

THE FORGOTTEN HISTORY OF VACCINATIONS YOU NEED TO BE AWARE OF

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By Dr. Mercola

Vaccines are one of the most controversial medical therapies, and it's impossible to make an informed decision unless you know both sides of the story. In the process of knowing both sides, the historical context is critical.

Dr. Suzanne Humphries, author of [*Dissolving Illusions: Disease, Vaccines, and the Forgotten History*](#), is a nephrologist who has committed the latter part of her medical career **to exposing the "lost history" of vaccinations.**

Barbara Loe Fisher of NVIC commented that this is one of the rare books that conducted **in-depth research documenting the medical history related to mass vaccination programs and infectious diseases.**

I have read the book from cover to cover and would strongly recommend that you pick up a copy if you have even the remotest interest in this topic, especially if you believe in the safety and necessity of vaccines, as the comprehensive documentation will likely cause you to reevaluate your position.

It is an absolutely fascinating read, and in some ways demonstrates that **enforcement of vaccine programs could be far worse today, when compared to historical standards when people were imprisoned and even killed when they refused to comply.**

I will likely reread the book again so I can be well armed to articulately express my concerns on **why one needs to have serious reservations on the validity of vaccines, based on historical precedents.**

Why This Book Was Written

Dr. Humphries' interest in this area began in 2009, when **several of her patients told her that they'd been perfectly healthy until they got one vaccine or another.** Prior to this, she'd been, as she says, "agnostic" about vaccination.

"I had vaccinated my dialysis patients; I, myself, was vaccinated; and I pretty much believed what I was taught in medical school," she says.

Then she started noticing that her patients were being ordered to get vaccinated on their first day of admission into the hospital—often when they had serious diseases: inflammatory diseases, heart attacks, congestive heart failure, and one patient with cancer on chemotherapy.

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Countering Vaccine Arguments Led to Startling Conclusions

The conventional paradigm states that vaccines are safe and effective, and can be given to virtually anybody regardless of how sick they are.

In order to address and counter the arguments she was given for this routine policy, she had to research vaccination, which led her to discover that **there is absolutely nothing in the medical literature to support vaccinating an acutely ill person.**

"At some point, they called in an expert to set me straight," she says. "The arguments that I got from the experts still were not lining up with science. My patients were acutely ill, they had inflammatory diseases, and I didn't want them vaccinated. I was told that I was confusing the nursing staff by discontinuing vaccines in my patients. That was how it all started."

Arguments often used by vaccine advocates include the oft-parroted sound by that **'diseases like smallpox and polio were eradicated by vaccination.'** Hence **vaccines rank among the greatest medical interventions known.**

As a result, she ended up researching smallpox and polio—even though it really had nothing to do with what was happening to her patients. Alas, this was when Dr. Humphries started coming to **some really startling conclusions.**

"In my research, I was startled [to realize] that what I found was completely counter to what I have been told and taught my entire life. I now don't believe that smallpox vaccines eradicated smallpox. I now don't believe that polio vaccines eradicated polio.

The stories are very twisted, long, and complicated, and the vaccines have changed over time. It's really easy to kind of throw up smokescreens here and there and make whatever argument one might want to, because people are so ignorant and because the story is so complicated."

The Story Behind the Smallpox Vaccine

Every vaccine has a story behind it, Dr. Humphries says. The smallpox vaccine, for example, was actually developed long before the medical establishment knew *anything* about the human immune system. The revelations on smallpox alone are fascinating enough to purchase this book, and is far more detailed than the summary in this article.

The vaccine was actually developed based on a rumor circulating among dairy maids. The rumor was that when a dairy maid had been infected with cowpox —which is a common infection on the udder of the cow—she would no longer be susceptible to smallpox.

The rumor was a persistent one, as rumors can be, despite the fact that there were plenty of dairy maids who developed smallpox after having cowpox. But this rumor is what led Edward Jenner to develop the first smallpox vaccine.

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"Basically, it was made by scraping pus off the belly of a cow," Dr. Humphries says. "Sometimes there was some goat genetic disease in there. There was horsepox mixed in there.

There was sometimes human pox mixed in and some glycerin. They would shake it up; they would take kind of a prong, and puncture the skin several times...

*What I didn't realize was that **there were many people who developed serious smallpox disease and died after they were vaccinated. The severity of disease was often worse in the vaccinated than the unvaccinated.***

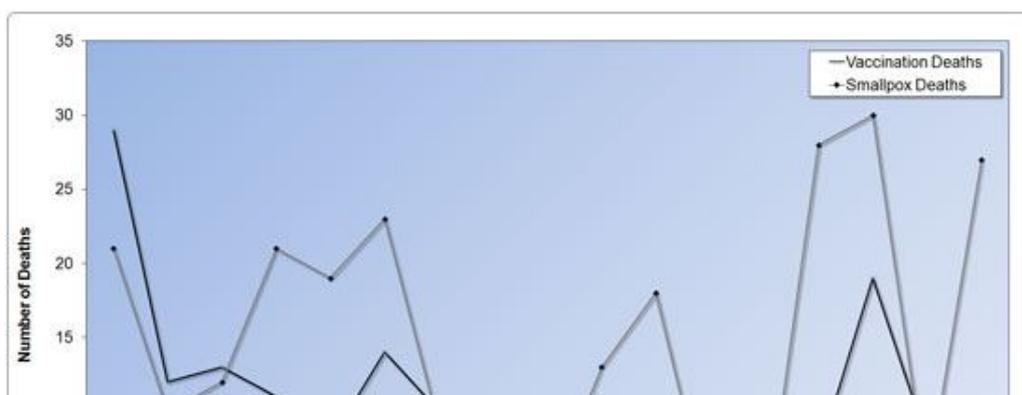
There are statistics that show that the death rate was higher in the vaccinated than the unvaccinated."

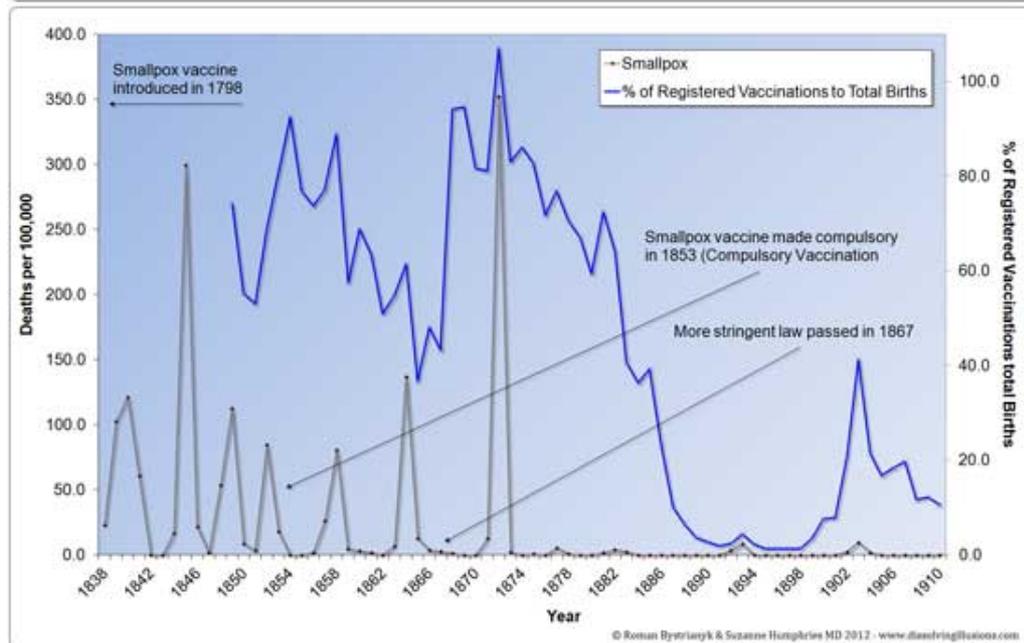
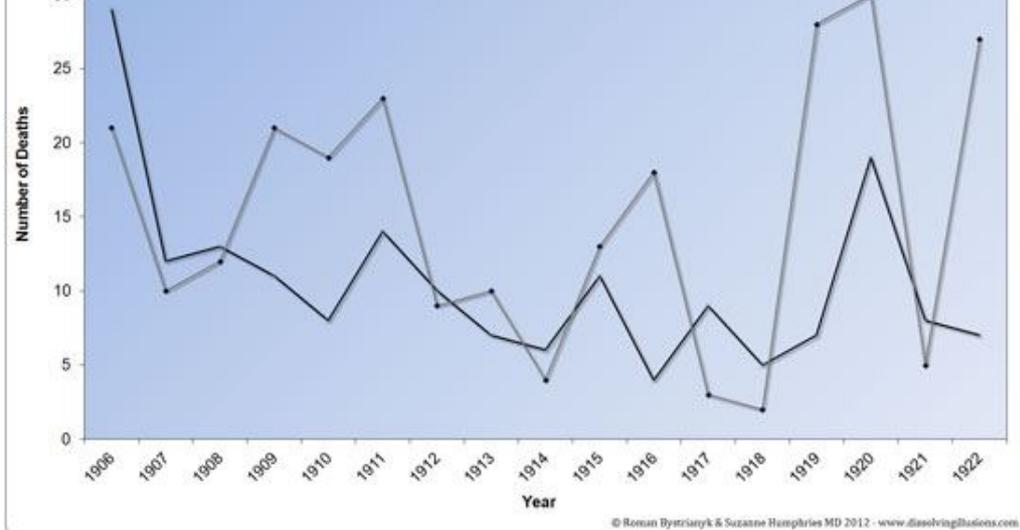
When the smallpox vaccine was developed, there was also no way to accurately diagnose the type of pox disease a person had. It may have been chickenpox, monkeypox, or smallpox, but back then, any kind of pox disease was considered smallpox—even though the vaccine didn't actually have the human smallpox virus in it. Animal pox virus was always used. According to Dr. Humphries, *it was the most contaminated vaccine that's ever been on the market.*

"If you look at a town like Leicester in England, that town was noticing that **they had one of the highest vaccination rates in the vaccinated world and their smallpox breakout was higher than ever,**" Dr. Humphries says. "The people in the town had a rally. The mayor and some of the health officials were there. They all agreed that they were going to stop vaccinating... The result was quite different from the predictions.

*The predictions were that there was going to be a bonfire of disease set upon the planet and that these people in Leicester were risking the health of the world by not making vaccination mandatory. **But once they stopped smallpox vaccines they had the lowest rate of smallpox infection and deaths.***

*What we show in our book — and we show the **graphs of the disease rates and the death rates** — was that **both of them went down precipitously after the vaccinations were stopped.** That story right there tells you that **vaccines were not what made the disease go away; what made the disease go away was isolation and sanitation.**"*





Antibody Is the Wrong Way to Ascertain Immunity

One of the major arguments against vaccine-induced immunity is that it primarily stimulates the humoral immune system and not the cellular immune system.

Antibodies are produced by the humoral immune system and then routinely measured to determine "immunity." The problem with this approach is that you can have high antibody levels and still get the disease. It's very difficult and expensive to measure the cellular immune response, and immunologists admit that they are still in the dark about a lot of the finer points of the overall immune response.

When you use antibody titers or blood levels to check for immunity, all you're doing is getting a picture of what happened (you had an immune response); it doesn't tell you whether you're going to be immune *in the future*, because antibodies are only one aspect of the immune response, and in some cases are not even necessary to easily combat the sickness and become immune.

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For example, those with agammaglobulinemia—a disease where you cannot make antibodies — can get infected with measles, recover uneventfully, and still respond to subsequent challenges of the virus in a normal healthy fashion and not get sick. These individuals will have lifelong immunity to measles, the same as someone without agammaglobulinemia.

Traditionally, the way immunity is determined is to do a test that measures antibodies, which is the humoral immune system. But there's no good way to assess the cellular immune system. It's a really imprecise science at best. As Dr. Humphries notes: "It's not only imprecise; sometimes it's downright inaccurate. You can have very high antibody levels, like numerous case reports of people who have hugely high antibody levels for tetanus, or normal antibodies, and have gotten some of the worst cases of tetanus. I have papers that show that people without antibody for polio have actually been able to respond to the virus as if they were already immune. The antibody really is a real wrong roadmap to look at to tell what's really going on. Sometimes there's correlation, but it's certainly not a given."

The Story Behind the Polio Vaccine

The other prime argument for the justification and support of today's highly aggressive vaccination program is the alleged success of the polio vaccine. But here again, the historical perspective fails to support the vaccination paradigm.

"The story behind polio is absolutely fascinating when you look at the politics that went on researching the vaccine, and how scientists were fired if they disagreed with the program going on through the National Foundation of Infantile Paralysis (NFIP) in the late 1940s and early 1950s. That was the vaccine that Jonas Salk developed," Dr. Humphries says.

Before the Salk vaccine became available, if you were admitted to the hospital any doctor could diagnose you with polio based on two physical examinations within 24 hours, to check for paralysis in one or more muscle groups. We now know that a number of viruses can cause paralysis, but back then, all instances were thought to be due to polio virus. When the polio vaccine was developed, a problem emerged. Swedish scientists were trying to tell the US scientists that formaldehyde inactivation was not going to work as planned.

Their warning, however, fell on deaf ears. This was unfortunate, as they turned out to be correct. **Live poliovirus, which was put in an injectable vaccine, would appear to be inactivated right after it was made, but sometimes it would "resurrect" in the vial... In essence, the formaldehyde did not kill off all the polioviruses in these vaccines, which led to live polio viruses being injected. As a result, more people developed paralysis from the vaccine in 1955 than would have developed it from a wild, normal natural poliovirus.**

Something had to be done to make it appear as though the vaccine was working. So what they did was change the diagnostic criteria for polio. Sadly this is a very common practice in medicine. When the observations don't fit your expectations, change or rig the system so that they do. With polio, the original criteria was two examinations within 24 hours. This was changed to two examinations within 60 days. This was helpful in cooking the books, because

Something had to be done to make it appear as though the vaccine was working. So what they did was change the diagnostic criteria for polio. Sadly this is a very common practice in medicine. When the observations don't fit your expectations, change or rig the system so that they do. With polio, the original criteria was two examinations within 24 hours. This was changed to two examinations within 60 days. This was helpful in cooking the books, because within 60 days, most people recover from their bout with poliomyelitis.

"All those people who were formerly called polio were no longer categorized as polio because they recovered from their paralysis within that time," Dr. Humphries explains.

Then there was the issue of testing. Prior to the vaccine, there was no testing done on blood or stool samples. After the vaccine came along, there was an epidemic in Michigan around 1958. About 2,000 people were diagnosed with polio. In disbelief over the outbreak, serological testing was done, and they discovered that the polio virus was found in only a small minority—about one-quarter of those who displayed symptoms of infection. Interestingly, in the remainder they discovered a different virus or no virus at all! And, subsequently, those patients were no longer "counted" as having polio.

"So simply by doing the diagnostic testing and changing the diagnostic criteria, the rates of polio plummeted, whether or not there was ever a vaccine. These were the kind of things that were going on back then," Dr. Humphries says.

Oral Polio Vaccine Propagates Transmission of Vaccine Virus

It's important to realize that the injected polio vaccine does nothing to prevent transmission of the virus, and after an oral polio vaccine you become a reservoir of virus that can mutate or combine with other bowel viruses, creating new strains that are often more virulent to those around you. According to Dr. Humphries, the only thing the injectable vaccine theoretically does is give you some blood immunity, similar to tetanus. This means it is only going to be effective if your *blood* meets the virus *before* the virus meets your nervous system.

Once vaccine makers realized just how difficult it was to inactivate the polio virus, and many people ended up contracting polio from the vaccine, they decided to abandon the injectable polio vaccine and create an oral vaccine instead, which is more similar to the natural route of infection. Again, controversy ensued. The oral vaccine did interrupt transmission of the wild type virus, but it propagated transmission of the vaccine virus instead.

"The fact of the matter is that you can attenuate a virus all you want, which means that you pass it through different animals to make it mutate enough that it's not quite as lethal or virulent at some point. But once you put that vaccine or that virus back into its natural host, it mutates back to the way it was," Dr. Humphries explains.

"You can give a baby an oral polio vaccine and it can be attenuated. But even in the vial, before you give it to that baby, those viruses are starting to revert back to their former problematic state. And then once the baby swallows that, the baby will generate some immunity in the intestine. But what's going to come out of that baby is going to be mutated vaccine virus. Oftentimes this is problematic, especially in people who are immunosuppressed."

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In the 1990s the US quit using the oral vaccine, and switched back to the injectable vaccine. To address the hazards of injecting improperly or inadequately inactivated polio virus, certain adjustments to the formulation were made. Modern polio vaccines are propagated and inactivated differently from earlier versions, and different countries also use different strains of the polio virus. Older polio viruses used to contain three strains of the virus. Today, some countries will only use one or two.

Polio Was 'Eradicated' NOT by the Vaccine But Through Redefinition

As noted by Dr. Humphries, it's very easy to defeat the polio vaccine argument, as most **incidences of polio disappeared because *the disease was redefined*—not because there was an actual change in disease prevalence.** In fact, it could be argued that the vaccine did more harm than good, since some versions *caused* polio, and others propagated new mutated strains of the virus. According to Dr. Humphries, at one point, **the *only* polio cases in the US were vaccine-induced.** Yet even though there are no cases of wild polio being discovered, the polio vaccine remains part of the US vaccine program.

"Even today, you can just go on to the CDC website and the Morbidity and Mortality Weekly Report (MMWR). You can see that cases of polio in this country by and large occur when people get the oral vaccine in another country and then come here. When they say that polio is only a plane ride away, the truth is that disease from polio vaccine is also a plane ride away... Like I said, the injected vaccines do not interrupt propagation of the virus. If somebody comes to this country who has recently had an oral polio vaccine and he's shedding a highly virulent strain, people in this country can start passing it around."

Polio Epidemic Historically Related to Increase in Sugar Consumption

Here's another interesting tidbit that no one ever talks about: In the past, it has sometimes been suggested that a large part of the polio epidemic was related to increases in sugar consumption. Dr. Benjamin Sandler wrote an entire book about this, and Dr. Humphries refers to his work in her book as well. She explains the connection as follows:

*"Polio's an enterovirus [i.e. a virus that enters the body through the gastrointestinal tract and thrives there]. *The integrity and the flora population in your bowel is extremely important when it comes to dealing with any kind of bowel infection. A diet that's high in sugar is going to 1) impair your cell-mediated immune system and 2) trash your gut flora... [It was] shown that in populations who cut back on their sugar intake, the rates of polio plummeted... But it was so unbelievable that nobody really listened to him.**

It was the same as when Dr. Frederick Klenner tried to say that he cured 100 percent of patients with intravenous vitamin C and [it] just didn't register. The low-sugar diet was very effective because of the effect it has on the immune system and on the bowel flora. The same with dichlorodiphenyltrichloroethane (DDT); DDT really trashes the bowel, the intestinal walls, and the flora. Not only can DDT give you all the symptoms of polio all by itself, it can also make the poliovirus much more virulent and active in the body for the same reason: it disturbs the normal

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DDT exposure has also been linked to [Alzheimer's disease](#), and it's worth noting that the contemporary equivalent of DDT, glyphosate, according to Dr. Don Huber, professor emeritus at Purdue University, is far more toxic than DDT. It definitely has been shown to decimate your microbiome, and glyphosate preferentially kills bacteria known to be beneficial for human health.

'You Cannot Dabble in the Topic of Vaccination'

Dr. Humphries left a successful practice making \$300,000 a year to be a poorly paid researcher. For her it was worth it, because her integrity wouldn't allow her to turn a blind eye to what she knew to be wrong.

"If you want to make these [vaccine] arguments, we have to have information and we have to have knowledge. We have to understand the history, the medical literature, the biology, the chemistry, the physiology, and the immunology. That is not easy. You cannot dabble in the topic of vaccination. If you do, you're likely going to be toppled by the pro-vaccine lobby because they're doing their homework."

I felt it was more important to do my homework and make these arguments that I wanted to make. I do lectures if people invite me. I have toured through Scandinavia. Our book has been translated into two different languages [Spanish and German]. Right now I'm really immersed in the topic of infant immunity because there is so much information that has just come out in the past few years that, in my opinion, turns the vaccine paradigm for infants completely on its head.

Instead of arguing about any particular vaccine, if you understand the way the infant immune system is designed, you can automatically see that if you were going to toss any kind of a vaccine in there, you might give them some short-term immunity, but you're also going to change their immune systems so that it can't function the way it was designed to function. The arguments against vaccines when you really understand the infant immune system I think are irrefutable."

Science of Epigenetics Changes Everything Yet Again.

Epigenetics is another field where biology is being turned on its head and all the old paradigms are being tossed out. Epigenetic science now tells us that our genes are NOT our destiny, and the problem is that once you start to epigenetically tinker with the infant immune system, you are basically depositing what Dr. Humphries refers to as "little cluster bombs" that will eventually "explode into a big problem." As an example, she cites a study by Nikolaj Orntoft, in which African girls were injected with a tetanus vaccine to see which genes might be upregulated or downregulated. What they found is that there's really no way to predict which genes will be affected.

So not only will each individual have a unique response to any given vaccine, based on their current health status, we're also epigenetically predisposed to respond differently in terms of the side effects we might develop. This means that having a vaccine compensation table for reimbursement for vaccine damage is nonsensical as we're bound to have different genes upregulated after vaccines are

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So not only will each individual have a unique response to any given vaccine, based on their current health status, we're also epigenetically predisposed to respond differently in terms of the side effects we might develop. This means that having a vaccine compensation table for reimbursement for vaccine damage is nonsensical as we're bound to have different genes upregulated after vaccines are given.

"We can have cancer genes upregulated, or autoimmune diseases upregulated. This has been shown in modern literature that used these highly sophisticated gene techniques to actually watch what happens after the vaccine is injected. I think this is really powerful information to show that, when vaccines started, they knew nothing about the immune system. Then scientists knew something about the immune system, but now we know about the genetics of the immune system and the epigenetics of the immune system, and that's got to be taken into account..."

Most Doctors Are Completely Uninformed, Which Means You Cannot Make an Informed Choice

Dr. Humphries stresses the importance of "thinking long and hard" about how much information you've been given *before* your child is given a vaccine.

"[Vaccines] can have tumorigenic kidney cells of a cocker spaniel in it. It can have human fetal cells with retroviruses. [It can have] aluminum, which is one of the most horrible things to inject into any sort of life form, especially into a muscle. Parents really need to know that their doctors are not informed and therefore they cannot give informed consent, and that they really need to think about it because you cannot unvaccinate.

The fear of, "Oh, what if my child gets a disease"—that's where knowing the history is really important because what we're talking about is under which conditions people become susceptible . That's really more important than transmission. Because, yes, measles transmits very rapidly through the population, but it actually has a lot of benefits to the immune system—so much so that they're using it to treat cancer today."

We really need to understand each disease – what the risk of it is, how it's transmitted, what the vaccine effectiveness is, and what the risks are. Dr. Humphries also notes that **the human body is designed in such a perfect way that there is a system in place to handle just about anything that happens to it, provided we've treated our body properly.**

"Babies who come into this world in a normal and natural way, who are breastfed for an appropriate amount of time, that's the best protection you could ever give to your baby's immune system or brain. Consider that when the fear starts to creep in. If you're breastfeeding your baby, you're already giving the most powerful thing on the planet that can be given to that baby," she says.

More Information

People have been scared into believing vaccines are the answer to prevent disease, but when you look at the historical evidence, the arguments used simply fall apart. There's just no question that improving your innate immune system—through reducing sugar and processed foods in your diet, improving your gut flora, leading a healthy lifestyle, and having adequate vitamin D levels, ideally through sensible sun exposure,—will provide a far more effective immune response and virtually eliminate any risk of developing a life threatening infection.

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The key is to have the courage to trust in this truth—that your body is designed to maintain health. Its natural course and direction is to be healthy not sick. If you have a healthy lifestyle, exposure to nearly all of these infectious agents will ultimately make you healthy and stronger. This is similar to exercise, which actually tears your body down to make it stronger. Nature actually knows what it's doing, whereas putting chemicals into your body based on human theories (or rumors!) that are oftentimes completely wrong, is unlikely to produce better results. As noted by Dr. Humphries:

"We have a highly profitable, lucrative religion that involves the government, industry, and academia. That religion is vaccination. People believe in vaccines. They'll tell you, they believe in vaccines. But you ask them what they know about vaccines and it will be almost nothing. In fact the people who argue the loudest usually know the least when it comes to trying to convince you to take the vaccine. That's been my experience.

Medical schools are bereft of information on the history of vaccination, on the contents of them, and the potential problems. We have the go-to doctors, like Dr. Paul Offit, teaching doctors how to talk to vaccine-refusing parents. We have doctors like Dr. Robert Jacobson putting out PowerPoint presentations to give to doctors, literally telling them to persuade the parents rather than to inform them.

Doctors are really being systematically brainwashed. Not only that, but if doctors do start to see problems, wake up to it; do their own research, and buck the system, they risk being treated the way I was. I was well respected through the entire state of Maine. People were referring their patients to me. My colleagues would come to me with their medical problems. But once I started to argue against the practice of vaccination, I was automatically tossed into the category of a quack."

To learn more, I couldn't more highly recommend Dr. Humphries excellent book, [*Dissolving Illusions: Disease, Vaccines, and the Forgotten History*](#), available in paper back and Kindle on Amazon. You can also find more information on the book's website, dissolvingillusions.com. I have read it cover to cover and plan on doing so again as there are loads of powerful information that helps combat the **blindly foolish acceptance of nearly all media and professionals on the value of vaccinations.**

Protect Your Right to Informed Consent and Defend Vaccine Exemptions

With all the uncertainty surrounding the safety and efficacy of vaccines, it's critical to protect your right to make independent health choices and exercise voluntary informed consent to vaccination. It is urgent that everyone in America stand up and fight to protect and expand vaccine informed consent protections in state public health and employment laws. The best way to do this is to get personally involved with your state legislators and educating the leaders in your community.



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THINK GLOBALLY, ACT LOCALLY.

National vaccine policy recommendations are made at the federal level but vaccine laws are made at the state level. It is at the state level where your action to protect your vaccine choice rights can have the greatest impact. **It is critical for EVERYONE to get involved now in standing up for the legal right to make voluntary vaccine choices in America because those choices are being threatened by lobbyists representing drug companies, medical trade associations, and public health officials, who are trying to persuade legislators to strip all vaccine exemptions from public health laws.**

Signing up for NVIC's free Advocacy Portal at www.NVICAdvocacy.org gives you immediate, easy access to your own state legislators on your Smart Phone or computer so you can make your voice heard. You will be kept up-to-date on the latest state bills threatening your vaccine choice rights and get practical, useful information to help you become an effective vaccine choice advocate in your own community. Also, when national vaccine issues come up, you will have the up-to-date information and call to action items you need at your fingertips. So please, as your first step, [sign up for the NVIC Advocacy Portal](http://www.NVICAdvocacy.org).

Share Your Story with the Media and People You Know

If you or a family member has suffered a serious vaccine reaction, injury, or death, please talk about it. If we don't share information and experiences with one another, everybody feels alone and afraid to speak up. Write a letter to the editor if you have a different perspective on a vaccine story that appears in your local newspaper. Make a call in to a radio talk show that is only presenting one side of the vaccine story.

I must be frank with you; you have to be brave because you might be strongly criticized for daring to talk about the "other side" of the vaccine story. Be prepared for it and have the courage to not back down. Only by sharing our perspective and what we know to be true about vaccination will the public conversation about vaccination open up so people are not afraid to talk about it.

We cannot allow the drug companies and medical trade associations funded by drug companies or public health officials promoting forced use of a growing list of vaccines to dominate the conversation about vaccination. The vaccine injured cannot be swept under the carpet and treated like nothing more than "statistically

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We cannot allow the drug companies and medical trade associations funded by drug companies or public health officials promoting forced use of a growing list of vaccines to dominate the conversation about vaccination. The vaccine injured cannot be swept under the carpet and treated like nothing more than "statistically acceptable collateral damage" of national one-size-fits-all mandatory vaccination policies that put way too many people at risk for injury and death. We shouldn't be treating people like guinea pigs instead of *human beings*.

Internet Resources Where You Can Learn More

I encourage you to visit the website of the non-profit charity, the National Vaccine Information Center (NVIC), at www.NVIC.org:

- [NVIC Memorial for Vaccine Victims](#): View descriptions and photos of children and adults, who have suffered vaccine reactions, injuries, and deaths. If you or your child experiences an adverse vaccine event, please consider posting and sharing your story here.
- [If You Vaccinate, Ask 8 Questions](#): Learn how to recognize vaccine reaction symptoms and prevent vaccine injuries.
- [Vaccine Freedom Wall](#): View or post descriptions of harassment and sanctions by doctors, employers, and school and health officials for making independent vaccine choices.

Connect with Your Doctor or Find a New One That Will Listen and Care

If your pediatrician or doctor refuses to provide medical care to you or your child unless you agree to get vaccines you don't want, I strongly encourage you to *have the courage to find another doctor*. Harassment, intimidation, and refusal of medical care is becoming the modus operandi of the medical establishment in an effort to stop the change in attitude of many parents about vaccinations after they become truly educated about health and vaccination.

However, there is hope.

At least 15 percent of young doctors recently polled admit that they're starting to adopt a more individualized approach to vaccinations in direct response to the vaccine safety concerns of parents. It is good news that there is a growing number of smart young doctors, who prefer to work as partners with parents in making personalized vaccine decisions for children, including delaying vaccinations or giving children fewer vaccines on the same day or continuing to provide medical care for those families, who decline use of one or more vaccines.

So take the time to locate a doctor, who treats you with compassion and respect and is willing to work with you to do what is right for your child.

www.articles.mercola.com

<http://articles.mercola.com/sites/articles/archive/2015/01/18/history-vaccination.aspx>

