More Scientists Against Vaccines

Stories of vaccine-injured children often start the same way. “I trusted my doctor. I didn’t know about vaccines then. I only wish I knew then what I know now.” Those with firsthand experience with vaccine side effects tend to learn a great deal about vaccines. Parents of vaccine injured children account for a large proportion of the anti-vaccine movement.

Many scientists are opposed to vaccines. Just like lay people, whether or not they are opposed to vaccines depends a great deal on how much they know about them and whether or not their livelihood depends on the vaccine industry.

Brian Hooker, PhD, PE

Brian Hooker is both a parent of a vaccine injured child and a vaccine researcher. As a scientist, he has devoted many years of his life to studying vaccines and corruption within the CDC.

Dr. Brian Hooker currently holds the position of Associate Professor and serves as the Math and Science Division Chair at Simpson University in California. He graduated from Washington State University in 1990 with a PhD in Chemical Engineering and is a licensed professional engineer in Washington. He is known for fighting against the CDC to reveal the data used in their studies on vaccines and helping to expose how the CDC has hidden data.

You know the CDC’s plan, not only their historic plan, but their ongoing plan, to absolve vaccines and vaccine components from anything related to the autism epidemic. You know, we don’t know what causes autism do we? But we know for darn sure tootin’ that it isn’t the vaccines and it can’t be the

vaccines. Okay, which is completely illogical. There is no logic. If you don't know what causes it, then it's very, very, difficult to say that something doesn't cause it.

Peter Fletcher, PhD

Dr. Peter Fletcher is a retired Chief Science Officer with the Department of Health in the United Kingdom. He also serves on the Committee on Safety of Medicine where he helped review drug safety trials and decide if new drugs, including new vaccines, were safe.

It appears that we are stuck with the term "autism" even though it is impossible to define with any precision. I suppose it does not matter as long as everyone understands that it is not a single abnormal condition but a cluster of different disorders having some signs and symptoms in common.

There is little doubt that what we might call "old fashioned" autism, as it was before 15 or so years ago, probably had predominantly genetic origins although even then other factors may have triggered the disorder.

There is absolutely no doubt that in the USA and the UK the number of cases of autism being diagnosed has reached epidemic proportions.

… The observed increase in autism in such a short period of time (15-20 years) therefore has to be real and to have external causality.

… It is of the utmost urgency that wide ranging research, with the aim of identifying possible external causal factors, be initiated without delay on an international basis.

… Instead of repeated denials of parents claims, could the skeptics of vaccination/toxic substances/immune challenge being causal discontinue their entirely negative attitude and give us something more positive? I could accept their

disbelief if they supported it with convincing alternatives, but none have been forthcoming.

Shiv Chopra, PhD

https://www.youtube.com/watch?list=PL024246A37000FF12&v=X71F9UCdPN8#t=12

Dr. Shiv Chopra has been working in Canada for decades within the field of food safety. He holds a PhD in Microbiology from McGill University in Montreal. Dr. Chopra is known for his part in the successful fight to have bovine growth hormone banned in Canada. He continues to speak out on matters of public health including food safety and vaccines.

…the first vaccines that landed on my desk were rubella and later on, mumps, and some later versions of measles. I objected to it. I said, 'I see problems in these because these are minor diseases and most people get immune by age 15. Why are we going to give these vaccines that have never been tested?'

I knew they were made in monkey kidney tissue and we have had problems with the polio vaccine…

… My suggestion was, why don't we test women at the age of 15 and 16? Those who are not yet immune then may be given the vaccine?

Of course, the companies didn't want that. They wanted 100 percent or at least 80 percent of the children vaccinated. That was the only way they were going to make money.

… We now know from history that those vaccines have been used for more than 40 years and the diseases, all of them, are still here. Meanwhile, autism, diabetes, and all kinds of autoimmune diseases have increased.

We don't know what damage we're doing – actually we know that

in association with those vaccines, chronic diseases in children have increased. But nobody is paying attention. Everybody is denying that.

… Ironically, those vaccines have never been removed from the ledgers and DPT was never talked about. Again, medical people know, a lot of scientists know, the CDC, U.S., FDA, other departments, medical departments, medical professionals, they are all denying that all these infectious diseases had started to decrease in the early 1940s.

… Veterinarians are effectively toxicologists.

Unlike medical people, we learn comparative medicine. So therefore, this is a way to compare and see what species do. The law is that every drug, any product that directly or indirectly gets into the human body, must be tested in at least two species of animals, one of which must be non-rodent. It must also be tested in pregnant animals. Then it also must be tested to see whether it produces cancer by lifetime studies in rats and mice and so forth.

[Recently] the United States Supreme Court said that if people get damaged, if the children get damaged due to vaccine, they can't sue either the government or the companies – by what right?

Who is to decide to shove vaccines into people who don't want it?

Theresa Ann Deisher, PhD

Dr. Theresa Ann Deisher holds a PhD in Molecular and Cellular Physiology from Stanford University. She has worked as a research scientist for more than two decades and currently presides as the President of the Sound Choice Pharmaceutical Institute and as the CEO of AVM Biotechnology. Her research over the years has focused on human therapeutics.

Vaccines manufactured using human fetal cells contain residual DNA fragments (50-500 bp) (Table I). It is possible that these contaminating fragments could be incorporated into a child's genome and disrupt normal gene function, leading to autistic phenotypes

…Not only damaged human cells, but also healthy human cells can take up foreign DNA spontaneously. Foreign human DNA taken up by human cells will be transported into nuclei and be integrated into host genome, which will cause phenotype change. Hence, residual human fetal DNA fragments in vaccines can be one of the causes of autism spectrum disorder in children through vaccination. Vaccines must be safe without any human DNA contaminations or reactivated viruses and must be produced in ethically approved manufacturing processes.

Tetyana Obukhanych, PhD

Dr. Obukhanych holds a PhD in Immunology from Rockefeller University and completed postdoctoral training at Harvard Medical School as well as Stanford University.

I hold a PhD in Immunology. I am writing this letter in the hope that it will correct several common misperceptions about vaccines in order to help you formulate a fair and balanced understanding that is supported by accepted vaccine theory and new scientific findings.

Do unvaccinated children pose a higher threat to the public than the vaccinated?

It is often stated that those who choose not to vaccinate their children for reasons of conscience endanger the rest of the public, and this is the rationale behind most of the legislation to end vaccine exemptions currently being considered by federal and state legislators country-wide. You should be aware that the nature of protection afforded by many modern vaccines – and that includes most of the vaccines

recommended by the CDC for children – is not consistent with such a statement.

… IPV (inactivated poliovirus vaccine) cannot prevent transmission of poliovirus (see appendix for the scientific study, Item #1). Wild poliovirus has been non-existent in the USA for at least two decades.

… Tetanus is not a contagious disease, but rather acquired from deep puncture wounds contaminated with C. tetani spores.

… Vaccinating for diphtheria cannot alter the safety of public spaces; it is likewise intended for personal protection only.

… In summary, a person who is not vaccinated with IPV, DTaP, HepB, and Hib vaccines due to reasons of conscience poses no extra danger to the public than a person who is. No discrimination is warranted.

How often do serious vaccine adverse events happen?

It is often stated that vaccination rarely leads to serious adverse events. Unfortunately, this statement is not supported by science. A recent study done in Ontario, Canada, established that vaccination actually leads to an emergency room visit for 1 in 168 children following their 12-month vaccination appointment and for 1 in 730 children following their 18-month vaccination appointment (see appendix for a scientific study, Item #5).

When the risk of an adverse event requiring an ER visit after well-baby vaccinations is demonstrably so high, vaccination must remain a choice for parents, who may understandably be unwilling to assume this immediate risk in order to protect their children from diseases that are generally considered mild or that their children may never be exposed to.

… Studies of measles outbreaks in Quebec, Canada, and China attest that outbreaks of measles still happen, even when

vaccination compliance is in the highest bracket (95-97% or even 99%, see appendix for scientific studies, Items #6&7). This is because even in high vaccine responders, vaccine-induced antibodies wane over time. Vaccine immunity does not equal life-long immunity acquired after natural exposure.

… elimination of vaccine exemptions, currently only utilized by a small percentage of families anyway, will neither solve the problem of disease resurgence nor prevent re-importation and outbreaks of previously eliminated diseases.

1)…due to the properties of modern vaccines, non-vaccinated individuals pose no greater risk of transmission of polio, diphtheria, pertussis, and numerous non-type b H. influenza strains than vaccinated individuals do. Non-vaccinated individuals pose virtually no danger of transmission of hepatitis B in a school setting, and tetanus is not transmissible at all; 2) there is a significantly elevated risk of emergency room visits after childhood vaccination appointments attesting that vaccination is not risk-free; 3) outbreaks of measles cannot be entirely prevented even if we had nearly perfect vaccination compliance; and 4) an effective method of preventing measles and other viral diseases in vaccine-ineligible infants and the immunocompromised, immunoglobulin, is available for those who may be exposed to these diseases.

Taken together, these four facts make it clear that discrimination in a public school setting against children who are not vaccinated for reasons of conscience is completely unwarranted as the vaccine status of conscientious objectors poses no undue public health risk.

Stephanie Seneff, PhD

https://www.youtube.com/watch?v=o3P6wVUH0pc

Dr. Stephanie Seneff is employed by MIT’s Computer Science and

Artificial Intelligence Laboratory as a Senior Research Scientist. She holds a PhD in Electrical Engineering and Computer Science from MIT. Her research has largely focused on nutrition and health through computer analyses of large datasets.

I'm a computer scientist so I can go look at the number crunching, looking at the words, statistical distributions and whatnot. You can find a lot of things out, looking at VAERS.

…I confirmed in my studies on VAERS database that MMR is associated with autism. I wrote a paper on that and I proposed at the time that possibly, and it was something that somebody else had also proposed, which was that the acetaminophen, it was given just to control the fever, kids are often given that around the vaccine, and that can become toxic to certain kids who can't metabolize it properly.

… the glutamate in the vaccine that's causing the problem and that the glutamate is much more toxic now because of the glyphosate. So all this is connecting up. And the same thing is true for the aluminum in the vaccines as well and people have talked a lot about the mercury and the mercury certainly is an issue and its very toxic. I look at the aluminum because that's the one that's gone up quite a bit. We have a lot of aluminum containing vaccines now that we didn't have before so that fits with what's going up in step with the autism increase, lots more aluminum containing vaccines. For example the HPV, which has just been introduced, the Gardasil they're giving that to these kids, teenagers. That's loaded with aluminum. And that's a very nasty vaccine. I've looked at that one too and it has much, much more severe reactions to that one than to other vaccines that these kids are getting. Its a very toxic vaccine and totally unnecessary in my opinion and they can't even prove that its actually doing what its claiming to do because its like 60 years later when you're going to get this cervical cancer that its supposedly protecting you from, you know. I don't know why anyone would

think it's a good idea to get that vaccine. Young girls' lives are being destroyed. People are dying or they're getting some debilitating autoimmune disease, you know, from that vaccine. It's very clear from the data.

Conclusion

When researching scientists' recommendations for public health policies in regards to vaccines, it is surprising how few of them support vaccination unless they work for the pharmaceutical industry.

In order for vaccines to be truly safe and effective, adverse reactions would be rare and breakouts of vaccine-preventable diseases among vaccine compliant populations would be rare or non-existent. Clearly, neither outcome is reality. The science does not support the statement that vaccines are safe and effective. This is not a scientific finding. This is a marketing slogan taught to doctors in medical school. If vaccine damage is a concern of yours, check out *How To Detoxify and Heal From Vaccinations – For Adults and Children.*

Further Reading:

- *Scientists Against Vaccines – Hear From Those Who Have Done the Research*
- *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:

- *Peter Fletcher/Anne Dachel on the Autism Epidemic*– Whale

- *How to Lie to a Generation of Families – Malfeasance in the CDCs Vaccine Safety Program* – Brian Hooker
- *What Happens When Your Government Chooses to Side-Step Scientific Truth?* – Mercola
- *Spontaneous Integration of Human DNA Fragments into Host Genome* – K. Koyama, T. A. Deisher
- *Harvard Trained Immunologist Demolishes California Legislation That Terminates Vaccine Exemptions* – The People's Voice
- *This is the Best Explanation of the Vaccine/Autism Connection I've Ever Heard!*– You Tube