



## Newsletter 202 Where are Australia's Vaccines Made?

28 June 2018

On the 21 June 2018 the Perth billboard that asked the simple question "What is in a vaccine?" was removed due to pressure from the Australian Medical Association (AMA) and the WA government. Here is the answer to "[What is in a vaccine?](#)" that the AMA does not want you to know.

The AMA has stated that this billboard should be "banned using legislation that states regulators can prohibit the advertising of "any public health risk". Perhaps the AMA could explain when it was decided that knowing what is injected into the human body "is a risk to public health?". This is imperative knowledge to a "protective" public health policy such as vaccination.

Yet this important health information is currently being described by the medical industry as “a risk to public health”. If the general public does not get involved in this debate now it will soon be legislated that Australians cannot publicly discuss what is in a vaccine or the medical risks associated vaccines.

We are already part-way down this path with doctors being investigated and de-registered for presenting this "anti-vaccination" material to their patients or on social media.

If you are concerned about this situation then please attend the conference that is being held in Sydney this weekend '**The Censorship of the Vaccination Debate in Australia**'. Here is a link to the [tickets and speakers for this event](#).

Another question that the community is concerned about is '**Where are Australia's vaccines made?**' The government has not provided transparent information about this on the Immunise Australia Program website..

Here is the information that I have researched on this topic about the manufacture and licensing of Australia's vaccines:

Vaccines today, like most pharmaceutical products, are no longer being produced or regulated in the countries in which they are used. There is an extensive international network of production and most Australian vaccines are made in other countries and licensed in the USA ***where vaccine manufacturers are free from liability for any harm that vaccines cause in humans.***

Many vaccines today are being made in China and India and the Australian government does not provide information on its **Immunise Australia Program (IAP)** website describing where Australia's vaccines are made. The only vaccines that are made in Australia are some influenza vaccines and Q Fever vaccine that are made by [Seqiris – a CSL company](#).

**All other Australian vaccines are made in other countries and licensed in the US before being approved for the Australian market *under a different name without further testing.***

China and India became major manufacturers of vaccines in 2014 and they are selling vaccines on [the international market](#). The **Council for Foreign Affairs** stated in 2012 that this market had expanded rapidly and regulators were over-whelmed or non-existent in these countries ([Garrett CFR 2012](#)).

Whilst [Vincent Iannelli, MD](#), claims that all vaccines that are used in the US are not made in China there is no transparent evidence that vaccines that we use in Australia are not being made in China or India.

Research on the safety and efficacy of vaccines is not subjected to the same approval process as that for other pharmaceutical drugs. This is because vaccines are classified as “[biologics](#)” and not pharmaceutical drugs but this does not explain why they are tested in a different way to other drugs.

Vaccines are not tested for safety using an ***inert placebo*** nor are they tested for effectiveness by demonstrating that the vaccines ***can prevent the disease in unvaccinated people*** ([Medical Products Agency – Sweden 2007](#)).

Researchers use the surrogate of antibody titer to make this claim but this is a small part of a very complex immune response to pathogens.

The [Swedish government](#) has stated it will not enforce mandatory or coercive policies on the population because of the serious adverse health outcomes that are associated with vaccines and because it is against the Swedish constitution. Colombia and Turkey have also taken this position.

In addition, the Australian government does not have to prove that vaccines can create herd immunity in the population *before* vaccines are approved for use in the population (**Terry Nolan 2010 – chair of the ATAGI vaccine advisory board from 2005-2014**).

Hence the Australian government is claiming it is everyone's responsibility to vaccinate with every vaccine that is recommended without having this evidence. Yet we do have evidence that the chemicals in vaccines will harm many children because of their individual genetic make-up.

The fact that the effectiveness of vaccines has not been proven in controlled clinical trials by observing that unvaccinated people do not get the disease is stated on the vaccine package inserts for many vaccines. Your doctor can provide you with these package inserts that also list the 158 serious adverse health outcomes that have been associated with vaccines for decades due to the chemicals in vaccines ([Institute of Medicine](#)) - but most doctors have not been educated on this topic because of the pharmaceutical funding of vaccine research and of doctors education.

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### **There is No Independent Science being used in Government Vaccination Policies**

Vaccines are described as "[biologics](#)" and are not tested in the same way as other drugs. All safety and efficacy research that is used in government vaccination policies is funded by pharmaceutical companies - there are no

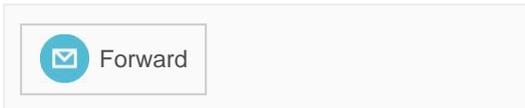


### **Supporting Public Interest Research**

I would like to thank everyone who has supported my research and newsletters over the last 5-10 years. If you have appreciated this unfunded independent 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

independent studies being used in policy decisions.

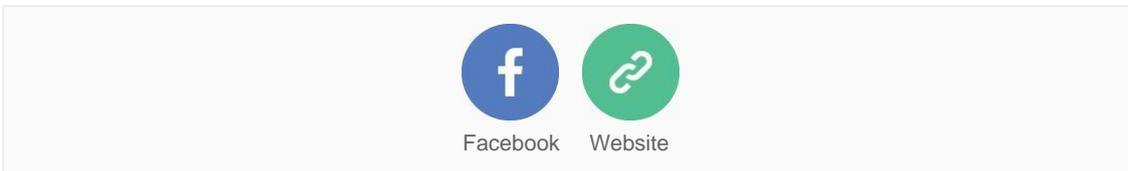
Here is the response from the TGA (Australia's drug regulator) that states [no independent studies](#) have been used to approve and register the recent **Shingles vaccine named Zostavax** for the Australian market. This information was obtained using the freedom of information act.



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.

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



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