

Top of Form

Concerns about the H1N1 influenza vaccination campaign

By Katherine Smith
August 2009

- 1) Baxter produced a seasonal flu vaccine for Europe earlier this year that was contaminated with live Bird Flu (H5N1) viruses. Had this vaccine been used, it could potentially have caused a bird flu pandemic. Fortunately the contamination was discovered by scientists in a Czech laboratory before the vaccine was injected into anyone. Baxter claims the contamination was accidental but it may have been deliberate. In any event, the contamination incident put a huge question mark over the safety of their vaccines. See: www.torontosun.com/news/canada/2009/02/27/8560781.html
- 2) The NZ government has ordered 300,000 doses of Baxter's H1N1 vaccine for 150,000 "first responders" (front line healthcare staff, police and emergency personnel.) See: <http://www.istockanalyst.com/article/viewiStockNews/articleid/3332184>
- 3) The NZ government also has a contract with CSL to supply additional H1N1 vaccine if needed. See: <http://www.istockanalyst.com/article/viewiStockNews/articleid/3332184>
- 4) The Ministry of Health website (in the pandemic influenza Q&A section, as of its July 28 update) states the vaccination will be not be compulsory for first responders. <http://www.moh.govt.nz/moh.nsf/indexmh/influenza-a-h1n1-questions>

However, the website (as of its August 3, update) also states that:

"Health authorities are:

- in regular contact with the World Health Organization to ensure we are well informed about international developments and acting in concert with global initiatives to limit the spread of the disease
- monitoring the spread of the disease and getting good information about individual cases in New Zealand
- planning for the possible need to increase or change the focus of our response."

There is legislation in NZ that could be used to implement a policy of mandatory vaccination (for the general population) should the government

decide to do so – the Health Act 1956. Moreover, over the years we have been approached by people who have been worried because their employment contracts have specified that they be vaccinated (or re-vaccinated) against specific diseases such as tetanus or Hepatitis. B, which amounts to a sort of de-facto mandatory vaccination policy within some institutions i.e. get the vaccine or lose your job.

5) In the USA the situation is quite dire, with preparations for mandatory vaccination well underway. (The USA has of course been sliding towards fascism for at least a decade and more quickly since September 11, 2001.) See: <http://farmwars.info/?p=1314>
More recently, the Massachusetts senate unanimously passed legislation making the H1N1 influenza vaccine compulsory. People who refuse to be vaccinated face fines of \$1000 per day and 30 days in jail. See: <http://www.abovetopsecret.com/forum/thread495400/pg1>

6) The World Health Organisation has recommended that pandemic influenza vaccines use "oil-in-water" adjuvants. These are squalene based. A number of different manufacturers have produced a variety of squalene based adjuvants under brand names AS03, MF59 and AF03, among others that could be included in their H1N1 vaccines.

See: http://www.who.int/csr/disease/swineflu/notes/h1n1_vaccine_20090713/en/index.html

http://docs.google.com/gview?a=v&q=cache:9HVW79vTl14J:www.who.int/vaccine_research/documents/Brief_overview_of_use_of_oil-in-water_emulsions.pdf+squalene+%2B+AS03&hl=en

WHO's recommendation is worrying because squalene injections can be used to induce autoimmune disease in laboratory animals and vaccines containing squalene are thought to be a prime contributor to Gulf War Syndrome (GWS) as sufferers have anti-squalene antibodies.

<http://www.autoimmune.com/GWSGen.html> (This link shows the link between Gulf War Syndrome and squalene)

http://www.sciencedirect.com/science?_ob=ArticleURL&udi=B6WFB-45F4JKG-1X&user=10&rdoc=1&fmt=&orig=search&sort=d&docanchor=&view=c&searchStrId=955180233&rerunOrigin=google&acct=C000050221&version=1&urlVersion=0&u serid=10&md5=da9e0c0eb432179ab78532f0ab787c09 (GWS and squalene)

<http://ajp.amjpathol.org/cgi/content/abstract/156/6/2057> (This link shows that squalene injections can cause autoimmune arthritis in lab rats)

7) Testing of H1N1 vaccines before release onto the market is likely to be poor. <http://www.medpagetoday.com/PrimaryCare/Vaccines/15230>

8) Conflicts of interest at WHO's Global Advisory Committee on Vaccine Safety (GACVS). The GACVS is touted by WHO as being an independent body with the members having "...impartiality and a high level of expertise..."

See: http://www.who.int/vaccine_safety/about/indepth/en/index.html

However, a quick check into the background of just one of the committee members (who was on the committee when GACVS largely dismissed the legitimate concerns about squalene's safety) reveals a different story.

Dr Kenneth Hartigan-Go is listed as being the Executive Director of the The Zuellig Foundation in the Philippines. He was on the committee from June 2006 until June 1009. http://www.who.int/vaccine_safety/about/current_members_june_2009.pdf

Also known as The Zuellig Family Foundation, this Foundation's logo is a modified version of that of Zuellig Pharma, a major supplier of pharmaceutical and vaccines in the Asia/Pacific region. (See: http://www.zuelligpharma.com/offices_china_pro&ser.html) What's more the Zuellig (Family) Foundation's website lists the League of Corporate Foundations (LCF) as a supporter of its work. http://www.zuelligfoundation.org/organizationalaffiliations_.htm A browse through the website of the LCF reveals that vaccine manufacturers Pfizer and Merck are LCF members. See: <http://www.lcf.org.ph/content/directory-members>

Thus it appears that far from being "impartial" when it comes to making decisions about vaccine safety, Dr Hartigan-Go is the Executive Director of a Foundation which has substantial links to the vaccine industry. I have not had time to look into the background of other members, but I would not be surprised if they had similar pharmaceutical industry links.

WHO makes the following claims for the funding of GACVS: "The work of the Committee is funded from multiple sources including WHO regular budget, UNICEF, the Bill & Melinda Gates Foundation, the GAVI Alliance and its Vaccine Initiatives. No funding is received from commercial organizations."

http://www.who.int/vaccine_safety/about/indepth/en/index2.html

On the surface this funding sounds appropriately impartial, especially as WHO makes the claim that "commercial organisations" do not contribute funding to the committee. However, scratch the surface of this bland pronouncement and you will see it's actually quite deceitful. The Wikipedia entry on the GAVI [Global Alliance for Vaccines and Immunisation] Alliance, for example states:

"Launched in 2000 at the annual meeting of the World Economic Forum in Davos, the GAVI Alliance includes among its partners developing country and donor governments, the World Health Organization (WHO), UNICEF, the World Bank, the vaccine industry in both industrialised and developing countries, research and technical agencies, NGOs, and the Bill & Melinda Gates Foundation." http://en.wikipedia.org/wiki/GAVI_Alliance

Merck's website gives more detail on the GAVI Alliance and moreover states:

"Merck is a founding partner in the GAVI Alliance. Formed in 1999, GAVI is an unprecedented public/private partnership whose mission is to mobilize resources that support the widespread use of vaccines..." <http://www.merck.com/corporate-responsibility/access/access-vaccines-immunization/initiatives.html>

So, there we have it; the GAVI Alliance, one of the funders of WHO's Global Advisory Committee on Vaccine Safety (GACVS) is a "public-private partnership" (and an unprecedented one at that!) which states its "mission" as being "to support the widespread use of vaccines". Obviously, the widespread use of vaccines would benefit the vaccine manufacturers in this "public-private" partnership – and the widespread use of vaccines is not encouraged by candid disclosure of vaccine risks to the public. Even if none of the members of WHO's GACVS had links to the vaccine industry, the funding of GACVS by the GAVI Alliance could be sufficient compromise the committee's integrity.

While WHO states that GACVS committee members "must declare any conflict of interest" they also "sign a confidentiality agreement",

See: http://www.who.int/vaccine_safety/about/indepth/en/index.html

Presumably because they have access to unpublished data

See: http://www.who.int/vaccine_safety/about/indepth/en/index2.html

which could damage vaccine company profits if unfavourable data were

made public. This confidentiality agreement also means that there is no way for any honest doctor or scientist who may be on the committee to bring to the public's attention information that may be of vital interest to public health that may have been discussed – and whitewashed – in GACVS meetings.

9) Side effects of influenza vaccines

Even influenza vaccines that do not contain squalene based adjuvants can cause side effects. CSL's seasonal influenza vaccine for winter 2009, "Fluvax", for example. Adverse reactions to the vaccine (according to the manufacturer's data sheet) include:

"Blood and Lymphatic System Disorders

Rare: Transient thrombocytopenia.

Immune System Disorders

Rare: Allergic reactions including anaphylactic shock.

Nervous System Disorders

Rare: Neuralgia, paraesthesia and convulsions.

Very rare: Encephalopathy, neuritis or neuropathy and Guillain-Barré syndrome.

Vascular Disorders

Very rare: Vasculitis with transient renal involvement.

Skin and Subcutaneous Tissue Disorders

Uncommon: Pruritus, urticaria and rash.

General Disorders and Administration Site Conditions

Very Common: Injection site inflammation.

Common: Influenza-like illness, Injection site ecchymosis and induration

Influenza-like illness may include pyrexia, chills, headache, malaise and myalgia.

Adverse event frequencies are defined as follows: Very common ($\geq 1/10$), common ($\geq 1/100$, $< 1/10$), uncommon ($\geq 1/1,000$, $< 1/100$), rare ($\geq 1/10,000$, $< 1/1,000$) and very rare ($< 1/10,000$).

It is worth noting that according to the Datasheet, "Fluvax" does not contain either aluminium adjuvant or the mercury based preservative thimerosal (thiomersal). Influenza vaccines that do contain these ingredients could be reasonably expected to cause more serious side effects.

<http://www.medsafe.govt.nz/profs/datasheet/f/Fluvaxinj.htm>

10) Potential for Baxter's and other manufacturers' H1N1 vaccines to cause fertility problems.

Another possible reason for concern about Baxter's H1N1 vaccine is that the company's patent for its general influenza vaccine manufacturing technique states that "Tween 80" (Polysorbate 80) http://en.wikipedia.org/wiki/Polysorbate_80 is used in its influenza vaccine production process. <http://www.theoneclickgroup.co.uk/documents/vaccines/Baxter%20Vaccine%20Patent%20Application.pdf>:

Polysorbate 80 is also an ingredients of some squalene-based water-in-oil emulsions used as vaccine adjuvants.

http://docs.google.com/gview?a=v&q=cache:9HVW79vTl14J:www.who.int/vaccine_research/documents/Brief_overview_of_use_of_oil-in-water_emulsions.pdf+squalene+%2B+AS03&hl=en

This is a concern because injection of Polysorbate 80 into baby females rats caused them to develop abnormalities of the reproductive organs. See:

http://infertility.suite101.com/article.cfm/polysorbate_80_causes_infertility

An excerpt from the above article – a copyrighted work state:

"Gajdova M, Jakubovsky J, Valky J. Delayed effects of neonatal exposure to Tween 80 on female reproductive organs in rats. Food Chem Toxicol. 1993 Mar;31(3):183-90. PMID: 8473002.

Baby female rats were injected with polysorbate 80 at days 4-7 after birth. It accelerated the maturing of the rats and caused changes to the vagina and womb lining, hormonal changes, ovary deformities and degenerative follicles."

Given the possibility of adverse reproductive effects of Polysorbate 80, it is worrying CDC recommends that pregnant women and children six months of age upwards and young adults up to the age of 25 be one of the high priority groups (in addition to healthcare and emergency services personnel) of the coming flu vaccine campaign in the USA – if supplies of vaccine are insufficient to vaccinate the whole population at once.

See also: <http://www.cdc.gov/media/pressrel/2009/r090729b.htm>
<http://www.guardian.co.uk/world/2009/jul/29/swine-flu-pregnant-woman-lancet>

[http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(09\)61304-0/abstract](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(09)61304-0/abstract) (This is a summary of the article in the Lancet which was funded by the CDC, for whom the lead author works.)

11) Ineffectiveness of seasonal flu vaccines

Given the rush to get H1N1 influenza vaccines into production, it is unlikely that there will be much, if any data, on the effectiveness of these vaccines in preventing H1N1 influenza or its complications before the vaccine is released into the market. The "efficacy" of influenza vaccines is a term used to describe its effect in creating an antibody response; this does not necessarily mean that the vaccine will protect against infection. Influenza vaccines have a long history of producing disappointing results in terms of preventing influenza or influenza like illness. A recent article published in the British Journal of Medicine stated that:

"In children under 2 years inactivated vaccines had the same field efficacy as placebo,⁸ and in healthy people under 65 vaccination did not affect hospital stay, time off work, or death from influenza and its complications.⁹"

The author also expressed surprise at the lack of safety studies:

"A Cochrane Database Systematic Review found only one old trial with data from 35 participants aged 12-28 months.⁸ In the general population of elderly people, despite a dataset of several million observations, safety was only reported in five randomised controlled trials (2963 observations in total) on local and systemic adverse events seen within a week of giving parenteral inactivated vaccine."

He recommended that in light of the evidence poor effectiveness of inactivated influenza vaccine, poor methodology of some studies and the surprisingly small amount of information relating to vaccine safety, that a "a re-evaluation [of influenza vaccination programmes] should be urgently undertaken."

<http://www.bmj.com/cgi/content/full/333/7574/912>

Concluding Comments:

Given that seasonal influenza vaccines do not appear to be very effective in preventing influenza like illness or complications and the fact that the serious concerns have been raised about the safety of H1N1 pandemic influenza vaccines, the decision about whether or not to receive an H1N1 vaccine is one that should be made very carefully. (Certainly, at the very least, potential candidates for vaccination would do well to study the vaccine manufacturer's datasheet when this is available before making a decision about the vaccine.) In New Zealand the decision about whether or not to be vaccinated has always been made by the individual concerned (or the parents/guardians of a child aged under the age of 16 years.) It is a basic human right that individuals give informed consent to any proposed medical treatment, including vaccination. It is crucial to the well-being of both individuals and our country as a whole that we resist any attempt by the State to erode individual rights and freedom of choice by making vaccination against H1N1 influenza compulsory for any group of New Zealanders or within the country as a whole. Considering that the

World Health Organisation influences the health policies of every country in the world, citizens of countries other than NZ would do well to look at the policies of their country's Ministry of Health and relevant national legislation and take whatever steps necessary to preserve (or regain) freedom of choice when it comes to vaccination.

Suggested further reading:

www.theflucase.com (This is probably the most important site to read for updates on the international situation.)

Further References

www.uncensored.co.nz

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http://www.baxter.com/about_baxter/news_room/downloads/Vero_Cell_Backgrounder.pdf.

<http://www.ageofautism.com/2009/04/1141979-60-minutes-episode-exposed-swine-flu-vaccine-injuries-lack-of-safety.html>

<http://ancavge.wordpress.com/2009/07/08/canadian-doctor-h1n1->

<http://vaccination-a-eugenics-weapon-for-mass-extermination/>

<http://www.rense.com/general86/our.htm>

<http://www.drcarley.com/>

Vaccine Ingredients

http://www.novaccine.com/specific-vaccines/vaccine.asp?v_id=16

<http://www.rense.com/general32/thru.htm>

<http://www.novaccine.com/vaccine-ingredients/results.asp?sc=27>

Alternative Therapies

[http://www.theoneclickgroup.co.uk/news.php?](http://www.theoneclickgroup.co.uk/news.php?start=2760&end=2780&view=yes&id=3607#newspost)

[start=2760&end=2780&view=yes&id=3607#newspost](http://www.theoneclickgroup.co.uk/news.php?start=2760&end=2780&view=yes&id=3607#newspost)

[http://us1.forward-to-friend.com/forward/show?](http://us1.forward-to-friend.com/forward/show?u=25b08cc8b5ebaf472984d04d0&id=196cf4fa17)

[u=25b08cc8b5ebaf472984d04d0&id=196cf4fa17](http://us1.forward-to-friend.com/forward/show?u=25b08cc8b5ebaf472984d04d0&id=196cf4fa17)