THE ENTIRE VACCINE INDUSTRY IS BEING EXPOSED FOR UNPROVEN ASSUMPTIONS AND MISREPRESENTATIONS OF DATA

By

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There are no safe vaccines. There never was and never will be with the current misrepresented data and unproven assumptions that have spanned over a century in the making. The fact is, every single vaccine is now being exposed for the lack of demonstrated evidence to actually prevent a single case of disease over a placebo. Think it’s an exaggeration? Think again.

The reality of two centuries of morality graphs and disease declines and vaccine effectiveness vs. dangers is always in stark contradiction to the claims of government health officials. People are now listening more than ever and the message is spreading like wild fire. The evidence being highlighted is that the historical significance and effectiveness of vaccines is nothing more than repeated myths absent of any real-life data.

The questionable contributions of vaccines and other medical measures were highlighted with incredible accuracy in 1977 by John and Sonja Mc Kinlay who brilliantly detailed how medical care is generally unrelated to improvements in the health of populations. (The Milbank Memorial Fund Quarterly. Health and Society. The Questionable Contribution of Medical Measures to the Decline of Morality in the United States in the Twentieth Century)

“History is replete with examples of how, understandably enough, self-interested individuals and groups denounced popular customs and beliefs which appeared to threaten their own domains of practice, thereby rendering them heresies (for example physicians’ denunciation of midwives as witches during the Middle Ages),” they wrote.

Not much has changed. The pro-vaccine camps have been dismissing the anti-vaccine community for quite some time (even their own peers who are physicians) as they have resorted to some very nasty measures to ensure that people do not discover the truth about vaccines. Marco Torres wrote an excellent article in 2010 on how Everything is Lie in our current mass exchange of mainstream information and any truth still left scattered on the internet is picked up and tossed around by disinformation specialists, as Torres points out in the middle of the article (Twenty-Five Rules of Disinformation).

So what’s different today about our knowledge on vaccines than it was thirty years ago? Everything. Every month that passes is exposing more quackery and myths about vaccination and their misrepresented benefits. More people are becoming aware so the truth can no longer be suppressed. A report which is again being highlighted by the alternative media (of course) is a remarkable study published in the Cochrane Library
which found no evidence of benefit for influenza vaccinations and also noted that the vast majority of trials were inadequate.

The authors found that vaccines administered parenterally, that is, outside the digestive tract, usually meaning by injection, reduced influenza-life symptoms by 4%. They found no evidence that vaccination prevents viral transmission putting the whole herd immunity myth once again into question.

The maximum success rate of the flu vaccines is 6.25% which is a pretty big under-achievement considering that the average reaction to placebo injections of distilled water is 30%.

More independent scientific studies are also coming forth showing evidence of massive fetal toxicity associated with flu vaccines. Recent research I reported on is now published in the journal *Human & Experimental Toxicology* showing a 4.250% increase in fetal deaths according to *Vaccine Adverse Event Reporting System* (VAERS) data when comparing three consecutive influenza seasons.

The HPV vaccine is another excellent example of a massive cover-up that is incrementally being exposed. The most recent scientific study was found online at PubMed from the National Institutes of Health --- *Human Papillomavirus (HPV) Vaccines as an Option for Preventing Cervical Malignancies: (How) Effective and Safe?*

The study carried out a systematic review of HPV vaccines pre- and post-licensure trials to assess the evidence of their effectiveness and safety. They found that HPV vaccine clinical trials design, and data interpretation of both efficacy and safety outcomes, were largely inadequate. They also noted an abundance of selective reporting of results from clinical trials (i.e., exclusion of vaccine efficacy figures related to study subgroups in which efficacy might be lower or even negative from peer-reviewed publications).

The authors note the widespread optimism regarding HPV vaccines long-term benefits appears to rest on a number of unproven assumptions (or such which are at odds with factual evidence) and significant misinterpretation of available data. For example, the claim that HPV vaccination will result in approximately 70% reduction of cervical cancers is made despite the fact that the clinical trials data have not demonstrated to date that the vaccines have actually prevented a single case of cervical cancer (let alone cervical cancer death), nor that the current overly optimistic surrogate marker-based extrapolations are justified.

Likewise, the notion that HPV vaccines have an impressive safety profile is only supported by a highly flawed design of safety trials and is contrary to accumulating evidence from vaccine safety surveillance databases and case reports which continue to link HPV vaccination to serious adverse outcomes (including death and permanent disabilities).
Late last year, the *Annals of Medicine* exposed the fraudulent nature of human papillamavirus (HPV) vaccines such as Gardasil and Cervarix. Key messages the researchers report include a lack of evidence of any HPV vaccines in preventing cervical cancer and lack of evaluation of health risks.

Vaccinations such as HPV are not preventative but they do compromise safety, and physicians will never provide accurate explanations of vaccine risks and benefits because they do not know themselves. Physicians can only rely on the information from vaccine manufacturers and since long-term pharmacokinetic effects which study the bodily absorption, distribution, metabolism and excretion of vaccines and their ingredients are never examined or analyzed, a physician can never fully inform a patient of any benefits or risks. That ladies and gentlemen is the *bottom line*!

Take into consideration all of the unintended (or perhaps intended) mutations that are taking place with whooping cough, polio and hepatitis vaccines. Or what if we consider all of the known and very dangerous excipients and preservatives (including thimerosal) in flu vaccines that continue appearing year after year as evidenced in approved 20011/2012 influenza line-up of vaccines introduced last year. Stay tuned as I will soon release my report for the 20012/2013 flu season which will clearly show that nothing has changed.

Nothing ever will change when it comes to the effectiveness or the preventative nature of vaccines. That’s because they aren’t effective and they will never prevent disease. The fact is, they were never designed to. When it comes to disease prevention, vaccines are a myth of an order and magnitude so large, that most people could never really conceive the true historical facts on why vaccines were first developed (and that had everything to do with the promotion and not prevention of disease). That’s not something I usually get into, but the cat is out of the bag and the vaccine industry is crumbling. It’s only a matter of time before every single human being is faced with the reality that vaccination and immunization are impossible to interrelate.

The validity and scientific merit of the vaccine industry is now hanging by a thread and all I can say is…it’s about time!

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