Newsletter 35 The Damage caused by HPV Vaccines and Other Vaccines that is not acknowledged by the Australian Government or Media 6 September 2013

Thank you for joining up to this newsletter and supporting research into children's health. At the last hour of the election campaign the Liberal party has (apparently incorrectly) announced the possibility of an 'opt out' system for censoring the internet. It appears that Australians are (rightly) unhappy to have an 'opt out' system for censoring internet content but they have happily accepted an 'opt out' system for the number of vaccines they put into their children's bodies - even though they do not know what is in a vaccine.

Attached is a list of the antibiotics, preservatives and fillers used in the multiple vaccines (24 doses) that are combined in an infant's body in the first years of life - when the body systems are still developing. The government added 3 new vaccines to this schedule in 2012 before raising this benefit to \$2,100 and ensuring that only parents that have 'fully vaccinated' their babies at 1, 2, and 5 years of age could receive this welfare payment — unless a doctor's signature is provided.

In addition, the Australian Department of Health approved the HPV vaccine for all girls and boys in Australia when the benefits and risks of this vaccine are still unknown [1]. This vaccine has been withdrawn in India and Japan because of the serious adverse events that are occurring globally to many individuals who have received this vaccine.

In the link below - Subterfuge in a Syringe [2] - the adverse events that are being associated with HPV vaccines have been listed. These include convulsions, asthma, demyelinating diseases (MS), encephalomyelitis, and autoimmune conditions - thyroiditis and arthritis.

1200 girls from the trials were left with permanent chronic illness in India. These adverse events are listed on the package inserts for most vaccines. Please ask your doctor to provide you with the package insert *before* agreeing to vaccinate yourself or your child.

In the second article below (*Court 'Glare' on Harmful Costly Vaccines* [3]) a medical practitioner in India has petitioned to ban the pentavalent (5 in 1 vaccine for infants) that

contains diphtheria, pertussis, tetanus, influenza B (HiB) and Hepatitis B. This is because 'the disease burdens of influenza type B (HiB) and Hep B are so low that the deaths from the vaccines outnumber the lives saved from (these) diseases'. This vaccine has been banned or not used in Japan, Canada, America, UK and European countries. There were 21 deaths reported to this vaccine in India last year and it is a much more costly vaccine (like HPV vaccines) than the DTP vaccine that has been used for decades. The article goes on to describe the HPV vaccine trials as a clear case of 'child abuse' and a 'violation of fundamental human rights'.

Yet the Australian Health Department and the mainstream Australian media continue to say 'there is no other side to vaccination' and they will not report on these issues. I have recently had an HPV paper accepted for presentation at the 3rd World Congress on Cancer Science and Therapy (San Francisco, Oct 2013) titled 'HPV vaccines have not been proven to be cost-effective in countries with comprehensive Pap screening and surgery'.

This paper provides evidence that the risks and benefits of HPV vaccines are still unknown. The paper has also been published in the *Infectious Agents and Cancer Journal* (June 2013). It has been researched in the Faculty of Law, Humanities and Arts at Wollongong University (School of Social Sciences, Communication and Media). Here is a link to the published article http://www.infectagentscancer.com/content/pdf/1750-9378-8-21.pdf

The mainstream media is not providing the public with this medical literature and the Health Department that has many conflicts of interest with industry (Ken Baxter Report 2010 [4] is not acknowledging this science. There is strong evidence of the harm this expensive and unproven vaccine is causing in the Australian population and this cannot be determined from the inadequate post-vaccination monitoring system that the TGA has implemented – a TGA that is 100% funded by industry.

In February this year many concerned Australians started a petition to ensure that our right to choose preventative medical procedures in public health policies is protected. Politicians are currently referring to the Australian Human Rights Commission as the 'Anti-Discrimination Commission' because there is no Commissioner to protect fundamental

human rights in Australia (The Australian Newspaper, 5.09.13). This explains why this government body is not assisting consumers to protect our bodily integrity - the right to choose what we inject into our 'own' healthy bodies.

Please sign the petition below (and forward it to family and friends) and it will be presented to the incoming government to request that our right to choose the number of vaccines we use in our bodies is protected in an amendment to the current Human Rights Act or in a new Bill of Rights for the Australian people.

http://www.avaaz.org/en/petition/My Body My Choice/?cDZEidb

Here are the links and references for this information:

- 1. Tomljenovic L and Shaw CA. 2013. Human papillomavirus (HPV) vaccine policy and evidence-based medicine: Are they at odds? *Annals of Medicine*. March 45: 2: pp182-193.
- 2. Subterfuge in a Syringe, 2013, http://sanevax.org/india-hpv-vaccines-subterfuge-in-a-syringe/
- India Legal Correspondent,2013, 'Court Glare on Harmful Costly Vaccines, The Telegraph, September, http://www.telegraphindia.com/1130903/jsp/nation/story 17305212.jsp#.Uik0VsY3 DZx
- 4. Baxter K. 2010. Structural Barriers to Reform of the Australian Health and public hospital system. Australian Centre for Health Research (ACHR). Canberra: TFG International Pty Ltd. January.

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