

To the Honorable Minister for Health Tanya Plibersek

CC: The Office of Health Protection, Federal Human Rights Department, Senator Bob Brown,
Independent Andrew Wilkie

24.2.12

Dear Minister,

It was disappointing to see that despite the community concern and the unanswered questions about Gardasil (see below) this vaccine is being recommended by the PBAC for use in boys as well as girls (The Weekend Australian, 17 Dec) . This is despite the misleading information that is provided to school students about this vaccine and the lack of data on the degree of harm it has caused in women because there is no long-term systematic monitoring of the side-effects. The true effect in the population can never be evaluated.

When this vaccine was introduced in 2007 Australian school students were not informed of the following facts:

- This is an HPV vaccine not a cervical cancer (cc) vaccine (it has never been demonstrated to prevent any cc)
- that the chances of dying from cervical cancer in Australia were very low – 1.9/100,000 women
- Even if infected the majority of HPV infections do not progress to cervical cancer or warts.
- There are 20 strains of HPV that are associated with cc and Gardasil only protects against 2
- Not all women are at equal risk of getting cc. Environmental factors are necessary and these include:
 1. Multiple partners for the male and female.
 2. The presence of other viruses e.g. HPV + HSV-2
 3. Prostitution
 4. Sex without a condom/microbicides
 5. Low socioeconomic status (poor hygiene/sanitation/nutrition conducive to STD'S)
 6. Immunosuppression
 7. Smoking
 8. Oral contraceptives

Young girls and women have been misled about the benefits of this vaccine and not informed at all about the risks. Below is a letter that was sent to Professor Fiona Stanley, Professor Jim Bishop and Health Minister Nicola Roxon early in 2011. All of these individuals have retired from their positions and no-one has answered the questions that are presented in this letter (below). The letter has also been sent to the TGA (24.8.11) but again there has been no reply.

Globally there has been 24,184 adverse reactions and 108 deaths (www.sanevax.org) but these are not recorded by the government regulator, the TGA, as they only monitor adverse-events in Australia – not globally.

This drug was implemented as a preventative medical procedure at a cost of approximately \$430 million over 4 years even though the majority of girls/women on this drug are not at risk of getting cervical cancer. This is not cost-effective and now the government will expand this to all boys on the basis that 'there is some evidence' (from pharmaceutically funded trials) it will protect against anal and penal cancers.

The TGA which approves drugs for the community is represented by members with conflicts of interest with industry allowing them to make money from the decisions they make. The doctors also make money from decisions to vaccinate the population. The TGA is also 100% funded by the pharmaceutical companies. This is not disinterested science. The community who is interested in the health of the population is not equally represented on the advisory board. The risks of vaccines are not being properly represented in vaccination policies and the benefits are overstated.

I will attach the letter that has been sent to many health authorities and remains unanswered. Please could you ensure that these questions are addressed and that public health is a priority.

If this drug is to be used for all girls and boys before they become sexually active, I hope that the government can demonstrate the cost-effectiveness of such a decision. In addition, I hope you will ensure that the public is accurately educated about the benefits and risks of using this drug. It is also essential that active monitoring systems are implemented in order to determine the long-term benefits and harm it causes in the population. The true benefits and risks of this drug in the population are unknown: this amounts to an experiment. Benefits and risks can only be evaluated with active, systematic monitoring systems.

This issue is also a human rights issue as healthy people are now being discriminated against in the workplace and in schools based upon vaccination status. I will copy this letter to the community and hope that consumer's questions will be answered and that our health is a priority. Please read and answer the questions below. (Letter: HPV Vaccine: Answers Needed from Government Health Ministers)

Kind regards,

Judy Wilyman

PhD Candidate