

# The Sanctity of Human Blood: Vaccination is not Immunization

By Tim O'Shea

## Topics

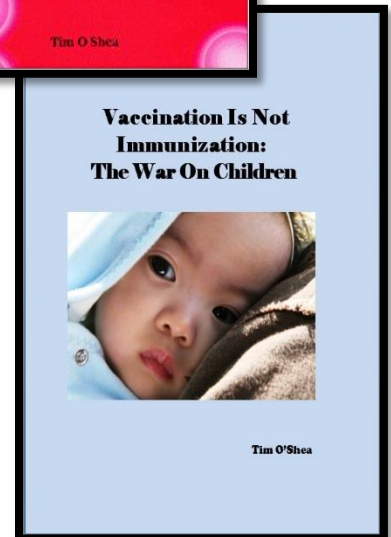
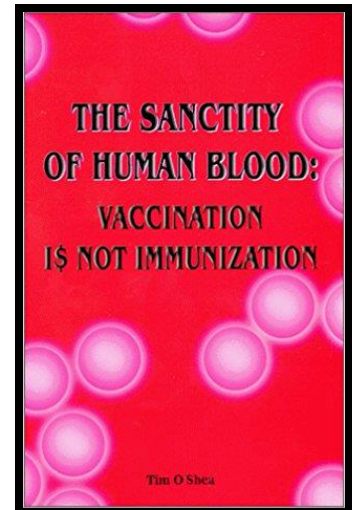
- Vaccination Certainly Does Not Guarantee Immunity.
- Artificial Immunity From Vaccination Is Temporary.
- It's Just Basic Economics.
- Who Protected You?

We've always been told that vaccines are safe, effective, and necessary. We hear how modern civilization has been saved from the ravages of infectious disease by the invention of miraculous vaccines. We hear how important it is for children to get their shots so they'll be safe from disease. And we all agree that children have a right to be protected from harm.

But there's a growing body of information today that indicates that vaccinations are dangerous and experimental. There are just too many unanswered questions:

- 1) Do vaccines put infants at risk of sudden death?
- 2) Do vaccines really give our children immunity to disease?
- 3) Are all these vaccines really necessary?
- 4) Are our children immune-impaired as a result of vaccination?
- 5) Are the climbing rates of infectious and degenerative diseases among adult Americans partly attributable to the effects of vaccination?

We're programmed to think of immunization and vaccination as synonyms. That's no accident. It cost plenty to make us think they're the same thing. The word immunization instead of vaccination is pervasive in both medical and mainstream literature, creating a semantic reality that cannot be supported by scientific evidence. In actuality, there's a big difference. Immunization means to make someone immune to something. Vaccination, by contrast, just means to inject something into the bloodstream. Big difference.

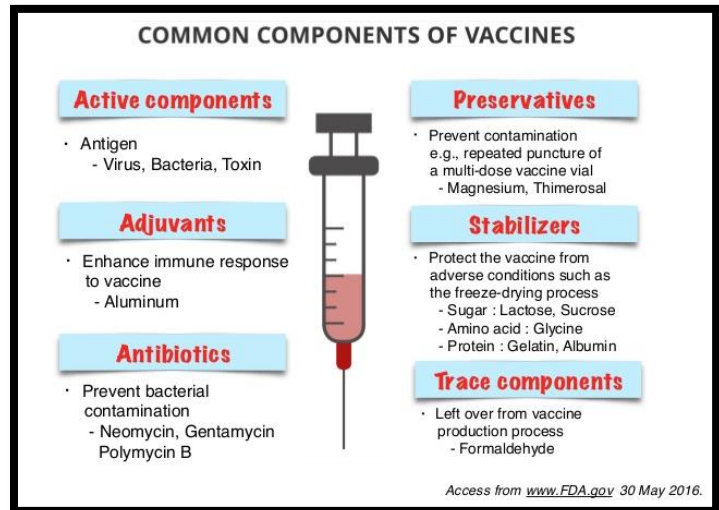


• **Vaccination Certainly Does Not Guarantee Immunity.**

True natural immunity happens only after one recovers from the disease itself. With the actual disease, the microorganism had to pass through many of the body's natural immune defense systems in the nose, throat, lungs, and digestive tract before it ever gets as far as the bloodstream.. It's very likely that the microorganism triggers many biological events that are essential in building true natural immunity, about which doctors know little or nothing. When a child gets a new disease, he may feel sick for several days, but in the vast majority of cases he will recover.

The first vaccines by Jenner, Pasteur and Koch, and also most modern ones, are experimental proteins made from rotting, diseased samples of animal tissue (cows, sheep, monkeys, humans, and horses) carrying some "weakened" infectious agent. Others are toxins (poisonous by-products of microorganisms) that are neutralized by formaldehyde and aluminum.

Most vaccines have components like formaldehyde, aluminum, and mercury which are called adjuvants, or helpers.(PDR, 2001) Formaldehyde is a carcinogenic liquid, used for embalming. Mercury is added in the form of thimerosal, a preservative known to cause nerve damage, autoimmune disorders and cancer. Aluminum is a proven neurotoxin, positively associated with Alzheimer's and several other neurological disorders. *Can we really get immunity from these concoctions?*



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The thinking behind vaccination is that if the person gets a "minor" case of the disease under the "controlled" conditions of vaccination, he will produce his own antibodies to the disease agent, and this will confer immunity, since his immune system will remember what the "bad bug" looks like. The next time the bug shows up, immune defense cells will be ready to kill it.

Unfortunately there is no general agreement that this is what vaccination really does.

Researchers like Alan Phillips say that "natural immunity is a complex phenomenon involving many organs and systems; it cannot be fully replicated by the artificial stimulation of antibody production."

In the words of famed Australian scientist Viera Scheibner, PhD : There is only one immunity, natural immunity, which is achieved by going through the infectious diseases of childhood. (Sudden Infant Death Syndrome, Letter to Congress , Summer 1999)

Artificial immunity, by contrast, is the result of the suppression of disease symptoms by injecting drugs or vaccines. Vaccination by direct injection makes the unproven assumption that the mere artificial stimulation of antibodies by the sudden presence of a foreign agent in the bloodstream is the whole story of immunity.

Obviously it isn't. Many studies have shown, for example, low antibody counts in vaccinated people and high antibody counts in sick people. If the body is allowed to figure out how to fight the disease on its own, without the added confusion and burden of vaccines and drugs, the body can develop natural immunity and not be susceptible to the same disease in the future. It now has a memory of how to fight the disease.

- **Artificial Immunity From Vaccination Is Temporary.**

*Artificial immunity carries a very high chance of reinfection.* This is the reason for the unproven modern concept of booster shots, and also helps explain why a significant number of individuals develop the disease they were vaccinated against. This is the reason for booster shots. Artificial immunity from vaccination has also created the modern phenomenon of atypical forms of the original disease appearing during adulthood, especially with measles, rubella, and chickenpox. By allowing the injection of an attenuated (half-killed) virus or bacteria into the body, we have done something nature would never permit. We have violated the sanctity of the bloodstream. We have tricked the immune system into not mounting an all-out response to a foreign agent. If the vaccine's microorganisms were not attenuated, all the powers of the natural immune system would join together to repel and attack the invader.

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Harvard Medical School's Richard Moskowitz, M.D., explains that the way vaccines are evolved is to make them weaker and weaker, just to the point where they don't produce any immediate inflammatory response. The problem is that in this form, the altered virus or bacteria can penetrate deeper into our tissues than would naturally be possible.

They can remain latent there for years, or for a short time. Then when something triggers these hidden allergens into action, they can manifest themselves in virtually any place or system of the body, causing major dysfunction, degenerative disease, or even death. *But not from the original disease!*

There is no convincing scientific evidence that mass inoculation can be credited with eliminating any infectious disease. If vaccination were responsible for the disappearance of these diseases in the U.S., why did these diseases disappear simultaneously in Europe, where mass vaccinations did not take place? International biostatistician Michael Alderson does a thorough job of showing how infectious diseases had sharply declined before mass vaccination ever came upon the scene. Many researchers feel from looking at the data that infectious diseases would have largely disappeared without any vaccines.

There was an obvious decline of the major infectious diseases due to improvements in sanitation and hygiene before mass inoculations took place. Australian medical researcher Viera Scheibner, Ph.D., summarized her investigation of some 60,000 pages of medical literature on vaccination: Sudden Infant Death Syndrome, Letter to Congress, Summer 1999.

**"Immunizations, including those practiced on babies, not only did not prevent any infectious diseases, they caused more suffering and more deaths than has any other human activity in the entire history of medical intervention. It will be decades before the mopping-up after the disasters caused by childhood vaccination will be completed. All vaccinations should cease forthwith, and all victims of their side effects should be appropriately compensated."** Jane Orient MD, Executive Director of the Association of American Physicians and Surgeons agrees:

"Public policy regarding vaccines is fundamentally flawed, permeated by conflicts of interest. It is based on poor scientific studies that are too small, too short, and too limited."

Dozens of other legitimate researchers and doctors have come to the same conclusion. Yet amazingly most pediatricians and parents are completely unaware of these findings. As Of Dec 2000, 40 Vaccinations Are Currently Mandated For Children In The Immunization Schedule.

By the time they enter school, most children have received 26 vaccines, according to the American Pediatric Association's Dec 2000 Immunization Schedule ([www.aap.org](http://www.aap.org))

Here's another word trick: the word "mandated" doesn't mean the same thing as mandatory. Mandated just means there are laws about something. Mandatory means you have to do it. In every state but two, parents have the legal right to sign an Exemption Form, which exempts the child from all vaccines.

Yes, there are laws about vaccination. Children must be vaccinated unless parents sign exemption forms. The problem is, parents are almost never informed about the existence of the Exemption Form. They are simply told over and over again that the child must be vaccinated before being admitted to school. This half-truth hides one of the best kept secrets in America today.

**An excellent website that spells out the laws for each state is:** <http://www.access1.net/via/STATES/toc-states.htm> (See <http://www.vaclib.org/exemption.htm> Whale editor)

In 1910 There Were Only Two Recommended Vaccines. In the 1940s, there were nine. Today we have 40, with dozens more in the pipeline, trying to get FDA approval.

Pharmaceutical companies are inventing new vaccines every year, each with the hope of being included in the mandated schedule. Yet there are never long-term safety studies before vaccines get approved for mass use. There are also never any follow-up studies about long-term effectiveness of vaccines, or even proofs that the vaccines are better than a placebo. (PDR, 2001) This is why vaccines are always being altered and replaced. With no truly scientific studies for safety and efficacy, the vaccines are actually tested on the live population. Our children are the lab rats. That's why the schedule keeps changing.

And that's why over \$1.2 billion in compensation for vaccine injuries has been paid out by the NVICP since 1986.

Before mass vaccination programs, the term Sudden Infant Death Syndrome (SIDS) didn't exist. Now at least 10,000 American babies mysteriously die each year with the catch-all SIDS diagnosis. Meanwhile, the declining health of our children is becoming obvious. According to the Centers for Disease Control (CDC), the figures for asthma incidence since 1980 has gone from 6.7 million to 17.3 million cases.

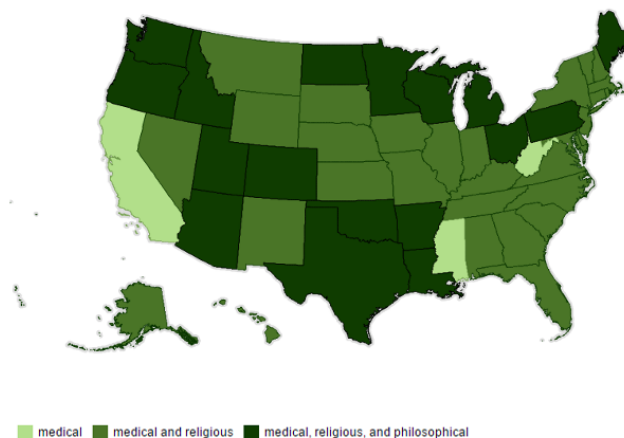
Most of the increase is in children. More than 5,000 die each year from asthma attacks. The overall health of American children is pathetic: asthma, allergies, autoimmune disease and the very infectious diseases for which they were vaccinated--all are on the rise.

Over 15 years ago, Robert Mendelsohn MD, wrote, "There is a growing suspicion that immunization against relatively harmless childhood diseases may be responsible for the dramatic increase in autoimmune diseases since mass inoculations were introduced."

Three brand new diseases of infants have appeared for the first time in the human race since the advent of vaccines: infant diabetes, Crohn's disease, bowel intussusception.

### State Vaccination Exemptions: Medical, Religious, and Philosophical

(as of July 6, 2016)



In addition, the incidence of cancers and childhood leukemia has skyrocketed between 1960 and 1980, at the same time the number of vaccines increased dramatically. (Koren) *Could this have anything to do with the fact that no vaccines are tested for carcinogenicity?* (PDR 2001)

Some of the most frequent complications of vaccinations "gone wrong" seem to be diseases of the central nervous system. It's easy to understand why in the case of children. Their nervous systems are in the process of forming, and nerve tissue is exquisitely sensitive to minute changes in its biological environment.

The blood brain barrier has not formed until six months of age. The insulation around the nerves--the myelin--is not complete yet. It is beyond controversy that the presence in the blood of a disease agent, plus the mercury, aluminum and formaldehyde found in vaccines, can trigger processes that disrupt normal nerve growth and development.

Harris Coulter, Ph.D. has chronicled a skyrocketing incidence of post-vaccination neurological disorders, including hyperactivity, learning disabilities, mental retardation, encephalitis and Guillain Barre syndrome.

These statistics seem to be missing within the pediatric profession - just ask your pediatrician. Adverse reactions usually don't get reported and are routinely met with denial. In the Congressional hearings chaired by Representative Dan Burton in April 00 we saw on TV many examples and case histories of mothers given the brush-off when reporting a vaccine reaction to their pediatricians.

- **It's Just Basic Economics.**

Vaccinations are the key to the whole Well Baby program, which introduces a child to the American health care system. Vaccination is the real bread and butter of the entire pediatrics profession. This is how people are trained from the beginning of life that the responsibility for their own body's health is something they can't be trusted with, but must rely on outside authority. That message is clear from the first moment when the baby is taken from the mother, with the rationale that the mother "needs to rest."

Unbelievably, not until recently was there a centralized U.S. record keeping agency to which physicians could report vaccine reactions.

Even though we have had mass vaccination for the last 100 years, it wasn't until 1991 that the Vaccine Adverse Effect Reporting System (VAERS) was finally set up by the FDA and the CDC. Some 33,000 reactions were reported between 1992 and 1996. Before that time it's anybody's guess how many reactions and deaths there were, because no agency was keeping track. The FDA estimates that doctors still only report a small fraction of these adverse reactions - less than 10%. In 1998 the National Vaccine Information Center did a survey of New York pediatric offices and found out that "only one doctor in 40 reports a death or an injury following vaccination." That's 2.5%. Yet this information has not been acted upon by either the FDA or the CDC, even with documented reports of death and neurological damage to infants and the fact that over \$1.8 billion has been paid in vaccine injury damages since 1991.

Chances are you won't hear any information about vaccines risk from a pediatrician during a "well baby" visit. A national survey written up in the Mar 01 issue of Pediatrics discovered that 40% of pediatricians giving vaccines admitted that they did not mention risks. (Davis)

Clarence Darrow, the famous early 20th century lawyer, voiced an oft-quoted objection to mandatory vaccination that's still relevant today. He asked, if vaccinations really work, those vaccinated will be immune to the disease, right? So what does it matter if some people choose to go unvaccinated? What do the vaccinated have to worry about? Aren't they protected? When You Were A Child,



- **Who Protected You?**

A lot of medical doctors today know enough to withhold vaccines from their own children, even though they continue to administer them to patients. Others just take the intellectually impotent position that "we don't really know enough not to vaccinate people."

Now, if doctors are going to stick a needle into a child's arm and inject something into the bloodstream, they should be absolutely certain that they have a thorough knowledge of all the short-term and long-term consequences. Is that asking too much? And before a parent lets a doctor do such a thing, they need to be equally well-informed.

A parent should be able to ask the pediatrician, "Before you inject my child, can you prove to me that vaccines are safe and necessary?" Try that sometime. It makes one wonder: if those in power were faced with a choice between the health of our children and \$30 billion, which would they choose? And if those involved in the vaccine industry had actually done the studies and discovered that, beyond all doubt, vaccinations were not only ineffective but instead are the cause of much disease and death, would they tell us? would we be reading about it in the New York times?

Excerpted from the Third Edition of The Sanctity of Human Blood, Vaccination and Immunization by Tim O'Shea.

## Autism and Vaccine by Tim O'Shea, DC

Testimony before U.S. House of Representatives Committee on Government Reform, April 6, 2000.

Perhaps one of the most shocking pieces ever to appear on television this past April: a six-hour taping of a Congressional investigation into the relationship between vaccines and autism among American children. This footage appeared on C-SPAN and was then archived on their website for an entire month.

On April 6, Rep. Dan Burton convened the Congressional hearing in which parents repeatedly told similar stories - how their normally developing babies, after MMR or DPT vaccinations, began displaying autistic behaviors, conditions that are often permanent. Happy, bright children were suddenly losing their abilities to learn, communicate or even recognize their parents.



Amazing testimony was given by experts in the field of autism:

Mary Megson, MD, explained how autism has gone from being rare (about one incident per 10,000 children in 1978), to epidemic proportions in 2000 AD: one case in every 300-500 children in many areas! Megson's research has shown total deficiency of vitamin A in almost all autistic children. What depletes the body of vitamin A at 15 months? **The MMR vaccine.** In addition, Megson found that pertussis toxin from the DPT shot disrupted a certain protein that is necessary for retinal formation. This would account for the prevalence of night-blindness and loss of 3D vision so common among autistics.

V. Singh, MDM, a specialist from Utah State who has studied over 400 cases of autism, found that these children had experienced an autoimmune episode, *in which their own bodies had been made to attack the linings of their nervous systems.* Dr. Singh characterized the epidemic as a "hyperimmune response to the measles virus." He stated that 55% of the families said that autism appeared soon after an MMR shot, and that 33% of families said it appeared soon after a DPT shot. Such neurologic damage is a well-established side-effect of the mercury, aluminum, and formaldehyde used in these vaccines.

Seeing the American democratic system in action in a live Congressional hearing, it soon becomes apparent how the control of information operates, even in the face of overwhelming scientific evidence that we may well be poisoning our own children!

The requisite defenders of the status quo robotically read their predictable prepared statements, denying the possibility of any connection between autism and vaccines. These included MDs Paul Offit, Edwin Cook, Brent Taylor and others. After they uniformly denied the vaccine/autism connection, it was most illuminating when Burton asked each one of them point-blank about the money each received from the vaccine manufacturers. And these are members of the advisory committee who make the decisions about which vaccines are to be included in the mandated vaccination schedule.

Colleen Boyle was there to represent the Centers for Disease Control. After stumbling through her prepared statement in which she denied any connection between autism and vaccines, Boyle stated the present incidence to be "12 in 10,000." Burton then stopped her cold by asking her one simple question: Did she think it was a conflict of interest for the same people who were funded by the vaccine manufacturers to be on the advisory board making decisions about which vaccines should be given to American children? Boyle was dumfounded and speechless. Burton repeated the question. Still no answer. Boyle's mute portrayal of the career bureaucrat spoke volumes.

Equally inept and ill-prepared was Deborah Hirtz, MD, representing the National Institutes of Health. Losing her place in her written statement, Hirtz forgot what she was saying, and it seemed obvious she had not written it. Finally, she just barely managed to put across what she was sent there to say - that there could be no connection between vaccines and autism, but that the NIH was "looking into it." The NIH has already spent some \$40 million per year of taxpayer money "looking into it." (Hirtz) Their answer: It needs further study. The performance of these representatives from the two government agencies who have almost sovereign power in the area of vaccines was frightening - their indifference; lack of information; condescension; and low level of intelligence. They gave no sign of having understood one word of the critically important breakthrough research that had just been so brilliantly expounded by Drs. Megson, O'Leary, and Wakefield. This is what power looks like - people who have been in their position so long that they know they don't have to justify themselves to anyone lower down on the food chain.

Government agencies have the same answer to every problem: more committees; more money; more study; and more meetings. Meanwhile, 22 years have gone by, and all these people say is "we don't know." After 22 years and \$100 million, we don't know the incidence, the cause or the cure for autism. But we'll definitely "look into it." And, oh yes, it's definitely "not vaccines."

The shocking scientific findings of Wakefield and O'Leary obviously demand more research. So then, why are the vaccines not suspended until that research is done? The underlying assumption is that the vaccines will continue as normal until enough "research" proves it is dangerous, as with rotavirus and Quadrigen. Only then will MMR be suspended. This is the thinking that passes as logic. The key point here that no one seems to be pointing out is that research should be done before mandating a vaccine into the bloodstream of American children! You don't just start mass-injecting something into a population and then stand back and defy independent scientists to prove it isn't safe! That's exactly what we've done here.

As a nation, as a government, and as parents, Americans should be very certain, beyond a reasonable doubt, that any substance being injected into an unformed little nervous system is absolutely safe and does no harm. That should be the minimum requirement. Drs. Wakefield, O'Leary, and Megson have shown startling results from some of the only scientific research on autism and vaccines in the entire world that has not been funded by the vaccine manufacturers. This research also shows a high likelihood that MMR and DPT vaccines may cause permanent intestinal destruction, liver damage, and autism. It presents a very plausible hypothesis for the horrific increase of autism since 1978. So, until we know for certain if they're right, why are the vaccines not suspended?

Researcher Gary Null's pert answer comes swimming to the surface; "It's the money, stupid." By the end of the hearing, Burton's room was polarized into three groups:

- \* those who were convinced of a connection between autism and vaccines
- \* those who admitted the possibility
- \* those who angrily denied the possibility, affronted that anyone would question their "scientific" opinions

It was amusing to see which people in the room were trying to discover the truth, and which were trying their best to cover it up.

Despite Burton's heroic efforts to bring these matters into public view, it's an uphill struggle. The big money's on the side of vaccines. Big money controls research, the press, "scientific" journals, and politicians. Seeing all these forces clash together in one room in just six hours has been the most instructive display of confusing the issues perhaps since the OJ trial. Watching a live congressional hearing like this, it soon becomes clear that for them, the real priority isn't necessarily finding the truth, but rather showing who's really in charge here. The viewer begins to understand how autism could have gone from being unknown in 1978 to being a household word in just 22 years with so little fanfare.



Without undue pessimism, the prospects for unbiased, objective scientific logic to prevail in deciding the future of MMR and DPT vaccines do not look bright. The mentality of the CDC and the NIH was well characterized in this videotape. The control of research and information by drug manufacturers was pervasive. Burton's co-chairman, Henry Waxman, did his best to divert attention from the issues to himself, to waste time on "points of order," and to prevent anyone who disagreed with him from being heard. Waxman's science champion, researcher Brent Taylor, MD, has recently had an article published in Lancet that supposedly shows no possible connection between vaccines and autism. Now Taylor has refused to provide his data for the study when repeatedly asked by other researchers, like Dr. Bernard Rimland. Such a request is standard, and researchers commonly share their data when requested, unless they have something to hide. Taylor's combination of fear and arrogance is characteristic of the way that research, and ultimately, decision-making on vaccines by the advisory committee. The researchers who have unlimited funding may 'prove' whatever they wish, get it published in the best journals, which are heavily advertised in by the drug companies, and then refuse to respond to valid objections, because they know that those opposing points of view will probably not be published.

Despite these formidable obstacles, doubts are creeping into the overall public "consciousness" from many different directions about the safety of vaccines. At one in 500, the fact of autism as an epidemic can no longer be covered up. The work of Wakefield, O'Leary, and Megson is going to be very difficult to explain away. The massive advertising campaign about the safety of vaccines in the popular media, which is certain to be stepped up in the next few months, is going to look very hollow in the light of clean, unbiased research that is not funded by parties who stand to make billions from certain predetermined results.

Author's note: Excerpted from forthcoming third edition of the Sanctity of Human Blood, New West, Publisher

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Reprints of testimony are available from the Office of Government Reform, Washington, DC (202) 225-2276  
Videotape available from <http://www.c-span.org>