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Vaccinations - good or bad?

(Redirected from [Vaccinations](#))

The idea of vaccination is that if you give the immune system a small "taste" of a bug (such as polio, whooping cough etc) it will make antibodies which will protect one against future exposures to the real thing. Good idea, but in practice it is not as simple.

My medical training tells me that all these issues should be resolved by logical argument. But in the modern world, all these arguments are tainted by vested interest (primarily from drug companies) and it is difficult to trust the data with which one is presented. Therefore one ends up working from either limited data, or untrustworthy data, or common sense and experience and ends up with a belief. So what you are getting below are my individual conclusions, but it is up to every parent to find what information they can and make up their own minds.

I have inevitably been drawn into this argument because I have seen many children with chronic fatigue syndromes, neurological damage or autism whose symptoms date from vaccination. This does not mean the link is causal but it does give cause for concern. We are seeing a rapid rise in the incidence of autism, currently estimated at 1 in 100 of all children. There has to be a reason for this.

The evidence that vaccinations reduce incidence of disease is not as powerful as the pro-vaccination lobby would have us believe! Most infectious diseases were well in decline as a result of improved hygiene and nutrition before vaccination became available. Doctors like to believe that vaccinations work and are reluctant to diagnose a disease in a vaccinated child. So for example since polio vaccine, polio is rarely diagnosed, but there has been an increase in aseptic meningitis.

The medical profession, backed up by the pharmaceutical and chemical industry, are experts in cover ups. When doctors find themselves in trouble they close ranks. Most people have seen cover ups for themselves with drug side effects (which kill huge numbers of people every year but are hushed up). I see cover ups in patients with pesticide poisoning, with problems from silicone breast implants and in Gulf War syndrome. Doubtless there are others and I know vaccine damage is covered up and/or denied. I have seen too many children with serious health problems dating from vaccination for which there is no other explanation for their illness. I have to believe the evidence of my own eyes.

Vaccines can cause harm

There is now strong evidence that part of Gulf War Syndrome was caused by multiple vaccinations. There are sound theoretical mechanisms by which vaccination may cause autism and there I believe there is still a case to be answered here. There are many cases of brain damaged children following triple vaccine (diphtheria, pertussis, tetanus).

Vaccines may be causing harm in unseen ways

Polio vaccination may be a cause of the huge increase in post viral fatigue syndrome. Before polio vaccination, post viral syndrome was rare. This is because people caught polio (which occasionally results in paralysis) which is an enterovirus. They mounted a vigorous immune reaction against polio virus which gave them cross-immunity against all other enteroviruses including Epstein Barr (glandular fever), coxsackie B, ECHO etc. This protected them against post viral fatigue since this most commonly follows an enteroviral infection.

We now know that many cancers are caused by viral infection. Obvious examples include hepatitis B (primary liver cancer), cervical wart virus (cervical cancer) and AIDS (Kaposi's sarcoma). Chronic myeloid leukaemia is probably virally induced. How many other cancers could there be from which we are protected by proper exposure to a virus, but not protected by vaccination? Nobody knows the answer to this question. I am not aware of any studies being done.

What is in a vaccine?

Not just bits of bacteria and viruses. No immune system is going to react vigorously against a few dead or half alive (attenuated) cells. To turn the immune system on a vaccine needs an immune adjuvant added. These include aluminium and mercury which are toxic in their own right. It may well be that autism following vaccination is actually a heavy metal problem. For a list of vaccine ingredients refer to [RENSE.COM](#). I have been criticised for referring people to this website but I have no reason to believe their ingredient list is inaccurate.

So what is the alternative?

We should be tackling infectious disease by good hygiene and supporting the immune system. The immune system is arguably the most micronutrient sensitive department of the body. Susceptibility to infections may be a symptom of poor nutritional status.

Good hygiene

By good hygiene definitely I do not mean obsessively wiping down working surfaces with antiseptic wipes. Indeed this is counter productive because we need daily exposure to bacteria to train and programme the immune system. What I recommend are proper public health measures such as:

- Not pumping raw sewage into the seas for people to swim in.
- Not making animals travel hundreds of miles to slaughter houses so they crap themselves on the way and get covered with shit, contaminating meat subsequently. Please try to buy local produce, or organic produce which has animal care standards.
- Not keeping chickens so intensively that they need constant antibiotics to survive chronic salmonella.
- Moving towards more organic farming practices i.e. away from intensive farming, use of properly composted animal waste, using local suppliers etc.
- Sexually transmitted diseases are presently all too common. Take proper precautions.
- We should not be concentrating sick and ill people in large general hospitals. This means that antibiotic resistant organisms can develop and spread quickly from one patient to the next.
- There are many other ideas for good hygiene. It is important to think carefully for yourself. Please do not assume that "hygienic" chemical solutions are the answer.

Boosting the immune system

Human beings live on a knife edge with their immune systems. The immune system has a delicate balancing act because it needs to be able to recognise bugs and attack them, it must recognise cancer cells and attack them, but it must recognise "self" i.e. human bacteria/bugs and human cells and ignore them. It is already confused by chemicals.

We should not be thinking about getting rid of the bug. This will always be impossible simply because "Nature abhors a vacuum" and if you get rid of one bug, another will take its place.

Therefore we should be thinking about individual resistance to disease i.e. making people so healthy through good diet, good micronutrient status (vitamins and minerals) and freedom from toxins (i.e. red herrings and obstacles) that the immune system can easily resist any bugs that do gain entry. For example, measles can cause eye damage, but not if there is good vitamin A status.

The starting point for good immunity is [The general approach to maintaining and restoring good health](#)

The trouble is that against all these arguments is the combined weight of the medical profession and pharmaceutical companies who financially drive government and control the Press telling us that vaccination is safe and desirable. Nowadays logical argument no longer prevails and policy is dictated by big business and cash.

Summary Points

These are based on a lecture given by Dr Peter Mansfield, an expert in childhood vaccinations. The principles behind the recommendations for immunisations are as follows:

1. The rate of decline of all the major infectious diseases is largely due to public health measures rather than vaccination. The benefit of immunisation has been greatly hyped by the pharmaceutical industry who stand to benefit most from its use. Our Public Health Service has exercised little, if any, critical judgement on behalf of the general public.
2. The immune system is immature at six months and unable to respond adequately to vaccination. It is pointless giving vaccinations before the age of six months. The baby should be protected from infectious disease firstly by breast feeding and secondly through avoiding unnecessary social contacts - that is to say babies should not attend public swimming pools, toddler groups, nursery, or whatever, until their immune system has matured further. Babies should be kept at home during this first six months.
3. In Nature, it is very unlikely for any immune system to meet more than one new, acute, systemic virus at a time. It goes against all the laws of Nature to use multiple vaccines against viruses. Indeed, there is evidence that these may be more harmful than those vaccines given in isolation, or at best they are likely to be ineffective.
4. Live vaccines given singly are likely to give reliable long lasting immunity.
5. "Dead" bacterial vaccines can be safely given in combination.
6. It is counter-productive to give mumps vaccination before the ages of nine in girls and ten in boys. This is because in children under this age, mumps is a benign illness with few serious side effects. Indeed, the aim should be for the child to develop mumps whilst a young child because this confers immunity for life. Failing this, vaccination should be given at the above ages, which conveys ten years' protection.
7. At the time of vaccination, the child must be well. Nearly all side effects result from a child being vaccinated when they are less than well and this greatly increases the chance of side effects.
8. Alcohol swabs should not be used since one risks inactivating the live vaccine.
9. Doctors must be extremely careful to keep vaccines between two and eight degrees centigrade since warming shortens the shelf life of the vaccine
10. The benefit of flu vaccinations has been greatly over-stated. Side effects have been greatly under-rated. On balance the benefit from flu vaccination is marginal.
11. The most effective treatment against infection is good nutritional status with respect to diet and micronutrients. With these principles in mind, the recommendations are as follows:

A Suggested Regime of Vaccination

Baby – no vaccinations before six months (if the baby has been born premature then this should be six months plus the time the baby was born premature). Breast feeding and social isolation (staying at home) are vital to protect the baby at this age. Vaccinations are no replacement for this policy at this age.

Six to Twelve Months – the following should be given individually. "Dead" vaccines need to be given at least twice, "live" vaccines just need one dose.

A suggested schedule for babies **who stay at home** would be:

- Six months: diphtheria, tetanus, pertussis and polio (three bacterial and one live virus) such as INFANRIX –IPV.
- Eight months: diphtheria, tetanus, pertussis and polio (three bacterial and one live virus) INFANRIX –IPV.
- Twelve months: diphtheria, tetanus, pertussis and polio (three bacterial and one live virus) INFANRIX –IPV.

For babies **who do not stay at home**,

- Six months: diphtheria, tetanus, pertussis, polio and Hib (four bacterial and one live virus) such as PEDIACEL.
- Eight months: diphtheria, tetanus, pertussis, polio and Hib (four bacterial and one live virus) such as PEDIACEL.
- Nine months – single MenC
- Twelve months: diphtheria, tetanus, pertussis, polio and Hib (four bacterial and one live virus) such as PEDIACEL.

In the event of a local meningitis outbreak, give one dose of meningitis C (anytime after six months of age).

Fourteen months: single measles vaccine

Between 5 and 15 years – Tetanus, diphtheria and polio (REVAXIS)

Age Nine Girls Mumps

Age Ten Girls Rubella

Age Ten Boys Mumps

BCG This is of unproven benefit and should not be given. Indeed many Health Authorities have already dropped this vaccine.

Young people are at highest risk of bacterial septicaemias and meningitides during the first 6 months of life and the first year at college. The latter is largely because many university students do not care for their diet, drink too much, smoke too much and get inadequate sleep and therefore their immune system is suppressed. They often live in close proximity. So before college give:

Pre-College: Men C and Hib one month apart

Adults – for travel – DIFTAVAX (tetanus and diphtheria) or REVAXIX (tetanus, diphtheria and polio)

Foreign travel

See [Travel and immunisations](#)

In conclusion

These, as I say, are my beliefs. They may well change in the future as I learn new things.

For a list of vaccine ingredients refer to [RENSE.COM](#)

External links

- [www.jabs.org.uk](#)

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