Doctors Against Vaccines – Hear From Those Who Have Done the Research

The general public shares a common misconception – that all doctors, or all "real doctors" support vaccination. Although it is true that the majority of doctors support vaccines, not all do.

Most doctors blindly support the recommendations of the American Medical Association and the American Academy of Pediatrics. Doctors are trained in *administering* vaccines, not in how they are made. There are some doctors that choose to do the research themselves in order to develop an informed opinion on the subject. These doctors who become knowledgeable about vaccines usually become anti-vaccine. A little knowledge goes a long way.

Without a doubt we live in the age of autism, but it is also the age of chronic illness. One in eighty-eight children are diagnosed with autism, while half of all children now struggle with chronic illnesses such as asthma, diabetes, ADHD, etc. This rise in illness correlates with the dramatic increase in vaccines given to our children along with a growing exposure to other toxic chemicals.

Recommended: ***Sugar Leads to Depression – World's First Trial Proves Gut and Brain are Linked (Protocol Included)***

Dr. Russell Blaylock

Dr. Blaylock is a man who wears many hats. He is a board certified neurosurgeon who owns a nutritional practice. Dr. Blaylock is a health practitioner, lecturer, and author. He practiced medicine for 25 years before pursuing his nutritional studies and research full time.

What Happens to the Brain With Vaccination?

It seems the brain is always neglected when pharmacologists consider side effects of various drugs. The same is true for vaccinations. For a long time no one considered the effect of repeated vaccinations on the brain. This was based on a mistaken conclusion that the brain was protected from immune activation by its special protective gateway called the blood-brain barrier. More recent studies have shown that immune cells can enter the brain directly, and more importantly, the brain's own special immune system can be activated by vaccination.

You see, the brain has a special immune system that operates through a unique type of cell called a microglia.

These tiny cells are scattered throughout the brain, lying dormant waiting to be activated. In fact, they are activated by many stimuli and are quite easy to activate. For our discussion, activation of the body's immune system by vaccination is a most important stimuli for activation of brain microglia.

Numerous studies have shown that when the body's immune system is activated, the brain's immune cells are likewise activated. This occurs by several pathways, not important to this discussion. The more powerfully the body's immune system is stimulated the more *intense is the brain's reaction. Prolonged activation of the body's immune system likewise produces prolonged activation of the brain's immune system.*

Therein lies the danger of our present vaccine policy.

The American Academy of Pediatrics and the American Academy of Family Practice have both endorsed a growing list of vaccines for children, even newborns, as well as yearly flu shots for both children and adults. Children are receiving as many as 22 inoculations before attending school.

What Happens When the Brain's Immune System is Activated?

The brain's immune system cells, once activated, begin to move about the nervous system, secreting numerous immune chemicals (called cytokines and chemokines) and pouring out an enormous amount of free radicals in an effort to kill invading organisms. The problem is—there are no invading organisms. It has been tricked by the vaccine into believing there are.

Unlike the body's immune system, the microglia also secrete two other chemicals that are very destructive of brain cells and their connecting processes. These chemicals, glutamate and quinolinic acid, are called excitotoxins. They also dramatically increase free radical generation in the brain. Studies of patients have shown that levels of these two excitotoxins can rise to very dangerous levels in the brain following viral and bacterial infections of the brain. High quinolinic acid levels in the brain are thought to be the cause of the dementia seen with HIV infection.

The problem with our present vaccine policy is that so many vaccines are being given so close together and over such a long period that the brain's immune system is constantly activated. This has been shown experimentally in numerous studies. This means that the brain will be exposed to large amounts of the excitotoxins as well as the immune cytokines over the same period.

Studies on all of these disorders, even in autism, have shown high levels of immune cytokines and excitotoxins in the nervous system. These destructive chemicals, as well as the free radicals they generate, are diffused throughout the

nervous system doing damage, a process called bystander injury. It's sort of like throwing a bomb in a crowd. Not only will some be killed directly by the blast, but those far out into the radius of the explosion will be killed by shrapnel.

Normally, the brain's immune system, like the body's, activates quickly and then promptly shuts off to minimize the bystander damage. Vaccination won't let the microglia shut down. In the developing brain, this can lead to language problems, behavioral dysfunction, and even dementia. In the adult, it can lead to the Gulf War Syndrome or one of the more common neurodegenerative diseases, such as Parkinson's disease, Alzheimer's dementia, or Lou Gehrig's disease (ALS).

Recommended: *Best Supplements To Kill Candida and Everything Else You Ever Wanted To Know About Fungal Infections*

Dr. Jay Gordon

In 1980, I abandoned the recommended vaccine schedule. I received dozens and dozens of phone calls from moms and dads reporting that their child had received shots a couple of days ago and they were acting a little different. They couldn't quite put their finger on it but their child was just not acting quite the same as before I gave the shots. They'd ask if this was okay…was it normal? Initially, as I was trained to do, I replied yes. After dozens and dozens and dozens of phone calls, I decided that I had better listen to these moms a lot more.

I stopped some vaccines. I delayed others.

No, I am not 'anti-vaccination.'

I am aware of the public health implications of completely abandoning our current vaccine schedule, and I certainly don't advocate that. What I really want is an honest discussion of the risks and benefits of each vaccine and combinations of vaccines for your child. Just your child. My experience is that many parents don't have the opportunity to discuss these concepts and these details with their doctors.

As you can see, Dr. Gordon really isn't all that anti-vaccine. He's been made famous because he is the doctor that is treating Jenny McCarthy's son, and she isn't all that anti-vaccine either. Dr. Gordon has earned himself a reputation for being anti-vaccine because he is against some vaccines and the current recommended vaccine schedule.

Recommended:

Dr. Suzanne Humphries

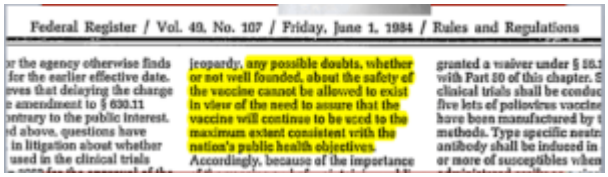
I am a conventionally educated medical doctor who was a participant in the conventional system from 1989 until 2011. During those years I saw how often that approach fails patients and creates new diseases.

I left conventional medicine to research the many problems with mainstream medical theory.

I do not consider it my place to tell anyone whether to vaccinate or not. It is my place to understand as much as I can about vaccines and give people a more complete understanding from which to make their choices. This has never been a priority to the public health services. In fact there is ample documentation that the priority was quite the

opposite, and actually to quell 'any possible doubts, whether well founded or not' regarding vaccines.

The following document is the American 1984 DHHS federal register, which listed final rules pertaining to the polio vaccination campaigns in USA after three decades of scandal and misinformation.



Federal Register / Vol. 49, No. 107 / Friday, June 1, 1984 / Rules and Regulations

...r the agency otherwise finds ... for the earlier effective date. ...eves that delaying the charge ...e amendment to § 630.11 ...ntrary to the public interest. ...d above, questions have ... in litigation about whether ... used in the clinical trials

...jeopardy, any possible doubts, whether or not well founded, about the safety of the vaccine cannot be allowed to exist in view of the need to assure that the vaccine will continue to be used to the maximum extent consistent with the nation's public health objectives. Accordingly, because of the importance

...granted a waiver under § 58.1 ...with Part 50 of this chapter. S... ...clinical trials shall be conduc... ...five lots of poliovirus vaccine ...have been manufactured by t... ...methods. Type specific neutr... ...antibody shall be induced in ...or more of susceptibles when

That priority has placed many lives in jeopardy as major problems with vaccination were and are overlooked by vaccine policy makers.

There are many problems with the science that underpins vaccine information. I've yet to meet a pediatrician who is informed enough to offer informed consent. Infant immunity has been misunderstood by immunologists, as the immunology literature admits to. Only recently have some important questions been answered about why infant immune systems don't function like adult ones. There is good reason for the tolerance that an infant has, and the answer is not to interrupt the program with aluminum and vaccines to ramp it up. That is now known to have long term consequences.

*There is a paucity of studies comparing never vaccinated children, with partially or fully vaccinated children. In terms of safety studies, a major issue is that most vaccine studies use another vaccine as the control placebo, or use the background substance of the vaccine. There is only one recent study (**Cowling 2012**) where a true saline placebo was used, rather than another vaccine or the carrier fluid containing everything except the main antigen. That study showed no difference in influenza viral infection between groups but astonishingly it revealed a 5-6 times higher rate of non-influenza viral infections in the vaccinated. It is no small*

wonder more true placebos are not used in vaccine research.

Dr. Tenpenny, D.O.

Dr. Sherri Tenpenny is ardently anti-vaccine. She has spent countless hours researching the vaccine debate, and she is familiar with all of the arguments for and against. She is adamantly against vaccines. She, like the other doctors on this list, has been accused of cashing in on vaccine fears, but which side of the debate is really making more money?

It continually breaks my heart that people have to personally experience a severe vaccine injury – or observe a serious reaction in someone they love – before they wake up to the absolute truth: vaccines can and do cause harm. They have heard the arguments and the stories from others. They ignored the pleas about risks and poo-pooed the concerns about vaccine reactions put forth by concerned friends. Instead, they trusted their uninformed pediatrician or caved under the pressure of their badgering RN mother-in-law.

And now, they are left holding the bag, so to speak: a terrible tragedy and a lifetime of medical care and medical bills, as they watch their loved one's health deteriorate before their helpless, regretful, angry eyes. Gardasil alone has had more than 38,000 adverse events reported through March, 2015. And that number is estimated to be only 10% of all actual adverse events. SaneVax.org documents case, after expensive case, of injured girls with huge medical bills after this vaccine – and Gardasil is only one of 16 vaccines given to children. How many dollars are actually spent on vaccine injuries, looking for a diagnosis, paying for medications and desperately trying to find a way to reverse the damage? The

true cost of vaccination is more than the cost of buying and administering vaccines. The untold tens of millions spent on injuries are not included in the calculations.

Dr. Andrew Wakefield

Dr. Wakefield is a gastroenterologist and researcher who followed the evidence where it lead him. In 1998, Wakefield, Prof. John Walker Smith, Dr. Simon Burch, and 10 other co-authors published a paper in the Lancet, a British Medical Journal, which showed a possible correlation between the MMR vaccine and resultant gastrointestinal dysfunction along with developmental delays and autism. Though the paper did not state a conclusive causal effect, it did state the need for further study into the possibility that the MMR shot was to blame. Wakefield went on to publicly bring attention to the possibility, criticizing the MMR shot and calling for separation of the three vaccines.

Read any pro-vaccine article that disputes the link between vaccinations and autism and chances are Andrew Wakefield and this fraudulent study will be mentioned. His offense wasn’t so much being a vaccine separatist so much as him questioning the vaccine dogma. This also made him big pharma enemies.

Dr. Wakefield was accused of fraud, and subsequently lost his medical license. Dubbed the father of the anti-vaccine movement, Wakefield has been both revered and vilified, depending on which side of the argument uses his name. The bizarre thing is, he is not anti-vaccine. He is, however, a critic of the MMR vaccine and has publicly stated that the measles, mumps, and rubella vaccines should be given separately.

In 1999, I proposed that the MMR-autism risk may, in part, be a function of age of exposure: the younger you get the vaccine the greater the risk. Why? Because, the younger you get measles, the greater the risk of an adverse outcome. This idea was shared with the CDC. They tested the hypothesis in children in the Atlanta Metro area and they found it to be true.

They found beyond a shadow of a doubt that two subgroups of children were at risk: children who were in effect developmentally normal to age 1 and black boys. They concealed this risk for 13 years and deceived everyone, putting millions of children at risk. In the words of Dr. William Thompson, the senior scientist responsible for this study, for the data analysis, and for disclosure of the fraud: I was involved in deceiving millions of tax payers regarding the potential negative side effects of vaccines.

I have filed a formal complaint with the Office of Research Integrity detailing the fraud. It is provided for you to examine. The matter is currently under investigation by the US Congress with the prospect of hearings later this year.

Dr. Lawrence Palevsky

I did not turn my back when I heard parent after parent – in the dozens, in the hundreds, and then in the thousands – start to say that their children were fine, then they got vaccinated, and then something really bad happened to them acutely or within days, weeks, or even months. Those parents were told 100 percent of the time by the conventional medical system, 'It's a coincidence. It couldn't possibly be related to the vaccine.

As a person who's curious about science and questioning, it became obvious to me that there may not be a coincidence here and that something more may be going on.

The literature is pretty supportive of the fact that vaccines have much greater adverse outcomes on the genotype of the body, the immune system of the body, the brain of the body, and the intracellular functions of the body than we are willing to tell the public about.

Pro-vaccine advocates argue that there are thousands of studies that prove that vaccines are safe. Dr. Palevsky explains why those studies are flawed.

…in order for us to really delve into those studies, we have to look at who supported the studies. What was the study design? What were the control groups? How big was the actual number of kids or adults that was used in those studies? I think we will see that in most of those studies, the actual safety has never really been proven.

One of the reasons that I think we can fairly say that is that the vaccine manufacturers and the conventional medical organizations have not done studies that compare vaccinated to unvaccinated children. In order for us to really know if children who were vaccinated are having an adverse effect from a vaccine, we have to use a placebo group that's given an injection of maybe normal saline to evaluate whether or not they developed the same symptoms that children who were vaccinated may develop after they're injected with the vaccine.

Those studies are not done. They're not done because the conventional medical system says it's unethical to leave kids unvaccinated for any length of time. But, most of the vaccine safety studies that are being done last anywhere between one and four weeks anyway. The kids are followed within those one to four weeks. Then, they're not followed in a very detailed

way to recognize whether any of their health outcomes could be related to the vaccine that they got one to four weeks ago.

What ends up happening is they compare the incidence rates of these vaccine reactions or these symptoms that kids get after they're vaccinated to how often those symptoms are seen in the general population, to check and see if this vaccinated group is in any way getting an increased incidence of these symptoms than the general population would get. But the fact of the matter is that the general population is vaccinated, so they're comparing a vaccinated group with a vaccinated group.

Dr. Buchwald, M.D.

The decline in infectious diseases in developed countries had nothing to do with vaccinations, but with the decline in poverty and hunger.

Dr. Glen Dettman

It is pathetic and ludicrous to say we ever vanquished smallpox with vaccines, when only 10% of the population was ever vaccinated.

Dr. Archie Kalokerinos, M.D.

Up to 90% of the total decline in the death rate of children between 1860-1965 because of whooping cough, scarlet fever, diphtheria, and measles occurred before the introduction of immunizations and antibiotics.

Dr. Mendelsohn, M.D.

My suspicion, which is shared by others in my profession, is that the nearly 10,000 SIDS deaths that occur in the United States each year are related to one or more of the vaccines that are routinely given children. The pertussis vaccine is the most likely villain, but it could also be one or more of

the others.

Peter Baratosy, M.D. PhD, Australia

I see many children in my practice. I see the difference between the immunized and the non-immunized. The non-vaccinated are much healthier and have less infections, colds, otis media, and tonsillitis.

John B.Classen, M.D., M.B.A.

My data proves that the studies used to support immunization are so flawed that it is impossible to say if immunization provides a net benefit to anyone or to society in general. This question can only be determined by proper studies, which have never been performed. The flaw of previous studies is that there was no long-term follow-up and chronic toxicity was not looked at. The American Society of Microbiology has promoted my research…and thus acknowledges the need for proper studies.

Raymond Obomsawin, PhD

Delay of DPT immunization until 2 years of age in Japan has resulted in a dramatic decline in adverse side effects. In the period of 1970-1974, when DPT vaccination was begun at 3 to 5 months of age, the Japanese national compensation system paid out claims for 57 permanent severe damage vaccine cases, and 37 deaths. During the ensuing six-year period 1975-1980, when DPT injections were delayed to 24 months of age, severe reactions from the vaccine were reduced to a total of eight with three deaths. This represents an 85 to 90 percent reduction in severe cases of damage and death.

Dr. Howard Weiner, Immunologist, Harvard

Medical School

If a person has a tendency towards a disease, at a certain age, a vaccine might make him/her more susceptible later when other challenges come along.

Philip Incao, M.D. Testimony on the Hepatitis Vaccine, Ohio 3/1/99

A critical point, which is never mentioned by those advocating mass vaccination is that children's health has declined significantly since 1960 when vaccines began to be widely used. According to the National Health Interview Survey conducted annually…a shocking 31% of US children today have chronic health problems… In my medical career, I've treated vaccinated and unvaccinated children, and the unvaccinated were far healthier and more robust. Allergies, asthma, and behavioral and attention disturbances were clearly more common in my young patients who were vaccinated.

Mary N. Megson, M.D.

Autism may be a disorder linked to the disruption of the G-alpha protein, affecting retinoid receptors in the brain. A study of sixty autistic children suggests that autism may be caused by inserting a G-alpha protein defect, the pertussis toxin found in the D.P.T. vaccine, into genetically at-risk children.

Guylaine Lanctot M.D.

The medical authorities keep lying. Vaccination has been a disaster on the immune system. It actually causes a lot of illnesses. We are changing our genetic code through vaccination.

Dr. Kalokerinos, M.D.

It was similar with the measles vaccination. They went through Africa, South America and elsewhere, and vaccinated sick and starving children…They thought they were wiping out measles, but most of those susceptible to measles died from some other disease that they developed as a result of being vaccinated. The vaccination reduced their immune levels and acted like an infection. Many got septicaemia, gastro-enteritis, etcetera, or made their nutritional status worse and they died from malnutrition. So there were very few susceptible infants left alive to get measles. It's one way to get good statistics, kill all those that are susceptible, which is what they literally did.

Conclusion

The AMA has always been corrupt. Just look back at their old recommendations for smoking tobacco. The AMA has also been sued for maintaining an illegal boycott of chiropractors. Their expert advice has always been for sale to the highest bidder. The CDC is no different. Recently they've been outed for covering up the link between the MMR vaccine and autism in African American children. Their advisory board is filled with industry insiders promoting their own self-interest. The AAP seems to be working primarily for vaccine manufacturers.

There are two kinds of pro-vaccine experts; those who regurgitate pro-vaccine rhetoric and those who are getting paid by pharmaceutical industries. Most regulators are the second kind of expert. (We all know money talks, and big money yells). You cannot do all of the research and come to the conclusion that vaccines are safe. Those that do the research invariably reject all vaccines, or refuse many of them.

Want to read what more smart physicians have to say? Check out *More Doctors Against Vaccines. And be sure to check*

out How To Detoxify From Vaccinations.

Further Reading:

- *How To Detoxify and Heal From Vaccinations – For Adults and Children*
- *Influenza Vaccine – A Comprehensive Overview of the Potential Dangers and Effectiveness of the Flu Shot*
- *The MMR Vaccine – A Comprehensive Overview Of the Potential Dangers and Effectiveness*
- *How Plumbing, Not Vaccines, Eradicated Disease*
- *Autism and Vaccines: CDC Whistleblower Exposes Vaccine Dangers, Lies, and Cover-ups*

Sources:

- *Vaccine Truth* – Dr. Blaylock
- *An Open Letter on Vaccinations* – Triple the Fun Plus 2
- *Disease, Vaccines, and the Forgotten History* – Dissolving Illusions
- *Defending the Right to Poison* – Dr. Tenpenny
- *Dr. Mercola Interviews Dr. Palevsky* – Mercola
- *Vaccine Induced Diseases* – Vaccines Uncensored
- *Lots of Great Vaccine Quotes* – Vaccination Liberation
- *What Wakefield Would Have Told Oregon Health Committee* – Age of Autism