



Newsletter 207 Professor Fiona Stanley and the Australian Government have not Answered Questions on the HPV (Cervical Cancer) Vaccine

1 August 2018

In light of the news that the Australian government has [not issued an entry visa](#) to the award-winning [investigative journalist, Joan Shenton](#), I would like to provide you with the questions on the HPV vaccine that **were not answered** by the Australian government and public health authorities **in 2011** - four years after this vaccine had been used in Australia.

Many Australians are asking what the government has to hide by hindering medical practitioners (Dr. Sherri Tenpenny and Dr. Suzanne Humphries) and investigative journalists from coming to Australia to inform the public of the global debate on the serious adverse events to vaccines.

Please read the letter below that was sent to our Australian of the Year (2003), Professor Fiona Stanley, and to the Australian government regulator of vaccines - the Therapeutic Goods Administrator (TGA) - in 2011. These health authorities did not answer the questions that parents and researchers are asking about the safety and efficacy of vaccines:

This information was presented in the [Infectious Agents and Cancer Journal](#) in February 2013 and put into a [23 minute video by a pharmacist in June 2018](#)

To Professor Fiona Stanley (May 2011) and the Therapeutic Goods Administration (TGA) (August 2011)

HPV Vaccine: Answers Needed from Government Health Ministers

In Australia, as in some other countries, the HPV vaccine - Gardasil® - is being promoted to adolescents, woman and now boys, as a vaccine to prevent cervical cancer. Health departments

are not addressing the concerns that some parents have about this vaccine.

There are many scientific and ethical concerns regarding the HPV vaccine. The following issues need to be addressed:

- This vaccine was not proven to be safe or effective against cervical cancer (CC) prior to its marketing in 2006. Phase 3 trials were not completed until 2007. In phase 3 trials this vaccine was only trialed for the prevention of pre-cancerous lesions in 16-26 year olds and not cervical cancer. These lesions frequently clear quickly without treatment (in this age-group) and many never lead to cancer. Therefore the vaccine is only assumed to be effective against CC because the relationship between pre-cancerous cells in young adults and cervical cancer 20 to 40 years later is still unknown.
- Each of the 3 injections contains 225 ug of aluminium hydroxyphosphate sulfate, an adjuvant known to be linked with autoimmune diseases, the chronic illnesses that are increasingly common.
- Each of the 3 injections contains sodium borate (a pesticide), which has been linked to infertility, seizures and paralysis. In 2005 the National Library of Medicine (NLM) of the National Institutes of Health declared this to be a dangerous poison and stated 'it is no longer commonly found in medical preparations'. HPV vaccine was approved in 2006.
- Each of the 3 injections also contains polysorbate 80, an emulsifier linked with anaphylaxis, convulsions, collapse, seizure (twitching) and infertility in animals.
- Gardasil® has 3 times the number of adverse reactions reported as all other vaccines combined. Since it was introduced, 94 deaths and 21,635 adverse reactions to Gardasil have been documented. Many have included the events listed above.
- There is no systematic, long-term surveillance of adverse events to the HPV vaccine. The reporting system is a passive surveillance system. The CDC states "This (VAERS) data cannot be used to infer causal associations between vaccines and adverse events". If no one carefully monitors adverse reactions, there is no proof that it is safe. Yet parents are told combining vaccines is safe. This also means it will not be possible to determine whether women vaccinated against HPV will have a higher rate of infertility and autoimmune diseases in 10 – 15 years time.
- The placebo in the clinical trials contained more aluminium adjuvant (a chemical linked with autoimmune diseases) than the vaccine itself. This casts doubt on the validity of the results.

Please explain the reason for using adjuvant in the control participants when the scientific literature links this chemical to the cause of autoimmune diseases.

Why has this vaccine been marketed so aggressively to Australian women when cervical cancer is a very low risk in Australia (indeed in all developed countries) and the vaccine contains chemicals linked with infertility? The other HPV vaccine (Cerverix) does not contain sodium borate or polysorbate 80, so why is it necessary to use infertility chemicals in Gardasil® which is being marketed to adolescent girls and women of all ages?

Yours Sincerely,
Judy Wilyman (2011)

(The references for this letter can be accessed [here](#) and for information on the pharmaceutical companies marketing campaign for HPV vaccines click here - [The Pharma funded promotion of HPV Vaccines](#)).

My research on the HPV vaccine was published in [cancer journals in 2013](#) and presented at international conferences but the Australian media would not report this research to the public. Murdoch owns approximately 80% of Australia's media and here are his [conflicts of interest in government vaccination policies](#).

The film the 'Sacrificial Virgins', that exposes the danger of HPV vaccines is showing on the east coast of Australia from 2 - 13 August 2018. [Dates and locations for the events are listed here](#). In the interests of your children's health please investigate what the Australian government is attempting to hide from the public by not providing a visa to professionals questioning vaccination.

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Some of the Ingredients in Vaccines:

Did you know that antibiotics are in most vaccines? Many people are allergic to antibiotics and using any vaccine carries the serious risk of anaphylactic shock to this and many other vaccine ingredients. Are you being informed of this before you give consent to giving your newborn baby a vaccine?

Please consider whether you want these substances injected into the tissues of your new born infant before the blood brain barrier is developed at 6 months of age or their other body systems. These ingredients and more are present in vaccines and the vaccination schedule has expanded to 16 vaccines requiring 52 doses from birth to adolescence.

And the '**new norm**' - allergies, anaphylaxis,



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 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](#)

Chronic Fatigue Syndrome (CFS), autoimmune disorders (diabetes, childhood rheumatoid arthritis, arthritis, multiple sclerosis etc.) autism, speech delay, neurological disorders, ADHD, childhood cancers.

[academic record to the public](#) when organised lobby group activists, such as **Australian Skeptic Inc / SAVN leader Dr. John Cunningham, Dr. Rachael Dunlop, Ken McLeod, Matthew Berryman, Peter Tierney and many other industry activists** provide false information about my university research in the mainstream media.



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u=f20605fde3732e41929f4a3f2&id=1a84bc42c5&e=fec8337d3c](http://us8.forward-to-friend.com/forward?u=f20605fde3732e41929f4a3f2&id=1a84bc42c5&e=fec8337d3c)

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