Vaccination as Orthodoxy: Conflicts of Interest Undermine Children's Health — Part I

Source: Children's Health Defense

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by <u>the Children's Health Defense Team</u>
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Note: With this article, Children's Health Defense is launching its second eBook: Conflicts of Interest Undermine Children's Health. The first eBook, The Sickest Generation: The Facts Behind the Children's Health Crisis and Why It Needs to End, described how children's health began to worsen dramatically in the late 1980s following fateful changes in the childhood vaccine schedule. This part of our new eBook outlines the political developments in the late 1980s that allowed these changes to happen and describes the widespread conflicts of interest that continue to overshadow the U.S. vaccine program.

Vaccination has been a cornerstone of U.S. government public health policy for decades. Although the Centers for Disease Control and Prevention (CDC)—initially called the Communicable Disease Center—opened its doors in the early 1940s with a mandate primarily focused on malaria eradication, it rapidly pushed to "extend its responsibilities to other communicable

diseases," including many of the illnesses subsequently targeted by vaccination.

The CDC has operated as the standard-bearer for the nation's vaccination efforts ever since. However, a close look at the agency's behavior—and the statements of internal whistleblowers—reveals that, for all intents and purposes, the CDC functions as a subsidiary of a "rapacious"pharmaceutical industry in partnership with the U.S. Food and Drug Administration (FDA) and numerous "outside parties and rogue interests" that all benefit from their endorsement of a highly profitable vaccine orthodoxy. The powerful vaccine "gospel" has swept up regulators, medical trade associations, physicians, science journals, the popular press and others "in a kind of consensus dogma" that has become "more important than the children [these institutions were] supposed to protect."

Over a century later, it is clear that vaccine policy-makers are the ones whose "organized and aggressive" public relations apparatus is relentlessly waging war on questioners, effectively branding them as heretics.

The Medical Marketplace Comes First

Economic and political interests have steered U.S. vaccination programs since at least the 19th century, when the medical establishment and its government and industry allies recognized that vaccination provided a new income stream and a compelling opportunity "to augment their authority in a competitive medical marketplace." Historical documents show that, from the earliest days, vaccine proponents have promoted a one-sided agenda, sidelining deeper inquiry into safety and efficacy and castigating individuals who dare to raise questions. In a blatant example of the pot calling the kettle black, Dr. William Bailey belligerently declared in an 1899 issue of Public Health Papers and Reports (a precursor to the American Journal of Public Health) that vaccination's

"enemies are organized and aggressive in their warfare against it."

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Independent scientists who cast doubt on vaccine orthodoxy find themselves facing <u>personal attacks</u> rather than impartial scrutiny of their research.

In recent months, the "war" has intensified, seemingly with buy-in from legislators, regulators, researchers and the private sector. Consider the following:

- In November 2018, payouts from the National Vaccine Injury Compensation Program crossed over the \$4 billion threshold, and the government reported a surge in autism rates (1 in 40 children)—yet when two congressional Committees held kangaroo-court vaccine hearings a few months later, they ignored vaccine safety issues and instead used the proceedings to demonize the unvaccinated.
- Reflecting the "outsized dependence of both political classes and media outlets on pharmaceutical industry contributions and advertising revenue," a Congressman requested that private social media and Internet companies censor information critical of current vaccine policies and products. In a cogent response, another Congressman asked, "If vaccines do not cause injuries, why has the Vaccine Injury Trust Fund paid out \$4,061,322,557.08 for vaccine injuries?"
- 2019 has marked a ballooning of legislative attempts to violate the bedrock principle—and fundamental human right—of free and informed consent to all medical interventions, including vaccines. Citizens seeking to

uphold their <u>religious and philosophical rights</u> to vaccine exemptions face increasingly punitive actions. Even medical exemptions are under attack.

There is more and more evidence of a coordinated effort to suppress any and all information that might be unfavorable to the vaccine program. Some of this verges on the slapstick, such as the last-minute cancellations by four pro-vaccine-mandate speakers who declined to show up at a scheduled event at Yale to debate "The Science of Vaccines" with Children's Health Defense Chairman Robert F. Kennedy, Jr. in March 2019. Other incidents are less entertaining:

- In February 2019, Dr. Anthony Fauci, Director of the National Institute of Allergy and Infectious Diseases (NIAID), gave <u>false information</u> to Congress, denying that measles vaccination can cause encephalitis (brain inflammation), even though vaccine <u>package inserts</u> have always listed encephalitis as a risk of measles vaccination.
- In January 2019, a renowned medical expert signed a sworn affidavit explaining how he told Department of Justice (DOJ) lawyers in 2007 that "vaccinations could cause autism" in a subset of children. The DOJ fired him as an expert witness, kept his opinion secret from the public and misrepresented his opinion in federal court in order to continue to debunk vaccine-autism claims.
- In a March 2017 publication, CDC authors acknowledged that many individuals involved in California's 2015 measles outbreak were "recent vacinees," briefly citing "unpublished data" showing that the vaccine strain of measles caused the infection in almost two-fifths (38%) of the tested cases.

Nonetheless, the CDC continues to demand that parents unhesitatingly allow their children to receive endless vaccine doses during pregnancy, infancy, childhood and adolescence. If someone (even an experienced doctor) dares to propose a less immunologically burdensome approach, the PR machine instantly jumps into overdrive to <u>discredit</u> him or her, despite the fact that respected, peer-reviewed science—including from the Institute of Medicine (IOM)—supports these concerns.

When companies perpetuate misleading vaccine safety claims—exaggerating the benefits and concealing the risks—and regulators obligingly politicize their vaccine recommendations and decisions, trust is damaged still further.

Waning Public Confidence

Although a barrage of assurances, both nationally and globally, continues to tell consumers that vaccines are safe, confidence in vaccine programs is declining worldwide. The medical journal Pediatrics reported in 2013 that nearly nine in ten U.S. pediatricians (87%) had encountered parents who questioned the CDC childhood vaccine schedule, up from 75% of children's doctors in 2006. The surveyed pediatricians also reported receiving frequent requests to follow an alternative vaccine schedule (almost one in five parents) and, over the seven-year period, a doubling of the percentage of parents refusing at least one vaccine. Where honored, parents' wishes for a slower and more selective vaccine schedule are amply rewarded, with practice data demonstrating better health outcomes and a far lower risk of autism.

Even the most ardent vaccine proponents recognize that the <u>erosion</u> <u>of public trust</u> is at least partially their own fault—the result of factors such as "heightened [public] awareness of the profit motives of the vaccine industry," lack of transparency on the part of industry and conflicts of interest among policy-makers. These observers even admit that "<u>financial</u> <u>and bureaucratic reasons</u>" prompt "vaccine manufacturers, health officials, and medical journals… not…to

acknowledge the risks of vaccines."

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In 1967, when childhood vaccines were much fewer and farther between, Dr. Graham Wilson (one-time Director of the Public Health and Laboratory Service for England and Wales) warned of the need to pay ongoing attention to vaccine safety, stating:

"It is for us, and for those who come after us, to see that the sword which vaccines and antisera have put into our hands is never allowed to tarnish through over-confidence, negligence, carelessness, or want of foresight on our part."

Forty years later, Congressional Representative Dave Weldon, himself a physician, harshly criticized the federal agencies charged with ensuring vaccine safety for <u>failing to heed Wilson's cautions</u>.

The loss of confidence in vaccine safety must be addressed with independent, unbiased science.

The U.S. government's Healthy People 2020 initiative states that "childhood immunization programs provide a very high return on investment," but Americans should be asking just who is garnering the positive returns. Globally, the vaccine industry is on track to more than double its worldwide revenues by 2024—from \$32 .5 billion in 2015 to a projected \$77 billion—but highly vaccinated children in the U.S. and elsewhere are suffering. As described by Children's Health Defense in the eBook, The Sickest Generation: The Facts Behind the Children's Health Crisis and Why It Needs to End, children's health has worsened dramatically since the late 1980s—"precisely the same time that the U.S. started expanding

the types and total number of vaccines required for school attendance." Over half of American children have at least one chronic illness, and neurodevelopmental disorders and pediatric autoimmune conditions have climbed to historically unprecedented levels. There is abundant evidence that vaccines are making children sicker, not healthier—representing an unquestionably negative return on investment for children, families and society.