

**Swine Flu, Vaccines, Viruses and Fear**  
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Flu and H1N1 virus season is in full swing. And so is the propaganda scaring you about these viruses.

A virus is not a live particle. So why are we afraid?

Virus particles are one-millionth of an inch long. They are 1000 times smaller than bacteria, and bacteria are smaller than most human cells. In fact, viruses cannot be seen with the naked eye, and can only be observed with an electron microscope. Viruses are merely pieces of genetic materials, either single or double stranded RNA or DNA. **Unlike human cells or bacteria, viruses cannot replicate themselves or carry out any chemical reactions on their own.** Viruses are only able to live and make more viruses if they are situated in a host cell (animal, plant or human) where they become part of the genetic material of their host's cells. **Outside a host cell, viruses cannot function. Thus, viruses have no spontaneous life of their own, and are influenced by a host of multiple environmental factors that will spontaneously turn them on and turn them off.**

As one of the basic tenets of conventional vaccine science, we are taught that *vaccines teach the immune system to recognize organisms before humans encounter them*. How is this possible, or probable? **Thousands, if not millions of viruses exist all around us, in the cells of plants and animals, and in the cells of our human bodies, at all times.** They may not be in the *active* process of replicating or infecting us, but they are here, in our bodies, and in our environments; they lay dormant in the genetic codes of plants, animals, and the cells of our human bodies, all the time. We don't have to have viral antibodies in our blood for us to know that our bodies already harbor them or have been exposed to them.

So how have modern medical experts figured out that somehow the 3 influenza viruses in the seasonal flu vaccine, and the 1 influenza virus in the H1N1 vaccine, are the only 4 viruses in the world we have yet to be exposed to, amongst all of the thousands, if not millions of viruses already in our environment, and in our own cells? And, how is it that we need to fear them above and beyond all other viruses? What makes them so different? Statistically speaking, we are more likely to already be harboring them as they sit dormant in our cells, yet we are not sick from them. It is also possible for us to have been previously infected by these four viruses without our knowledge, long before we are "introduced to them" through a vaccine. Then, why are we made to fear *these 4* viruses as if they are new to us?

Now that we are entering the winter season, we are made to believe the 4 flu viruses in the seasonal flu and H1N1 vaccines have suddenly arrived. We are being scared into believing these 4 influenza flu viruses are making their way into our society as we speak, and are going to wreak havoc on our health at any moment. We are led to imagine that these 4 viruses are waiting at the coastal borders for winter to come so they can invade our country and make us all sick. These viruses, and only these threatening viruses, somehow know not to enter our borders and expose themselves to us until winter time has arrived.....

It is important to remember that viruses are present at all times of the year. They don't just show up because it's winter. People come down with flu-like illnesses all year round. Just look at what happened during springtime in Mexico and all around the world. So, why have we become afraid all of a sudden because it's winter, and why has that sent us into a frenzy about these viruses, and only these viruses?

Most of us are led to believe that we develop flu-like illnesses due to exposures to airborne particles from sick people who are either coughing or sneezing on us. A 2009 study in the Journal of Medical Virology, however, shows us that **mere breathing alone can also generate small particles carrying airborne viruses.** We're always inhaling viral particles, even from healthy people, and not necessarily harboring organisms in our bodies that others are not carrying in their bodies. Since we pretty much breathe in the same air as everyone around us, we colonize our noses and our airways with the same micro-organisms as everyone else. Even if we are exposed to someone who is coughing or sneezing on us or around us, it doesn't necessarily translate into our coming down with their illness.

**Exposure to a virus, therefore, is not sufficient for us to get a viral illness, since we're always exposed even if no one around us is sick with a flu-like illness.** And, more often than not, our bodies are in a state of wellness, and not in a state of sickness, in spite of the ordinary viral exposures from mere breathing, or the occasional person who sneezes and coughs on us. Then, why do we fear that the only way we're going to get sick is if we're around someone who is sick, when viral particles are around us and within us at all times, in sickness and in health?

Despite what we learn in our medical training, it is not commonly publicized that the majority of viruses that contribute to flu-like illnesses throughout the year, especially in the winter, **are not caused by viruses in the influenza virus family.** Put another way, the 3 influenza viruses in the seasonal flu vaccine, and the 1 influenza virus in the H1N1 vaccine, **are not the main causes of flu-like illnesses in humans each year, and each winter.** Most people who get a flu-like illness, or even die from complications of a flu-like illness each winter, do not get infected by one of these 4 influenza flu viruses that we vaccinate against. They simply get flu-like illnesses from run-of-the-mill, garden variety viruses that are present all year round which, for whatever reason, are activated more commonly in the winter months. So why are we made to fear these 4 viruses, and encouraged to get vaccinated against them?

We are further led to believe that 36,000 people die of the seasonal flu each year due to the influenza virus. If we read the CDC website, however, we find that this number is misleading. The authorities at the CDC state they “don’t know exactly how many people die of the (influenza) flu each year because most people who die from seasonal flu-related complications are not tested for the flu (influenza virus).” This is a bit shocking. Then, how do the experts at the CDC know, and how can they report, that 36,000 deaths occur each year from seasonal flu-related complications at the hands of an influenza viral illness, when they state that they don’t test people with seasonal flu for the influenza virus? Answer: They don’t know, and they shouldn’t report these false numbers. Instead, they mislead us with inappropriate conclusions.

According to the CDC, the number 36,000 deaths comes from a 2003 JAMA study which used a statistical model to *estimate* the number of flu-related deaths over 9 flu seasons in the 1990s, among people whose underlying causes of death on their death certificates were listed as **respiratory or circulatory diseases**. Read this sentence again carefully. The investigators in this study implied that the number of deaths from respiratory or circulatory diseases in these 9 flu seasons were really due to flu-related illnesses.

Yet, the people whose deaths were due to respiratory or circulatory diseases **DID NOT have confirmatory lab tests of true influenza virus related illnesses, nor was there any clinical evidence linking their cause of death from respiratory or circulatory diseases to any type of flu-related illnesses. All we can say about the cause of death of the people whose death certificates they reviewed, is that they died of respiratory or circulatory diseases. Period.**

Despite the lack of confirmatory data from this study and, based on the CDC’s admission that **most people with seasonal flu are not tested for the influenza virus**, the experts manufactured the number 36,000 deaths based on an *inference* that if people died from respiratory or circulatory diseases during flu season, their deaths must have been due to an influenza viral illness. Therefore, we are scared into believing that an estimated 36,000 people die of the influenza virus each year. So, get your flu shot based on this misinformation, and knowing that **most flu-related illnesses are not caused by influenza viruses in the first place**. How is this passed off as good science, and for what purpose is it allowed to be passed off at all?

We are told over and over again that 36,000 people die each year of the flu, and most people believe it as truth, because we’re told over and over again that 36,000 people die each year of the flu. In reality, there are no true data about how many people with seasonal flu die of influenza related illnesses each year, or data showing how many people actually have an influenza viral illness that is responsible for their flu-like symptoms. Then why are we mandated and, in some cases strong-armed, into getting the flu vaccine when there are no confirmatory data to help us understand how many people with seasonal flu actually die from illnesses due to these influenza viruses, or if influenza viral illnesses are a major health problem at all?

In looking further at the seasonal flu vaccine, there are multiple studies performed by Tom Jefferson, MD at the Cochrane Vaccine Field in Italy, showing that flu vaccines have little or no effect on reducing hospitalizations and deaths from the flu, or on reducing the number of people who get the flu. His investigations have also shown that little comparative evidence exists on the safety of the flu vaccine.

In addition, at an American Thoracic International Society Conference in May 2009, the flu vaccine, which had been given to 263 children who developed documented cases of influenza illness despite being given the vaccine, was found to be ineffective in protecting these children against hospitalization, particularly for children with asthma. There was also a 3-fold increased risk for hospitalization in children with asthma who had received the flu vaccine, and the investigators concluded that the flu vaccine had unknown effects on patients with asthma.

Yet, parents of children with asthma are strongly encouraged to give their children the flu vaccine which, by the way, has never been studied for safety and efficacy on children with asthma. We are simply told that they should receive the vaccine since the flu-like illness (most commonly not even due to the influenza virus) would be extremely detrimental to their health.

The influenza flu virus du jour is the H1N1 virus. **This year, anyone who has a flu-like illness is automatically assumed to have an H1N1 virus infection, whether they are tested for the virus or not.** (Remember how many viruses there are in our environment that can possibly infect us.) In situations where people with flu-like illnesses have tested positive for H1N1 virus with a nasal swab, they are automatically assumed to be sick from the H1N1 virus simply because the virus was found in their noses at the time of their illnesses. A simple conclusion is made by the experts; people come down with flu-like illnesses, they test positive for H1N1 (or not), and the H1N1 virus is believed to be what **caused** their flu-like illnesses. But, not so fast. We cannot make this conclusion without more scientific clarity. The mere presence of the virus in someone who has flu-like symptoms does not prove causality, unless we have studied a proper control group to evaluate the carrier rate of H1N1 in healthy people.

In order to prove causation, we have to do a study comparing the number of people with flu-like illnesses, who test positive for the H1N1 virus, with the number of adults who also test positive for carrying the H1N1 virus in their noses, and are healthy and don’t have the flu. If a large enough number of healthy adults are also carrying H1N1 viruses in their noses, in numbers equal to or close to the numbers of people with flu-like illnesses who are also carrying H1N1 virus, then we could only conclude that the people who have flu-like symptoms and test positive for H1N1 in their noses, only have H1N1 virus present in their noses. We cannot make any claims that the virus is **causing** their illnesses. So, despite what’s being reported in the media, we don’t know how many people are ill due to the H1N1 virus because the testing of a proper control group has not been done, and most people who are having flu-like

symptoms are not tested for the H1N1 virus.

Pregnant women are also advised to get the seasonal flu vaccine, and now the H1N1 vaccine. Yet, if we read the package insert of the flu vaccine and the H1N1 vaccine, they both state that, “animal reproduction studies have not been conducted with Influenza A (H1N1) 2009 Monovalent Vaccine or the flu vaccine. It is also not known whether Influenza A (H1N1) 2009 Monovalent Vaccine or the flu vaccine can cause fetal harm when administered to a pregnant woman or can affect reproduction capacity.....Neither the flu vaccine nor the Influenza A (H1N1) 2009 Monovalent Vaccine have been evaluated for carcinogenic or mutagenic potential, or for impairment of fertility.”

So, what women in their right minds would go ahead and get the vaccine anyway and risk the lives of their unborn children? And, what women who are interested in becoming pregnant would get a vaccine that has not been tested to see if it might impair fertility? And, under what pretenses can we advise pregnant women to get this vaccine, with this information in our midst? Whatever happened to “first do no harm,” and the use of the precautionary principle? Most people are unaware that one of the ingredients in the seasonal flu and H1N1 vaccines, polysorbate 80, has been linked to causing infertility in mice, so where are the studies evaluating its effects on humans when used in vaccines?

Why haven't the proper scientific studies been done to answer these questions, and why are we only hearing the scary part about the dangers of these viruses? And why are we being made to believe H1N1 is the only virus in our environment, somehow possessing greater virulence than any other viruses in our environment? **(Remember, viruses are not alive and have no chemical machinery of their own to replicate).**

And, why are we pushing this H1N1 vaccine when there are insufficient data to help us understand short and/or long term effects of the vaccine and its ingredients? Is the relationship of the effects of vaccine ingredients on our health a relevant question to ask? Does it matter that we choose to be cautious about injecting these ingredients into our bodies when no science is available to understand what happens to them, or to the health of our immune systems, once they're injected? Have these vaccines truly been tested sufficiently, using proper scientific standards, to prove they are really “safe?”

Here are some, but not all, of the flu and H1N1 vaccine ingredients, and some of their known side effects:

1. Egg proteins from chick embryos, possibly harboring avian viruses which are then injected into our bodies;
2. Gelatin which causes allergic reactions and anaphylaxis;
3. Polysorbate 80 (Tween80) which causes severe allergic reactions, including anaphylaxis, infertility, and assists in bringing chemicals from the bloodstream across the blood brain barrier;
4. Formaldehyde which is a known carcinogen;
5. Triton X100 which is a strong detergent;
6. Sucrose which is table sugar;
7. Resin which causes allergic reactions;
8. Gentamycin which is an antibiotic and;
9. Thimerosal which is a known neurotoxin.

We are told by the authorities that the H1N1 vaccine is manufactured using the same manufacturing process as the flu vaccine. And, since, according to the authorities, the flu vaccine is already known to be safe, then by definition the H1N1 vaccine should have the same safety data, and so we believe it to be true. But, it's not true.

Do you know of any studies that investigate what happens to you and your children when any single one of these ingredients is injected into your bodies? No, you don't, because there are none.

Do you know of any studies that investigate how each of these ingredients interact with each other when they are injected into your bodies? No, you don't because there are none.

Do you understand the difference between how you and your children process these ingredients via injection, vs. how we would process these ingredients if we were to inhale them or ingest them or be exposed to them on our skin? No, you don't, because the studies haven't been done to determine the differences in how our bodies react to injected vaccine materials vs inhaled, ingested or skin exposure to vaccine ingredients?

Are you told that some of the viral vaccines almost always contain foreign DNA of either animals or humans, just by the very nature

of how they are manufactured? **Since viruses are so small, and cannot be seen with the human eye, the manufacturers can only isolate them from animal or human tissues that are believed to have been infected with them. But, the viruses themselves are not always isolated alone. They are often contaminated with the foreign DNA of the tissues they have infected and the tissues on which they are grown.** So, by definition, flu vaccines, which contain the tiny genetic materials of the flu viruses imbedded in the DNA harvested from infected tissues, are then grown on chicken embryos, and will, therefore, also be contaminated with the foreign DNA of chicken eggs, and whatever viral and other genetic materials that are in the chicken embryo cells.

So, what is safe about injecting foreign animal/human DNA via the flu vaccines into our bodies, along with any viral particles that may be embedded in the DNA of other human or animal cells? We don't know, because no study has actually been done to track the vaccine material once it's been injected, nor do the manufacturers have the technology to monitor the degree of foreign DNA materials in the vaccines to remove them before the vaccines go to market. Yet, we are told that vaccines are completely safe, because we would not believe otherwise. We want to believe that these vaccines wouldn't be allowed to come to market until the proper safety studies are done to evaluate them. But that is not the case.

So what are we to do with all this information? Ask yourselves a few questions:

1. How dangerous are viruses anyway if they have no life of their own and rely on host cells to "turn them on?" What actually turns viruses on and off?
2. Why are we worried about these 4 viruses when there are thousands, if not millions of viruses present not only in the winter, but all year round, and they can only live in host cells like humans, animals and plants?
3. How can you avoid exposure to viruses when they are always being inhaled from the air, whether someone is sneezing and coughing, or merely breathing?
4. Why would you inject these 4 viruses into your body when, in all likelihood, you've already been exposed to them through the air, intestines, the skin, or carry them in your genes, since viruses are merely strands of genetic material?
5. And, why would you risk your health by injecting foreign DNA and all the vaccine ingredients when no data are available to understand how they are processed in your bodies once they are injected?
6. Why are you worried about 4 influenza virus infections when the majority of viruses that give us "the winter flu" are not the ones we vaccinate against?
7. And how can we know how many people actually suffer or die from influenza viral illnesses, when people who have the flu are not tested for the influenza virus?
8. Why are you worried about a new influenza virus infection, H1N1, when the proper studies to evaluate the safety of the vaccine have not been done, and we do not understand whether more people in society are already carrying the virus in their noses without being infected?
9. Why get the flu vaccine when there are studies suggesting it has no effect on protecting you from the flu, especially if you have asthma?
10. How do people get sick if there are already thousands, if not millions of viruses around us and in us and we're relatively well most of the time?

When deciding between whether to get a seasonal flu or H1N1 vaccine, make an informed choice. Ask yourself how much you know about the likely health outcomes if you come down with a flu-like illness, and what the odds are for your full recovery (knowing these 4 viruses are not the most likely viruses to infect us), vs. how much you know about the likely short and long-term health outcomes of being injected with either of these vaccines, and your choice should be made easier.

### **How to Protect Yourself and What to Do if You Get Flu-Like Symptoms?**

- 1. Assume Exposure:** Assume you're either exposed to the flu viruses we vaccinate against, or already harboring their genetic material in the cells of your body, and just live your life without fearing them.
- 2. What if You Get Sick with a Flu-Like Illness?** Any time you get sick, slow down, even stop what you're doing, rest more, sleep more, and stay home. Take a break from the daily routine, and turn in. Your body needs to be sick in order for you to get well. Let it happen. Our bodies don't get sick overnight. We usually have to let ourselves get pretty rundown to become susceptible to the winter flu-like illnesses. As many days/weeks/months of stress that it takes for you or your children to get sick, it sometimes takes just as long to get well. Be patient and watch.
- 3. Reduce Stimulation and Activity.** Whether you are coming down with a flu-like illness, or you're simply preparing for winter,

make sure to reduce your overall stimulation and activity at this time of year. Winter time is a time to hibernate, slow down, go to bed earlier, use less energy, exert yourselves less, eat less food, be less active, and rest. This is especially important if you're feeling sick or run down.

- 4. How to Care for Yourself?** If you are coming down with a flu-like illness, drink more in the way of warm fluids, soups, teas, and broths, and reduce your regular food consumption. It's normal for your body to not be hungry when you're sick. In preparing for the winter when it's cold outside, eat more warm, whole foods - stews, chilis, soups, casseroles, potted meals, and roasts, and avoid a diet largely consisting of salads, and cold/cool/iced and raw foods and beverages. Save the salads and raw foods for the summer when it's hot and these foods can cool you off.
- 5. Consumption:** Avoid overeating and over-consumption, especially in the winter. More so than at any time of year, our bodies have less reserve energy available in winter to handle and appropriately digest the amount of food we are accustomed to eating, and the amount of overall consumption that is common in western society. Eat your large meals before it gets dark.
- 6. Vitamin D:** Check your vitamin D3 levels and supplement as needed. Infants and children need 500-1000 IU per day, older children need 1000-2000 IU per day, adolescents and adults could take 5000-10,000 IU per day, but always monitor vitamin D3 levels first. Check with your health care provider before administering.
- 7. Vitamin C:** Supplement with vitamin C in 3-4 doses per day. Large doses often get wasted, so use smaller pulse doses to keep a steady level. If you get stomach cramps or diarrhea, you're taking too much vitamin C.
- 8. Homeopathy:** Have the homeopathic remedy *oscillococcinum* handy and use as directed at the first signs of respiratory or flu-like symptoms.
- 9. Wet Sock Therapy for Fever and Flu-Like Symptoms:** A brilliant therapy I learned from my naturopathic physician colleagues to help drain the fever and flu out of your body. Take a warm bath, put cool wet cotton socks on your feet, and follow it with dry wool socks. Then, go to bed. Many parents and practitioners swear by the benefits of this therapy. Try it.
- 10. Fever:** Let a fever burn out the wastes that have accumulated in your body. Try not to medicate and suppress the way your body uses its normal physiology in order to detoxify appropriately. Bundle to bed after a warm bath. Sweat out your fever so your body cools naturally. Don't take a cool or cold bath, it's too much of a shock to your system. Make sure you stay well-hydrated and see your physician immediately if you or your child don't look well, or are having any change in your mental state.

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