



## Newsletter 195 WA Government reverses Informed Consent for Flu Vaccine to 'Opt Out' System

6 April 2018

The West Australian Health Department is considering recommending that the flu vaccine be a [Key Performance Indicator \(KPI\)](#) for all healthcare workers to increase the number of staff being vaccinated against the flu this year (3 April 2018). This is despite the evidence showing that the higher the number of people getting the flu vaccine the [greater the number of hospitalisations and deaths](#) to flu.

The recommendation is also being made despite the Cochrane Database stating in 2008 (when flu vaccine was first [trialled in WA for children under 5 with disasterous consequences](#)) that "the efficacy of inactivated influenza vaccine in children under two was found to be similar to placebo" (that is, not effective at all) and that "childhood influenza vaccines are not good at preventing influenza-like illness in children over two" ([Fact Sheet on Childhood Influenza](#)).

Any recent up-dates of this efficacy information on the Cochrane database needs to be assessed with respect to the independence of the study and the parameters that were used to form the conclusions.

These facts regarding efficacy and lack of safety were confirmed on the Prescribing Information (PI) sheet for the Fluvax/Afluria vaccine (CSL Ltd 2007):

- 'There have been no controlled studies demonstrating a decrease in influenza disease after vaccination with Fluvax/Afluria'
- Vaccination with Fluvax/Afluria may not protect all individuals
- 'Safety and effectiveness of Flulaval in paediatric patients has not been established'. Nor has it been evaluated for carcinogenic, mutagenic or fertility impairment (PI Flulaval 2013-14).

So regardless of the absence of this safety and efficacy data the West Australian Health Department is currently recommending the influenza vaccine to pregnant women and children -

even though the main consequences of flu in children and adults is **absenteeism from school and work** - it is not a serious illness in the majority of children or adults.

The PI also lists numerous serious adverse health events (AE's) that have been associated with flu vaccines for decades and many of which have been **causally linked to vaccines by the Institute of Medicine:**

**Hives, asthma, allergies, hypersensitivity, anaphylaxis, autoimmune diseases, facial paralysis, neurological disorders, convulsions, seizures, Guillain-Barre Syndrome (GBS), neuritis, myositis, polyneuropathy, encephalomyelitis, thrombocytopenia, transverse myelitis, vasculitis, breathlessness and collapsing, etc.**

Please check out the [compensation claims paid to vaccine-injured victims](#) in the US from their **Vaccine Injury Compensation Program (VICP)** and note how many of these serious injuries are from influenza vaccines.

Please also note that Australia **does not have** a VICP to legitimise the harm that vaccines are causing in the Australian population and **nor do we want one**. Australians want fully informed consent and choice in all the vaccines that are recommended by the government.

Australia also does not have an independent body monitoring the harm caused by vaccines. This is why the Australian government states that only 1-10% of AE's to vaccines are recorded by the Australian Therapeutic Goods Administrator (TGA). This regulatory body, like the US FDA, is 100% funded by industry and it is responsible for approving vaccines for the market **and monitoring their safety in the population** - this is a serious conflict of interest. [Here are the consequences of this situation](#) to human health.

Allergies are known to occur due to the egg protein, antibiotics, thimerosal (mercury compound), formaldehyde, polysorbate 80 etc in influenza vaccines. These components are listed in the Australian government's components of vaccines in the **Australian Immunisation Handbook (AIH Ed. 9 and 10)**.

Thimerosal (mercury compound) was listed as present in influenza vaccines and the paediatric and adult hepatitis B vaccine - Engerix-B **up to 2013** as stated by the Australian government in the [AIH 9th edition](#) - even though the Australian government told Australians that mercury had been removed from all Australian vaccines by 2000.

Mercury compound (thimerosal) was also still present in the multi-dose vials of some influenza vaccines and **infanrix-hexa vaccine** given to infants at least up to 2010 in Australia - as stated by **Austin et al 2010** provided in my [PhD thesis](#).

A family history of allergies/hypersensitivity leads to the potential for an anaphylactic reaction after receiving an influenza vaccine or any vaccine.

Why are Australians being asked to take this risk for a disease that is **not a serious risk to the majority of Australians** and without being informed of the serious AE's associated and / or causally linked to this vaccine?

Further, why is the West Australian government considering removing informed consent and implementing a default 'opt out' system when this violates all international human rights laws and the doctor's good medical practice code of conduct - stated in the Geneva Convention and the

Nuremberg Code?

The **Australian government** is able to hide these facts from the public because it has censored the vaccination debate in the Australian media and the **University of Wollongong** is complicit in this censorship because it has allowed **Professor Heather Yeatman**, a nutritionalist without qualifications in vaccination science or policy, to promote the government's false claims about the safety and efficacy of vaccines, on the UOW website when my PhD has provided evidence that there are **NO safety studies** that have tested the recommended vaccines by using an **inert (saline) placebo** in the unvaccinated group in clinical trials.

The studies that the Australian government is using in phase 1-3 clinical trials use aluminium adjuvant or a previously marketed vaccine as **the placebo** to claim there is no difference in the number of AE's in vaccinated and unvaccinated groups. These substances are **not inert placebos** and they are linked to causing autoimmune diseases, hypersensitivity and neurological damage in humans. Hence the Australian government is using **pseudo-science** to claim that the recommended schedule of vaccines is safe and effective in the genetically diverse Australian population.

The Phase 4 clinical trial is the data collected in the population **after marketing the vaccine**. This safety data is flawed because government regulators **have never used active systematic surveillance** of the long-term health outcomes of all vaccinated individuals to determine causal links. If you don't look for causal links you will not find them. Again the government is using pseudo-science to make claims of 'safety' about vaccines.

The **University of Wollongong** is allowing academics who have **never investigated the science that is underpinning the government's vaccination policies** to promote false information about the safety and efficacy of these policies that will harm human health.

This breach of the university's charter to maintain integrity in academic knowledge, along with the **Australian government's censorship** of the vaccination debate is allowing the government to make false claims about vaccines that is leading to a crime against the Australian population.

The reversal of informed consent for some Australians in an 'opt out' system that will require a doctor's signature to refuse a vaccine amounts to a medical abuse on Australians. The government has not supported these policies with science that has been debated by the academic community and the public is being misinformed by the Australian media that is not being held to account.

Please discuss these issues with your doctor and ensure that the Australian government and the University of Wollongong academics are held to account for promoting pseudo-science in government vaccination policies.

Judy Wilyman PhD

*Bachelor of Science, University of NSW*

*Diploma of Education (Science), University of Wollongong*

*Master of Science (Population Health), Faculty of Health Sciences, University of Wollongong.*

*PhD in [The Science and Politics of the Australian Government's Vaccination Program](#), UOW School of Humanities and Social Inquiry.*



### **Some of the Ingredients in Vaccines:**

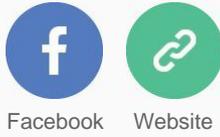
I would like to thank everyone who has supported my research and newsletters over the last 5 years. If you have appreciated this unfunded research and debate of children's health I hope you will consider a [\\$5 donation](#) for the upkeep of my website and continuation of my voluntary newsletters.

Only funded research is promoted to the public and universities do not promote student research. Hence the need for my website and newsletters to promote my independent research that is in the public interest.



### **Supporting Public Interest Research**

My website [Vaccination Decisions](#) became necessary because the University of Wollongong [is not required to rectify the academic record when organised industry-lobby groups](#) provide false information about my university research in the mainstream media.



*Email Judy Wilyman* | [http://us8.forward-to-friend.com/forward?  
u=f20605fde3732e41929f4a3f2&id=57a1e05008&e=fec8337d3c](http://us8.forward-to-friend.com/forward?u=f20605fde3732e41929f4a3f2&id=57a1e05008&e=fec8337d3c)

*Copyright © 2018 Judy Wilyman, All rights reserved.*  
You are receiving this email because you opted in at our website.