


Deep Roots at Home

VITAL VACCINE INFORMATION
For Moms & Dads To Make An Informed Choice



Vital Vaccine Information - For Moms & Dads to Make Informed Choices

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This ebook is dedicated to those children I care for in my special needs class.

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NOTE TO READERS: I'm neither anti- or pro-vaccine; I am pro-science. I recommend Dr. Paul Thomas's Vaccine Schedule ¹ and the video "The Vaccine Friendly Plan."²

MEDICAL DISCLAIMER: I am no longer a practicing medical professional, and I am not a doctor. I am a mother. I do seek scientific confirmation of the safety and effectiveness of the information I share. Medical decisions are your personal responsibility. Nothing I say in this ebook or on deeproootsathome.com is intended to treat or prevent disease. Consult your own doctor or medical professional.

“Beloved, I pray that all may go well with you and that you may be in good health, as it goes well with your soul.” ~3 John 1:2

I wish that when I had to make decisions about vaccines for our first child I had something to help inform me. As it was then, all I had to go on was what I was taught in nursing school, the urgings of the staff in the doctor's office and a shiny brochure from a vaccine-manufacturing drug company.

Those trying to teach about vaccine dangers have only one motivation: to prevent more suffering. We have either witnessed it first hand in our own family or know those who have.

Too many will say, "I didn't know, why did no one tell me, I believed them." I'm sad, heartbroken, frustrated, angry. Parents, educate yourselves. Do your homework. IT IS YOUR JOB. YOUR RESPONSIBILITY. You owe it to your child/ren. The choices you make today will impact your children forever. And they will inevitably impact YOU! Choose wisely. —Jacqueline Fitzgerald, parent

In this spirit, I now share some of what I have been learning with you. Please don't take my word for it, though. Do your own investigation and come to your own conclusions. For your child's sake, for you, and for your families.

Mothers-to-be in my generation were told to take extra vitamins and eat nutritious food but, most of all, to avoid anything that could harm the developing fetus like cigarettes, alcohol, medications, household cleaning products, radiation and other toxic exposures. As an RN, I learned of the risks of anesthesia

during delivery. Many friends were signing up for Lamaze classes to prepare for a drug-free birth, which many obstetricians discouraged. And lots of us chose to breastfeed, even though a lot of pediatricians were pushing formula and bottles back then.

Today, pregnant women face a different set of difficult questions and choices about keeping themselves and their babies healthy. Among them are whether or not to get vaccinations during pregnancy that public health officials, obstetricians, and pediatricians say will protect pregnant women and their newborns from getting sick.

When a doctor recommends a certain shot, it seems logical that most pregnant patients will trust their doctor's advice, assuming that the shot has been proven safe and won't in any way harm the baby. Let's allow the science to speak for itself.

I present this compilation of known scientific studies to further the base of knowledge with which you can make a truly informed decision. **Parental choice is key here, but I encourage you to know all there is to know so you will be confident in your decision, one way or the other or somewhere in the middle.**

I have tried to summarize in this ebook as much as possible. If you want to cut to the chase, you can read the post on Deep Roots at Home called "What I'd Tell You Over Coffee If You Asked If We Vaccinate." ³

1. ALUMINUM IS NEUROTOXIC...AND CONSIDERED WORSE THAN MERCURY

Aluminum Has Replaced Mercury in Many Vaccines

When it comes to vaccine safety, much of the talk about toxic ingredients focused on thimerosal (which contains mercury)⁴ that was added to killed (inactivated) vaccines as a preservative.

But vaccines also contain adjuvants — agents that stimulate your immune system to increase immunologic response to the vaccine – **and the most toxic is aluminum.** Aluminum is a known neurotoxin that is contained in a number of common childhood and adult vaccines. It exceeds the toxicity of mercury in the human body.

While mercury use has decreased, **the use of aluminum additives has not decreased.** Many vaccines contain aluminum, see below. This is NOT an all-inclusive list, however. Your best bet if you're wondering about a specific vaccine is to read through the package insert of each vaccine in question.⁵

- DTaP (diphtheria, tetanus, pertussis)
- Hepatitis A vaccine
- Hepatitis B vaccine*
- Hib vaccine
- Pneumococcal vaccine
- Gardasil (HPV vaccine)

*In 1982, the Hepatitis B vaccine came out for **teens** with high risk behavior (sharing needles and sex). Tragically, the strategy soon

focused on universal **childhood** vaccination. But by 1990, nearly 90% of all babies received the hepatitis B vaccine before hospital discharge *even though their mothers don't have Hepatitis B (and the vast majority do not!).*

According to a new study published in Current Medical Chemistry,⁶ children up to 6 months of age receive **14.7 to 49 times** more aluminum from vaccines than the U.S. Food and Drug Administration (FDA) safety limits allow.

CRITICAL KNOWLEDGE:

The FDA has set the safety level for aluminum in parenteral solutions (IVs) at 4-5 micrograms/kg of body weight per 24-hour period. This safety level was set after it was determined that higher levels of aluminum caused brain and kidney damage.

At 4-5 mcg/kg, a 12-pound infant should be able to handle approximately 30 mcg of aluminum spread out over 24 hours.

Infants vaccinated according to the CDC's Recommended Childhood Schedule receive up to 1,200 mcg of aluminum in a matter of seconds at their 2, 4, 6, and 12 month "well-baby check-ups" (aka vaccine appointments). There has never been a single study of the synergistic effects of vaccinations as they are administered according to the schedule.

If you allow this, you are giving consent for your child to be used as a subject in the biggest medical experiment in history.



"Aluminum is now being implicated as interfering with a variety of cellular and metabolic processes in the nervous system and in other tissues."

-American Academy of Pediatrics

"Our results show that: children from countries with the highest Autism Spectrum Disorder prevalence appear to have the highest exposure to Aluminum from vaccines"

Journal of Inorganic Biochemistry

"Aluminum (Al), the most commonly used vaccine adjuvant, is a demonstrated neurotoxin and a strong immune stimulator. Hence, adjuvant Al has the potential to induce neuroimmune disorders."

Journal of Inorganic Biochemistry

"Our results provide strong evidence supporting a link between autism and the aluminum in vaccines.."

Entropy 2012

"in adult humans Aluminum vaccine adjuvants have been linked to a variety of serious autoimmune and inflammatory conditions (i.e.,"ASIA"), yet children are regularly exposed to much higher amounts of Al from vaccines than adults; it is often assumed that peripheral immune responses do not affect brain function. However, it is now clearly established that there is a bidirectional neuro-immune cross-talk that plays crucial roles in immunoregulation as well as brain function."

Lupus 2012

DRJOCKERS.COM
SUPERCHARGE YOUR HEALTH

(Image Source ⁷)

ALUMINUM IS A BRAIN TOXIN

Aluminum is ubiquitous in the earth's crust, air, soil and water. However, although aluminum is a common, "natural" element, it has absolutely no biological role inside your body and is, in fact, **a demonstrated neurotoxin.**

As researchers wrote in Current Medicinal Chemistry:⁸

"Experimental research ... clearly shows that aluminum adjuvants have a potential to induce serious immunological disorders in humans. In particular, aluminum in adjuvant form carries a risk for auto-immune diseases, long-term brain inflammation and neurological complications and may thus have profound and widespread adverse health consequences."

FACT: There is overwhelming evidence that chronic immune activation in your brain is a major cause of brain dysfunction in numerous degenerative brain disorders, such as multiple sclerosis, Alzheimer's disease, Parkinson's and ALS (Lou Gehrig's disease), which may explain the reported association between aluminum-containing vaccines and these diseases.⁹

FACT: A study published in *Pediatrics*, the official journal of the American Academy of Pediatrics, admitted that: *"Aluminum is now being implicated as interfering with a variety of cellular and metabolic processes in the nervous system and in other tissues."*¹⁰

FACT: When you or your child is injected with an aluminum containing vaccine, the aluminum compounds it contains accumulate not only at the site of injection but can travel to your brain and accumulate there.¹¹ In your brain, aluminum can enter neurons and glial cells (including microglia). Studies have shown that aluminum can activate microglia and do so for long periods, which means that the aluminum in your vaccination may be priming your microglia to overreact.

FACT: Aluminum also impairs your body's ability to excrete mercury, and as a consequence, aluminum will make whatever amount of mercury you have in your system even more toxic as it builds up. This Public Health study states:

*"Rigorous and replicatable studies have shown evidence of ethylmercury (EtHg) and of adjuvant Aluminum toxicities....findings have shown a solid link with neurotoxic effects in humans..."*¹²

FACT: Aluminum (and Tylenol¹³) impairs glutathione (GSH) synthesis and hinders the mechanism for replenishment as seen (below) in this study.¹⁴ Glutathione is the master antioxidant, detoxifier of every cell in the body and responsible for :

- Maintaining vitamins C and E in their reduced, active forms
- Immune function

Interaction of Aluminium Metal with Glutathione in Human Blood...

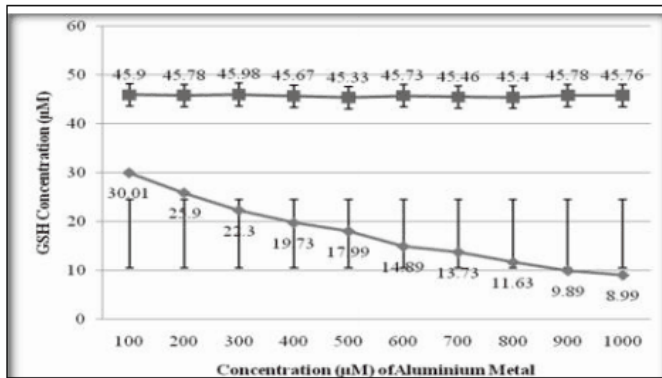


Figure 2. Effect of Aluminium on plasma GSH level
 ■ Control ♦ Aluminium concentrations

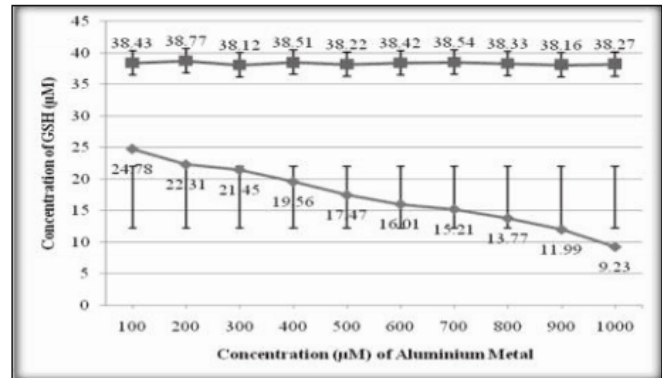


Figure 5. Effect of Aluminum on cytosolic fraction GSH
 ■ Control; ♦ Aluminium (100-1000µM)

- Tightly regulating the production of hydrogen peroxide
- Neutralizing lipid peroxides-breakdown products of polyunsaturated fatty acids (PUFAs) found in our cell membranes
- Assisting in making drugs and other toxic chemicals more water-soluble for easier excretion

(Image Source ¹⁵)

CREDIBLE RESEARCHERS & DOCTORS SPEAK OUT ABOUT ALUMINUM

Please take the time to thoroughly grasp the depth of aluminum toxicity...for you and your child's future.

There are concerned doctors and pediatricians who are willing to speak out at great risk to their reputation and practices. Suzanne Humphries, MD gives us this incredibly fascinating, understandable, and

informative video outlining credible research that may shock you!

Video: Aluminum Is Toxic To All Life Forms
deeproootsathome.com/vaccine-videos

Dr. Paul Thomas is a beloved physician and pediatrician who has made a difference in many families' lives by giving them sane vaccine choices. As a former medical professional myself, he is my kind of doctor! I hope this informs and fortifies many who hope to be parents one day and are facing these huge decisions!

Video: Parents' Right to Informed Consent
deeproootsathome.com/vaccine-videos

I am just skimming the surface, but there is much more on the blog at Deep Roots at Home: [Neurotoxin Aluminum In Hepatitis B Vaccine - A Popular Pediatrician Warns](#) ¹⁶

Finally on the topic of aluminum, in this document, a French expert in the field of aluminum adjuvant toxicity personally and professionally reaches out to the U.S Department of Health & Human Services. (Image Source ¹⁷)

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— PARIS-EST

June 15, 2017

United States Department of Health & Human Services
National Institutes of Health
Food & Drug Administration
Centers for Disease Control & Prevention
200 Independence Avenue, S.W.
Washington, D.C. 20201

Re: *Aluminum Adjuvants*

Dear Directors:

I am an expert in the field of aluminum adjuvants toxicity in humans and animal models. I have been working in this field since the initial description of the AI vaccine-induced macrophagic myofasciitis in 1998. Since that time I have written 40 peer-reviewed scientific publications and one book on this subject.

I strongly support the contention that aluminum adjuvants in vaccines may have a role in the etiology of autism spectrum disorder (ASD). My view is founded on a significant and burgeoning body of peer-reviewed scientific evidence which makes the link between ASD and exposure to aluminum through vaccinations and other sources. Examples of this literature from my own group are detailed below and I urge the HHS to take them into consideration in forming any future opinion on the safety of aluminum adjuvants in vaccines.

The Center for Disease Control's claim on its website that "Vaccines Do Not Cause Autism" is unsupported with respect to aluminum adjuvants and this claim stifles the important research to determine the safety of aluminum adjuvants used in vaccines. As an expert in the field of aluminum adjuvants and aluminum toxicity I solemnly declare that more research on the role of aluminum adjuvant in vaccines and neurological disorders, including ASD, is essential and urgently required.

Yours very sincerely

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2. STRABISMUS (EYE), FACIAL & SPINAL ASYMMETRY POST-VACC: LOOK FOR IT



(Image Source ¹⁸)

Over 3 years, Germany's central scientific institution, the Robert Koch Institute,¹⁹ accessed the mental and physical health of children up to age 17.

The study (named KIGGS) of 17,641 children gathered a whopping amount of data, including their vaccination statuses.

Mathematician and statistician Angelika Kögel-Müller made a statistical assessment of the information pertaining to health regarding vaccination. She's published the results in her

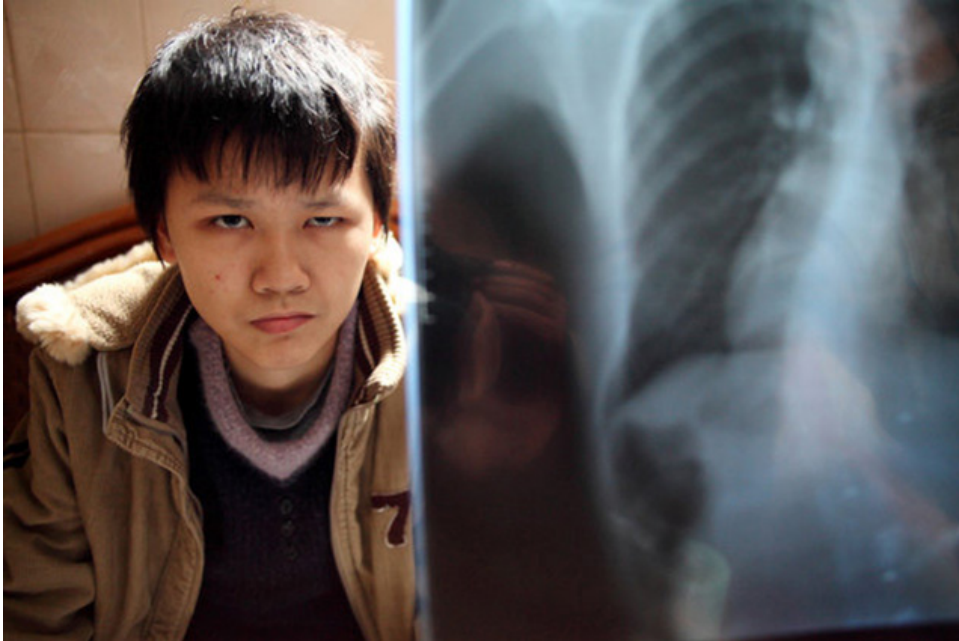
article 'Impfen macht krank'.²⁰ This is the English translation²¹ of the article.

Among vaccinated children, she found stunning increases in the following conditions:

SCOLIOSIS

The significant finding is that scoliosis, which is an abnormal curvature of the spine, was found in 5.3% of vaccinated children, while among the vaccine-free children the number of scoliosis cases was zero (0).²²

FACT: This peer-reviewed study with primates ²³ (and many more like it not with primates) shows **YES**, it can cause scoliosis!



This young man ²⁴ has asymmetry of the facial and eye muscle and spinal scoliosis. The asymmetry of Tan’s face, affecting particularly his left eye and his mouth, is also notable as such facial asymmetries are not rare - as we will see in a moment. (Image Source ²⁵)

PERFECT STORM

When our immune systems respond to a threat, they produce more white blood cells and send them to the area of need. White blood cells are at least 2x larger ²⁶ than red. This only becomes a problem when it kicks into overdrive and delivers emergency numbers of white blood cells to small blood vessels.

The smallest of these vessels are located in your hands, feet, eyes, and brain, particularly

by the area which controls speech. Tiny capillaries are so small that white blood cells have to squeeze through one at a time. **When**

so many white blood cells are released, they cannot squeeze through (blocking red blood cells carrying oxygen) **so the oxygen and blood supply is restricted** for a period of time. When severe enough, blood supply may be restricted **permanently**.

FACT: The result is **ischemic brain stroke with gross inflammation**, and can be seen as loss of **facial symmetry (crookedness),**

strabismus (loss of eye coordination), and loss of muscle tone around the eyes, cheeks, and mouth.

“Overall...intraventricular (brain) hemorrhages occurred in 17% of those receiving single dose vaccines and in 24% of those receiving multiple dose vaccines.”²⁷

—Pourcyrous, MD, et al, Journal of Pediatrics, 2007

FACT: These micro-hemorrhages and resulting inflammation occur in an enclosed cranium (skull) resulting in brain swelling/pressure and consequently neurological damage to brain tissue with lowered blood flow.

You can see more of the neurological injuries in this post: “Strabismus” article on

STRABISMUS



Left photo was taken before the change in her eyes. June 2007.

Below photo was taken the day before she went into surgery to correct the strabismus. Nov. 2007.

Drugs associated with Strabismus:

http://www.cybersight.org/bins/content_page.asp?cid=1-2897-3398-3413

Rubella and Mumps virus vaccine
Measles and Rubella virus vaccine
Measles virus vaccine
Measles, Mumps, and Rubella virus vaccine
Rubella virus vaccine

<http://doublecheckmd.com/EffectsDetail.do?sessionId=B901660E8E45A65CA6FCCFD903A5A721?dname=hepatitis+B+vaccine&sid=12676&eid=1709>

Hepatitis B vaccine

<http://patientsville.com/flu-vaccine-side-effects/influenza-fluzone-strabismus.htm>
Influenza shot

<http://www.flcv.com/eyehg.html>

Dilation, poor accommodative function (focusing) and convergence insufficiency - which if severe is strabismus - are characteristic of mercury poisoning. Dr. A. Cutler



Deep Roots at Home.²⁸ Some are permanent, some recurrent, and others temporary.

FACT: Damage to the cranial nerves controlling eye movement results in loss of eye coordination (strabismus²⁹), as in the girl above (top).

FACT: Italian Journal of Pediatric study: “MMR viruses are neurotropic. Therefore, although

the vaccine is obtained by live attenuated viruses, vaccination may produce neurological disorders.”³⁰

One example the study shows an image of is this 20-month-old Italian boy (above, right) “who received a MMR (VAX PRO) vaccine dose according to the normal vaccination schedule.” (Image Sources: ^{31 32 33})

BAILEY BANK’S CASE

Bailey Bank’s outcome is permanent:

According to the Court Case Transcript: “The Court found that Bailey Bank’s Acute Disseminated Encephalomyelitis (ADEM) (including stabismus) was both caused-in-fact and proximately caused by his vaccination. It is well-understood that the [MMR] can cause ADEM, and the Court found, based upon a full reading and hearing of the pertinent facts in this case, that it did actually cause the ADEM.”³⁴

FACT: “Vaccinations, including the Gardasil vaccine³⁵, the flu shot³⁶, MMR vaccine³⁷, and

Hepatitis B vaccine,³⁸ can cause Encephalomyelitis (ADEM). Symptoms may begin immediately after vaccination, or take up to a few weeks to arise.”³⁹

FACT: Another optic trauma seen post-vacc: Papillitis (optic neuritis).⁴⁰ In children it most commonly presents following an infection but has been **reported to occur after vaccination**. These patients often develop optic atrophy as a result of the preceding inflammation.⁴¹

Below: VAERS Database Reports on Strabismus (many/most never noticed or reported) (Image Source ⁴²)

National Vaccine Information Center
Your Health. Your Family. Your Choice. MedAlerts

Search Results

Found 337 cases where Symptom is strabismus

Case Details

This is page 7 out of 34

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VAERS ID: [207767](#) (history) Vaccinated: 2003-05-23
 Form: Version 1.0 Onset: 2003-05-30
 Age: 0.2 Days after vaccination: 7
 Gender: Female Submitted: 2003-08-07
 Location: Virginia Days after onset: 69
 Entered: 2003-08-13
 Days after submission: 6

Vaccination / Manufacturer	Lot / Dose	Site / Route
DTAP: DTAP (DAPTACEL) / SANOFI PASTEUR	C1383AA / 1	LL / -
HIBV: HIB (ACTHIB) / SANOFI PASTEUR	UA824AA / 1	LL / -
IPV: POLIO VIRUS, INACT. (IPOL) / SANOFI PASTEUR	W0869 / 1	RL / -
PNC: PNEUMO (PREVNAR) / PFIZER/WYETH	492399 / 1	RL / -

Administered by: Private Purchased by: Private
Symptoms: [Congenital anomaly](#), [Convulsion](#), [Electroencephalogram abnormal](#), [Strabismus](#)
SMQs: Systemic lupus erythematosus (broad), Congenital, familial and genetic disorders (narrow), Convulsions (narrow), Noninfectious encephalitis (broad), Noninf (broad), Noninfectious meningitis (broad), Ocular motility disorders (narrow), Generalised convulsive seizures following immunisation (narrow), Hypoglycaemia (broad)
 Life Threatening? No
 Birth Defect? No
 Died? No
 Permanent Disability? Yes
 Recovered? No
 Office Visit? No
 ER Visit? Yes
 ER or Doctor Visit? No
 Hospitalized? Yes, 8 days ...

3. LIVE-VIRUS VACCINES ARE GROWN IN CELL LINES FROM ORGANS OF ABORTED BABIES

Cell lines for vaccines (and drugs) don't last forever. Babies are aborted alive in the sac and organs harvested with no anesthesia. Prolife? Research [the reality that is vaccine science](#).⁴³

Many modern day live virus vaccines are grown in cell lines developed from organs of aborted babies and thus is the center for great controversy. This is established fact, clearly labeled by vaccine manufacturers in their inserts and appears on the CDC website. We have attached a chart of the currently used ones according to their lab connotations. Those connotations stand for the following individuals:

WI-38: Developed in 1964, taken from the lung tissue of a 3 month gestation female baby. WI = Wistar Institute, 38 = 38th baby. Is the Growth medium for the Rubella virus- RA273.

RA273: Taken from the lung of a 3 month gestation aborted baby. R=Rubella, A=Abortus, 27=27th baby, 3=3rd tissue explant. (Then cultivated on the WI-38 aborted fetal cell line to get the MMR viruses. Stanley Plotkin, vaccine developer, would later reveal that 40 more babies were aborted after RA273 was successfully isolated, with virus strains taken from 34 of them. A total of over 80 separate abortions were involved in the research and final production of the present day rubella

vaccine- 21 abortions from the original WI-1 through WI-26 fetal cell lines that failed, plus WI-38 itself, plus 67 from the attempts to isolate the rubella virus.)

MERC-5: Developed in 1970 from the lung tissue of a 14 week gestation male baby. Introduced in Great Britain by the Medical Research Council.

HEK-293: Developed in 1973 from aborted baby kidney cells genetically engineered combined with adenovirus. 293 is the number of the experiment.

Per C6: Developed in 2001 from an isolated retina of a baby about 18 weeks gestation. This cell line was made to be 'immortal' but failed. It caused cancerous tumors in mice. Was used in the HIV vaccine trial but caused cancer so it was pulled. Crucell-advent of their PER C6 fetal cell line took off. PER C6 is a normal cell that has been modified to resist cell senescence. In doing so, it introduces the potential for cancer to form in the vaccine recipient.

WI-26 VA4: An SV40 transformed derivative of WI-26, a human diploid cell line derived from embryonic lung tissue of a male Caucasian. The cells have SV40 T-Ag but infectious virus has not been rescued.

WALVAX2: Recently developed from the lung tissue of a 3 month gestation baby girl. To replace the current MERC-5 and WI-38 which are depleting and will be the new MMR. See the PubMed study.⁴⁴

To obtain all these, the scientists had to be present at the time of the abortion because

“In order to sustain 96% of the cells, the live tissue would need to be preserved within 5 minutes of the abortion”

—Dr. C. Ward Kischer.

And it's still happening today. Notice again the last listed: **WALVAX2**. This is a brand new line in which 9 babies died in the making.⁴⁵

And it will admittedly continue. PBS recently reports on how fetal tissue is VITAL to vaccine and drug development.⁴⁶

There are 271 vaccines (and 85 drugs) in the pipeline awaiting approvals that we cannot see the ingredients too yet but you can bet they include fetal lines just like our current ones do.^{47 48}

Why does this matter? Two reasons.

#1: A considerable portion of America is Pro-Life and may object to such a practice if they were made aware of it. Let's be aware and spread that awareness. Certainly it's an understandable reason that people of faith may opt to abstain from such products and why the religious exemption is so important.

#2: Though it is established scientific fact that loose, living DNA can insert itself into the genome of any host, the introduction of aborted fetal DNA via injections (along with adjuvants designed to stimulate the immune response to the proteins and chemicals with side effects of opening the blood brain barrier) has never been studied by vaccine manufacturers nor the FDA. Many scientists now hypothesize that some childhood cancers and neurological disorders can be traced to such genetic interference.⁴⁹

(Following Page: Image Source⁵⁰)

VITAL VACCINE INFORMATION— for moms & dads to make informed choices!

USA & CANADA - ABORTED FETAL CELL LINE PRODUCTS AND ETHICAL ALTERNATIVES (Jan 2015)

Disease	Product Name	Manufacturer	Fetal Cell Line	Ethical Version	Manufacturer	Cell Line
Acute Respiratory	Adenovirus 4,7 Oral	Barr Labs	WI-38	None	N/A	N/A
Chickenpox	All Varivax, Varilrix	Merck, GSK	WI-38, MRC-5	None	N/A	N/A
Cystic Fibrosis	Pulmozyme	Genentech	HEK-293	N-acetylcysteine, Hyper-sal	Various	N/A
Ebola - In Development	NIAID/GSK ChAd3	GSK	Procell92/HEK-293	ZMapp Therapeutic	LeafBio	Tobacco
	AdVacEbola	J&J/Crucell,	PER C6,	rVSV-ZEBOV	Univ. of Texas	Vero
	VSV-EBOV	NewLink Gen	HEK-293	GOVOX-E301, E-302	GeoVax	Chick eggs
Heart problems	Abciximab (Repro)	Eli Lilly	HEK-293	Integrilin, Angiomax	Merck, Medicine Co.	N/A
Hemophilia	rhFVI, VIII, Eloctate	Octapharma, BioGen	HEK-293	Advate, Kogenate	Baxter	Hamster
Hepatitis A	Vaqta, Havrix Avaxim, Epaxal	Merck, GSK Sanofi, Berna	MRC-5 MRC-5	Aimmungen None in US or Canada	Kaketsuken (Japan & Europe)	Vero (monkey)
Hepatitis A & B Hepatitis A & Typhoid	Twinrix Vivaxim	GSK Sanofi	MRC-5 MRC-5	Engerix Hep-B Only Recombivax Hep-B Only	GSK Merck	Yeast Yeast
Infection prevention	G-CSF	Octapharma	HEK-293	Neupogen	Amgen	E-coli
Measles/Mumps/Rubella	MMR, Priorix	Merck, GSK	RA273, WI-38, MRC-5	MR+M (Japan only)	Kitasato Daiichi Sankyo	Hen, rabbit
Measles-Rubella	MR Vax, Eolarix	Merck, GSK.	RA273, WI-38, MRC-5	Attenuvax (Measles Only)* MR (Japan only)	Merck Kitasato Daiichi Sankyo	Hen eggs Hen, rabbit
Mumps-Rubella	Biavax II	Merck	RA273, WI-38	Mumpsvax (Mumps Only)*	Merck	Hen eggs
Rubella	Meruvax II	Merck	RA273, WI-38	Takahashi (Japan only)	Kitasato Daiichi Sankyo	Rabbit
MMR + Chickenpox	ProQuad/MMR-V Priorix Tetra	Merck GSK	RA273, WI-38, MRC-5	None	N/A	N/A
Polio	Poliovax, DT PolAds Polio Sabin (oral)	Sanofi Pasteur GSK	MRC-5 MRC-5	IPOL, IMO VAX® Polio**	Sanofi Pasteur	Vero
Polio Combination (DTaP + polio+ HiB)	Pentacel, Quadracel	Sanofi Pasteur	MRC-5	Pediacel, Pediarix, Any HiB DTaP, IPOL, InfanrixHexa,	Sanofi, GSK	Vero
Rabies	Imovax**	Sanofi Pasteur	MRC-5	RabAvert	Novartis	Hen eggs
Rheumatoid Arthritis	Enbrel	Amgen	WI-26 VA4 - RDNA	Humira, Cimzia, Orenzia	Abbott, UCB, BMS	Hamster
Shingles	Zostavax	Merck.	WI-38, MRC-5	None	N/A	N/A
Smallpox	Acambis 1000	Acambis	MRC-5	ACAM2000, MVA3000	Acambis/Baxter	Vero

Note: Immune-Globulin shots will provide temporary immunity (4-6 months) for Hepatitis-A and Rubella (3-4 months)

***Moral versions of Measles and Mumps are currently UNAVAILABLE as of January 2010 – TELL MERCK TO PROVIDE THEM!**

****NOTE: IMO VAX® Polio is a moral version for polio vaccine in Canada and is not the same as IMO VAX for rabies.**

IF THE PRODUCT YOU ARE QUESTIONING IS NOT LISTED ABOVE, IT DOES NOT USE ABORTED FETAL CELL LINES

4. PROOF PEDIATRICIANS MAKE \$\$ FROM VACCINES

To learn if your pediatrician has your child's best interest at heart, this is mandatory reading.

Pediatricians have begun refusing to accept families who opt out of some or all vaccines.

When my friend's child suffered a life-threatening reaction to a vaccine a week after her first birthday, my friend assumed her pediatrician would write her a medical exemption from future vaccines.

Shortly after receiving a routine set of vaccines, the happy, vibrant one-year-old spiked a 106 degree fever, began having seizures, and was hospitalized. When the unexplained "illness" passed after a week in the hospital, the little girl had lost her ability to walk. My friend describes how her daughter, who had learned to walk several months earlier at 9 months, suddenly "stumbled around like a drunk person" for weeks following the vaccines.

My friend met with a team of pediatricians, neurologists, and naturopathic doctors, and they agreed: Her daughter had suffered a brain injury caused by a reaction to one of the vaccines. Hoping the injury would be temporary and that she might recover and ease her brain inflammation if they could help her small body quickly eliminate the vaccine additives that caused the reaction, my friend's

daughter underwent an intensive detoxification program overseen by a nutritionalist. Slowly, her daughter relearned to walk.

My friend is a practicing attorney who graduated from a Top 10 college. The evidence was overwhelming that her daughter's reaction had been caused by vaccines, she told me.

But a few months later, when she took her daughter back into the pediatrician for a visit, he wanted to vaccinate her daughter again. She was baffled. Why?

After a reader sent a link to a PDF file of Blue Cross Blue Shield's Physician Incentive Program (formerly available online), Wellness & Equality learned that insurance companies pay pediatricians massive bonuses based on the percentage of children who are fully vaccinated by age 2.

So how much money do doctors really make from vaccines?

As the table (right) explains, Blue Cross Blue Shield pays pediatricians \$400 per fully-vaccinated child. If your pediatrician has just 100 fully-vaccinated patients turning 2 this year, that's \$40,000.

Yes, Blue Cross Blue Shield pays your doctor a \$40,000 bonus for fully vaccinating 100 patients under the age of 2.



HEALTH CARE OUTCOMES: PREVENTIVE HEALTH

CHILDHOOD IMMUNIZATIONS – COMBO 10	
Product lines	BCN Commercial
Source	HEDIS
Description	<p>The percentage of children 2 years of age who meet the combination 10 criteria on or before their second birthday:</p> <ul style="list-style-type: none"> • (4) DTaP* vaccinations • (3) IPV* vaccinations • (1) MMR vaccination • (1) VZV vaccination • (3) HiB* vaccinations • (3) Hepatitis B vaccinations • (4) PCV* vaccinations • (1) HepA vaccination • (2 or 3) RV* vaccinations • (2) Influenza** vaccinations <p>*Vaccinations administered prior to 42 days after birth are not counted as a numerator hit. **Vaccinations administered prior to 180 days after birth are not counted as a numerator hit.</p>
Continuous enrollment	Must be continuously enrolled 12 months prior to child's second birthday
Age criteria	Children who turn 2 years of age during 2016
Exclusionary criteria	Children who are documented with an anaphylactic reaction to the vaccine or its components
Numerator	The number of children who completed vaccinations as defined above
Denominator	The eligible population
Level of measure	Provider level
Target: COMM	63%
Payout: COMM	\$400 per Combo 10 completed for each eligible member

If your doctor manages to fully vaccinate 200 patients, that bonus jumps to \$80,000.

The average American pediatrician has 1546 patients, though some pediatricians see many more.⁵¹ The vast majority of those

patients are very young, perhaps because children transition to a family physician or stop visiting the doctor at all as they grow up.

(Image Source ⁵²)

But here's the catch:

Under Blue Cross Blue Shield's rules, pediatricians lose the whole bonus unless at least 63% of patients are fully vaccinated, and that includes the flu vaccine. So it's not just \$400 on your child's head—it could be the whole bonus. To your doctor, your decision to vaccinate your child might be worth \$40,000, or much more, depending on the size of his or her practice.

If your pediatrician recommends that your child under the age of 2 receive the flu vaccine—even though the flu vaccine has never been studied in very young children and evidence suggests that the flu vaccine actually weakens a person's immune system over the long term⁵³ – ask yourself:

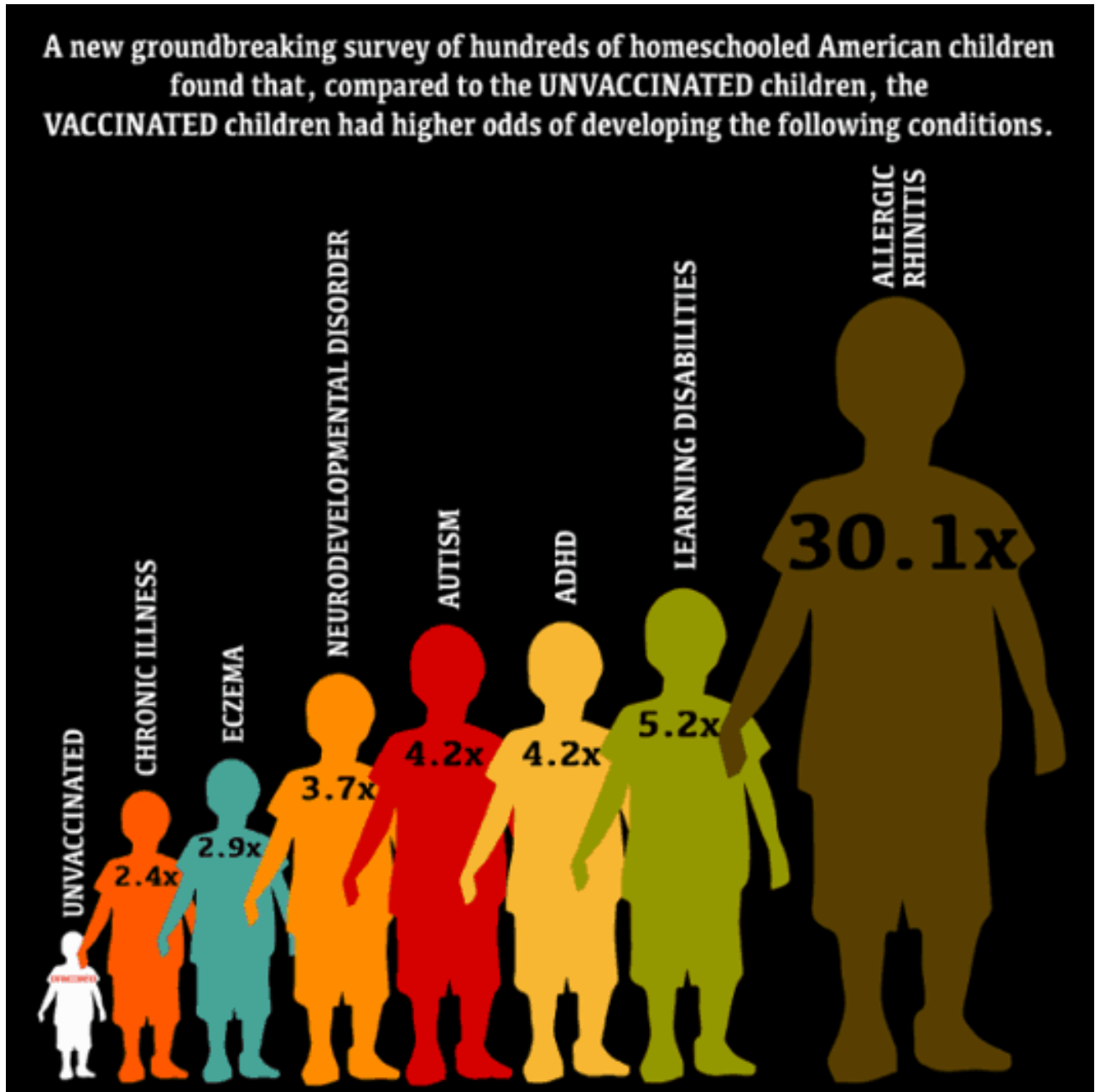
“Is my doctor more concerned with selling me vaccines to keep my child healthy or to send his child to private school?”

A Note Regarding the Sources for The Physician Alliance Blue Cross Blue Shield Incentive Program ⁵⁴ as of 4/30/2017:

After Wellness & Equality ⁵⁵ published this article, Blue Cross Blue Shield locked online access to their incentive program and then removed the page altogether. Clearly this incentive program was never intended to be public knowledge and created a bit of PR issue for them. Fortunately, another website managed to save the entire BCBS incentive program booklet and has published it in entirety online... Find the link in the endnotes.⁵⁶

5. VACCINATED VS. UNVACCINATED CHILDREN: GUESS WHO IS HEALTHIER?

Until last year, there had not been one single published study that compared children to see who is healthier (or sicker) years after the shots. This first-of-its-kind pilot study⁵⁷ of vaccinated vs. unvaccinated American homeschooled children shows who is really ailing.



(Image Source⁵⁸)

HERE ARE THE OUTSTANDING PILOT STUDY FINDINGS TO HELP YOU MAKE THE BEST CHOICE FOR YOUR CHILD:

What it found about increases in immune-mediated diseases like allergies and neurodevelopmental diseases including autism, should make all parents think twice.

*Vaccinated children were more than **three times as likely to be diagnosed on the Autism Spectrum** than unvaccinated children.⁵⁹

*Vaccinated children were **30-fold more likely to be diagnosed with allergic rhinitis (hay fever)** than non-vaccinated children.

*Vaccinated children were **22-fold more likely to require an allergy medication.**

*Vaccinated children had **more than quadruple the risk of being diagnosed with a learning disability** than unvaccinated children.

*Vaccinated children were **300 percent more likely to be diagnosed with Attention Deficit Hyperactivity Disorder** than unvaccinated children.

*Vaccinated children were **340 percent more likely to have been diagnosed with pneumonia** than unvaccinated children.

*Vaccinated children were **300 percent more likely to be diagnosed with an ear infection** than unvaccinated children.

*Vaccinated children were over **two-fold more likely to have taken antibiotics and hospitalized more often.** See “Messed up microbiomes” in my post.

*Vaccinated children were **700 percent more likely to have surgery to insert ear drainage tubes** than unvaccinated children.

*Vaccinated children were **2.5-fold more likely to be diagnosed with any chronic illness** than unvaccinated children

THE SCIENCE

The Children’s Medical Safety Research Institute⁶⁰ distilled the research findings.

“Both vaccinated and unvaccinated children in the study got sick sometimes. As expected, vaccinated children were less likely to have some infections they were vaccinated against: they were 71% less likely to have had chickenpox (Odds Ratio = 0.26), 75% less likely to have had whooping cough (pertussis) (OR = 0.3), and 87% less likely to have had a rubella infection (OR = 0.1) (see Table 2).”⁶¹

However, in spite of public health hysteria over outbreaks of measles at Disneyland and mumps resurgence, there was no evidence that vaccinated children were any more protected against these so-called “vaccine-preventable diseases”. Children in both groups had about the same rates of infection with measles, mumps, Hepatitis A and B, influenza, rotavirus and meningitis (both viral and bacterial).”

Unvaccinated children in the study were actually better protected against some “vaccine-preventable diseases” than children who got the shots. Since 2000, the CDC has recommended four shots against seven different strains of pneumococcal infections before age 15 months (13 strains since 2010), but vaccinated children in the study were 340 percent more likely to have been diagnosed with pneumonia compared to unvaccinated children (OR = 4.4).

BRAIN DRAIN

- In the 80s, autism occurred one in 10,000 children
- By the early 1990s, one in 2,500
- Five years ago, one in 88 children were diagnosed
- Today it is one in 68.

In the pilot homeschooler study, the risk of being diagnosed on the spectrum was more than four-fold higher among vaccinated children (OR 4.3).

The CDC still quotes a 2004 Pediatrics study⁶² claiming to debunk a link between autism and vaccines even though one of its authors, their own top scientist William Thompson, admitted that he and colleagues colluded to obscure and then shred data (he kept copies) showing a link between autism and the MMR vaccine. Thompson confessed in one taped telephone chat to Brian Hooker,⁶³ a bioengineer professor at Simpson University and the father of an autistic child.

The Thompson whistleblower case is the basis of the 2016 documentary **Vaxxed: From Cover-Up to Catastrophe**⁶⁴ by Andrew Wakefield, the gastroenterologist who was among the first to suggest a link the MMR vaccine and autism in the late ‘90s, and who has become a symbol of how the system deals with dissenters. It’s the film the CDC does not want anyone to see.

Brain and nervous system damage from vaccines is nothing new. Crippling Acute Disseminated Encephalomyelitis, for example, (which causes MRI-visible white spots on the brain), is a documented side effect for virtually every vaccine.⁶⁵ Narcolepsy⁶⁶ and Guillain Barré Syndrome⁶⁷ are other examples.

MORE FACTS:

FACT: Health in the U.S. on Such A Steep Decline (Childhood Disability Rate Jumps 16% Over Past Decade)⁶⁸

FACT: “Findings show a counter-intuitive relationship: nations that require more vaccine doses have higher infant mortality rates.”⁶⁹

For more information, read the whole post on Deep Roots at Home: Vaccinated vs. Unvaccinated Children: Guess Who Is Healthier?⁷⁰

6. WE ARE SICKER BECAUSE OF THE FLU VACCINE

Are you curious why more people were sick in 2017 and dying from the flu?

Well, according to the research, the findings showed that those individuals who had received the flu vaccine were “shedding” 6.3 times more virus than the unvaccinated!

The most recent research from the National Academy of Sciences proves:

- 1. That the vaccinated are “shedding”/ spreading more virus simply by breathing.**
- 2. That prior vaccination has weakened the immune systems of those who got the shot.**
- 3. Individuals who receive the flu vaccine are placing others around them at greater risk than the unvaccinated.**
- 4. The vaccine doesn’t protect one from infection.** ⁷¹

Text from the research:

“Self-reported vaccination for the current season was associated with a trend ($P < 0.10$) toward higher viral shedding in fine aerosol samples; vaccination with both the current and previous year’s seasonal vaccines, however, was significantly associated with greater fine-aerosol shedding in unadjusted

and adjusted models ($P < 0.01$). In adjusted models, we observed 6.3 (95% CI 1.9–21.5) times more aerosol shedding among cases with vaccination in the current and previous season compared with having no vaccination in those two seasons.”

“The association of current and prior year vaccination with increased shedding of influenza A might lead one to speculate that certain types of prior immunity promote lung inflammation, airway closure, and aerosol generation. This first observation of the phenomenon needs confirmation. If confirmed, this observation, together with recent literature suggesting reduced protection with annual vaccination, would have implications for influenza vaccination recommendations and policies.”⁷²

What does this mean for families facing decisions on the flu shot before winter?

FACT: Higher viral shedding: those flu vaccinated were breathing out more flu virus and are spreading it more than the unvaccinated.

So when health “authorities” like the CDC promote the flu vaccine by saying things like “the vaccine protects you and those around you,” “everyone needs the vaccine because of ‘herd’ immunity,” or “you have to get the vaccine to protect the elderly, the very young, and the weakened cancer patients”, etc., they would be telling you the opposite of the truth!

FACT: 6.3 times more aerosol shedding: those vaccinated were spreading more flu virus into the air around them simply by breathing as compared to those who hadn't received the flu vaccine that same year and/or the flu vaccine from the previous year. Those vaccinated pose a greater risk to the elderly, the very young, and immune-compromised cancer patients, and that the unvaccinated spread the disease less and protect others better. Thus the vaccine does the exact opposite of what people have been told and explains why we are seeing more and more people get sick earlier each year and more people die from the flu.

FACT: Reduced protection with annual vaccination.

The flu vaccine weakens a person's immunity against infectious illness.

This fact has been shown in #5 above with multiple studies comparing the health of Vaccinated vs. Unvaccinated Children

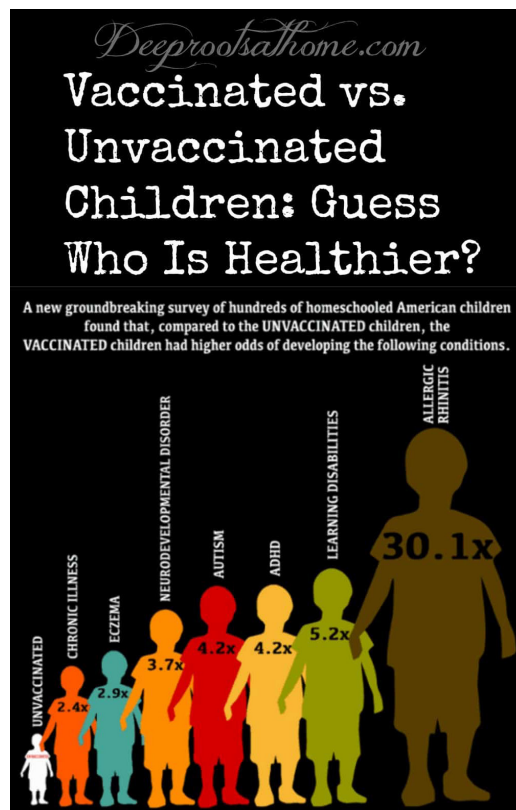
And this study is particularly disturbing: **Effectiveness of trivalent inactivated influenza vaccine in influenza-related hospitalization in children: A case-control study** which found that **children receiving the annual flu vaccine had a “threefold increased risk of hospitalization.”**⁷³

FACT: “Prior immunity” promotes lung inflammation. Dr. Dale Brown, the Wild doc⁷⁴ explains it this way, “Now I wanted to explain this part so that people wouldn't be misled. Immunity and vaccination are not synonymous, in fact, this study provides the very evidence to prove that vaccinations like the influenza vaccine don't provide immunity, hence the vaccinated being infected and spread it more. The correct wording should have read that **“prior**

VACCINATIONS promote lung inflammation” as this fact has been shown in animal studies.⁷⁵ This means that when you receive a flu vaccine, elucidated by this study and animal studies,⁷⁶ the lungs are damaged. Hence the scientific term/phrase “vaccine-associated enhanced respiratory disease” which in animal studies has shown that flu vaccinations damage lung tissue of the vaccinated and distort or weaken the natural immunity of the host, person or animal. Could

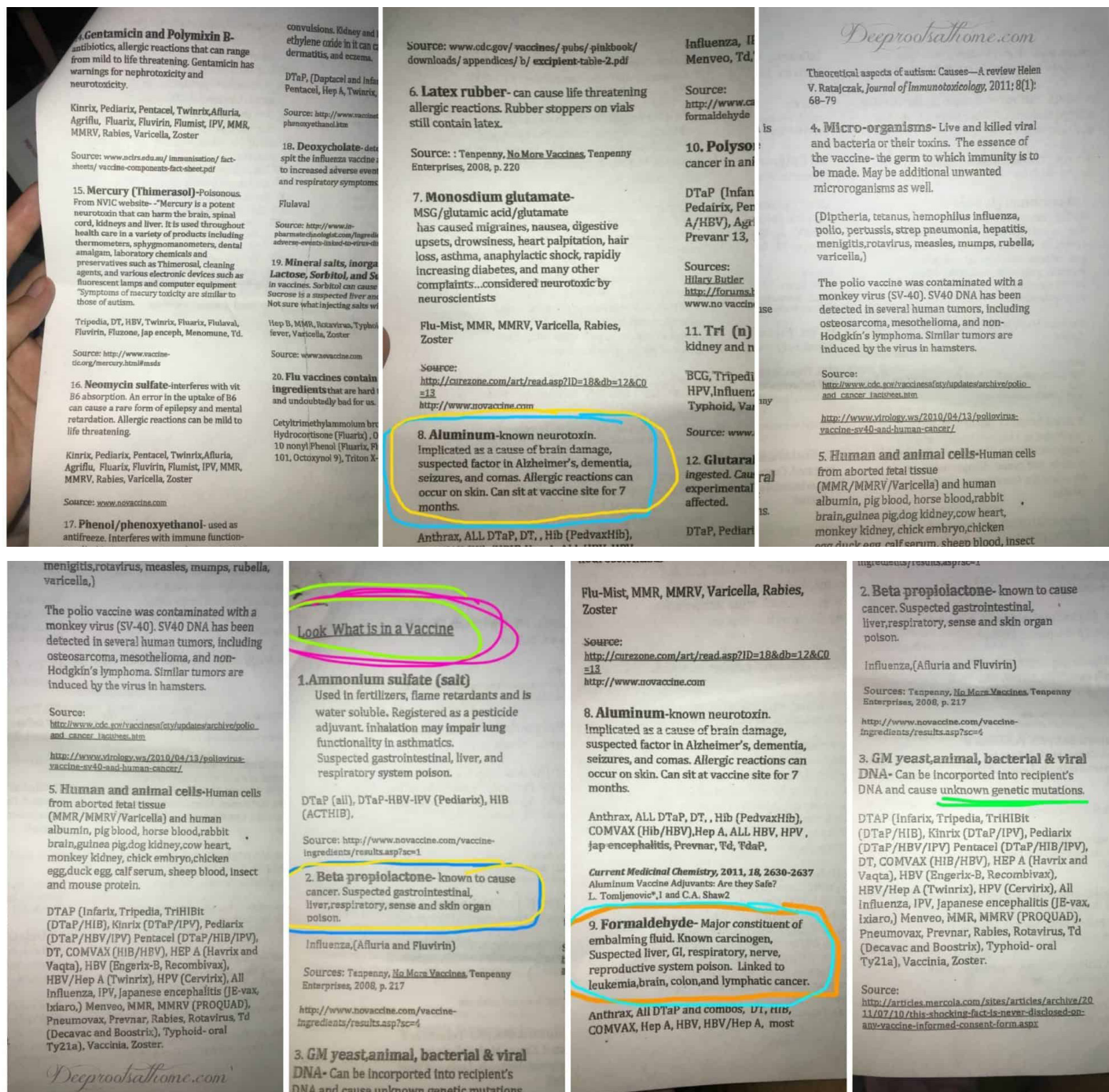
this be just one more reason more people are developing severe lung diseases like COPD or why the rates of asthma in America are increasing in the vaccinated?”⁷⁷

(Image Source ⁷⁸)



7. WHAT IS TRUE INFORMED CONSENT?

One mother took her son Madden to their pediatrician with real questions, and he gave her these sheets to read (along with vaccine inserts). After her questions, he agreed that he could not in good conscience give her child shots. McKayla's August 22, 2018 FB post: "Just some food for thought. Straight from Madden's doctor. But of course the CDC won't tell you that because "vaccines save lives." #EducateBeforeYouVaccinate. (Image Source ⁷⁹)



The Right to Make a Risk Decision Belongs to You

I do not tell anyone what risks to take and never will. The right and responsibility for making a risk decision belongs to the person taking the risk.

When you become informed and think rationally about a risk you or your child will take - and then follow your conscience - you own that decision.

I defend the ethical principle of informed consent to vaccine risk-taking because vaccines are pharmaceutical products that carry a risk of injury, death and failure, and because informed consent to medical risk taking is the central ethical principle guiding the ethical practice of medicine.

(Image Source ⁸⁰)

CDC CHILDHOOD VACCINE SCHEDULE

#KNOWTHEVAX

1980

DTP (2 MONTHS)
OPV (2 MONTHS)
DTP (4 MONTHS)
OPV (4 MONTHS)
DTP (6 MONTHS)
OPV (6 MONTHS)
MMR (12 MONTHS)
DTP (18 MONTHS)
DTP (5 YRS)

2016

INFLUENZA (PREGNANCY)
TDAP (PREGNANCY)
HEP B (BIRTH)
HEP B (2 MONTHS)
ROTAVIRUS (2 MONTHS)
DTAP (2 MONTHS)
HIB (2 MONTHS)
PCV (2 MONTHS)
IPV (2 MONTHS)
ROTAVIRUS (4 MONTHS)
DTAP (4 MONTHS)
HIB (4 MONTHS)
PCV (4 MONTHS)
IPV (4 MONTHS)
HEP B (4 MONTHS)
ROTAVIRUS (6 MONTHS)
DTAP (6 MONTHS)
HIB (6 MONTHS)
PCV (6 MONTHS)
IPV (6 MONTHS)
INFLUENZA (6 MONTHS)
INFLUENZA (7 MONTHS)
HIB (12 MONTHS)
PCV (12 MONTHS)
MMR (12 MONTHS)
VARICELLA (12 MONTHS)
HEP A (12 MONTHS)
DTAP (18 MONTHS)
INFLUENZA (18 MONTHS)
HEP A (18 MONTHS)
INFLUENZA (30 MONTHS)
INFLUENZA (42 MONTHS)
DTAP (4 YRS)
IPV (4 YRS)
MMR (4 YRS)
VARICELLA (4 YRS)
INFLUENZA (5 YRS)
INFLUENZA (6 YRS)
INFLUENZA (7 YRS)
INFLUENZA (8 YRS)
INFLUENZA (9 YRS)
HPV (9 YRS)
INFLUENZA (10 YRS)
HPV (10 YRS)
INFLUENZA (11 YRS)
HPV (11 YRS)
TDAP (12 YRS)
INFLUENZA (12 YRS)
MENINGOCOCCAL (12 YRS)
INFLUENZA (13 YRS)
INFLUENZA (14 YRS)
INFLUENZA (15 YRS)
INFLUENZA (16 YRS)
MENINGOCOCCAL (16 YRS)
INFLUENZA (17 YRS)
INFLUENZA (18 YRS)

1986

**NATIONAL CHILDHOOD
VACCINE INJURY ACT
SIGNED INTO LAW-
FREEING MANUFACTURERS
FROM ALL FINANCIAL
LIABILITY FOR INJURY
OR DEATH.
THE SCHEDULE
WENT FROM:
6 INJECTIONS &
3 ORAL VACCINES TO
53 INJECTIONS
& 3 ORAL VACCINES**

8. GOOD VACCINE PRACTICE IN NORWAY

An American parent could reasonably decide not to follow the C.D.C.'s current vaccination schedule by choosing to vaccinate on the schedule they use in Norway, which has one of the lowest infant mortality rates in the world.

In Norway no childhood vaccinations are routinely given in the first three months of life⁸¹ whereas a 2-month-old American infant has been vaccinated against at least four diseases. At the same time, 99 percent of Norwegian infants are breastfed⁸² when they leave the hospital and generous family leave policies facilitate successful (and exclusive) breastfeeding. For an American mom who is exclusively breastfeeding and not putting her child in daycare, following the Norwegian schedule would be a philosophical, evidence-based, demonstrably better choice.

It is a news media-driven misperception that parents who claim philosophical or religious exemptions are uneducated or misinformed.

Most parents who individualize the vaccine schedule are actively educating themselves, continually assessing their family's specific health needs, and doing everything they can to keep their children safe and healthy.

9. TDAP (PERTUSSIS WHOOPING COUGH VACCINE) FOR PREGNANT WOMEN?

A recent Pediatrics study has revealed that whooping cough pertussis vaccine effectiveness among preschool children is estimated to be only 45%. Its effectiveness drops to **less than 9%** after four years. Thus, despite very high coverage of greater than 90%, they still had the highest incidence of pertussis. ,⁸³

Consider this study: **Baboon Study Reveals New Shortcoming of Pertussis Vaccine**⁸⁴

After confirming the **ineffectiveness** of pertussis whooping cough vaccine to prevent infection and transmission among vaccinated children, the CDC now recommends **pregnant women** get the whooping cough vaccine for **each pregnancy**.⁸⁵

Is this a well-reasoned scientific decision?

(To me that is like pushing a car that won't start and is full of explosives into your garage.)

GLARING LACK OF SAFETY TESTING

You have to look no further than information in the vaccine manufacturer product inserts and posted online by the U.S. Food and Drug Administration (FDA) and Centers for Disease Control (CDC) to quickly answer the above question:

FACT: Injuries and deaths from pertussis-containing vaccines are the most compensated claims in the federal Vaccine

Injury Compensation Program (VICP) and influenza vaccine injuries and deaths are the second most compensated claim.⁸⁶

FACT: When a pregnant woman is harmed by an influenza or Tdap vaccine, drug companies selling the vaccines in the U.S., doctors and other vaccine providers are shielded from vaccine injury lawsuits⁸⁷ but it is unclear whether vaccine injuries sustained by an unborn child in the womb will qualify for federal vaccine injury compensation.⁸⁸

FACT: The Food and Drug Administration (FDA) lists influenza and Tdap vaccines as either Pregnancy Category B or C biologicals⁸⁹ which means that adequate testing has not been done in humans to demonstrate safety for pregnant women and **it is not known whether the vaccines can cause fetal harm or affect mother's reproductive capacity and "should be given to a pregnant woman only if clearly needed."**^{90 91 92}

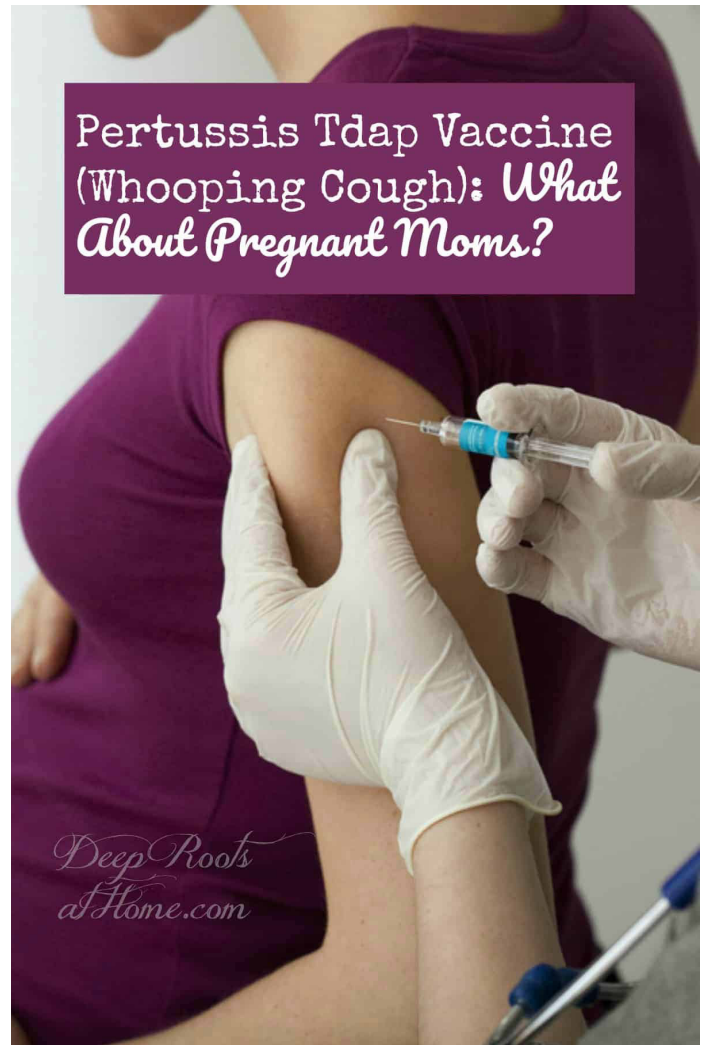
FACT: There are ingredients in influenza and pertussis containing Tdap vaccines that have not been fully evaluated for potential genotoxic⁹³ or other adverse effects on the human fetus developing in the womb that may negatively affect health after birth, including aluminum adjuvants, mercury containing (Thimerosal) preservatives and many more bioactive and potentially toxic ingredients.^{94 95 96 97 98 99 100 101 102 103}

FACT: A 2013 published study evaluating reports of acute disseminated encephalomyelitis (ADEM) following vaccination in the U. S. Vaccine Adverse Events Reporting System (VAERS) and in a European vaccine reaction reporting system found that pertussis containing Tdap was among the vaccines most frequently associated with brain inflammation in children between birth and age five.¹⁰⁴

FACT: Infant and Maternal Mortality Rates Are High in America.¹⁰⁵ More than 3x the risk of pregnancy-related deaths than three decades ago (1987-2014).¹⁰⁶

If you are pregnant and have other children, be aware that the American Academy of Pediatrics is urging pediatricians to vaccinate parents bringing their children in for sick or well baby visits, especially pregnant women.¹⁰⁷ If an obstetrician or pediatrician pressures you to get vaccinated while you are pregnant, ask the doctor to show you the science. If you conclude the vaccine's benefits do not outweigh the risks for you and your baby but are threatened or sanctioned in any way for making an informed choice, you should find another doctor who will treat you with respect and honor your health care choices.

Read **The Sound Vitamin C Treatment of Whooping Cough by Suzanne Humphries, MD** (See endnotes for download link).¹⁰⁸ My family always keeps Vitamin C in the Sodium ascorbate form on hand.



An excellent, short (but profound) video by my favorite (and the popular) pediatrician, Dr. Paul Thomas, can be found on the resources page.

Video: Vaccine Talk: Tdap Safe for Pregnant Moms

deeproootsathome.com/vaccine-videos

See the whole post on Deep Roots at Home: Pertussis (Whooping Cough) Vaccine: Pregnant Moms May Want To Pass¹⁰⁹

10. PROMINENT DOCTORS AND SCIENTISTS WHO BELIEVE WE HAVE NOT BEEN TOLD THE TRUTH

*“The public is woefully uninformed on vaccine risks due to government and mainstream media censorship.”*¹¹⁰ —**Dr. Mark Geier, MD**, National Institute of Health, and past professor at Johns Hopkins University.

*“Every one of my medical colleagues who has taken the time to do the research for himself or herself, instead of just parroting the mainstream and accepting the CDC propaganda as truth, including Jim Sears, MD, Dr. Rachael, MD, Jim Meehan, MD, Kelly Brogan, MD, Suzanne Humphries, MD, Aviva Romm, MD, Mark Hyman, MD, Dr. Bob Sears, MD, Lawrence Palevsky, MD, Dr. Joseph Mercola, DO, David Berger, MD, Kenneth Stoller, MD, Elizabeth Mumper, MD, Cindy Schneider, MD, Bose Ravenel, MD, Lonna Larsh, MD, Gary G. Kohls, MD, Randy Naidoo, MD, Shira Miller, M.D., and literally hundreds more who I can’t tag because they prefer to stay behind the scenes, has concluded that we are not being told the truth about vaccine safety and vaccine side-effects.”*¹¹¹ —**Paul Thomas, MD**

The founder of the CDC, **Dr. Alexander Langmuir**,¹¹² later Emeritus Professor at Harvard, was adamant when he stated: *“I would not take the flu vaccine, my wife doesn’t take the flu vaccine, no one should take the flu vaccine. And in fact, when I was head of the CDC, I wanted to make that as a public statement, and I refused to say that you should take the flu vaccine.”* One reason being the flu vaccine is especially problematic in being recommended or required annually, and still contains Thimerosal and aluminum. *“That’s why I’m now a professor at Harvard.”*¹¹³

Jonas Salk, inventor of the Inactivated polio vaccine (IPV), testified before a Senate subcommittee that nearly all polio outbreaks since 1961 were caused by the oral polio vaccine.¹¹⁴

*“The vaccinations are not working and they are dangerous. We should be working with nature.”*¹¹⁵

— **Dr. Lendon Smith, MD**, The Children’s Doctor, popular TV doctor 70s-90s

“The greatest threat of childhood diseases lies in the dangerous and ineffectual efforts made to prevent them through mass immunization... There is no convincing scientific evidence that mass inoculations can be credited with eliminating any childhood disease.”¹¹⁶

— **Dr. Robert Mendelsohn**, MD Head of the Medical Licensing Board for the State of Illinois 70s thru 90s. (One of the first medical books I read as a young mom was by him.)

“There is no evidence that any influenza vaccine thus far developed is effective in preventing or mitigating any attack of influenza. The producers of these vaccines know that they are worthless, but they go on selling them anyway.”

— **Dr. J. Anthony Morris**, Former Chief Vaccine Control Officer, US FDA

(See more in the original article on Deep Roots at Home ¹¹⁷)

Medical Doctors Opposed to Forced Vaccinations

Should Their Views be Silenced?



11. OTHER RESOURCES

VIDEO PAGE RESOURCES:

DeepRootsAtHome.com/vaccine-videos

With the help of several intriguing short videos, I think I can get across the true essence of why I keep writing about this topic!

They are intriguing because they include:

- Undisputed evidence why measles are vastly overrated
- Dr. Diane Harper, lead researcher, HPV (Gardasil) vaccine trials
- What Dr. Stephanie Christner found when she investigated after her own daughter's death
- What Johns Hopkins and CDC scientists knew and published in 2000
- Studies being pulled from scrutiny and how the MMR affects black baby boys 340% more if given before age 3
- Suzanne Humphries on autism, vaccines, and infant immunity

NEWS (MUCH OF WHAT HAS BEEN CENSORED). YOU DECIDE:

A large vaccine and prescription medication producer, Sanofi to Pay \$25M to Settle Federal Bribery Charges^{9/2018}.

- <https://www.fdanews.com/articles/188299-sanofi-to-pay-25m-to-settle-federal-bribery-charges>¹¹⁸
- <https://vaxxter.com/vaccine-maker-sanofi-pharma-fined-millions-for-bribery>¹¹⁹

Rep. Bill Posey Calling for an Investigation of the CDC's MMR research fraud

- <https://www.c-span.org/video/?c4546421/rep-bill-posey-calling-investigation-cdcs-mmr-reasearch-fraud>¹²⁰

22,000 U.S. Nurses Refuse Flu Vaccine At Expense Of Career

- <https://deeproofsathome.com/22000-us-nurses-refuse-flu-vaccines-at-expense-of-career>¹²¹

Note to readers: I'm neither anti- or pro-vaccine; I am pro-science. Watch the video on the page called The Vaccine Friendly Plan (I recommend Dr. Paul Thomas's Vaccine Schedule¹²²) **Find a vaccine-friendly doctor near you at the sites in the endnotes.** ^{123, 124, 125}

“You may choose to look the other way, but you can never say again that you did not know.” —William Wilberforce

Endnotes (Links all available at <https://DeepRootsAtHome.com/vaccine-videos>)

- 1 http://www.drpaulapproved.com/uploads/6/4/8/3/64831775/dr_paul_approved_vaccine_plan.pdf
- 2 <https://deeproofsathome.com/vaccine-videos/>
- 3 <https://deeproofsathome.com/parents-vaccinate/>
- 4 <https://www.cdc.gov/vaccinesafety/concerns/thimerosal/index.html>
- 5 <http://www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm093833.htm>
- 6 <http://www.ingentaconnect.com/content/ben/cmc/2011/00000018/00000017/art00011>
- 7 <https://drjockers.com/aluminum-vaccines/>
- 8 <http://www.ingentaconnect.com/content/ben/cmc/2011/00000018/00000017/art00011>
- 9 <https://articles.mercola.com/sites/articles/archive/2011/09/21/could-this-be-the-most-dangerous-aspect-of-vaccines.aspx>
- 10 <http://pediatrics.aappublications.org/cgi/content/abstract/97/3/413>
- 11 <https://articles.mercola.com/sites/articles/archive/2008/02/26/how-vaccines-can-damage-your-brain.aspx>
- 12 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4344667/>
- 13 <https://deeproofsathome.com/acetaminophen-childs-vaccinations/>
- 14 <https://pdfs.semanticscholar.org/d98f/a83ad6b15a1e8783de6834e6cc595ac340d3.pdf>
- 15 <https://pdfs.semanticscholar.org/d98f/a83ad6b15a1e8783de6834e6cc595ac340d3.pdf>
- 16 <https://deeproofsathome.com/hepatitis-b-vaccine-aluminum/>
- 17 <https://jbhandleblog.com/home/2018/4/1/international2018>
- 18 <http://areyoucrooked.com/>
- 19 https://www.rki.de/EN/Content/Institute/institute_node.html
- 20 <http://www.gesundheitlicheaufklaerung.de/impfen-macht-krank#comment-248282>
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