What About . . . VACCINES?

"The only safe

vaccine is one that is

never used."

Dr. James R Shannon,

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o many people's horror, we do not vaccinate our horses, dogs, cats, or ourselves and have not for over 30 years. When our middle-aged children were young, we severely minimized their vaccines and refused to give the new (at that time) measles shot from which, it turned out, over 200 children died before it was recalled. In fact, we almost went to jail over that one. It is our belief that there is absolutely no way that we can possibly vaccinate against every single "bug" that comes down the pike and would rather build our immune systems naturally with optimum nutrition. For us it has worked admirably with rarely even a snotty nose among the bunch of us.

This article contains but a tiny fraction of the material available that throws grave doubt on the wisdom of routine vaccinations as we know them today. Because this is of concern not only to ourselves as human beings but also to ourselves as responsible animal owners, information here is drawn from a variety of sources yet holds true on a trans-species level. Ultimately we agree wholeheartedly with Dr. James Shannon, formerly director of the National Institute of Health who stated, "The only safe vaccine is a vaccine that is never used."

What is a Vaccine?

Vaccines are prepared in laboratories by taking a pathogenic (disease causing) substance such as a specific disease "germ," preparing it with carriers and fixing substances, and then injecting the final product into the body in order to prevent that disease from occurring naturally. This is done by exciting the body's immune system to produce antibodies which form an immunity to that specific disease. According to Stephanie Cave, MD in WHAT YOUR DOCTOR MAY NOT TELL YOU ABOUT CHILDREN'S VACCINATIONS, there is a difference between "Natural" immunity and "Vaccinated" immunity. The Natural Immunity mobilizes the entire immune system, from the respiratory tract to the liver, thymus, spleen, and bone marrow creating antibodies that confer life-long immunity against that invading virus and similar ones. The body is so effective at doing this, that it frequently will reduce or eliminate the disease even before symptoms show.

On the other hand, Vaccinated Immunity bypasses many of the body's initial immune system defenses with a sort of massive sneak attack. This then, according to Walene James in IMMUNIZATION: THE REALITY BEHIND THE MYTH (2ND ED 1995), results in the persisting of live virus or other foreign antigens within the cells of the body, a situation that may provoke autoimmune reactions later as the body attempts to destroy its own infected cells. To those who study this, there then is no surprise that the incidence of autoimmune diseases (rheumatoid arthritis, subacute lupus erythmatosus, MS, asthma, psoriasis, etc), all once considered rare, has risen sharply in this era of multiple vaccine immunization.

An explanation for this could be found in an article entitled "Why You Should Avoid Taking Vaccines," (Well Being Journal, March/April 2005), by James Howenstein, MD, who states that: "All vaccines given over a short period of time

to an immature immune system deplete the thymus gland (the primary gland involved in immune reactions) of irreplaceable immature immune cells. Each of these cells could have multiplied and developed into an army of valuable cells to combat infection and growth of abnormal cells. When these immune cells have been used up, permanent immunity may not appear." He points out this could be the answer to Dr. W. B. Clarke's important observation that cancer was not found in unvaccinated individuals.

This is where the issue of *vaccinosis*, or reaction to vaccines, comes in.

latrogenic Diseases/Vaccinosis

Some question the veracity of vaccinosis. However, there is an increasing awareness of serious ramifications as already shown

> above. There already is a long list of diseases caused by doctors (iatrogenic) in other areas, and it grows yearly as treatments become more invasive or experimental and vaccines are not exempt. In fact, a recent official study was just concluded which stated that due to hospital errors alone, over 156,000 people die annually!

In 1955, a new "killed" polio vaccine was approved by the FDA as being 60% effective; two lots from Cutter Labs (Berkeley CA)

former director National Institute of Health were found later to contain live virus [THE CUTTER INCIDENT, AMERICAN JOURNAL OF HYGIENE, 1963]. I was one of 260 individu-

als who contracted polio from that vaccine, as proven by the CDC. The clue was the unusual incidence of paralysis beginning close to the vaccine site; to this day I live with severe Post Polio Syndrome. Hundreds, if not thousands, of Gulf War I & II veterans also live with the ramifications of aggressive overvaccination; it is called Gulf War Syndrome and has affected their very DNA. In fact, some vets of GWII are suing the government (which is us) for its vaccination policies, too many vaccines at one time with too many being in the experimental stage, and the consequences of it.

While the government's sentiment and intention, as well as those of hundreds of thousands of physicians and veterinarians, may be admirable, in fact there have been few studies which actually measure vaccine efficiency and vaccine interaction with other vaccines for either human or animal.

Meanwhile, reports of side-effects keep pouring in at the same time as more vaccines are being developed and their use encouraged by both physicians and veterinarians who tend to garner great financial profits through selling them to patients. It is also interesting to note that Congress has seen fit to remove the only protection that US citizens have against vaccine side effects: the ability to sue manufacturers for redress of profound injury and occasional death due to the use of their vaccines.

Unfortunately, most people think that unless you swell up and go into anaphylactic shock within minutes of an injection (and that IS a possibility with certain individuals), you are reaction-free. However, many side-effects are more subtle and may take days, weeks, months and sometimes even

Prior-to-Vaccination Questions

www.909shot.com

- Is my child/pet sick right now?
- Has my child/pet had a **bad reaction** to a vaccination before?
- Does my child/pet have a personal or family history of:

*vaccine reactions

*convulsions or neurological disorders

*severe allergies

*immune system disorders

- Do I know if my child/pet is at **high risk** of reacting?
- Do I have full information on the vaccine's side effects?
- Do I know how to identify a vaccine reaction?
- Do I know how to **report** a vaccine reaction?
- Do I know the vaccine manufacturer's name & lot #?

years/decades to show up in ways that may at first glance appear unrelated to original causation. Too many parents are ignored when they, very shortly after a round of vaccines, report their children having very swollen and hot injection sites, prolonged high-pitched screaming (common following pertussis including the new, "safer" *acellular* pertusis), loss of eye contact or former babbling and cooing, disturbed sleep patterns; children who go from being normal, happy active children to whiny, fearful, lethargic children with eating disorders, heart disease, speech disorders, neuro-developmental diseases, and, too frequently, autism. In fact, an estimated 400,000 Americans today have autism, a once rare neurological disorder characterized by social withdrawal, difficulty communicating, and involuntary, repetitive movements. The incidence of autism has increased number of vaccines has increased.

And far too many children die from that which their parents were told would make them healthy.

Frequently we receive calls from horse owners who say their animal was doing great and then all of a sudden just "fell apart" with lethargy, poor appetite (even to ulcers being diagnosed), lost condition, glassy eyes or eye infections, weaving, hoof cracks/abscesses, and sometimes even ataxia or stumbling gait. Upon questioning, it turns out that yes, they were vaccinated within the last two days to three weeks with multivalent vaccines (sometimes up to 9 vaccines at a time in one or two shots) and frequently were even dewormed (more chemicals) at the same time. These, too, constitute vaccine reactions. Some vets in the holistic world believe that horses are the most over-vaccinated of all domestic animals in this country and others even postulate that EPM may be caused by nerve-based (cultured in nerve tissue) vaccines being used: the horse begins to form antibodies to its own tissues from the vaccines. We surmise that such a response may not be limited to EPM nor to the equine species alone.

Additionally, we have had numerous pet owners report to us that their vets have told them they are now vaccinating cats in the leg instead of the neck because if a cancer forms, the leg can be removed far more easily than can a head! I cannot verify this myself.

Sandy Mintz writing in the Washington Post says of the measles vaccine alone:

"It is interesting to note that in a 1990 article on measles

vaccine, written by Drs. Walter Orenstein, Director of the National Immunization Program at the CDC, and Lauri Markowitz, one of the co-authors of both the 1990 article and the Katz article and formerly of the CDC, it was stated: 'From 1950 to 1959, an annual average of more than 500,000 cases and 500 deaths were reported. However, the true number of infections was estimated to be 10 times as high.' In other words, if only reported cases are considered, the death rate appears to be 1/1000. If you factor in the number of unreported cases, quite high during the era when measles was common, the death rate drops to 1/10,000. In the more recent Katz 'Vaccines' article, co-written with Redd and Markowitz, it says that the death rate is 1 to 3 in 1000 cases (pg.223), even though later in the article they say that there used to be, 'in the pre-vaccine era' (pg. 229), around 500 deaths among 4,000,000 cases (actually 1.25/10,000 cases). Either they are exaggerating the current death rate, or it has gone up. We submit that if the death rate has risen, measles vaccine is the cause, having changed measles epidemiology so that high-risk groups now more often get the measles." [WWW.VACCINATIONNEWS.COM/SCANDALS/SEPT_13_02/SCANDAL33.HTM]

From England comes a report on the preliminary results of a well structured survey indicating the disease side-effects suffered within a certain time frame following vaccination:

Cancer--31% within 3 months
Chorea--63.2% within 3 months
Encephalitis--75% within 3 months
Heart conditions--26.8% within 3 months
Kidney damage--40.5% within 3 months
Lameness--52% within 3 months
Liver damage--47% within 3 months
Paralysis of abdomen--64.7% within 3 months
Short attention span--68.4% within 3 months
Autoimmune diseases--54.8% within 3 months

[WWW.NATURALREARING.COM/J_IN_LEARNING/IMMUNIZATION/CANINEVACCINATIONSURVEY.HTM]

Reports have been coming in to us anecdotally about horses with severe *ataxia* (hind-end weakness) and even death from the highly touted West Nile Vaccine. One breeder we know personally had a valuable, and to all indications healthy, breeding stallion die within days of being vaccinated plus we have heard of 2 other stallions who died within hours of receiving; other stallions at both facilities appeared totally unaffected. We had a geriatric gelding move to our boarding facility when he became severely ataxic following an automatic vaccination of WNV in spite of her protests; it took him a couple of years to recover. Other reports are even more shocking. Sunny Wyland, DVM has a six inch file of reports she collected over a 4 months period in 2003 of owners who, following veterinarian advice in vaccinating their bred mares, have lost their entire foal crop. She says,

"At this time, I cannot count the number of foals lost due to Placenta Previa, deformities, respiratory distress syndrome, displaced placentas, stillborns and many many more illness. I researched sometimes upwards to twenty-two hours a day. In my opinion, the only common link is the West Nile Vaccine."

She goes on to say, "My next question is this, will it affect the stallion in the same manner? I believe it will." And she invites people to contact her: "Anyone with any questions about these issues may contact me at HORSEDOCO3@AOL.COM" [HTTP://LOST-

Vaccine Ingredients

When one actually studies a list of ingredients that are contained in most vaccines, some of the side-effects may not seem so bizarre or unbelievable. In addition to the actual "vaccine" itself, there are added numerous ingredients to the carrier for various expressed purposes.

One of the most toxic additives used is the potent neuro-toxin mercury under the guise of thimerosol, a preservative. [Interestingly, we have been told by the American Dental Association that the 50% mercury content of amalgam fillings (silver) is perfectly safe.] In actuality, mercury is so toxic, that old mercury thermometers are supposed to be discarded only in specially designated hazardous areas and a mercury spill at a high school, as was recently in the news, will cause the whole school to be immediately evacuated while a specially garbed HAZ-MAT team goes in to clean up. Yet there it still remains in far too many vaccines including influenza vaccines, many of the tetanus toxoids (not really a vaccine) and of course the animal-mandated rabies. Based on the results of studies, which found thimerosal-containing vaccines to contain mercury in excess of Federal Safety Guidelines, researchers confirmed a link between thimerosal-containing childhood vaccines and neurodevelopment disorders and heart disease. [JOURNAL AMERICAN PHYSI-CIANS & SURGEONS SPRING 2003; WWW.MERCOLA.COM/2003/APR/5/ VACCINES_MERCURY.HTM] A connection between vaccines and autism was published in the British medical journal *The Lancet* in 1998 describing eight children whose behavioral problems surfaced within two weeks of receiving the measles-mumpsrubella vaccine. This link could certainly account for the appalling surge of previously rare autism in this country.

A March 2005 issue of Discover magazine [http://www.discover.com/issues/mar-05/features/our-preferred-poison/?page=1] contains an article by Karen Wright entitled "Our Preferred Poison: A little mercury is all that humans need to do away with themselves quietly, slowly, and surely." She states:

. . . Until recently, many infants received regular injections of mercury on a state-mandated, medically sanctioned schedule. The mercury came from a compound called thimerosal that has been used as a preservative in vaccines and other medicines since the 1930's. In 1999 the FDA recommended that thimerosal no longer be used in pediatric vaccines, and manufacturers have removed it from all but the influenza vaccine. [ed: not quite true.] But some scientists and many more aggrieved parents are convinced that thimerosal in childhood vaccines has already caused, or at least catalyzed, the U.S. epidemic of autism...federal health officials added four new kinds of vaccines to the childhood immunization schedule, and the amount of mercury routinely administered to infants in the first six months of life more than doubled. Throughout the 1990s, a 3-month-old baby might receive as much as 63 micrograms of mercury in a single visit to a doctor—roughly 100 times the daily EPA safety level. By the age of 6 months, properly immunized children were exposed to at least 188 micrograms of mercury in a series of at least nine injections. Although the 1999 FDA action minimized such exposure, some infant flu vaccines still contain 12.5 micrograms of mercury per dose-more than 10 times the

daily EPA safety level for a 20-pound baby.

Unfortunately, due to labeling regulations that require only the final manufacturer to state the addition of thimeroso, it is still included as a part of already-formulated ingredients and so still slips into many vaccines. This makes it all but impossible for the average physician/veterinarian to know the truth; only the most dedicated researcher can hope to know the full facts.

Along with mercury, aluminum also is in every flu vaccine (and some childhood vaccines). It too is toxic to the brain and will eventually cause cognitive dysfunction such as Alzheimer's Disease. According to Hugh Fudenberg, MD

AVMA Principles of Vaccination

Approved by the AVMA Executive Board April, 2001 http://www.avma.org/policies/vaccination.htm

...Thorough evaluations of the risks of the disease, and those potentially associated with the vaccine, compared to the benefits of vaccination for the patient, are necessary in crafting optimal health recommendations that include vaccination......COBTA (The Council on Biologic and Therapeutic Agents) believes that variation in our patients and their lifestyle, and between the individual vaccine products available, requires a customized approach to vaccination recommendations to best match the variation in the patients presented for immunization

...Adverse events may be associated with the antigen, adjuvant, carrier, preservative, or a combination thereof. Possible adverse events include failure to immunize, anaphylaxis, immuno-suppression, autoimmune disorders, transient infections, and/or long-term infected carrier states. In addition, a causal association in cats between injection sites and the subsequent development of a malignant tumor is the subject of ongoing research. The role of genetic predisposition to adverse events needs further exploration and definition

...The one-year revaccination frequency recommendation found on many vaccine labels is based on historical precedent and United States Department of Agriculture regulation, not on scientific data. Even in those cases where scientific data was submitted to qualify the label claim, the data generated does not resolve the question about average or maximum duration of immunity. There is evidence that some vaccines provide immunity beyond one year. Revaccination of patients with sufficient immunity does not add measurably to their disease resistance, and may increase their risk of adverse post-vaccination events. Vaccination is a potent medical procedure associated with both benefits and risks for the patient. Adverse events, including some that are potentially severe, can be unintended consequences of vaccination.

...Unnecessary stimulation of the immune system does not result in enhanced disease resistance, and may increase the risk of adverse post-vaccination events.

...Vaccines, including polyvalent products, should be selected to include only those antigens appropriate for the specific risk needs of the patient, thereby eliminating unnecessary immune system stimulation and lowering potential risks of adverse events.

...Veterinarians and owners/clients need to carefully consider the benefits and risks of using these vaccine products on an individual basis.

[WWW.NITRF.ORG], the world's leading immuno-geneticist and 13th most quoted biologist of our times (nearly 850 papers in peer review journals), if an individual has had five consecutive flu shots, his/her chances of getting Alzheimer's Disease is ten times higher than if they had one, two or no shots. Dr. Fudenberg presented his research at the National Vaccine Information Center's (NVIC) International Vaccine Conference, Arlington, VA September, 1997. According to the John's Hopkins Newsletter Nov 1998, Alzheimer's is expected to quadruple and that certainly seems to be occurring.

Sherri J. Tenpenny, D.O., a nationally renowned and respected vaccine expert advises every consumer to read the package insert on every vaccine [WWW.MERCOLA.COM/2003/JAN/25/pediarix.htm]. Some other additives, adjuvants and contaminants that may be listed on an insert ingredient list are:

- VERO (monkey) cells -- potentially containing the SV40 virus incriminated in several different cancers, including leukemia.
- Bovine extract, bovine casein and calf (bovine) sera -- It is common knowledge that bovine blood products can be contaminated with viruses, including "mad cow disease" and bovine viral diarrhea virus (BVDV) is the one most often contaminating fetal bovine serum.
- Formaldehyde -- a chemical that has caused cancer in laboratory animals and may cause cancer in humans. There is no known threshold level below which cancer risk does not exist. [WWW.NSC.ORG/ EHC/ INDOOR/ FORMALD.HTM]
- Glutaraldehyde -- a toxic chemical that is used for cold sterilization of medical and dental equipment. There is no Occupational Safety and Health Administration (OSHA) permissible exposure limit. [WWW.AFSCME.ORG/ HEALTH/ FAQ-GLUT.HTM]
- 2-Phenoxyethanol -- the chemical name for antifreeze

An excellent website that tells about not only all vaccine content and suggested timing but also possible adverse reactions, etc. is WWW.KNOW-VACCINES.ORG/FAQ.HTML#3A.

Vaccine Numbers & Frequency

The sheer number of "shots" given to our children and our animals is becoming overwhelming. The current childhood immunization schedule calls for approximately twenty injections in the first two years of life and, with the constant development and introduction of new vaccines, that number will continue to increase. [WWW.INTERNETWIRE.COM/IWIRE/RELEASE_HTML_B1? RELEASE_ID=50035]

These injections begin when the child is only hours old, long before leaving the hospital with **Hepatitis B**, which is rarely even encountered by most children and continuing on with **DTaP** (diptheria, tetanus, & the newer, "safer" acellular pertussis or whooping cough), **Hib** (haemophilus influenzae type B), **Polio** (inactivated polio vaccine, IPV, is the injectable form recommended over the oral polio vaccine, OPV, as of Jan 1, 2000), **MMR** (measles, mumps & rubella which also has a high incidence of neurological effects), and **Varicella** (chicken pox). Others are frequently added to these "most popular" ten.

Ronald Schultz, a researcher at University of Wisconsin-Madison, suggests in guidelines published in Trends, the <u>Journal of the American Animal Hospital Association</u>, that annual vaccinations to prevent rabies, distemper and other lifethreatening diseases are not necessary, and their side effects may, in fact, hurt the dogs the vaccines were supposed to protect. Schultz recommends dogs receive the major shots once every three years and less critical vaccines only in certain instances. Dr. Schultz became convinced American dogs were

being over-vaccinated after conducting years of clinical trials measuring the potency of vaccinations. His studies showed a rabies vaccine lasts about three years, frequently much longer, while the three other core vaccines for the most dangerous canine diseases lasted seven years or more, he said. Veterinarians have recommended annual shots of many of these vaccines for decades. Schultz said that puts dogs at risk for infrequent but potentially serious side effects including skin problems, allergic reactions and autoimmune diseases. "These adverse reactions have caused many veterinarians to rethink the issue of vaccination," Schultz said. "The idea that unnecessary vaccines can cause serious side effects is in direct conflict with sound medical practices." Other groups supporting the new guidelines include the American Colleges of Veterinary Internal Medicine, Veterinary Microbiology and the American Association of Veterinary Immunologists.

Don Hamilton, DVM concurs:

"A practice that was started many years ago and that lacks scientific validity or verification is annual revaccinations. Almost without exception there is no immunologic requirement for annual revaccinations. Immunity to viruses persists for years or for the life of the animal. Successful vaccination to most bacterial pathogens produces an immunologic memory that remains for years, allowing an animal to develop a protective anamnestic (secondary) response when exposed to virulent organisms. Only the immune response to toxins requires boosters (e.g. tetanus toxin booster, in humans, is recommended once every 7-10 years). And no toxin vaccines are currently used for dogs and cats. Furthermore, revaccination with most viral vaccines fails to stimulate an anamnestic (secondary) response as a result of interference by existing antibody (similar to maternal antibody interference). The practice of annual vaccination in our opinion should be considered of questionable efficacy unless it is used as a mechanism to provide an annual physical examination or is required by law (i.e., certain states require annual revaccination for rabies)." [WWW.SHIRLEYS-WELLNESS-CAFE.COM/PETVACC.HTM]

Strangely enough, many events and barns are now even requiring rabies vaccination for horses apparently regardless of the fact that rabies can only be spread via the bite of an infected animal; I wonder what the incidence of rabies really is in horses? This is a perfect example of what John Fudens, DVM (Affinity Holistic Clinic, 1171 Lakeview Road, Clearwater FL, 727-446-3603) refers to as is "Colorable" law as opposed to "Common or Constitutional" law. Colorable law refers to that "passed by Administrative agencies/bureaucrats who have been given so called authority to pass laws. Black's Law Dictionary 5th Edition defines colorable law as 'That which is in appearance only, and not in reality, what purports to be, hence counterfeit, feigned, having the appearance of truth.'" In other words, it is based on opinion, not necessarily fact, and with little to no precedence necessary.

Vaccine Effectiveness

It has long been argued by some researchers, that many disease states thought to have been eradicated by vaccines were actually on their way out in the natural course of events before vaccines were administered.

According to Richard H. Pitcairn, DVM, PhD: "Looking at the statistics available for smallpox, polio,

measles, and pertussis (whooping cough), we find that besides the fact that the incidence of these diseases was already declining before vaccination programs were enforced, the incidence actually increased once these programs were instituted. Some countries, looking at statistics showing this lack of efficacy and increase in disease incidence, together with deaths resulting from reactions to the vaccination, have terminated compulsory vaccination. When Australia did so in the case of the smallpox vaccine, smallpox virtually disappeared in that country (three cases in fifteen years). In the case of the polio vaccine, many European countries refused to systematically inoculate their citizens, yet polio epidemics also ended in these countries as well.

Measles is an especially interesting disease to look at because of its close similarity to canine distemper. The measles vaccine was introduced in 1963, even though in the United States and England a greater than 95% decline in the measles death rate had already occurred between 1915 and 1958. Also, the death rate from measles in the mid-1970s (post-vaccine) was exactly the same is it was in the early 1960s (pre-vaccine). A study by the World Health Organization concludes that chances are 14 times greater that measles will be contracted by those vaccinated against the disease than by those who have not been vaccinated. The federal government reported in 1985 that 80% of the 1,984 cases of measles occurred in people who had been properly vaccinated. More recently, outbreaks have continued to occur throughout the country, sometimes among 100% vaccinated populations." [WWW.CYBERPET.COM/CYBERDOG/ARTICLES/HEALTH/VACCINE.HTM]

Keith W. Wassung, nationally known author and speaker in the field of health education and research, goes to the heart of the matter challenging the theory of artificial immunity.

"The science of immunology is on a fast track due to recent advances in molecular biology and genetics research. Though there is still much to be learned, it has become evident that artificial immunity, stimulated by vaccination, is not even close to duplicating immunity received from natural exposure and may actually work in an immune suppressive fashion. Pressed by advancing technology and consumer demand, health care is slowly changing its focus from disease treatment to performance enhancement. Accompanying this will be an increased emphasis on nutrition, exercise, and structural integrity of the human frame, all of which maximize the body's innate healing power." [HTTP://WWW.VACCINATIONNEWS.COM/]

More from that previously mentioned English survey. The following shows the percentage of dogs contracting the very diseases for which they were vaccinated; this would indicate that either a) the vaccines either did not protect, or b) that the vaccine can cause the disease itself:

Hepatitis--63.6% occurred within three months
Parainfluenza--50% within three months
Parvovirus--68.2% within three months
Distemper--55.6% within three months
Leptospirosis--100% of dogs contracted leptospirosis within three months of vaccination.

Vaccine Contraindications

Because vaccinations have become so routine in everyone's minds ,and perhaps to save visits to the doctor/vet, vaccinations

IF YOU CHOOSE TO VACCINATE

- Vaccinate for only the most virulent or locally prevalent & dangerous diseases
- Before vaccinating, draw blood titers to generally assess immunity levels; immunity has in many instances been shown to last far longer than originally anticipated
- Only give one vaccine at a time rather than multi-valents which contain numerous vaccines in one injection; single vaccines lessen the chance of side-effects and if any occur, can be tracked more readily
- Space vaccinations out a minimum of 3-4 weeks between injections; rabies vaccines 3-6 months after any others
- Increase Ester-C® or Hiscorbadyne intake following label directions from 2 weeks before and continuing for 4 weeks afterward—some researchers suggest up to 3 grams of Vit C/day for an adult human; adjust for children/animals accordingly bearing in mind that Ester-C® is far more potent
- Immediately spray injection site with Release and cover with a Miracle Clay poultice to draw toxins; with animals, support digestion for at least 2 weeks with daily DynaPro
- If you are inclined towards homeopathics, Thuja (follow directions) is the generally recommended remedy as a follow up to prevent or diminish vaccine reactions
- Since vaccines are stressful, do not introduce any other stressful factor the same day of the vaccination such as other vaccines, deworming or heavy physical activity
- According to the AVMA and instructions included with each vaccine, no animal or human should receive a vaccination if health is compromised—even with just a cold; be sure to take temps prior to administering vaccines and if at all abnormal, do not vaccinate
- Consider checking with your holistic physician/veterinarian about the use of homeopathic nosodes in lieu of some or all vaccines
- Build basic immune system health by correct diet leading to an appropriately alkaline pH & overall reduced toxin loads

are frequently given even when directly contra-indicated by both the AVMA and vaccine package inserts. One of these contra-indications is illness. Stephen Tobin, DVM says:

". . . All vaccines are supposed to be given only to healthy animals. That is so stated in the package inserts. If an animal is sick, it is not supposed to be vaccinated. That is why vets are supposed to give an examination before giving the vaccination. Giving a vaccination to a sick animal is malpractice. Also, there is no vaccine that can be used, for the vaccine is only licensed for use in healthy animals. But how do you define healthy? If an animal is being treated by the vet for a problem, that is prima facie evidence that the animal is not healthy. If the vet insists the animal is healthy enough, but you think it is not, remind the vet that he is giving the vaccine off license, and that he and he alone is responsible for any problems that arise from the vaccination, as the manufacturer does not need to stand by a product that is used off license. In fact, it would be a good idea to get him to sign a statement saying just that." [HTTP://WWW.THENSOME.COM/VACCINATIONS.HTM]

"Sick" means anything from having a mild cold to a raging fever. It means from having a cough to having a cancer.

It means anything for which you, your child or your pet have taken, or are taking, any form of medication from aspirin to prescriptions. It means that your immune system is already being taxed.

It also means NEVER VACCINATE AGAIN if there has ever been a reaction to a vaccine. And reactions mean anything from a localized swelling to behavior/appetite/sleep changes, from lethargy to clumsiness, from silence to highpitched screaming, and so on. In other words, ANYTHING outside of normal for that individual constitutes a reaction and that individual should, I repeat, never again receive any vaccination.

Another contra-indication, but certainly one not listed in medical literature, is activity or other stressors. In other words, if your horse or dog in going on the show circuit or your child is going to be in a track meet or school play or you are getting ready for a cruise or big party, these are all stressors to the immune system. If the immune system is under stress, it cannot possibly respond appropriately to a forced invasion of pathogens without perhaps dire effects. Personally, we go a step further, and suggest that you and any individual/animal vaccinated take at least 24 hrs to go a bit slower than usual since the body is already in overload.

On Reporting of Adverse Vaccine Reactions . . .

Adverse reactions are not rare. In horses, we are hearing more and more frequently of serious *ataxia* (hind end weakness) and either abortion or malformed foals following the West Nile Vaccine and for years we have heard and witnessed abortions following the Rhino series (usually after the second shot) which is given to prevent abortions. This is just us hearing about a few horses.

Most people are totally perplexed as to what to do when confronted with adverse vaccine reactions especially when their physicians/veterinarians are unwilling to admit the possibility. However, any and all reactions should be reported to the FDA which maintains a database of Adverse Drug Reactions. It is imperative to use the reporting option WWW.FDA.GOV/CVM/INDEX/ADE/ADETOC.HTM and use form FDA 1932a. Or call 888/FDA-VETS. Manufacturers are required by law to report to the FDA any negative reports.

Another place to report that actually gets legislative attention quite quickly is your state's Legislative Audit and Budget Subcommittee/Ombudsman's Office......they do the reviews of all the publicly funded licensed boards, like the veterinary boards. When you submit something to the vet board simply copy it to this subcommittee. When the board's review comes up, the subcommittee must contact you to hear your side of the issue. It is the legislature's way of checking on how responsive the board has been to the concerns of the public and to be sure the vet board doesn't just stonewall you.

Since 1990, the U.S. government has collected many thousands of reports of damage caused by vaccines. This database, called the Vaccine Adverse Event Reporting System (VAERS), is available for anyone to download from WWW.MEDALERTS.ORG/VAERSDb/. However, the data available from the government is difficult to use for these reasons:

- It is broken up into separate databases for each year.
- Each year's data is split into two different files: one with the details of the case, and another with specific information about the vaccinations that were given.

- The data is in raw form, and must be imported into a real database system before any analysis can be done.
- There are some formatting errors in these files.

The site organizes the government's VAERS data and makes it available for online searching. Before using this data, please read the government's warning about the data.

Hopefully, as more people realize they can report reactions, they will. And hopefully, as such reports increase as they are bound to, they will be listened to.

Blood Titers

Many holistic vets suggest drawing blood titers annually to check for immune levels before automatically giving vaccines. Horse Journal, Jan 2002 states:

"If you are concerned about over-vaccination and would like to pay for an assessment of your horses' blood titers, ask your vet to contact your state's Department of Agriculture, Division of Animal Health Diagnostic Laboratory. These labs are far more likely to be set up to do the necessary serology than are commercial labs. The USDA Veterinary/Animal Biologics Lab (515/663-7331) is a good general contact for questions about serological testing and/or laboratory facilities. You can also contact the National Cooperation for Laboratory Accreditation for a list of certified labs: NACLA Secretariat, Office of Standards Services, National Institute of Standards and Technology, PO Box 4045, Gaithersburg, MD 20885-4045, 301/975-6472 or email NACLASECRETARIAT@NIST.GOV."

Although more and more insurance companies and some counties are now accepting high titer counts in lieu of vaccinations for animals, unfortunately even titers do not always paint an accurate picture. As they depend on stimulation at the time of the draw, they can exhibit different results even at different times of the same day.

Homeopathics

Many homeopaths prefer to use homeopathic nosodes in lieu of standard vaccinations. Widely used in Europe for decades, they are just now gaining some acceptance in this country. Unfortunately, nosodes will not show up with antibodies on a titer test since they do not work in the same way as standard vaccines. Because of this, they can be difficult to use in the case of rabies as they will not provide any kind of legal help.

More accepted is the use of various homeopathic remedies as guards against side-effects following standard vaccinations. Since homeopathic tinctures are given very individualistically, to use the allopathic concept of "this medicine for this disease" does not necessarily hold true. It is far safer to check with your homeopathic physician/veterinarian for advice in this matter.

However, that said, there are a few common remedies which do seem to hold a certain universal truth. *Thuja* (30c) should be given at the same time as any vaccination and many claim it will prevent vaccine related problems. Warts on horses are frequently due to vaccinosis and usually disappear when the animal is given *Thuja*. *Lachesis* can be used as a Rabies vaccination antidote and *Hypericum* for neurological effects while *Ledum* is frequently used in lieu of tetanus toxoids.

Vitamin C Considerations

Many times babies are taken to the emergency rooms with blood clots in the brain, bruises and hemorrhage, even fractures, and the parents or caregivers are charged with child abuse.

Titers: What Do They Tell Us?

by Christie Keith; www.caberfeidh.com/Titers.htm

Many people who are trying to reduce vaccination are interested in using "titers" as a test to measure whether or not their dog is still immune to a disease. They often speak of titers as showing "high" or "low" immunity, or of "having to" re-vaccinate when a titer is low. While there is not a tremendous amount of research on titers in dogs, I think it's fair to say there *is* quite a bit of misunderstanding on the part of pet owners, and even many veterinarians, as to what a titer test does or does not tell us.

A "titer" is a measurement of how much antibody to a certain virus (or other antigen) is circulating in the blood at that moment. Titers are usually expressed in a ratio, which is how many times they could dilute the blood until they couldn't find antibodies anymore. So let's say they could dilute it two times only and then they didn't find anymore, that would be a titer of 1:2. If they could dilute it a thousand times before they couldn't find any antibody, then that would be a titer of 1:1000.

A titer test does not and cannot measure immunity, because immunity to specific viruses is reliant not on antibodies, but on memory cells, which we have no way to measure. Memory cells are what prompt the immune system to create antibodies and dispatch them to an infection caused by the virus it "remembers." Memory cells don't need "reminders" in the form of re-vaccination to keep producing antibodies. (*Science*, 1999; "Immune system's memory does not need reminders.") If the animal recently encountered the virus, their level of antibody might be quite high, but that doesn't mean they are more immune than an animal with a lower titer.

Dr. Donald Hamilton, a holistic veterinarian and author of Homeopathic Care for Cats and Dogs: Small Doses for Small Animals, compares antibodies to fire engines. Just because the fire engines aren't racing all over town all the time, and the fire fighters are back in the firehouse, sleeping, eating or playing cards, doesn't mean they aren't ready to jump in their trucks and head to the fire when the alarm sounds.

So what does a low or zero titer tell you? Nothing much. A high titer is strongly correlated with either recent infection or good immunity, but the opposite isn't true. You can use a titer test about two weeks after vaccination to determine if the vaccination was effective in stimulating an immune response (in other words, if the animal was successfully immunized from the vaccine), but testing that same animal's titer years down the road doesn't really tell you anything new.

The only other uses for titer tests in my opinion are to check immunization status on dogs with an unknown history, to provide documentation for legal purposes such as travel, or licensing in areas that accept rabies titers in lieu of rabies vaccination, to satisfy curiosity, or to provide peace of mind for pet owners. However, for every person who has his or her mind relieved by finding his or her dog "has a titer" to a disease they were worried about, there is someone else who now thinks his or her dog or cat is "unprotected" against a disease to which they are most likely really immune.

However, Alan Clemetson, MD, Professor Emeritus, Tulane University School of Medicine points out in the <u>Townsend</u> <u>Letter for Doctors and Patients</u>, Jan 2002, that such hemorrhages and all are symptoms of infantile **scurvy** or **vitamin C deficiency**. Infant vaccines can deplete vitamin C by raising blood histamine levels and then the endothelial cells lining the inside of the blood vessels become separated from one another. Infection or the stress of a cold can also halve the blood levels of vitamin C in just a matter of 24 hours. Dr. Clemetson said.

"It has been shown that the toxins or toxoids of the usual inoculants (vaccines) cause increased blood histamine levels in animals. . . It will be possible to study the protective effects of vitamin C in reducing histaminemia. Ascorbic acid (vitamin C) aids the conversion of histamine to hydanton-5-acetic acid for elimination and has been shown to protect against the toxicity of inoculations, both in animals and humans. Even some soldiers going to the Gulf War suffered severe reactions to some of their inoculations, so this matter is of concern to the armed forces as well as the rest of us. . . we are defective mammals, lacking fur and lacking the ability to make our own vitamin C. We take great care to provide ourselves with clothes and housing to make up for our lack of fur, but we do not always take enough care to make up for our inborn error of metabolism. It is odd that medical schools, which teach so much about DNA and the genetic code, do not pay more attention to teaching nutrition and about a major human genetic defect shared by us all."

Mercury, copper and other heavy metals in the vac-

cines are also shown to raise blood histamine levels. Subperiosteal hemorrhages (the capillary fragility in the covering of the bone) can lift the *periosteum* right off the growing bone and be the cause of spontaneous fractures (think race horses). Dr. Clemetson goes on to point out that C deficiency also impairs the ability of the amino acids lysine and proline to form collagen and the foundation for fibrous tissue, bone, cartilage and tooth dentin. In a case where the parents were accused of murder of their young infant, based on the bruising, fractures, etc. revealed in autopsy, it was found that the baby had been premature. The mother said she was too sick to take her vitamins, and actually lost weight during the pregnancy. This premature, malnourished baby was then vaccinated at 8 weeks with oral polio, DPT, influenza B, and hepatitis B. The baby developed a high pitched cry and a fever of 105, and after respiratory arrest at home 2 days later, died at the hospital at age 10 weeks. The father is serving a prison sentence for murder after the finding of "shaken baby syndrome."

Another physician recognizing the value of Vitamin C is Matthias Rath, M.D. who immigrated from Germany to become the first Director of Cardiovascular Research at the Linus Pauling Institute in Palo Alto, California. In recognition of his civil courage against the pharmaceutical interests which he believes are undermining appropriate research and his efforts on behalf of the people of the world, Dr. Rath received the prestigious 2001 "Bulwark of Liberty Award" from the American Preventive Medical Association. On his Foundation's website [WWW4.DR-RATH-FOUNDATION.ORG] he states:

"Dozens of studies with different viruses have all confirmed that there is no known virus that does not respond to vitamin C. In a study published in the Proceedings of the National Academy of Sciences USA, it was shown that vitamin C alone can block even the HIV/AIDS-Virus by more than 99 % (Proceedings Natl. Acad. Sci. USA, 1990, 87, 7245-9)."

Conclusion

We cannot help but consider the following:

- Why are we stressing infant (human and animal alike) immune systems with vaccines for diseases that are far less than fatal in their natural states and/or for those it is highly improbable that they will be exposed (such as the Hepatitis B vaccine given just hours old)?
- Why are we vaccinating unformed immune systems at all when we know from scientific study that this depletes the thymus gland of the very cells required for full immune response as the individual matures?
- Why is this the most vaccinated country in the world, for both humans and animals, yet the increase of fatal or seriously debilitating neuromuscular diseases is frightening to those examining the trends?
- Some statistics show that malaria kills 3,000 children daily in Africa; why are we not outraged at this? Could it be there is no money to be made there?
- Who/what is behind this insane hyperbole of fear: today, fear of West Nile Virus and SARS; tomorrow, what will it be? Who stands to gain from this? Can we follow the money trail?

We believe in the ultimate healing power of nature rather than solely in the hubris of funded science. Too much information is being left out of too many equations to the detriment of all. Living in fear of something can actually create that which we fear—disease included. We prefer instead to focus on health and well-being and think that eating species-appropriate optimum diets, supplementing with **DYNAMITE**® bio-available minerals and their **Hiscorbadyne** (Ester-C®-based formula), following reasonable hygiene suggestions and avoiding toxins wherever possible should provide an optimum immune system for any species and most individuals.

For those animals under stress such as campaigning, training or on a breeding/boarding facility with frequent visitors, many owners prefer to keep them on a more rigorous **Hiscorbadyne** regimen along with quarterly **SOD** rounds or minimal daily usage. Cyclical **SOD** is also recommended for dark skinned animals whose immune systems tend to require more copper or simply when an animal is stressed or you think it appropriate.

We also believe that individuals require occasional immune system challenges, such as colds or flu, in order to practice mobilizing the system with relatively minor diseases so it can be primed and ready for major challenges. Sort of like the armed services practicing war games so they are prepared for full combat situations. It makes little sense to me that we would deliberately short-circuit Mother Nature's

beautiful work of art because we do not yet fully, and may never, understand its miracle of being. It seems so obvious and logical that the more toxins one pours into a system, the harder it has to work in order to even function on a minimal basis depending on it's basic genetic strength.

But what to do when confronted by an event or barn or school that requires vaccinations we choose not to give? For schools, simply turn over the registration form; most have an area in very small print, where you can state either religious or philosophical differences. For events/barns/counties, education is the key here; remember, vaccines are "Colorable" laws and therefore changeable.

In either instance, you also, of course, have the choice of not attending. Home schooling has become very popular in recent years and has also been shown to be even more effective than crowded public schools where teachers have little control over students. And in our opinion, no boarding facility or event is worth taking a chance on our animals' long-term health.

The insistence of these groups on vaccination has never ceased to amaze me. One would think that they are afraid their vaccinated members might "catch" something from the "unprotected" member. Of course, following this line of thought out logically, that would indicate they are concerned that the vaccines don't work. Perhaps they are correct. We heard of one distributor, a national campaigner, who sold a mare across country. The mare arrived hale and hearty, but the new owners became enraged when they discovered no vaccine history. Before they could get a vet out to "shoot" her up, the whole barn came down with strangles for which they had all been vaccinated. Guess who the sole healthy horse was? Yep, the unvaccinated mare! And stories like this abound within the unvaccinated community.

Ultimately, we must each learn to question rather than to just blindly accept "popular" or "common" advise. After all, doctors are human like the rest of us and many simply do not have the time to read even their own Journals let alone do research into areas which may seem bizarre in light of their education.

Rather than heaping the responsibility for our own and our animals' health on someone else, let us each take more personal responsibility, do our own research, come to our own conclusions and perhaps even share those conclusions with our health practitioners.

Along with the books mentioned in the body of the article, here are some websites which we have found personally helpful:

- WWW.MERCOLA.COM/ARTICLE/VACCINES/PREVENT_HEALTH.HTM
- WWW.KNOW-VACCINES.ORG/FAQ.HTML#3A
- www.909shot.com
- WWW.VACCINES.NET/
- WWW.PCSLINK.COM/~KLOVE/IMMUNIZE.HTM
- WWW.ACCESS1.NET/VIA/
- WWW.ANTHRAXVACCINE.ORG
- WWW.VACCINATIONNEWS.COM
- WWW.VACCINEWEBSITE.COM
- WWW.THEDOCTORWITHIN.COM/INDEX1.HTML
- WWW.VACLIB.ORG/PDF/EXEMPTION.HTM (State Laws)
- WWW.AHVMA.ORG (listings of holistic vets by area)