saw so many people coming in extremely sick after receiving their flu shots! That raised some red flags, as did noticing how carelessly the medical practices were handled, like the drugs brought in by the sales reps who bought us lunch and handed them out like candy. That started me doubting, and when I got pregnant I began doubting the vaccines too. After extensive research and talking with many parents on both sides of the issue, I was sure that vaccines aren’t for us!”

Family History

“When my son was two, he was vaccinated, became lethargic, went into respiratory distress, and was hospitalized for over two months. They said it was one in a million, and would never happen again. We continued vaccinating him on a delayed schedule, but he continued to get sicker; and still I was reassured by the doctors that we were doing the right thing. My son is now going on six, and our daughter is 18 months, also vaccinated on a delayed schedule. She gets extreme fevers, goes lethargic, and ‘zones out’; again they tell us, it’s ‘just so rare!’ We held off on giving her more; but she still wasn’t meeting her milestones, and developed serious GI problems. At this point we stopped vaccinating, and started researching. “Our two youngest aren’t vaccinated at all and are never sick, while our two oldest are chronically ill to this day. I too had severe reactions to a flu shot in 1997 and my second Hep B in 1999. With our family history of psoriasis, eczema, and autoimmune diseases, we should never have been vaccinated in the first place!”

An Array of Symptoms

“I kept trying to figure out how my two-year-old had become so ill. Reading his medical records reminded me that he’d had a reaction for up to ten days after each

vaccination, anything from a rash to hives, fever, or screaming oddly for hours at a time, but all worrisome enough that we took him to the ER each time. It’s taken years to restore his health, to the point that we’ve stopped vaccinating all our children.”

Asthma, Allergies, Asperger’s

“In 1980, I vaccinated my first child as instructed; there were a few issues, but I didn’t connect them. In 1985, with our second, I’d read about problems with some vaccines, so we did the DT only; still she developed chronic asthma and allergies. But our third developed Asperger’s from his vaccines. By then there were many more on the schedule; thank God we didn’t do them all! He has suffered the most, after receiving the MMR three times in his teens, and the chicken pox, both of which I approved of at the time. Now we’re spending thousands to try to restore his health: he’s very ill.”

Brain Damage

“I witnessed my friend’s daughter having an adverse reaction to the HPV vaccine at 18 years of age. The day after being vaccinated, she had a stroke, spent over a month in the hospital, had to relearn how to talk and walk again, and lost much of her memory. Four years later, she is still recovering.”

ADHD and Autism

“After being vaccinated, my baby regressed, screamed for days, and became sick with multiple ear infections, despite being 100 percent breastfed. He now has ADHD and Autism-Spectrum issues. Against my better judgment, I was also pressured into a flu shot when I was eight months pregnant with him. My unvaccinated children have not suffered anything like that. Knowing what I know now and wish I’d known then, I’ll never vaccinate another baby.”

Bullied

“My son was injured from a vaccine, and his injuries were bad; but it wasn’t until I was also injured by the same vaccine that I fully comprehended how bad it was. Crawling on all fours to look after my children was my light-bulb moment. Right then we moved away from mainstream medicine, but I still regret that I allowed myself to be bullied into vaccinating my children, and that the doctors refused to acknowledge my fears and concerns. From that day on, I would’ve stepped in front of a bullet to spare my children any further damage. My

third child was born at home 24 years ago, with no vitamin K or eye drops; she has never been vaccinated, is the healthiest of my three, and the only one with higher education beyond high school. She has two degrees, including a Master's in Education; my other two are both disabled."

Her Pet Dog

"My prized English bulldog went into anaphylactic shock after her third booster shot! That's what got me started asking vets about vaccines; and they gave me no clear answers! That's how I came across so much information. After seeing my dog so close to death and realizing this could happen to my children, I decided I wasn't willing to take the risk!"

Family History

"In my teens, my mom told me that an uncle just died from the swine flu shot, and that I ran 106° fevers twice and nearly died after being vaccinated as a baby in the late fifties. Then she added that our cousin developed a mental condition that they didn't have a name for then, but probably was autism, and the whole family believed it was the vaccines that did it, because he changed right after that. Right then, I thought, there's got to be something fishy about this vaccinating thing. Growing up in Sacramento in the seventies, I knew many people who didn't vaccinate, and started talking to Preventive Medicine doctors and local health gurus. I decided not to vaccinate long before I was married and had my daughter in 1982."

The Medical System

"I almost died from being given prescription drugs for a month and a half, followed by others for a whole year, during which time I suffered so much in so many ways that I ended up firing my doctors, and told them I'd decided to find my own natural cure. It took me a couple of years of nonstop reading, but I succeeded. After that, I started researching foods, beauty products, vaccines, everything!"

Past Medical History

"It took me falling ill after hospital-mandated flu and H1N1 vaccines. My son almost died the day after his two-month shots, but I believed the docs, who ruled it

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"I knew that if anything happened to my daughter as a result of a vaccinations, I'd never forgive myself"

an 'acute, life-threatening episode of SIDS,' in spite of the fact that he didn't die. He became seriously ill again after his Seventh-Grade series, at about the same time that I got sick from mine. With him, I didn't notice it immediately; the doctor said he was just going through puberty, and this and that. It wasn't until six months later that his pediatrician took our complaints seriously and discovered that he had a brain tumor."

Overkill

"I was an ignorant mom who followed my pediatrician's advice. My gut made me ask questions, and I had the sense to spread out the vaccines and not do multiple cocktails. But each time, my kids got fevers, welts, and felt crummy, while I lost a lot of sleep worrying about them. Still it wasn't till the flu shots made my kids really sick that I said, 'No More!' Even so, they keep pushing whooping cough and HPV, and we keep refusing them. I did my research and chose to stop vaccinating when my children were in Third and Fourth Grade. Now they both have Personal-Belief Exemptions and won't get any more shots; I haven't had any more either."

A Parent's Intuition

"It was an innate, clear understanding that vaccines weren't safe or effective and represented a clear and present danger. It was something I knew instinctively, and nothing done or said to me could alter it; in fact, every insult and embarrassment I suffered because of it only strengthened that resolve."

Ditto

"I just had a feeling: I knew that if anything happened to my daughter as a result of a vaccination, I'd never forgive myself."

A Nurse's Doubts

"I'm an RN working in the NICU for 27 years. When we started vaccinating babies less than an hour old for Hep B, it didn't seem right; these are newborns with no risk factors, whose moms tested negative for Hep B. When I asked about it, I was told to do it anyway, 'because it's the law.' Soon after, flu vaccines were mandated for us, though I'd never had one in my life; and that triggered my research, and my discovery of corruption and greed in the vaccine establishment."

A Teacher's Fears

"I'm a teacher; two different moms told me of their perfectly normal children who regressed into autism immediately after vaccines."

Death

"In 1981 my son suffered severe reactions to DPT vaccines at 8 and 13 months; he should never have received the second, which resulted in encephalitis, with high fever and vomiting, after which his health deteriorated; at the age of two, he finally slipped away."

A Bad Case of Denial

"My son got the MMR. Two weeks later he complained that his heart was racing; the rate was 160 per minute, but it went back to normal in a minute or so. The cardiologist did a lot of tests and sent us home with a heart monitor to put on when his heart raced; but he reassured me that the MMR didn't cause it. Blindly I just did what I was told; 6 months later he died from supraventricular tachycardia."

"Two years later, when Jared was three and Seth nine months, Jared got the MMR, and Seth got DTaP, Hib, and polio. Seth cried for two hours afterward, and stopped walking, started banging his head, and didn't speak for two years. I can't convey how desperate I felt watching another son deteriorate right in front of me and feeling helpless to stop it. At 18 months he was diagnosed as severely autistic, and once again I was told it wasn't the shots, that it was 'just a coincidence' and was going to happen no matter what."

"Meanwhile, nine days after his MMR, Jared started seizing, and again I was told it was a coincidence, not the MMR. Still I went along; but after three months, Seth went in for another round, and the girl who checked us in gave me vaccine information sheets, which shocked me, because no one had ever given them to me before; I didn't even know they existed! On the MMR sheet, I read that 6 in 10,000 children suffer seizures, brain damage or death! WTF, when my pediatrician walked in, I lost my [expletive deleted] religion! Needless to say, no shots were given that day! That's when I finally started doing my own research, logging onto Pub Med, Postgraduate Medicine, the CDC website, and the package inserts; I couldn't believe that I was reading; everything I'd been taught was a lie."

"Natural Causes"

"My son died and my daughter was injured after their vaccinations. The Coroner told me that my son died of 'natural causes,' namely, SIDS. My daughter's injury was labeled 'coincidental.' The Coroner warned me not to mention vaccines as a possible cause of my son's death, or I'd be charged with contempt of court. They know."¹⁰ As their stories make clear, these parents, relatives, eyewitnesses, victims, and friends are not antiscientific zealots wedded to a fixed ideological position, but simply people whose lives and perspectives have been turned upside down, and in many cases ruined, by what happened to them or their children, friends, and loved ones.

Some Vaccine Cases of My Own

In much the same way, my own patients' histories have taught me that the committed relationships, memorable experiences, and the commonsense reasoning involved in raising a child provide a far more accurate context for determining whether a vaccine has played a causal or contributory role in the problems that follow it than any preformed list of "acceptable" or "proven" reactions. If applied in good faith with an open mind, facilitated if necessary by a caring physician or health professional, the parental instinct is well adapted to figuring out what really happened and why, without the necessity for an elaborate, quasi-judicial procedure. On the other hand, as I will presently show, even intelligent, attentive parents can easily miss the vaccine connection in the case of chronic, autoimmune diseases, which often require months or even years to develop, and may not become manifest even then without another insult, such as a booster shot or exposure to toxic chemicals. To illustrate, here is the tale of a twelve-year-old boy whom I know of solely from his mother's letter, but her words are so heartfelt and so congruent with the whole of my experience that I cannot imagine them to be anything but the honest truth as she experienced it; and I venture to say that even my most obdurate critics will be hard put to reject them out of hand:

My son Adam was healthy until his first MMR at 15 months. Within two weeks he had flu and cold symptoms that persisted for six weeks, at which point his eyes had become puffy, and he was hospitalized with nephrotic syndrome. A renal



biopsy showed “focal sclerosing glomerulonephritis,” but he didn’t respond to steroids. I asked if it could be related to the vaccine, but they told me it couldn’t, and we accepted that.

Over the next four years he was hospitalized repeatedly, but finally went into remission, seeming normal and healthy, and stayed off all medication for five years. When he turned 10, his pediatrician recommended a booster, saying that a rise in measles cases made it dangerous for him not to be protected. Checking the PDR and other sources, I found no warning for kidney disease or listing of it as an adverse reaction; so I agreed to it. In less than two weeks, he relapsed, with ++++ protein in the urine, swelling, and massive weight gain, signs that we recognized at once. He was admitted in hypertensive crisis, with blood in the urine, fluid in the lungs, and generalized edema. On Cytoxan, massive doses of Prednisone, and three other drugs he slowly improved, but missed another seven months of school.

It’s been two years since that horrible episode, and he still needs Captopril for high blood pressure and spills ++++ protein every day. The doctor says he sustained major kidney damage, will always need medication to control his blood pressure, and will worsen as he grows, necessitating a transplant eventually. This time I was convinced that his condition was related to the vaccine, but still the doctors didn’t take me seriously and told me it was a coincidence.

I searched for information and even contacted the manufacturer of the vaccine. Finally they sent me two almost identical reports of nephrotic syndrome following the MMR vaccine. It’s very difficult for lay people to get information or even ask questions, since we don’t use correct medical terms and feel stupid. Please tell me if my ideas are reasonable. I don’t think my son could tolerate another episode, and I think he’d have normal blood pressure and kidney function today if not for that second shot.

I also have great concern for other children who develop nephrotic syndrome some weeks after

receiving MMR and whose doctors never make the connection. They could all be at great risk if revaccinated. I realize that this letter has taken up a lot of your time, and I’d appreciate any help you can give me. Thank you.

Like many others who seek my help, this woman honestly believed that the MMR vaccine had crippled her son for life; yet she had no intention of suing the drug company who manufactured it, the doctors who administered it, or the government’s Vaccine Injury Compensation Program (VICP), as she was legally entitled to do. Whether she didn’t think she could win, a conclusion my experience would certainly justify, or just wasn’t a litigious person, as seems more relevant in her case, the absence of such motive only lends further credence to her story.

She was writing simply to find a physician to hear and validate the truth of her experience, which neither the pediatrician who recommended and gave the shots, nor the specialists who treated Adam in the hospital, nor any of the other doctors she spoke to were willing to do. Although it was very little to ask, it was more than enough to earn her gratitude.

To anyone inclined to discredit such tales, I need only repeat that the confidences our patients entrust to us represent the truth as they live it, and that in this instance the causal link between the vaccine and the disease that ruined Adam’s life is sufficiently obvious to be grasped at once by any reasonably attentive twelve-year-old of average intelligence. Yet when vaccines are involved, such stories are routinely dismissed out of hand, by parents and doctors alike, as if they couldn’t possibly be true or worthy of serious consideration, or at most a rare event, tragic to be sure, but of no statistical significance.

“The doctor says he sustained major kidney damage, will always need medication to control his blood pressure”



Even in the face of compelling circumstantial evidence to the contrary, “a coincidence” was the automatic response of every doctor involved in Adam’s care, and they stuck to it even when two virtually identical case reports were supplied by the drug company itself. Whether a canny strategy to defeat possible litigation, or simply the instinctive shielding of a cherished worldview from the threat of change, this prejudice is so deeply ingrained in the medical profession as to warrant careful study in itself.

Finally, Adam’s by no means unique misfortune calls further attention to the largely unexamined deliberations as to whether or not “glomerulonephritis,” “autism,” “encephalopathy,” or any other such complication is judged to have been caused by a vaccine or vaccines and thus qualifies as legally compensable. As for Adam in particular, notwithstanding the two cases of MMR nephritis

“Even in the face of compelling circumstantial evidence to the contrary, ‘a coincidence’ was the automatic response”

documented by the manufacturer, renal failure is still not officially recognized as an adverse effect of the vaccine, an omission that not only helped the doctors to frustrate his mother’s inquiries, but would undoubtedly have assured her defeat in

the VICP “court” had she chosen that route. In short, even though the complication it describes is too uncommon to qualify as a smoking gun in the statistical sense, this case illustrates all of the issues we have just been discussing, and also foreshadows the chapters to follow. I can imagine no more powerful indictment of the VICP, our current program for compensating vaccine-injured patients, than its deafness to tragedies as transparent and heartrending as this one. Δ

Avoiding Pesticides & Suicide Rates

Though suicide by gunfire and suffocation are the most common forms of suicide in the United States, the World Health Organization (WHO) notes that ingesting pesticides is one of the most common methods of suicide globally. WHO estimates that of the three million suicide-by-pesticide attempts each year, more than 250,000 end in death.

Suicide linked to pesticide ingestion is common in Asian countries, including China, Malaysia, and Sri Lanka. Based on evidence from these and other countries, the only way to prevent or reduce such deaths is to stop using the most harmful agricultural pesticides.

Limiting access to pesticides may in turn restrict the means of suicide—an approach that research has shown to be highly effective. Suicide ideation decreases over time, so the longer a suicidal person is delayed, the lower the risk that an attempt will recur. For example, barriers on bridges and positioning others around in an area known for suicide attempts have proved to inhibit people from attempting to take their own lives, allowing them time to move past the crisis.

Consumers can choose domestic and pesticide-free products to reduce overall demand, and ultimately lead to a reduction in pesticide use.

— Adapted from “Avoiding Pesticides Could Reduce Worldwide Suicide Rates,” by Sarah Berry, Sydney Morning Herald, at <http://www.smh.au>

Coenzyme Q10 & the Heart

Congestive heart failure is a chronic condition in which a damaged heart muscle cannot pump enough blood to supply the body with needed nutrients and oxygen. Today more than 5 million Americans suffer from heart failure.



A failing heart muscle is energy-starved, but conventional drug treatments work to reduce the heart's workload rather than address the core problem of the weakened heart itself. There are many treatments besides drugs that can energize the heart, and those with healthy hearts can take steps now to prevent congestive heart failure.

The Lancet reported that patients with congestive heart failure who underwent stem cell therapy showed a decrease in dead heart muscle tissue and notable improvements in heart pumping action, activity level, and quality of life.

Coenzyme Q10 (CoQ10) has been shown to improve cardiac reserves, pumping efficiency, and tolerance for exercise. In fact, CoQ10 may be recommended for heart protection regardless of how healthy hearts already are.

Research has shown that taking vitamin D, selenium, vitamin E, folic acid, fish oil, and a high-potency multi-nutrient improves heart function. Further, those who walk briskly, are active every day, watch their weight, don't smoke, and drink moderately are 50 percent less likely to ever develop heart failure.

— Adapted from “Treatments for Congestive Heart Failure” by Julian Whitaker, MD, at <https://www.drwhitaker.com>.

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References

1. Mendelsohn, R., *How to Raise a Healthy Child...in Spite of Your Doctor*, Contemporary Books, Chicago, 1984, pp. 6-7.
2. *Ibid.*, pp. 210-212, *passim*.
3. Tenpenny, S., *Saying No to Vaccines*, Tenpenny Publishing, Cleveland, 2008, “A Note to Readers,” pp. vii-viii, *passim*.
4. Humphries and Bystranyk, *op. cit.*, Introduction, pp. xii-xiv, *passim*.
5. Bark, T., Letter to Oregon State Senator Ferrioli, posted in Health Impact News, October 22, 2015, healthimpactnews.com.
6. Palevsky, L., www.drpalevsky.com, January 2, 2012.
7. Martin, M., and Badalyan, V., “Vaccination Practices among Physicians and Their Children,” *Open Journal of Pediatrics* 2:228, 2012.
8. *Ibid.*
9. Cook, L., “Parents Share Why They Will Never Vaccinate Again,” October 11, 2015, www.StopMandatoryVaccination.com.
10. *Ibid.*
11. Moskowitz, R., “Hidden in Plain Sight: The Role of Vaccines in Chronic Disease,” *American Journal of Homeopathic Medicine* 98:15, Spring 2005.