

Polio: Endemic Viral Disease or Mass Chemical Poisoning?

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The Bill and Melinda Gates Foundation have funded the development and distribution of polio vaccines in developing regions like Asia and Africa (Image Source: [GRAIN](#))

Current [NHS information](#) describes it as a 'serious viral infection' but adds that most people won't even know they are infected. While some will experience 'flu-like' symptoms,

others may become temporarily or permanently paralysed.

The term 'polio' is a description of spinal pathology: an inflammation of the grey marrow (polio muelos) of the brain stem and spinal cord. Symptoms vary wildly from *none* to fever, vomiting, bowel irritation, back pain, neck stiffness, problems with swallowing and breathing, paralysis, and *death*.

Poliovirus is an enterovirus that is activated in the human gut. The corporate science machine maintains that it is a dangerous pathogen spread by infected faecal matter but Dr Suzanne Humphries explains in her book, [Dissolving Illusions](#), that it is a naturally occurring common bowel irritant that existed for millennia before it began crippling people – *which poses the question: what changed?*

One factor is [pesticide usage](#), which is implicated in other neurological conditions such as [Parkinson's disease](#). Polio incidence and pesticide usage closely correlate; if you plot them on a graph, they follow the same lines.

What came to be known as polio was once called 'summer diarrhoea' because local outbreaks occurred after crop spraying had taken place in the spring. Children played in contaminated soils and ate unwashed fruit; their parents reported finding them paralysed in apple orchards.

High consumption of sugary foods in the summer lowered immunity by suppressing white blood cell activity, creating the perfect environment for toxic pesticides to interact with viruses in the gut and cause illness.

Doctors noted that symptoms of polio resembled food poisoning.

Poor diet increased susceptibility to poliovirus infection – especially a diet full of refined sugar, white flour, and processed foods, which were introduced to the public during the industrial revolution, around the time that polio began to emerge.

British physician Michael Underwood first observed '*debility of the lower extremities*' in children in 1789. It was the height of the industrial and agricultural revolutions in Europe and pesticide use skyrocketed. Most pesticides contained toxic metals such as lead and arsenic.

Lead and arsenic bind tightly to soil and do not deteriorate; they remain within the first 12-18 inches of topsoil for generations and contaminate waterways. *Redevelopment of former rural sites without proper clearance of toxic soil has the potential to poison whole areas of people.*

Crops were heavily sprayed with pesticides that were designed to attack the nervous systems of insects – *unfortunately they had the same effect on humans*. They were inhaled and absorbed through the skin and oral cavity, causing nausea, vomiting, diarrhoea, brain dysfunction, and bone malformation – all of which are common symptoms of heavy metal poisoning *and* polio.

Heavy metals were present in everyday products in the 18th, 19th, and early 20th centuries. Arsenic was used in synthetic dyes and syphilis treatments; mercury was used in teething powders, dental fillings, and medical preparations.

Lead, arsenic, and mercury are neurotoxic environmental poisons – all are fat-soluble and therefore can affect fatty areas of the body such as the brain and nerves.

Orthopaedist Jacob von Heine observed '*infantile spinal paralysis*' in 1840 and speculated that it was a contagious disease. It was named 'acute anterior poliomyelitis' by Wilhelm Heinrich Erb in 1875, by which time outbreaks had started to occur.

SEE ALSO: [W.H.O. Now Admits That Gates-funded Vaccine is Causing Polio Outbreak in Africa](#)

Regional patterns of disease led physicians to believe that

polio was a contagious virus, but it was an unproven assumption. Scientists had no idea what a virus was in the nineteenth century – nobody had seen one because the electron microscope, which enabled observation of viruses, was not invented until 1931.

A study of 2,000 case histories carried out by *Harvard Infantile Paralysis Commission* concluded that tonsillectomies (introduced in 1909 and carried out routinely as a preventative measure) provoked respiratory paralysis due to bulbar polio. This was known at the time as authorities prohibited removal of tonsils and adenoids during epidemics. *Bulbar polio was the type that required use of an iron lung and had the highest death rate.*

The case fatality rate in the early 1900s was very high. England and Wales made polio a notifiable disease in 1912, and it was endemic from then on. [The New York epidemic of 1916](#) saw patients experimented on with spinal injections of disinfectant and adrenaline. Roughly half of those treated died and were recorded as polio deaths.

A new pesticide, DDT – labeled ‘*the killer of killers*’ – was introduced just as WW2 began. People were led to believe it was good for them and even sprayed it on their children’s lunches. It is a cumulative poison and can be absorbed through the skin and mucosa. Governments started to ban DDT in the early 1950s, but the damage was done. The UK outlawed it in 1986, and it was banned worldwide in 2001, though it continues to be used in areas with high malaria incidence.

Epidemics peaked in the 1940s and 50s and physicians began to notice a correlation between certain medical interventions and polio paralysis. Children treated for congenital syphilis with arsenic-based Salvarsan often developed paralysis in their injected limbs.

Cases of polio rose in line with the expansion of vaccination

programmes for diphtheria, pertussis, and tetanus.

The diphtheria vaccine was introduced in the UK in 1942 and was noted for its adverse effects. The British Medical Association published news on the 10th of April 1950 that the [diphtheria vaccine](#) was responsible for childhood paralysis attributed to polio.

A doctor at Guy's Hospital in London found that 80 children developed paralysis within a month of receiving the shots; a health ministry doctor reported that another 65 children had developed paralysis within a fortnight; the St. Pancras medical officer found 40 more cases. Some children recovered from the paralysis, but others were still paralysed 18 months after onset. Two of the cases followed injection of penicillin.

Anne McLaren, [writing for Cambridge University Press](#) in 1957, stated that, "It is now well established that intramuscular inoculation with combined diphtheria-pertussis prophylactics can affect the course of poliomyelitic infection in children. Localisation of paralysis in the limb injected with vaccines was reported by McCloskey, Martin, Geffen, Hill & Knowelden, and Benjamin in 1950."

In 1951, Dr Ralph Scobey and Dr Mortind Biskind testified in front of the U.S Congress that the paralysis around the country known as 'polio' was being caused by industrial poisons, and that a virus theory was purposely fabricated by the chemical industry and the government to deflect litigation away from both parties.

The diagnostic criteria for polio were very loose prior to trials for the vaccine in 1954. Only after the vaccine was introduced was there any effort to distinguish polio from other types of paralytic disease.

The first polio vaccine, created by Jonas Salk in 1955, caused

a great deal of controversy. The 'Cutter Incident' happened when 120,000 children were injected with a live virus instead of a weakened one: 40,000 developed polio, 200 were paralysed, and ten died. When the immunisation program was eventually rolled out to the public, a different, untested, rapidly approved formula was used.

Salk later admitted that live virus vaccines against influenza or poliomyelitis might produce the diseases they intended to prevent (Science, 4th March 1977).

In 1956, the American Medical Association ordered that doctors could no longer diagnose paralysis as polio – it had to be called '*acute flaccid paralysis*'. This reduced polio statistics dramatically and gave the appearance that the vaccine programme had succeeded, when really the definition of the disease had just changed.

Simple, timely changes to diagnostic criteria meant the number of paralytic cases dropped irrespective of the vaccine programme.

Laboratory testing for polio wasn't introduced until 1958. Before then, all manner of other diseases could be classed as polio, including other enteroviruses, lead, arsenic, and DDT poisoning, Guillain-Barré syndrome, transverse myelitis, post-polio syndrome, viral or aseptic meningitis, traumatic neuritis, and Reye's syndrome. *How many were misdiagnosed and put on the wrong path of treatment as a result?*

It is claimed that the polio vaccine eradicated polio due to overblown, tightly controlled propaganda campaigns, but the truth is that cases plummeted because of changes in pesticide use, elimination of toxic metals in everyday products, improved diets and sanitary behaviour, and redefinition of the disease.

There is no convincing evidence of polio as a contagious viral

disease. Naturally occurring polio is all but obsolete in the modern world and the only 'polio' we see nowadays is vaccine-induced, courtesy of immunisation programmes run by the World Health Organisation.

There has been a huge rise in vaccine-induced polio paralysis in India. In 2011 there were an extra 47,000 cases, which were directly proportionate to the amount of oral vaccines administered. In 2018 a vaccine tainted with eradicated type-2 polio was given to children in Uttar Pradesh. The country remains vulnerable to polio due to its continued use of DDT, intramuscular injection of antibiotics, and diets high in sugar and low in vitamins.

Research scientist Viera Scheibner says that modern day vaccine advocates have forgotten the '[*polio provocation*](#)' of the past. She believes that vaccines represent a [*assault on the immune system*](#), which seems to be clearly implicated in the shadowy history of polio.

Vaccines were not needed to combat polio. Dr Fred Klenner published [*results of a study*](#) that used intravenous vitamin C to cure polio and other viral diseases 73 years ago – six years before the vaccine was introduced. With a success rate of 100%, we have to ask why this simple, non-toxic, affordable cure was completely overlooked and ignored by the medical community. *Why is it still ignored?*

The answer may lie in the criminal deceptions peddled by medical-industrial-pharmaceutical cartels that control the narrative of disease in order to sustain their gravy train of ill-gotten gain. A customer cured is a customer lost and there is no profit to be made from a healthy population.

Further reading:

The Lancet – Polio provocation: solving a mystery with the help of history:

<https://www.thelancet.com/journals/lancet/article/PIIS0140-673>

[6\(14\)61251-4/fulltext](#)

NCBI – Before the Vaccines: Medical Treatments of Acute Paralysis in the 1916 New York Epidemic of Poliomyelitis:
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4293735/>

Viera Scheibner – Vaccination: 100 Years of Orthodox Research Shows That Vaccines Represent a Medical Assault on the Immune System:
<https://archive.org/details/vaccination100ye0000sche/page/176/mode/lup>

Suzanne Humphries – Dissolving Illusions:
<http://www.whale.to/c/DissolvingIllusions-Polio.pdf>

The Weston A. Price Foundation – Pesticides and Polio: A Critique of Scientific Literature by Jim West:
<https://www.westonaprice.org/health-topics/environmental-toxins/pesticides-and-polio-a-critique-of-scientific-literature/>

A collection of articles and sources:
<http://whale.to/vaccine/vaccines/polio1.html>

BMA news article, 1950 – diphtheria vaccine:
<https://trove.nla.gov.au/newspaper/article/52712872>

Anne McLaren – The Effect of Vaccines and Other Substances Upon the Course of Neurotropic Virus Infection (1957):
<https://europepmc.org/scanned?pageindex=10&articles=PMC2217904>

Fred Klenner – The Treatment of Poliomyelitis and Other Virus Diseases With Vitamin C (1949): https://www.mv.helsinki.fi/home/hemila/CP/Klenner_1949_Polio.pdf

Landsteiner & Popper:
<https://core.ac.uk/download/pdf/7827597.pdf>

Parkinson's disease and pesticide use:
<https://www.michaeljfox.org/sites/default/files/media/document>

[/August%202020_Environment_Transcript.pdf](#)

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