



# Shots in the Dark

**A vaccination craze puts us all at risk.**

**"L**yla Rose Belkin was a lively, alert five-week-old baby when I last held her in my arms," said her father, Michael Belkin, a financial analyst in New York City. "Little did I imagine as she gazed into my eyes that she would die that night. At her final feeding she was agitated and feisty—then fell asleep and didn't wake up. The autopsy ruled out choking. A swollen brain was the only abnormal finding. Most doctors I spoke to said it must have been Sudden Infant Death Syndrome, a catch-all diagnosis for unexplained death." This happened last September. For weeks, Belkin and his wife agonized over what they might have done differently. What he couldn't get out of his mind was that a few hours before Lyla's death, she had been inoculated with the Hepatitis B vaccine. Most doctors he spoke to scoffed at the idea. The vaccine is safe, they said. But he began his own investigation, and he became disturbed by what he found.

He spoke to Bonnie Dunbar, a molecular biologist at Baylor College of Medicine in Houston. Five years earlier, her brother had experienced multiple sclerosis-like symptoms following vaccination. "His problems have been attributed to the Hepatitis B vaccine by over a dozen different specialists of unquestionable medical expertise," she testified before the Texas Public Health Board. "He has now been rated permanently and totally impaired. His health care has cost the state of Texas around half a million dollars to

date." Then disaster struck again. A student in her lab, who was required to take the vaccine, "went partially blind following her first booster injection, a medical condition that was exacerbated by her second booster which resulted in long-term hospitalization."

Only a few years ago, Dr. Dunbar was honored by the National Institutes of Health for her vaccine work. Nonetheless, she began her testimony with this eye-opener: "I am not here today as an official representative of Baylor College of Medicine but as a concerned citizen of Texas and the United States. In fact, I am sure that some of my colleagues would not approve of my appearance. Especially those that are benefiting handsomely from pharmaceutical company income as consultants and expert witnesses while carrying out vaccine clinical trials."

Merck & Co. derives \$900 million per annum from vaccine sales. Its Hepatitis B vaccine is the first in the country to use recombinant DNA technology. Since 1991, Hepatitis B inoculations have been given routinely to infants in the U.S., and 36 states now require that a series of three shots be given to infants as a condition of attending school. Although many are now getting the vaccine, hardly anyone in the general population is at risk for the disease. The Centers for Disease Control and Prevention in Atlanta says that in 1996 a total of 10,637 cases of the disease were reported in the U.S., of whom 279 were below age 14. In 90 percent of cases, antibodies are naturally produced and after a flu-like illness the patient recovers and is immune for life. To drum up a Hepatitis B scare, and justify the massive vaccination program, the

CDC has arbitrarily multiplied the number of reported cases by 20, using the argument that most go undiagnosed.

The general population is not at risk for Hepatitis B. The profile of those who are is similar to those at risk for AIDS. The CDC identifies the hepatitis risk groups as: drug addicts, homosexuals and heterosexuals with multiple partners, children of immigrants from certain areas, health-care workers, and infants born to infected mothers. So how come everyone is urged to get the vaccination, including newborns, and why are state health departments playing along, agreeing that children can't go to school if they don't get their shots?

The CDC explains that it has "generally not been feasible" to identify people "engaged in high-risk behaviors." Instead, the agency recommended "making Hepatitis B vaccine a part of routine vaccination schedules for infants." In other words, the risk of adverse events must be borne by innocent infants, who can be singled out on the maternity wards, because the sex and drug addicts can't be expected to identify themselves. Jane Orient, executive director of the Association of American Physicians and Surgeons, and a practicing physician, commented: "It's outrageous to be forcing this upon children, the great majority of whom are not at risk. But all *are* at risk of adverse reactions to the vaccine." She doesn't recommend the shots for those not in risk groups.

"I am horrified by what I am seeing on this issue," said Baylor's Dr. Dunbar. "I can't believe this is happening in this country." Public health is being used to undermine individual responsibility and to legitimize intrusion on family autonomy. Sidney Wolfe of Ralph Nader's Health Research Group, a foe of drug company profiteering, was not familiar with this controversy. He cited a 1997 study claiming

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that Hepatitis B vaccination in urban centers is "inadequate."

The Food and Drug Administration set up a system for reporting adverse reactions to the vaccine, and by October 1998 almost 25,000 vaccine-related adverse events had been reported, many of them life-threatening. The FDA has also said that as many as 90 percent of such reactions are never reported at all, so we should multiply these totals by ten. Michael Belkin estimates that, in addition to his own daughter, at least 1,400 people have died throughout the country from an adverse reaction to Hepatitis B immunization. Many such cases involve what is called auto-immunity. It is believed that the genetically engineered vaccine sometimes confuses the body's immune system into attacking itself. Many of the responses resemble multiple sclerosis.

The bad effects may unfold over weeks. One scandalous feature of this vaccine is that the drug companies used safety studies that monitored children only for four or five days after vaccination. Now, a long-term study of the effects on nurses (who must get the shots) is underway. Shouldn't legislatures at least wait for the results before they make shots compulsory? The problem is that most legislators, like most journalists, are cowed by assertions of medical expertise, and by threats that any delay will jeopardize the nation's health. The *New York Times* in particular has acted as an uncritical conveyor-belt from the CDC to the general public. One politician who has stood firm is New Jersey's Christie Todd Whitman. She refused to sign into law a mandate rushed to her desk by gullible legislators. In France, a similar mandate was rescinded last October because doctors saw what was happening and sued.

Having studied the FDA's reports of adverse reactions in infants, CDC concluded that there were "no unexpected events." A leaked internal CDC memo suggests otherwise. A meeting at the agency in 1997 discussed "possible association" between the vaccine and MS and recommended a "case control study" with 60 days as a "reasonable time limit to use for the onset of MS post-vaccination." (Five days were enough to get the vaccine approved.) Another CDC claim, that "studies show that these side effects are

reported no more frequently among those vaccinated than among persons not receiving vaccine," cited only references dated ten years before the vaccine was available. Thus is science put at the disposal of politics. An Institute of Medicine report refutes CDC's claim. At least 100 published reports by physicians have attributed serious adverse effects to the vaccine. The truth is that CDC is a political agency which has become accustomed to disseminating public-health scares as a way of protecting and expanding its budget. Not for nothing was "Prevention" added to its title.

State health departments have a budgetary interest in mandating shots. According to Barbara Fisher of the National Vaccine Information Center in Vienna, Virginia, amendments to the Childhood Immunization Act of 1993 gave states financial incentives to set up tracking registries, and a "performance-based grant program" offered up to \$100 a head depending on the number of shots delivered. "A bounty is put on children's heads," Fisher said. "Our children now get 33 doses of ten different vaccines by kindergarten; our grandparents got only one—smallpox. The CDC hasn't yet done the studies showing whether all these shots are safe." Marian Wright Edelman, where are you now that we need you?

**R**ecently, John F. Modlin, professor of pediatrics and medicine at Dartmouth and chairman of CDC's Advisory Committee on Immunization Practices, debated the issue at the University of New Hampshire with Burton A. Waisbren, an immunologist from Milwaukee. Michael Belkin took along a chart showing that, in New Hampshire alone, the 48 reported adverse reactions to the vaccine in children aged zero to ten in recent years were 16 times greater than the number of cases of disease (three). There were four times as many child deaths (11) as there were cases of disease. Those shocking figures show how out of control the vaccination program has become.

Modlin said the critics were "uninformed," and suggested that attributing deaths to the vaccine was like blaming automobile accidents on the Cheerios antecedently consumed. "Whatever you do," he said, "don't let somebody try to tell

you that Hepatitis B is uncommon because only 11,000 cases were reported in this country." In fact, he added, "I don't care" how many reported cases there are. "What's probably more accurate is extrapolated data." By which he means "hypothetical." It's as unscientific to deny causation, without careful investigation, as it is to assert it.

Meanwhile, Modlin should disclose the financial relationship between the relevant drug companies and the ongoing research at Dartmouth Medical School. In response to a question, he allowed that there was such a connection. "Scientists are increasingly supported by for-profit companies," the *Wall Street Journal* recently reported, "but a new study shows that critical fact is seldom revealed in published research." This is especially true in the medical field.

In his response, Burton A. Waisbren said that "the first thing that should be done is we should stop universal Hepatitis B vaccination." He added that "doctors, hospitals and scientists who [support this vaccination program] should be held responsible legally.... If all else fails, I think there is going to be a congressional investigation." Without quite reaching his question, he asked: "How could an executive in a pharmaceutical company that made a billion dollars out of this experiment, and the director of a government agency impose an experiment—they talk about a strategy—this is an experiment." Because, he added, "they don't know if this is going to help the situation."

The forum organizer, Gerhard Bedding, is circulating a petition to rescind the mandate in New Hampshire. He describes the modern medical attitude as: "Here comes this poor unprotected baby. We need to get at it immediately to give it the benefit of our protection." It reminds him of the "Kill all the bugs!" outcry of the 1950's. When he sees today's CDC officers in their military uniforms, he is reminded of nothing so much as his childhood in occupied Holland, during World War II.

ABC's "20/20" aired a good program in January. Articles have appeared in *Science*, *Insight*, the *Washington Post*, *Toledo Blade*, and *Indianapolis Star*, and elsewhere. In Ohio, Indiana, and Illinois, efforts are underway to rescind the mandate or expand exemptions. Grassroots opposition is growing. ❧

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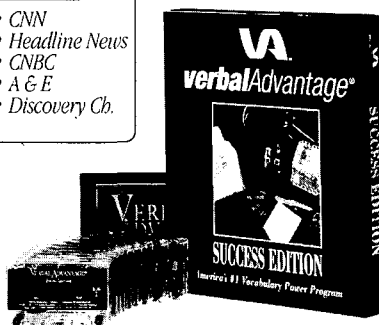
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