

# Problems Surrounding Vaccine Safety

Dick Atlee, 9 May 2017 – <http://dickatlee.com/vaccines>

## The process:

1. Industry proposes to FDA, does safety testing
2. The FDA approves the vaccine
3. The CDC decides to include it on the schedule
4. Doctors and hospitals administer it
5. Those injured or killed appeal to the VICP "Vaccine court"

## Testing Problems -- General

- No financial liability for injury/death (1986 NCVIA)
- No testing of the whole schedule (cumulative effects of ingredients)
- No testing of combination-vaccines (e.g., MMR) -- diseases don't normally occur simultaneously

## Testing Problems -- Industry

- Short term -- usually  $\leq 30$ -day followup
- Ineffective (fake) placebos
  - Almost never saline (the gold standard)
  - Vaccine minus antigen (hides effect of other ingredients)
  - Previous version of vaccine (declared "safe" by same faulty method)
- Exclusion of people who will have to take the vaccine (pregnant, sick, genetic risks)

## Regulation Problems: Captive-agency Corruption

- Revolving door (e.g. Julie Gerberding)
- Financial conflicts of Interest  
(e.g., CDC committee deciders: 97% faulty ethics forms, 64% positive conflicts)

## FDA Problems

- Large-scale hiding of industry-unfavorable data  
(even to their independent advisors who make approval/rejection decisions)
- \* Loosening of approval regulations  
(four different "shortcuts" handle over half of drugs)

## CDC Problems

- Inherent conflict: buying/distributing vaccines but also regulating them
- Reactive -- only does studies when outsiders complain, if at all
- Fraudulent "science"
  - William Thompson / Vaxxed (MMR)
  - Simpsonwood meeting / Trace Amounts (thimerosal)

## Medical Practitioner Problems

- Hospitals – lowered reimbursements if don't vaccinate
- Doctors
  - administration bonuses vs lowered reimbursements
  - most are unaware of how to recognize and report adverse effects (VAERS)
- General – consent forms (vanilla: lacking vitally important warnings)

## Vaccine Compensation Problems

- No judicial discovery permitted
- Congress intended to be supportive, implemented as confrontational
- Two thirds of claims rejected (autism automatically excluded)  
\$3.56 billion paid out so far

(see over)

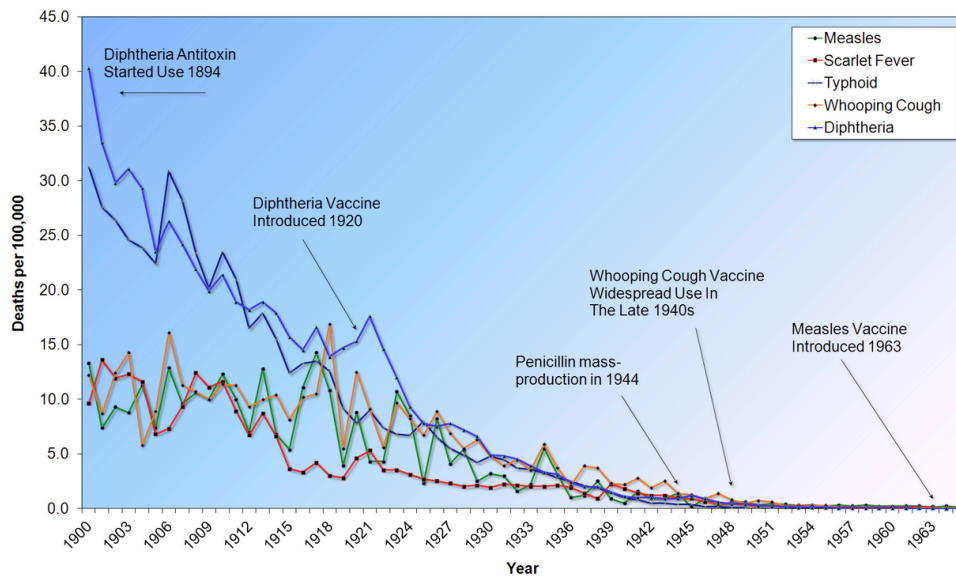
The lack of adequate testing of the present vaccine schedule means that the national immunization program is a vast human experiment, and as such is subject to a number of U.S.-signed international agreements. Any mandatory implementation of it violates these. In particular:

**The Nuremberg Code**  
regarding human experiments

**The voluntary consent of the human subject is absolutely essential.** This means that the person involved **should have legal capacity to give consent**; should be so situated as to be able to exercise free power of choice, without the intervention of any element of force, fraud, deceit, duress, over-reaching, or other ulterior form of constraint or coercion; and **should have sufficient knowledge and comprehension** of the elements of the subject matter involved, as to enable him to make an understanding and enlightened decision.

**United Nations Universal Declaration on Bioethics and Human Rights**  
(2005, 192 signatories, including U.S.A.)

Any preventive, diagnostic and therapeutic medical intervention is only to be carried out with the **prior, free and informed consent of the person concerned, based on adequate information.** The consent should, where appropriate, be express and may be withdrawn by the person concerned at any time and for any reason without disadvantage or prejudice.



Childhood Disease Death Rates US (above) / Measles Death Rates US/UK (below)

