

# The Green Tongue

*Herbal tid-bits and information for healthier living without chemicals*

***Safe Vaccination*** The immune system is a very complex system of the human body.

Research about the immune system is still being revealed through thoughtful study but in general, most of what we know about the immune system we know in the context of vaccination <sup>1</sup> and how to manipulate it through vaccines, not as a complete body system that works in conjunction with all other systems. This isn't to say that other fields of study do not try to understand immune function, but immunology and vaccinology are intricately intertwined. Immunology as taught in medical school revolves around vaccination and the schedule of immunizations suggested by the CDC. A pediatrician does not do extensive study about vaccines and the real dangers of these injections.<sup>2</sup> In fact, many doctors think vaccine injury is 1:1,000,000, which is false. <sup>3</sup> The immune system is an enormously complicated system and we have only brushed the service of understanding. Although this is fascinating stuff, you do not have to have a degree in biology to understand the many ways you can help your immune system function more efficiently, especially if it is cold & flu season.



Vaccination is a contentious subject for many and needs to be approached in a realistic and balanced way where fear is not a factor. There is fear on both sides of this topic, but what I find for most people who are aware of the many side-effects vaccines can cause, they are basing their criticism and apprehension on real science as well as real experiences whether it's because of a vaccine-injured child, or an injury inflicted on their own body. The idea that many who decide to selectively vaccinate or even forgo them altogether are being dismissive of science as well as the overall health of our society is just not true. This is a form of gaslighting and is a typical tactic of authoritarian missives. This is an important point to make; no medication is without risks and vaccines are no exception. This is not a

discussion of Pro-vax and Anti-vax. This false dichotomy has been pushed for far too long. This is a discussion of what is the best possible health care choices people can make for themselves and their family. There is evidence that vaccines work, at least for a short time, and this fact needs to be part of the many variables that surround the topic. It's also important to note that vaccines do not necessarily stop transmission of a infective pathogen and even the 'fully' vaccinated get and pass on pathogens that cause infection. <sup>4</sup> This fact is explained by Dr. Richard Flemming and Dr James Neuenchwander

<sup>1</sup> <https://www.encyclopedia.com/science/encyclopedias-almanacs-transcripts-and-maps/history-immunology>

<sup>2</sup> <https://thevaccinereaction.org/2018/07/what-doctors-learn-in-medical-school-about-vaccines/>

<sup>3</sup> <https://childrenshealthdefense.org/defender/infant-vaccines-all-cause-mortality/>

<sup>4</sup> <https://www.nvic.org/NVIC/media/LegacySite/pdf/Live-Virus-Vaccines-and-Vaccine-Shedding.pdf>



in separate interviews articles as well. Here is one video <sup>5</sup> in which Dr. Neu explains that most vaccines on the schedule do not stop transmission. (He also explains how doctors are not taught about vaccine injury). The reason for this is that many vaccines are not neutralizing a pathogen, but stimulating immunity which 'teaches' T cells and B cells what the virus looks like and these cells attack the virus, but that person infected at that point could possible pass on the infection. Some vaccines are also using live viruses, which shed and spread infection. <sup>6</sup> While vaccines may stop severe disease in some individuals, it doesn't in many. This biological truth is reason enough to get rid of all mandates for vaccines. The concerns of an overwhelming part of our society should not be ridiculed, dismissed, or ignored as it is steeped in research, science, and real-world experiences. We cannot as a society afford to be blind to the negative effects of vaccination and what it is doing to our health as well as how vaccination may be changing and damaging our very DNA, where we see in our population more ill-health in the form of autoimmunity, cancer, and chronic illness in general and even death, and how generational changes to the health of people is affected.

Since the advent of vaccines we have seen the overall health of our population DECLINE where more chronic illness is taking the place of mild childhood infection.<sup>7</sup> Right now life expectancy has declined for several years running.<sup>8</sup> What are we trading off? In this short paper, I will try to hit on the basics and give you an idea of where to go in terms of your own health care choices for you and your children. Consider THIS your informed consent.

There are many media outlets including the website of the CDC that praise the use of vaccinations as saving lives and eradicating disease. These statements are riddled with inaccuracies and falsehoods. In fact, vaccines have never 'eradicated' diseases and it can be argued vaccines have caused a slew of diseases on their own. Smallpox and polio are always used at the litmus that vaccines have eradicated these diseases. Where is the study for that? How do we know that? Bc we don't see these infections anymore? Smallpox vaccine programs went on for 200 years and many argue the vaccines were the reason smallpox stayed around. I have no doubt that mass vaccination keeps people's immune system impaired and makes them susceptible to infections, and that includes smallpox. Work done by Dr. Suzann Humphries in her book Dissolving Illusions shows us this. The most vaccinated for smallpox were typically the ones that died of smallpox. I suggest the book highly. Novel viruses tend to peak and then die-off all on their own, like scarlet fever. Populations reach herd immunity and the virus is no longer a threat. THIS is the real reason viruses are 'eradicated'. Truth is, the smallpox virus is likely still present, it has just lost pathogenicity.

I have read many articles touting the use of vaccines and all dismiss the very notion that a person could be injured using weak science and observation and in fact these articles only convey one side, ignoring a body of evidence that proves vaccines cause injury. The propaganda and indoctrination that surrounds vaccine science is thick and has been for 100 or so years. If you ignore half of a body of evidence, you can in no way have an informed opinion or make an informed decision. Real science happens when all known variables are included, not cherry-picked assumptions and conclusions.

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<sup>5</sup> <https://thehighwire.com/ark-videos/meet-the-doctors-curing-the-incurable/>

<sup>6</sup> <https://www.nvic.org/NVIC/media/LegacySite/pdf/Live-Virus-Vaccines-and-Vaccine-Shedding.pdf>

<sup>7</sup> <https://adc.bmj.com/content/101/10/881>

<sup>8</sup> <https://www.macrotrends.net/countries/USA/united-states/life-expectancy>

*The Vaccine Schedule* currently supported and suggested by the Centers for Disease Control (CDC) has children 1- 18 receiving about 70 doses and 16 vaccines on the schedule. (On page 8) This is quite a change from years prior when only a handful were administered. With a proportional increase in vaccines added to the schedule we see a concomitant increase in autoimmune diseases. We also see an increase in autism rates as well as other diseases like cancer, juvenile type I diabetes, thyroid disorders, food allergies, asthma, and more. But, but, but correlation doesn't equal causation! This is a mantra that resides in the echo chamber of pro-vaccine zealots. Truth is, correlation doesn't equal causation, until it does. Correlation is where research starts. And yes, many of these dis-eases noted above have been researched and are indeed correlated in part, by vaccines. We cannot dismiss the increased use of pesticides, herbicides, endocrine disrupting chemicals, and fire retardants as one layer contributing to chronic dis-ease. This also needs to be studied objectively without the input from the very industries manufacturing or using these chemicals. While the Food and Drug Administration (FDA) is charged with overseeing industry science in regards to safety, much of the science we see in any of these industries is heavily funded by industries, which is a direct conflict of interest. 10

While many of the diseases we are vaccinated for do still occur, we can see that vaccination has likely played a role in reducing the instances of major outbreaks. Vaccines do this by reducing symptoms in vaccinated individuals. Again, vaccines do NOT necessarily stop transmission. This is why the CDC keeps telling everyone to get vaccinated. If everyone susceptible is vaccinated, they will potentially be asymptomatic. But what about those that can't be vaccinated? The vaccinated DO NOT PROTECT THEM. So when you hear that you need to get vaccinated to protect the newborn or protect Jimmy who has cancer, it's not a true statement. And is proffered by the industry to sell more vaccines and to scare people into getting them. The DTaP vaccine can spread whooping cough by creating asymptomatic individuals.<sup>11</sup> That's science. Also any cancer ward will not allow recently vaccinated individuals (with a live virus vaccine) in because they shed the pathogen they have just been vaccinated for because they could cause an outbreak.

Each vaccine should be researched and thoughtfully considered on its own, not in general. Which means, don't make broad statements about all vaccines. This is true for those pushing vaccines too. When people are concerned for what is injected into their body, it's not because all vaccines should be looked at the same. It doesn't mean people are 'anti-vax' and it doesn't mean that all vaccines are equally dangerous. I personally think the vaccine schedule is completely out of hand and that vaccination is VERY limited in what it can do for a body. I also think vaccines weaken a body making people more susceptible to other infections and chronic diseases since it damages the immune system and its ability to respond properly. The work of Dr. Ebey in Papua new Guinea comes to mind. <sup>12</sup> While this is truth, I think this topic is so contentious for some, that if you say no to one, you must be saying no to them all. I say let people do what they want. Vaccination is a personal decision not a decision based upon who may be affected if you do have an infection. Pushing this liability upon an unvaccinated person is a slippery slope and one we have learn from the smallpox inoculations that were ongoing for 200 years and never eradicated the disease and made people more susceptible to infection the more inoculations they received. <sup>13</sup> . People also need to be informed of the side effects and damage that can happen. Until we have an honest discussion about this, Informed Consent does not exist, even though it is law. I eat well and take care of myself for ME, not for little Jimmy who lives down the street and I don't expect anyone else to do what is best for ME, I can do that just fine thank you. When we make any one person responsible for another's health we have destroyed the boundary of body autonomy.

While it would be nice to be able to look up reactions from all vaccinations compared to incidence of disease and adverse reactions caused by the diseases itself, there really isn't a way to do this for common folk. I am sure the CDC is aware of the problems surrounding vaccine injury, but their databases are not available to the public. One database is called the Vaccine Data Link, (VDL) and has relatively recently been unavailable to the public. I am not really sure who has authorization to it except those at the National Institutes of Health (NIH).

## *The History*

While Informed Consent is part of our legal structure since 1986 specifically in regards to vaccines and promulgated by the National Vaccine Act of 1986, it rarely happens, if at all. Doctors are told to give out information papers that do not convey real informed consent but go into why it's important to vaccinate and how often one should.<sup>14</sup> These leaflets are called Vaccine Information Sheets (VIS) and give no information about adverse reactions, but go on to explain what the disease is you are being vaccinated against. While this satisfied Informed Consent per the CDC, it indeed does not fully embody the true sentiment of the law.<sup>15</sup>

The truth about vaccines is not easy to find and many studies put out by the CDC or others like the pharmaceutical companies that manufacture and profit from these vaccinations, do not give us the whole picture.<sup>16</sup> Some studies have actually been manipulated to show a positive result, for example the research done on the MMR (Look up Dr. Brian Hooker and the whistleblower, William Thompson)<sup>17</sup> Some data from that study was actually omitted in order to hide the higher incidence of autism in african american boys as compared to caucasian boys. There was a statistically significant correlation of autism when administering the MMR vaccine to african american boys compared to caucasians. Some speculate that this difference is less genetic than it is about demographics. William Thompson, inside the CDC, while he has come out as a whistleblower, is still working for the CDC. The research paper studied many boys from lower-class, inner cities where perhaps less education is available about administering several vaccines at once. It appears that perhaps these boys received too many too soon, while the caucasian boys received a selected amount. This is one possibility. The CDC was trying to hide this.....why? We also know that CDC studies, do not use proper placeboes when determining vaccine safety/efficacy. <sup>18</sup> Some studies include placeboes stated as 'saline' but in reality contain everything the vaccine does except the virus, no antigen. So this includes the adjuvant (typically aluminum salts) and a complex of other substances, like formaldehyde and other things called excipients. <sup>19</sup> These vaccines also contain casein (milk protein), peanut or castor oil, and trace amounts of latex from the plungers. When these substances are injected into the body concurrent with an adjuvant (aluminum) to create an immune response -a small body in particular- they carry the real possibility of creating allergies to the very products included in the vaccine - like latex, peanuts, and dairy. <sup>20</sup> These are real vaccine ingredients being injected into your child or you. What's more, some 'placebos' are other vaccines containing all the excipients AND the antigen.<sup>21</sup> How can anyone who is a scientist think using no true control group would give us appropriate data? This is why I implore everyone to look at the data, not just take someones word for it. Don't just read the headlines, or the results of a research paper. Look at the data. Look at the vaccine inserts. The inserts come from the manufacturer and will tell you all about the vaccine as well as clinical trial information.

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All pharmaceutical drugs carry risks. We know this. Why would vaccines be any different? When the possibility of injury outweighs the difficulty of the disease, we have to wonder if it is worth it. Many children die due to



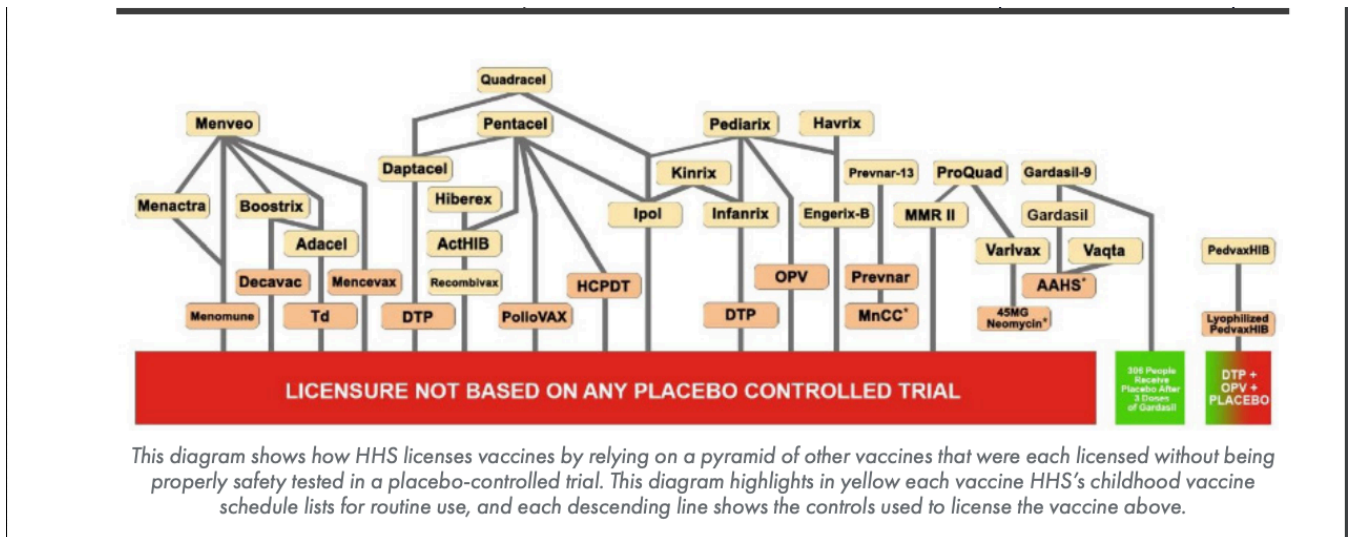
vaccine injury each year (SIDS) 22 and many more are injured for life. We know that our bodies benefit from being exposed to certain diseases. We know that after an illness children undergo a developmental leap. 23 We know that certain diseases protect us later on in life from certain types of cancer. 24 What are we trading off?? Is one death due to a vaccine worth another POSSIBLE death due to disease? Either way it should be a personal choice, not one mandated by politicians while the pharmaceutical companies profit from vaccines and are afforded no liability for injuries. 25

## *Facts concerning the vaccine and medical industries-*

In the 1970's & 1980's - "The National Childhood Vaccine Injury Act of 1986 (NCVIA or Act) created a no-fault compensation program to stabilize a vaccine market adversely affected by an increase in vaccine-related tort litigation and to facilitate compensation to claimants who found pursuing legitimate vaccine-inflicted injuries too costly and difficult. The Act provides that a party alleging a vaccine-related injury may file a petition for compensation in the Court of Federal Claims, naming the Health and Human Services Secretary as the respondent; that the court must resolve the case by a specified deadline; and that the claimant can then decide whether to accept the court's judgment or reject it and seek tort relief from the vaccine manufacturer. Awards are paid out of a fund created by an excise tax on each vaccine dose. As a *quid pro quo*, manufacturers enjoy significant tort-liability protections. Most importantly, the Act eliminates manufacturer liability for a vaccine's unavoidable, adverse side effects. In 2011, the Supreme Court ruled that vaccines carry with them 'unavoidable adverse effects', therefore vaccine manufacturers cannot be sued as a result of vaccine-induced injury in federal courts although people can file civil claims on the state level, within very narrow limits." 28 Basically the NCVIA law does not include design flaws as reason for tort litigation, so as long as the manufacturer has no knowledge of the design of the vaccine as a reason for damage, a civil case cannot be brought forth. Vaccines are not afforded the same scrutiny as a drug whereby tort litigation and compensation are major regulators of safety in manufacture. Clinical trials are also included in the safety profiles of drugs as well, but as stated prior, vaccine manufacturers do not use true control groups or placebos in clinical trials, and in doing so, safety signals are obscured and market forces have no affect on product quality.

In 1990 - As part of the NCVIA, VAERS - Vaccine Adverse Event Reporting System was instituted as a passive monitoring system for vaccine injury. This is a volunteer system that relies on the parents coming forward to report any adverse event due to vaccination as well as health care workers, the latter required by law to report. The CDC uses this system as a 'passive surveillance system' to track adverse events. Many times these injuries manifest 2 or more weeks after vaccination. It makes you wonder how many injuries are never reported. The vaccine industry (then passed on to consumers) is required to financially support this system with each vaccine that is sold. (.75 per antigen per dose) The HHSs examination of the VAERS reporting system concluded that the system reports on about 1-10% of injuries. 29

Vaccines in the US do not have to be standardized and in fact, an incident in Tennessee brought this fatal error of the vaccine manufacturers to light. 8 infants died of SIDS due to one batch of DTaP vaccines from the manufacturer. 30 As a result of this horrific incident, manufacturers no longer send one batch to a selected location, but instead separate and disperse batches across the US. Standardization, is still, to this day, not a requirement. 31 Vaccines are considered 'biologics' where they by-pass the 'normal' regulatory process and guidelines and can reach the market in a little as 4 days after clinical trials. 32 Clinical trials, as stated above, are not required to use an inert double blind placebo control group and in fact all recent vaccines are tested against either another vaccine or the vaccine less the antigen, so all excipients are present in the control. Here is a chart that illustrates vaccines and which ones used an inert placebo in trials.



Source Document 33

It has been stated by former National Institute of Allergies and Infectious Disease (NIAID) director Tony Fauci that placebo controlled studies are unethical. 34 There have been some test groups that do receive just a saline injection, like with one of the HPV vaccines on the market. This group comprised about 600 people and the results were mixed in with the rest of the control groups, so it's impossible to see real outcomes. 35 For more info on these trials, again I implore people to find and read the inserts prior to receiving any vaccine.

- Currently the US vaccinates the very young and very old. These are times when our bodies are the most immune compromised, but we insist on injecting foreign substances including virus antigens into the blood stream. The immune system is overwhelmed by this and can react in a negative way.
- Since the CDC has advocated more and more vaccines, we have seen more and more autoimmune diseases.
- autism rate in 1970 was 1:10,000 where a child would only receive a handful (if that) of vaccines, many of which were not multiple disease vaccines. The autism rate now is 1:35 and projected to be 1:3 in 2050. 36 The CDC and others claim it is a genetic disease, but have no proof of this and continue to research the genetic correlations to autism, but not the real issue - heavy metal toxicity and brain damage case by vaccination and possible links to using OTC fever-reducing medications like Tylenol when a child experiences fever after vaccination, glyphosate in the food supply, poor gut microbiome caused by C-sections, poor diets of the mother, antibiotic use of the mother, lack of breast feeding, environmental toxins, cumulative effects of vaccinations over generations, etc. There are indeed many layers. We do however know there is a genetic component to it, but there is no evidence this is the cause since many children do not acquire autism until age 2 or 3. It is likely an epigenetic issue whereby an environmental insult instigated genetic changes leaving a person more susceptible to dis-ease. People who carry MTHFR genes mutations, of which there can be many, may be more susceptible to toxin damage due to poor methylation. 37 This fairly new study of science has made us aware of predisposition of diseases, but in no way means you will GET the disease.
- Pregnant women are encouraged to get a DTaP and flu vaccination, a horrible time to inundate the immune system. During pregnancy the body is in an immune modulated state. 38 Never



vaccinate in an immune modulated state. That includes when a person is sick. No robust safety data exists to support this practice. 39 This statement from the WHO scientist exemplify the need for more testing. Simply put, stop vaccinating pregnant women!

- Many people claim that babies are born with autism, but it is only diagnosed at an older age due to the nature of the dysfunction caused by autism. Has there ever been an autism study that includes these women who were vaccinated during pregnancy? Why is this now being pushed by the CDC, NIH et al?
- We are the nation that spends the most on health care, we vaccinate for the most diseases more often, and have the highest infant mortality of any wealthy nation at 6.1 deaths per 1,000 live births. We have also recently seen an increase in maternal deaths. 40 Is it correlated to vaccines?
- At 2 months, if following the CDC vaccination plan, a child can be vaccinated with up to 7 diseases at once. What human could ever be exposed to 7 diseases at once...at 2 months even and confer immunity? What is more is that at 2 months the immune system is very immature, so this is even more dire a situation for that immune system. Infants, like a pregnant mother, are in an immune modulated state. This is by design. As the infant's immune system learns diseases through the mothers milk, slowly this modulation turns off to have a fully functioning immune system as they age. When you inundate a baby with all these antigens and toxins, how could many of them confer immunity? Where is that study? I'll tell you where it is, it doesn't exist. They simply go by incidence of disease in the general population.
- In 2015, the VAERS reporting system reported 127 deaths due to the MMR vaccine. 2 deaths occurred due to measles (these were apparently children undergoing chemo). You may say that vaccination has kept measles deaths under control. Many argue that measles is not the killer that it is purported to be and with the knowledge we have now in regards to nutrition as well as more accessibility of treatment choices, clean water and sanitation, and understanding the disease and how it spreads, 41 we just wouldn't see the death rate like we saw even 70 years ago. The truth is, a large majority of children do not die from measles, especially if given proper nutrition and care like vitamin A, vitamin C. People use the immune compromised as justification for the deaths from vaccination. We are simply trading one death for another.
- Pharmaceutical companies do their own testing. Because of the growing issue of autism (1:35 children diagnosed to date in the US) and the public outcry regarding thimerisol in vaccines and the parents wanting more safety testing on this mercury based preservative, the CDC conducted 20 studies to prove there is no relationship to thimerisol and autism. The Institute of Medicine (IOM) formerly the Academy of Sciences, did a review in 2004 of these 20 studies submitted by the CDC. The IOM is an independent science board who's job is to be sure science is robust and adequate for use on the population. The IOMs report concluded that the CDC needs to follow up with more research regarding the safety of vaccines and the subsequent association with autism since research to date does not support or deny the relationship. The CDC has never followed through with this requirement by the IOM. Here is a list of reports from the IOM, some with broken links unfortunately. <https://vaccinesafety.edu/IOM-Reports.htm> You can look into the story HERE: <https://childrenshealthdefense.org/news/vaccines-and-autism-is-the-science-really-settled/>
- Vaccines on the schedule have increased substantially since the 1950's as a direct result of the Vaccine Act of 1986. With no liability, vaccines offer a substantial profit for manufacturers. Below is a list of the childhood vaccines administered from the age of 0-12 years. Vaccines are

**Table 1 Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger, United States, 2023**

These recommendations must be read with the notes that follow. For those who fall behind or start late, provide catch-up vaccination at the earliest opportunity as indicated by the green bars. To determine minimum intervals between doses, see the catch-up schedule (Table 2).

Vaccine	Birth	1 mo	2 mos	4 mos	6 mos	9 mos	12 mos	15 mos	18 mos	19-23 mos	2-3 yrs	4-6 yrs	7-10 yrs	11-12 yrs	13-15 yrs	16 yrs	17-18 yrs	
Hepatitis B (HepB)	1 <sup>st</sup> dose	← 2 <sup>nd</sup> dose →					← 3 <sup>rd</sup> dose →											
Rotavirus (RV): RV1 (2-dose series), RV5 (3-dose series)		1 <sup>st</sup> dose	2 <sup>nd</sup> dose	See Notes														
Diphtheria, tetanus, acellular pertussis (DTaP <7 yrs)		1 <sup>st</sup> dose	2 <sup>nd</sup> dose	3 <sup>rd</sup> dose	See Notes		← 4 <sup>th</sup> dose →					5 <sup>th</sup> dose						
<i>Haemophilus influenzae</i> type b (Hib)		1 <sup>st</sup> dose	2 <sup>nd</sup> dose	See Notes			← 3 <sup>rd</sup> or 4 <sup>th</sup> dose → See Notes											
Pneumococcal conjugate (PCV13, PCV15)		1 <sup>st</sup> dose	2 <sup>nd</sup> dose	3 <sup>rd</sup> dose	See Notes		← 4 <sup>th</sup> dose →											
Inactivated poliovirus (IPV <18 yrs)		1 <sup>st</sup> dose	2 <sup>nd</sup> dose	3 <sup>rd</sup> dose	See Notes		← 4 <sup>th</sup> dose →					4 <sup>th</sup> dose						See Notes
COVID-19 (1vCOV-mRNA, 2vCOV-mRNA, 1vCOV-aPS)										2- or 3-dose primary series and booster (See Notes)								
Influenza (IV4)										Annual vaccination 1 or 2 doses								Annual vaccination 1 dose only
Influenza (LAIV4)																		Annual vaccination 1 dose only
Measles, mumps, rubella (MMR)					See Notes		← 1 <sup>st</sup> dose →					2 <sup>nd</sup> dose						
Varicella (VAR)							← 1 <sup>st</sup> dose →					2 <sup>nd</sup> dose						
Hepatitis A (HepA)					See Notes					2-dose series, See Notes								
Tetanus, diphtheria, acellular pertussis (Tdap ≥7 yrs)																1 dose		
Human papillomavirus (HPV)																		
Meningococcal (MenACWY-D ≥9 mos, MenACWY-CRM ≥2 mos, MenACWY-TT ≥2 years)																		
Meningococcal B (MenB-4C, MenB-FHbp)																		
Pneumococcal polysaccharide (PPSV23)																		
Dengue (DEN4CYD; 9-16 yrs)																		

also required for older ages for college admission. Most states have exemptions to such





mandates and these forms can be acquired via the state health and human services websites. The flu vaccine is also administered EACH year. I implore all of you reading this to look up each individual illness, the risk of your child contracting the illness versus the risk of vaccine injury. This last task is a bit harder since no medical establishment follows true Informed Consent as promulgated by the 1986 vaccine Act which states by law, doctors must inform a patient or patients advocate/guardian of any adverse event or risks with vaccination or medication, but the issue is no governmental agency is tracking vaccine injuries, publicly anyway. VAERs is one place to go, but you have to consider that most (90-99%) of vaccine injuries go unreported including death. An interesting fact though, during the COVID lockdowns, infant mortality plummeted. 42 We effectively saved 200 infants per week by NOT vaccinating.

On the next page is the current CDC schedule for individuals 18 years or younger. CDC also has an adult schedule which is also added below.

Here is a link to all the excipients in vaccines. These are listed by vaccine. Excipients are all the other ingredients in a vaccine besides the viral antigen.





<https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/b/excipient-table-2.pdf>

Here is link to all the vaccine inserts so you can look up the information yourself and perhaps inform your doctor.

[https://www.vaccinesafety.edu/package\\_inserts.htm](https://www.vaccinesafety.edu/package_inserts.htm)

Figure 2. Recommended immunization schedule for adults aged 19 years or older by medical condition and other indications, United States, 2017

Vaccine	Pregnancy <sup>1-6,9</sup>	Immuno-compromised (excluding HIV infection) <sup>3,7,11</sup>	HIV infection CD4+ count (cells/ $\mu$ L) <sup>3,7,9-11</sup>		Asplenia, persistent complement deficiencies <sup>7,10,11</sup>	Kidney failure, end-stage renal disease, on hemodialysis <sup>7,9</sup>	Heart or lung disease, chronic alcoholism <sup>7</sup>	Chronic liver disease <sup>7-9</sup>	Diabetes <sup>7,9</sup>	Healthcare personnel <sup>4,9</sup>	Men who have sex with men <sup>6,8,9</sup>
			< 200	$\geq$ 200							
Influenza <sup>1</sup>			1 dose annually								
Td/Tdap <sup>2</sup>	1 dose Tdap each pregnancy		Substitute Tdap for Td once, then Td booster every 10 yrs								
MMR <sup>3</sup>		contraindicated	1 or 2 doses depending on indication								
VAR <sup>4</sup>		contraindicated	2 doses								
HZV <sup>5</sup>		contraindicated		1 dose							
HPV-Female <sup>6</sup>			3 doses through age 26 yrs								
HPV-Male <sup>6</sup>			3 doses through age 26 yrs	3 doses through age 21 yrs							3 doses through age 26 yrs
PCV13 <sup>7</sup>			1 dose								
PPSV23 <sup>7</sup>			1, 2, or 3 doses depending on indication								
HepA <sup>8</sup>			2 or 3 doses depending on vaccine								
HepB <sup>9</sup>			3 doses								
MenACWY or MPSV4 <sup>10</sup>			1 or more doses depending on indication								
MenB <sup>10</sup>			2 or 3 doses depending on vaccine								
Hib <sup>11</sup>			3 doses post-HSCT recipients only	1 dose							

 Recommended for adults who meet the age requirement, lack documentation of vaccination, or lack evidence of past infection
  Recommended for adults with additional medical conditions or other indications
  Contraindicated
  No recommendation

All vaccines are grown on animals cells. These animals are: bovine, monkey, murine, human, porcine, canine, and insect. The animal cells are contained in the vaccine because of how they are manufactured. See the excipient list link. When you see acronyms like MRC-5 or WI-38, these are human fetal cell lines. They simply do not and cannot separate the animal/insect cells from the matrix.<sup>44</sup> Vaccines also do not have to endure standardization or need to be purified. The regulations do not exist which means and has been substantiated by independent labs, that vaccines contain contaminants of all kinds including metals like titanium, but also e-coli. They also do not go through toxicology testing or pharmacokinetics. This means, no one is keeping track of how these excipients move through the body and if they are toxic to organ systems. It's literally one big fat guess.

The human fetal cell lines are also genetically altered to keep dividing and not die. <sup>46</sup> This has many people concerned these cells are technically tumorigenic and potentially cancerous.

Animal cells carry with them their own viruses. This is how many think SIV in monkeys transferred into humans, which we call HIV. Of course this has been 'debunked' with limited explanation and certainly no real science to back it up. There is also an association with SV-40 monkey virus with glioblastoma, a very serious brain cancer. <sup>45</sup> Many other retroviruses are associated with animals and were introduced into the blood supply via vaccines. It is estimated (but not acknowledged overtly

by the medical community) that over 25 million people have a retrovirus in their body, which can and does lead to many types of man-made diseases like Chronic Fatigue Syndrome, AIDS, autoimmunity, and many types of cancer. Dr. Judy Mikovitz is a good source for this information and it can be found in her book Plague, which is listed below under "Books". There has been several murine (mice) retroviruses found in the blood of people. 47

### *Resources and links:*

*Do your Own research! Here are some great links to get your started.*

National Vaccine Information Center: <https://www.nvic.org/>

CDC Injury reporting System: <https://vaers.hhs.gov>

HPV Vaccine Dangers: [sanevax.org](http://sanevax.org)

All sorts of vaccine information - Children's Health Defense: <https://childrenshealthdefense.org/>

Informed Consent Action Network - ICAN

<https://jameslyonsweiler.com/2021/02/15/lyons-weiler-most-recent-studies/>

LearntheRisk.org - Former Merck employee Brandy Vaughn.

No Liability for vaccine manufacturers: <https://www.law.cornell.edu/uscode/text/42/300aa-22>

<http://www.greenmedinfo.com/blog/examining-rfk-jrs-claim-cdc-owns-over-20-vaccine-patents>

<https://www.ncbi.nlm.nih.gov/books/NBK221811/>

Physicians for Informed Consent

[ageofautism.com](http://ageofautism.com)

[soundchoice.org](http://soundchoice.org)

<https://www.flemingmethod.com/about>

### Books

Shot in the Dark by Barbara Low Fisher founder of NVIC

Retroviruses: Plague the Book & Plague of Corruption by Dr. Judy Mikovits

Dissolving Illusions by Dr. Suzanne Humphries

Miller's Review of Critical Vaccine Studies: Neil Z. Miller

Vaccines, Autoimmunity and the Changing Nature of Childhood Illness by Thomas Cowan, MD

The Vaccine Friendly Plan: Dr. Paul Thomas & Dr. Jennifer Margulis

The Environmental and Genetic Causes of Autism: James Lyons-Weiler

Turtles All The Way Down

### Other useful links:

#### Documentaries & Films, Programs

The Truth About Vaccines

Vaccines Revealed

Vaxxed I & II

The Highwire with Del Bigtree

1986 The Act: Andrew Wakefield

<https://rumble.com/user/CriticallyThinking>: Dr. Sherri Tennpenny & Dr. Larry Palevsky

Studies regarding safety of vaccination and other references

[https://childrenshealthdefense.org/wp-content/uploads/VaccineRisks\\_ReadTheFineprint\\_v1.pdf](https://childrenshealthdefense.org/wp-content/uploads/VaccineRisks_ReadTheFineprint_v1.pdf)

<https://www.wellnessdoc.com/1200studies/>

Chris Exely Aluminum Studies: <https://thevaccinereaction.org/2019/07/chris-exley-phd-on-the-link-between-aluminum-in-vaccines-and-autism/>

Polly Tommey and the Vaxxed Bus

Simpsonwood Transcripts

This link takes you to the story of Brian Hooker and the CDC's Dr. William Thompson. This is one of THE most important stories regarding vaccines with whistleblower William Thompson speaking out against fraud at the CDC in regards to the MMR/autism study. <https://vaccineimpact.com/2016/dr-brian-hooker-exposes-fraud-at-the-cdc-congress-refuses-to-hold-hearings/>

<https://www.nytimes.com/1973/05/04/archives/fda-finds-four-vaccines-contaminated-with-probably-harmless-viruses.html>

<https://www.nature.com/articles/s41587-020-0507-2>

<https://pubmed.ncbi.nlm.nih.gov/26103708/>

[https://icandecide.org/article\\_tax/white-papers/](https://icandecide.org/article_tax/white-papers/)

Sara M. Woods Kender is a clinical herbalist with over a decade of experience with the plants. She offers consultations, reiki healing sessions, and teaches classes on herbalism.