

Vaccine Injury in the UK



*A selection of testimonies
and references*



Why have we compiled this book?

Parents in the UK have spoken out for decades with serious concerns around the safety of vaccination.

We stand without conflict of interests, usually having found ourselves involved because of a suspected injury after vaccination. Instead of being heard, with respect as consumer safety advocates, we have either been ridiculed or ignored, whilst accused of spreading lies and misinformation, even disinformation.

In this book we aim to show that vaccine injury is recognised in the literature and the product inserts, in the vaccine injury programs around the world and in thousands of testimonies. We ask is it right therefore to mandate vaccines for school or employment?

As vaccines can and do injure, could it be to an extent which may be greater than the injury claimed to be saved by vaccination? Estimates of injury and death around all medicines and interventions are grossly under reported and investigated as the research shows. Estimates of injury and death due to infectious disease in the developed world are grossly exaggerated because the declining rates seen during the pre vaccine era are not taken into account in the modelling.

The measles vaccination, for example, has been documented to 'shed', to cause disease and even cause outbreaks (New York: 2014). Therefore, what is the evidence that disease will reduce further by mandating such a product?

Furthermore, as vaccine profits continue to escalate, then shouldn't we be more critical of the conflicts around vaccine policy makers? In the UK we call for an overhaul of the Medicines and Healthcare products Regulatory Agency (MHRA), called for in 2005 by a Select Committee, and also the Vaccine Damage Payment Unit.

On behalf of the families of the vaccine injured in the UK, we call for reasoned voices in the media and we ask that vaccine victims be heard.

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Founder, Vaccine Injury Stories UK &
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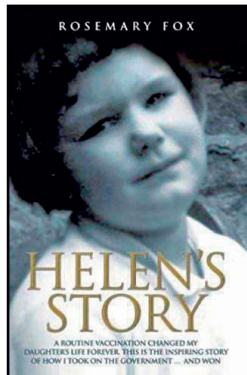


Cover photos of George Fisher, Robert Fletcher (with thanks to the Wigan Post) and Jon Edwards

Introduction to Vaccine Injury in the UK

Why does the UK have a Vaccine Damage Payment?

“Arguments supporting vaccine-injury compensation include political and economic pressures, litigation threats, increasing confidence in population-based vaccine programmes and ensuring sustainability of vaccine supply. However, compensation schemes are also based on underlying principles of fairness and justice.”¹



“Just imagine that in 1962, you have been blessed with a ... daughter and that overnight she is transformed into one who could never be normal and who suffers permanent mental handicap and convulsions. Then, as you sought explanations and challenged the Government’s refusal of compensation, you were warned that you were damaging the vaccine programme and told to keep quiet.”

– Rt. Hon Lord Ashley of Stoke, C.H. speaking of Rosemary Fox, who spent 27 years pursuing and succeeding in ensuring that the United Kingdom has a formal Vaccine Damage Payment Unit.

1. <https://www.who.int/bulletin/volumes/89/5/10-081901/en/> 1

How much has the UK paid out in vaccine damage?

The Vaccine Damage Payment Unit (VDPU) has paid out over £74,000,000 to nearly 950 people whose severe disability (over 60%) was caused by vaccination since 1979. (FOI Request, 2nd June 2017 to Ms Paviour). The Department of Work and Pensions (DWP) are responsible for this unit.

However, as stated by Author, John Stone ¹

“By 1988 settlements had been reduced to a trickle and in the last decade the DWP has conceded almost nothing despite the mushrooming schedule. They were forced to concede some Pandemrix/Narcolepsy claims by the Appeal Court in 2017, thanks to surveillance in Scandinavian countries, but the 95 pending cases hang in stalemate between the government and the petitioners. An interesting point is that there is no fund set aside and the DWP have to go to the Treasury for each award.

By and large, the British government has put the two fingers up to all claimants; there are no robust mechanisms for recognising vaccine harm, parents who have to prove and pay for their case, the MHRA does not follow up on adverse reports. Furthermore, because of the social stigma of vaccine injury, any doctor who reported on vaccine harm may be ridiculed. The position is frankly no better than hit and run, with the victims subject to public criticism and abuse. “

Despite the fact that the majority of vaccines are administered in infancy, applications to the DWP for a Vaccine Injury Payment for death, in the first two years, are not accepted.

Furthermore, Christina England¹ points out that if you have a limited income and already receive benefits you could lose these benefits if the VDPU pays you compensation.

1. *Age of Autism* ed

2. *Vaccine Policy And The UK Government: The Untold Truth*, 2015

Disability and Carers Service

MR. JOHN DUNCAN
6 WALLACEHILL WAY
CARDRONA
PEEBLES
EH45 9LF

Our address **Vaccine Damage
Payment Unit**
Palatine House
Lancaster Road
Preston
PR1 1HB

Our phone number 01772 899944
Our fax number 01772 899873
Textphone 01772 899489
Website www.direct.gov.uk
Date 06 June 2006

Dear Mr. Duncan

About Your Claim For a Vaccine Damage Payment

We received your claim for a payment under the Vaccine Damage Payments Act 1979 on 30/05/2006.

I am sorry to tell you that your claim has been unsuccessful.

This is because claims can only be considered once a child reaches two years of age.

Unfortunately, Anna was under the age of 2 when she passed away

Vaccine Damage Payments Act 1979 sect 2(1)(c)

What To Do If The Information We Have Used To Make The Decision Is Wrong

If the information we have used is incorrect and Anna was in fact 2 years of age when she passed away please let us know so that we can consider reversing our decision.

The time limit for requesting a reversal is 6 years from the date of this letter. This means that you have until 06/06/2012.

What To Do If You Disagree With This Decision

If you disagree with the decision you can appeal to the Tribunal Service. You can do this by writing to the Vaccine Damage Payments Unit.

The Tribunal Service look at your claim afresh, to see if the decision was correct.

There is no time limit for requesting such an appeal.

You can email us at CAU-VDPU@dwp.gsi.gov.uk
We are open: - Monday to Thursday 9.00am - 5.00pm Friday 9.00am - 4.30pm



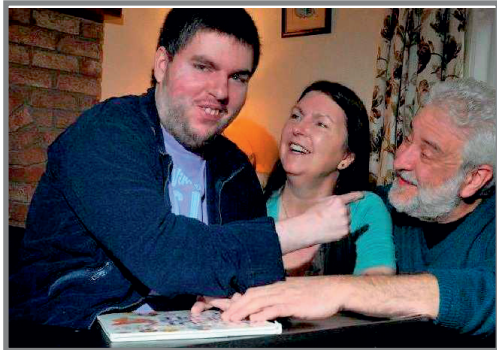
Can vaccines can cause brain damage?

There are many recorded incidents where vaccines have been proven to cause brain damage.

The case of Robert Fletcher is just one example. As a toddler, Robert was left without speech, without mobility, without bowel control and without a day free of seizures.

It was found by the Vaccine Payment Damage Scheme that the MMR vaccine caused his severe disability and brain damage.

After 18 years of struggle by his parents, the Vaccine Damage Payment Unit (VDPU) finally paid out compensation.



<https://www.wigantoday.net/news/people/video-interview-mum-calls-for-mmr-jab-court-case-to-be-reopened-1-9591944>

Can vaccines cause other severe damage?

The pharmaceutical industry is aware that vaccines can and do cause damage and death, this information is noted in the vaccine inserts.

In the USA, the Vaccine Injury Compensation Programme has a comprehensive list of acknowledged Vaccine Injury including death. The USA Vaccine Injury Compensation Court has paid out over **\$4 billion** to date. Private health insurance companies also hold lists of vaccine injury, including death

The Uranium Commission advised the Italian Parliament that the Italian Military not receive more than 5 vaccines at one time and that they undergo a pre-vaccine test for susceptibility. *Research has revealed a statistically significant association between multiple military vaccines and both autoimmune diseases and death.

The most comprehensive and fully referenced introduction to different pathways for vaccine damage is found here:

<https://www.efvv.eu/pathways-for-vaccine-damage/>



<https://drive.google.com/drive/folders/1WuCxYplwQJFjh1fzwLXgf6krtOEESFUQ> p. 154



Testimonies

These dozen testimonies, beginning with Rosemary Fox, are just a small selection of thousands of vaccine injury stories shared in the UK.

The Medicines & Health Products Regulatory Agency (MHRA) receives several thousand serious adverse vaccine reactions and several thousand minor reactions each year.

It is estimated that only a tiny fraction of adverse effects are ever reported.

Please be aware when reading these stories that they often span decades, cover many files of medical notes and are being told by families who have suffered enormously.

We have made every effort to summarise these stories accurately and to demonstrate how healthy babies and children have suffered adverse reactions following vaccination.

Not every case here is recognised officially as vaccine injury but we suggest that a lack of official report does not mean they are not vaccine injured. It should be noted, however, that the symptoms described are within the time frame mentioned in the manufacturer's product insert and the recipients were previously reported as normally healthy.

The Vaccine Damage Payment Unit (VDPU) only considers cases where people are 60% or more disabled, meaning that many cases of disability at a lower rate are ignored. Unless a family has the financial means to bring a case to the VDPU, or indeed have the energy to sustain several years of litigation alongside caring for a very sick child, the majority of cases go un-investigated.

Reporting the events to the MHRA via a simple Yellow Card does not touch on the long term nature or the new health conditions of these debilitating symptoms and no agency is responsible for following up these cases and many thousands like them.

Jon Edwards – from a video interview:
<https://bit.ly/2VQJLq6>

Michael and his wife Allison are on guard 24/7 with Jon. He is a very vulnerable young adult who needs round the clock specialist care for his autism and his gastro-intestinal problems.

Jon was a healthy boy who regressed into severe autism following his MMR vaccine in 1998. Jon became very hot and developed a raging thirst. Calpol was given as instructed. He lost speech and eye contact and stopped playing with his toys. He is still non verbal and doubly incontinent.

His mother wonders if his egg allergy was a complication or if his older brother's chicken pox had a negative impact.

Allison argued with Michael for both her sons to be vaccinated as she believed it would keep them safe and healthy. Now she feels guilty every day for the pain she has put her youngest through having seen how drastically his life changed from that day onward and the level of care that will be foisted onto his brother Charlie in the coming years.

Michael is very concerned about the tidal wave of children with special needs and autism. What will happen to these children when their parents are no longer around to look after them?

Allison presented to the House of Commons and successfully campaigned for necessary adult nappies on the NHS and still campaigns today for better Autistic support.

(photo: front cover)

Max Perry – by his Dad

"Our 27 year old son has a severe regressive form of autism. He developed perfectly normally until 16 months.

Ten days after his MMR vaccination, he started to lose skills, including language, and develop autistic symptoms with associated gastro -intestinal problems, described as a severe form of IBS.

Thereafter, we had years of struggle to ensure services for Max. We went through two educational tribunals trying to get Max's needs met on a home programme with special education. However, the local authority was only interested in finding him a 52 week placement because Max was so severe and this was the cheapest option.

He was sadly placed in his first boarding school at 7 and Max has been through special schools throughout his life at great expense to the state.

I was told by social services to give up my job to help look after him and my wife was told to call the police if she could not manage his behaviour. This is how bad Max was.

Finally and thankfully Max is now at home in a special extension to the house and needs full time carers. He has bowel problems and is non verbal.

Luckily we have found local support and Max was included onto a pilot scheme for integrated personalised commissioning known as 'My Life My Way' in Hampshire. This is a pilot scheme to support families long term. But what will happen to the children when their parents are not around any more?"



Max regressed 10 days after the MMR

Harriet Hadley – by her Mum

"Harriet was born on 2nd July 1994, almost 4 weeks early. She was a healthy 5lb 9oz. We returned home, our family complete, baby sister for George. Harriet was our beautiful baby girl, rosy-cheeked and always smiling.

Harriet received her routine vaccinations on schedule. Despite being forward in most areas of development, she began to get lots of colds, chesty coughs and fevers.

On August 1st 1995, I visited the GP surgery for Harriet's routine MMR vaccine. Following the injection Harriet immediately cried and developed swelling and redness. We were advised to give her Calpol by the nurse practitioner. She continued to be unsettled and distressed for the remainder of the day. Harriet was exhausted from crying. I will never forget that distressing night. I could not console Harriet... eventually, she fell asleep.

In the morning I realised I hadn't heard Harriet, who usually was laughing, babbling, calling out and standing up in her cot. **She was looking extremely pale, dark circles around her eyes, lying in her cot. No babbling, no words, no laughing.**

The days, weeks and months that followed were spent at the surgery and with health visitor assessments. Harriet's behaviour became more bizarre, lining up objects, hand flapping, tiptoeing. She began to self-harm, banging her head on the floor. She would scream in pain, arch her back and become rigid. She was severely constipated and was suffering extreme bowel pain.

At the age of two, Harriet was diagnosed with Autism. My adult daughter is severely autistic, requires constant supervision, has no awareness of danger and will need care for the rest of her life. I live with the worry ... who will care for her when I die."



Harriet reacted immediately after the MMR

Jack Campbell - by his Mum and Dad

from a video interview: <https://youtu.be/21tYfZ7dtMY>

Jack is in his twenties and is autistic.

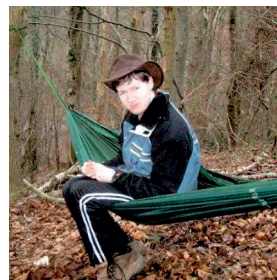
Jack had his DPT vaccine at 2 and 3 months, but Jack was not a well baby. Joan (his mother) refused his 4 month jab as he was not well at the time and then Joan thinks Jack had the measles when he was 7 months old as his brother had it and this was noted on his records.

At 14 months Jack was due his MMR vaccine in 1994. Immediately afterwards Jack was floppy and clingy and very thirsty. Joan was up with him all night and Jack gave out a very high pitched cry, which Joan now knows, is a sign of inflammation of the brain called encephalitis. Jack cried the next day and had a high temperature. He was given antibiotics 4 days after the MMR when mum visited the GP and mentioned that he hadn't been well after his MMR with a cough and fever. And that is when he regressed. Jack lost eye-contact and stopped babbling.

Jack did not manage nursery. He would not play and interact with others. Instead he would climb on everything, and had no sense of danger.

In 1997 Joan started court proceedings against Merck, the MMR vaccine manufacturer, for medical negligence, but their Legal Aid wasn't extended to cover the time the case was taking. She then joined with 2000 other children in a class action against the MMR. They did not see court because legal aid was pulled a few weeks before it came to court.

Jack is still on medication for seizures, follows a gluten free diet and sadly has been bed ridden for several years because of extreme pain in his jaw and teeth due to an abnormal cyst.



Jack reacted immediately after his MMR vaccination.

Alfie Hitchcock - by his Mum

"Meet our 14th month old son Alfie. This photograph was taken a few weeks before we took him for his MMR vaccine. He was our first child and the most precious thing in the world to us.

As with most first time parents we did everything by the book and what our lovely health professionals tell us to do, after all what did we know...

Ten days after the vaccine he became rather unwell. We called my doctor who refused to see him and said it was perfectly normal and to give paracetamol and put him to bed. He said: if he's still like it on the morning, call me.

Unfortunately, Alfie didn't make it till the morning. We put him down to sleep and when I went to check on him half hour later he was dead. Gone. Stolen. Never to breathe again.

They certified his death as SIDS (*even though SIDS is not classified at this age.*) This has led me to research every vaccine. I wish I knew then what I know now. Over my dead body will I ever let a vaccine near my children.

We now have 3 unvaccinated children who are fit and healthy and poison free."



Alfie died 10 days after the MMR

Jodie Marchant

- from The Mail on Sunday, 11th June 2000

"A girl who developed autism and severe bowel problems after being injected with *seven childhood vaccinations at once has controversially been refused compensation.

According to her parents (Pat and Bill), Jodie Marchant, now eight, was a healthy baby until she was given the multiple inoculation at the age of 14 months. Today their child is severely disabled. She cannot talk, hardly eats and spends many of her days and nights in excruciating pain.

Now the couple's MP, Alan Whitehead, is fighting to discover why the Vaccine Damage Tribunal refused the Marchants a possible payout of £40,000. And Health Minister John Denham has expressed his concern over the case.

Mr Whitehead, Labour MP for Southampton, said yesterday: ... 'As far as I can see that means that they have actually accepted that she was vaccine-damaged but because this was the result of a multiple injection on one day, and not a particular vaccine,

the tribunal hasn't got the power to consider it.'

Jodie's mother, Patricia, 44, told how she took her daughter for a mumps, measles and rubella jab at their local health centre in Southampton in May 1993 but, unknown to her, Jodie was injected with vaccines against diphtheria, tetanus, whooping cough and polio at the same time as the MMR (in the same syringe)". * further records revealed an eight vaccine, Hib was also given

Dr. Peter Fletcher, MB BS MSc Ph.D. FFPM wrote: "Jodie's serious handicaps are causally related to vaccination."



Update (May 2019): Alan Whitehead is trying again to raise the issue with the Minister for the DWP and the Minister for Health to help Jodie bring an appeal to the Vaccine Damage Payment Unit. Jodie is still non verbal, is 80% brain damaged and is doubly incontinent. Her father, William, passed away at Christmas 2018 and her Mum, Pat, is now her sole carer.

Alisha Salters - by her Mum

"My story starts when my daughter, Alisha, was six years old - a normal healthy child, meeting all her milestones, a real bundle of energy and very active with it. That is until the day she went into school for a vaccination of M.R. (Measles and Rubella).

Within 36 hours we were at accident and emergency at our local children's hospital because Alisia had an allergic reaction. The doctors said that it was normal and to go home and give her calpol.

After a long three month wait we were finally told she had Juvenile Idiopathic Arthritis (a listed side effect of the Rubella vaccine).

We were in shock. My daughter was put on many different medications and was referred to physiotherapy. We were told by doctors that we were 'lucky' to have a new clinic at the children's hospital in Liverpool to deal with it, but when we asked why is it becoming more common in children, the doctors would not give us an answer.

Alisha had an immediate reaction and has suffered juvenile arthritis since the MMR

Our lives revolved around hospital appointments for other tests but none of the medications worked, it was a very worrying time. Alicia seemed to get one problem after the other, perhaps from the steroids and even the chemotherapy: Ulcerative Colitis, Osteoporosis, Iron Deficiency Anaemia to name but a few.

My daughter has suffered her whole life from the age of six, through her teens when she was just 4 stone, to this day at 30 years of age when she can't now have children because of the various medical treatments she has received.

Her school life with friends was taken away for her, she could not join in any activities or go on school trips because of the mobility difficulties and pain; it was heart breaking to see your child so upset and alone."



Georgie Fisher - from The Telegraph, 2nd December 2008

"Sarah and Christopher Fisher said they believed the jab was "implicated" in the sudden death of their son George. The inquest heard how George had suffered an epileptic-type fit four months before being given the MMR vaccine and that this might have been a warning he could react badly to the jab.

George died 10 days after the MMR and the inquest couldn't certify the cause of death.

Professor of Infant Health, Peter Fleming, Bristol University, said it was **most likely** that George died from a rare type of seizure known as Sudden Unexpected Death in Childhood (SUDC)."

The Age of Autism describes Georgie:

"It was so hard to hear how this robust toddler died. He was a remarkably good birth weight almost 8lbs 10oz, he breastfed well until aged 11 months. He was the youngest of four children, Sarah and Chris were well-experienced and instinctive parents. They too felt they had no real concerns. His feisty nature was described by them both in turn, how he could lift a baby sit-in car above his head at age twelve months and managed to move his cot across the wooden floor of his bedroom whilst still in it.

*The MMR had left Georgie immediately with a runny nose, diarrhoea (he also was teething), sore ears, a fever, vomiting and had sore red eyes which had prompted his Mum to phone to make a doctor's appointment. Calpol was advised but he had died before she could take him.... **The post mortem report showed his lungs and blood carried the measles virus and he had an enlarged spleen which means he was fending off a virus ... "***

(photo: front cover)

Kasra Saberi - by his Mum

"My first born was injured in the early 90s. He had bad reactions to each of his infant vaccines from birth, but the MMR was the last straw.

Kasra went from a healthy, bubbly, chatty, playful, bouncy and sociable toddler to a scared, shy, thin little boy who did not want to be touched or spoken to. He began to have severe gastrointestinal symptoms, first diagnosed as a parasitic infestation. He had constant diarrhoea and Candida infections.

He couldn't eat properly and vomited almost every day. He lost the little speech he had and stopped interacting. Kasra was diagnosed as moderate to severely autistic at the age of 2 years and eight months.

I knew my son was not born this way. I saw the light switch off in his eyes and I can pinpoint it to the day of his MMR vaccination. No one dared to talk about recovery as it was not heard of, however, I knew my son needed me to help him recover from the terrible gastrointestinal problems which had stunted his growth and his cognitive development.

Kasra was injured by the MMR and was found to have the presence of the vaccine strain of the measles virus in his gut

My GP referred us to a well-known paediatric gastroenterologist called Professor Walker-Smith and his team at the Royal Free Hospital in London. The biopsies showed an acute condition caused by the presence of measles virus in his gut. The measles DNA was checked against his vaccine batch and it matched. My son's gut was constantly shedding its lining to get rid of the measles virus. The MMR injection introduced the measles to his gut rather than promoting antibody immunity.

Kasra is not totally recovered. At 26, he still suffers from allergies and gut issues, but to a lesser extent. At great personal expense we have travelled the world to find ways to help him but he will never be independent.

His life and future were robbed from him and as a family we have suffered massively. He will never live an independent life."



Lucy Hinks

"From an early age I knew the way I wanted my life to go - sixth form and university. It never occurred to me that this would not be possible.

Before I took ill I had a good attendance at school and was hardly ever poorly, apart from tonsillitis. **However, as a baby I was very ill and admitted to hospital with suspected meningitis, but it turned out to be a bad reaction to the MMR vaccine so I did not have the second MMR.**

I had all 3 HPV vaccines during 2010/11. Following the 3rd I had severe joint pain and flu like symptoms, a persistent headache and exhaustion. I was given a diagnosis of Myalgic Encephalomyelitis (ME) over the next few weeks which I felt was caused by the vaccine. In the next 3 months I lost a third of my body weight, I could not walk, talk or feed myself. I did not open my eyes for 13 weeks. I was sleeping more than 20 hours a day, as though I was in a coma.

Two months later I was referred to the children's mental health service and given the diagnosis of Anorexia. They did not believe or understand how ill I had been. They wanted me admitted to a psychiatric Unit far from home.

Later that year my parents found out that they had been investigated themselves for fabricated and induced illness.

Today, I am waiting for a referral to a neuro-physio for problems with my hips and legs and the results of a sleep study. I have to listen to my body and either rest or sleep to avoid full-blown relapse which is what happens when I try to return to normal activity. 8 years later I am no where near normal.

None of us chose to be ill. The life I lead now is difficult to cope with. It took me a long time to accept that while it wasn't the life I expected, it was still possible to have a life and not purely exist. I am working to build a life around my illness, manage the symptoms and get the most out of life that I can."

(There are many similar stories to Lucy's after the HPV vaccine. Japan has suspended the recommendation of this vaccine while they investigate further.)

Robert Fletcher

- by his Mum

"The Government's Vaccine Damage Payment Unit is designed not to pay. This keeps the awards artificially low and gives the false impression that vaccines are far safer than they really are.

When my son was brain damaged following MMR and HiB meningitis vaccines no medic told our family about the scheme. No medic wanted to admit that such damage could occur. We had to go through a steep learning curve on all levels.

The first assessor conceded that all Robert's problems were linked to the jabs but wanted us to describe the 'biological mechanism that led to the damage'.

18 years later armed with medical reports, a neurologist prepared to give evidence, and a legal team to keep the tribunal panel focused on the level of proof needed resulted in a payment being made - a derisory sum - but at last an admission by government that we had been right all along.

How many families have been denied this simple justice because government wants to shirk its responsibility and ignore vaccine damage?"

(photo: front cover)



Lucy Hinks, who became severely unwell following her HPV vaccinations and has not fully recovered.

How are UK adverse events reported?

The Medicines and Healthcare products Regulatory Agency (MHRA) operates a Yellow Card Reporting System that can now be used by members of the public, as well as medical practitioners to report adverse events.



" I can confirm that the MHRA has received a total of 21,822 UK spontaneous suspected ADR reports between the 1st January 2005 and 22nd April 2015, in association with the vaccines in the routine immunization schedule,

10,987 of these were serious reports and 10,835 were non-serious. Please be aware that one ADR report may contain more than one vaccine as some vaccinations within the schedule are administered within the same time period." ¹



1. <https://www.whatdotheyknow.com/request/264023/response/652396/attach/3/FOI%2015184%20Final%20Response.pdf>

Are the UK Adverse Event Reporting Systems fit for purpose?

According to UK scientists, adverse events are reported as little as 2% of the time...

"The data suggests that under-reporting by the spontaneous system may be as high as 98%." ¹

And according to a US government-funded Harvard Medical School study,

'fewer than 1% of vaccine adverse events are reported' ²

Even when a vaccine ADR is suspected, there are very few doctors in the UK who will even acknowledge that vaccinations can cause injuries, let alone make a Yellow Card Report. Patients themselves are also largely unaware. Vaccine adverse events are not part of a coroners remit in the UK, as many families have reported. Yellow Card Reports are filed and compared but not individually followed up.

In the UK, we have the '**Black Triangle Warning Scheme**', which exists to signify to patients and medical professionals any medicines which are still subject to intensive monitoring. However, the scheme is poorly understood, passive and largely ignored.

This is in contrast to the Japanese system, which mandates 'pharmacovigilance' for new vaccines by health care professionals via Early Phase Post-Marketing Vigilance (EPPV). This is the mechanism by which Japan withdrew recommendation for the MMR and Gardasil HPV vaccines because they identified an unacceptable level of adverse effects. ³

1. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1293280>

2. <https://healthit.ahrq.gov/sites/default/files/docs/publication/r18hs017045-lazarus-final-report-2011.pdf>

3. https://www.diaglobal.org/productfiles/22993/day%203/401/s401%2003_tomoko%20okudaira.pdf

Is there a conflict of interest between UK policy makers and manufacturers?

The medical licensing agency (the MHRA) which has responsibility for monitoring vaccines is entirely funded by the pharmaceutical industry and has to compete for business against other global agencies.

In November 2017 the UK government appointed Patrick Vallance, President of R&D at GSK, as Chief Government Scientist; industry insider Jonathan van Tam as Deputy Chief Medical Officer for Emergency Preparedness and Pandemic Planning (sic) and Sir Andrew Witty, recent boss of GSK, as director of the industry beneficial Accelerated Access Partnership.

Particular concern, must surround the role Prof Andrew Pollard who has combined being director of Oxford Vaccine Group, which develops vaccine products with the industry, with being chair of the Joint Committee on Vaccination and Immunisation, which recommends products to the schedule.

In 2013 the JCVI rejected a request from the then secretary of State for Health, Jeremy Hunt, to recommend Bexsero Meningitis B vaccine to the schedule, which they failed to agree on. Shortly afterwards Pollard, who was lead developer of Bexsero, was appointed to chair the Committee, and the recommendation of the product to the infant schedule was made at his second meeting. Almost immediately following this, negotiations began to transfer Bexsero with Novartis's vaccine division to GSK, and the vaccine was included by Hunt in time for the 2015 election. Pollard remarkably also acts as adviser to the MHRA and European Medicines Agency.

Last year the European Parliament expressed concern that the cost of vaccinating a single child had gone up by 68 times between 2001 and 2014, and it must have risen a great deal more in the intervening 5 years.

Successive governments have failed to ensure sufficient transparency over these matters which are now completely neglected by the media.

How many UK children die from Measles?

During the past thirty years, three children have sadly died from the complications of Measles.



How many UK children may have died from Measles Containing Vaccines (MCV's)?

According to a recent Freedom of Information Request (FOI), in the 4 years between 2013 to 2016, 9 people were reported killed by the MMR. We don't know how many are children. These reports have not been investigated nor have they been made public, for fears the individuals can be identified.

Table 4: Total number of MMR vaccine reports and doses distributed (serious reports in brackets)

	2013/14	2014/15	2016
Total number of reports	228 (172)	274 (189)	195 (144)
Total number of reactions	727 (567)	945 (701)	674 (534)
Total fatal	2	2	5
Exposure	1,472,000	2,208,000	1,232,800
ERR per 100,000 doses	15.5 (11.7)	12.4 (8.6)	15.8 (11.7)

ERR = Estimated Reporting Rate

1. <https://www.gov.uk/government/publications/measles-deaths-by-age-group-from-1980-to-2013-ons-data/measles-notifications-and-deaths-in-england-and-wales-1940-to-2013>
2. <https://www.whatdotheyknow.com/request/572117/response/1361888/attach/3/VACCINE%20ASSOCIATED%20SUSPECTED%20ADVERSE%20REACTIONS%20REPORTED%20VIA%20THE%20YELLOW%20CARD%20SCHEME%20DURING%202018.pdf>

Do Europeans support vaccine mandates?

Over 200,000 European citizens have signed the largest petition of its kind, translated into 15 languages, asking for parents to be given the opportunity for informed consent for vaccination (permission granted in full knowledge of the possible consequences, typically that which is given by a patient to a doctor for treatment with knowledge of the possible risks and benefits), rather than for vaccines to be mandated.

Respect, promote and protect freedom of informed vaccination consent throughout Europe



216,524 have signed. Let's get to 300,000!

Salman mansoori signed 1 hour ago

Zaid Ali signed 2 hours ago

Thanks to your support this petition has a chance at winning! We only need 83,476 more signatures to reach the next goal - can you help?

Take the next step!

Secretary European Forum for Vaccine Vigilance (EFVV) started this petition to European Parliament and 2 others

[Français](#) [Italiano](#) [Español](#) [Deutsch](#) [Polskie](#) [Hrvatski](#)
[Português](#) [Norsk](#) [Slovene](#) [Svenska](#) [Magyar](#) [Česky](#) [Slovensky](#)
[Lietuviška](#)

The European Forum For Vaccine Vigilance (EFVV) (<http://www.efvv.eu>), a group representing some 25 European countries is therefore demanding:

That the precautionary Principle be applied in the case of vaccination and that compulsory vaccination for school be abolished throughout Europe as it is a breach of our Universal Human Rights where vaccines can injure and cause death.

That an effective, independent European Vaccine Adverse Effect Reporting (VAER) system be established to monitor vaccine safety.

Can the Measles vaccine cause disease?

Measles outbreaks have been traced to a recently vaccinated person.

The MMR is a 'triple live vaccine' meaning that the virus contained within the vaccine can shed to and cause disease in others. The 2014 New York measles outbreak was actually traced to a recently vaccinated woman who shed to a fully vaccinated man. ¹

Measles can also be caused by the vaccine strain.

Genetic sequencing science has proven that measles infection can be identified as either from a measles vaccine or a wild virus. ²

"During the measles outbreak in California in 2015, a large number of suspected cases occurred in recent vaccinees (3). Of the 194 measles virus sequences obtained in the United States in 2015, 73 were identified as vaccine sequences."

"Considerable measles cases in Tianjin occur in vaccinated children, and further research is needed to understand the reasons for vaccine failure." "the fact that 8.5% of cases in the surveillance dataset and 26% in the case series contracted measles despite 2 or more doses of MCV is surprising." ³

1. <https://www.sciencemag.org/news/2014/04/measles-outbreak-traced-fully-vaccinated-patient-first-time>

2. <https://jcm.asm.org/content/55/3/735>

3. <https://www.sciencedirect.com/science/article/pii/S0264410X19305985>

Has the Measles Vaccine uptake significantly dropped in the UK?

The UK was declared "measles free" by the World Health Organisation (WHO) in 2017 despite never reaching the target of 95% coverage in children with a Measles Containing Vaccine (MCV) since 1968.

World Health Organization

WHO vaccine-preventable diseases: monitoring system. 2018 global summary

Coverage time series for United Kingdom of Great Britain and Northern Ireland (the) (GBR)

Last updated 22-Oct-2018 (data as of 18-Sep-2018)
Next overall update spring 2019

Vaccines	2017	2016	2015	2014	2013	2012	2011	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1998	1997	1996	1995	1990	1985	1980
BCG	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	11	10	9	--	--	
DTP3	94	94	95	95	95	95	95	94	93	92	92	92	91	92	91	91	91	91	92	91	92	96	93	85	--	--
DTP4	87	87	89	90	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
Hib3	94	94	95	95	95	95	95	94	93	92	92	92	91	92	91	91	91	91	92	91	92	95	--	--	--	--
MCV1	92	92	93	93	93	92	90	89	86	86	86	85	82	81	82	85	85	88	88	87	91	92	92	89	--	--
MCV2	88	89	89	89	88	87	85	84	79	75	74	75	75	76	77	74	75	76	--	--	--	--	--	--	--	--
PCV1	--	--	--	--	--	--	--	--	92	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
PCV2	94	94	94	95	95	95	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
PCV3	92	92	93	93	93	92	90	89	91	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
Pol3	94	94	95	95	95	95	95	94	93	92	92	92	91	92	91	91	91	91	92	91	92	96	94	90	--	--
RCV1	92	92	93	93	95	92	90	93	86	86	86	85	82	81	--	--	--	--	--	--	--	--	--	--	--	--
rotac	90	90	89	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
TT2+	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	93	96	93	--	--	--

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It is worth noting here that even if 100% of children received two doses of the MMR, children represent one section of the population and the MMR does not give full or life long immunity. We can therefore never hope to have true herd immunity via vaccination.

http://apps.who.int/immunization_monitoring/globalsummary/coverages?c=GBR

Is social media to blame for the small reduction in measles vaccine uptake?

It has been claimed that social media is to blame for the small reduction in measles vaccine uptake in the last few years, however, the Government's own study found this not to be true.

Only 4% of 1,674 people surveyed mentioned they had seen something negative about vaccination on the internet, of which a small proportion was on social media.

"When asked what they had come across in the past year the majority (86%) of parents who reported seeing or hearing information about vaccines said the messages were in support of immunisation.

Only 4% said the information was against vaccination. Of the small number of parents (n=143) who had seen information to make them doubt having their child immunised, 35% had seen this on the internet and 14% mentioned social media (and 13% on FB) as the main source. Information relating to side effects of vaccines was the main topic parents cited that might have persuaded them not to immunise their child." ¹

Jamie Lopez Bernal, a senior epidemiologist in PHE, also doesn't feel that 'anti-vax' messages are to blame for the drop in vaccine uptake. She suggests that barriers to vaccination are more related to appointment issues

"While vaccine hesitancy may be factor for a small minority of parents - timing, availability and location of appointments, have been identified as barriers to vaccination by parents and healthcare professionals." ²

1. Number CDP 2019/0108, 30 April 2019

2. The Pharmaceutical Journal, 26th April 2019

Do vaccines increase the risk of cancer...

The MMR, along with all other vaccines, has not been evaluated for their potential risks on cancer, to mutate genetic material or to impair fertility.

13.1 Carcinogenesis, Mutagenesis, Impairment of Fertility
RECOMBIVAX HB has not been evaluated for its carcinogenic or mutagenic potential, or its potential to impair fertility.

Can multiple vaccines be administered safely?

The Italian Uranium Committee advises no more than 5 vaccines to their adult military personnel at any one time. Robert F Kennedy, co counsel in the Monsanto litigation, has found that the US vaccine schedule has not been tested since 1988. New research by Corvelva has found that 5 of the 7 vaccines tested so far contain unknown contaminants and genetic mutations

Has the cumulative level of injected aluminium adjuvant in vaccines been biologically tested?

Assumptions have been made against oral toxicity studies and have not been weight adjusted

...is the science really settled?

1. https://www.ema.europa.eu/en/documents/product-information/m-m-rvaxpro-epar-product-information_en.pdf

2. see P. 5 of this book / Case 1:18-cv-03215-JMF /

<https://www.corvelva.it/it/speciale-corvelva/vaccinegate-en.html>

3. <https://www.sciencedirect.com/science/article/pii/S0946672X17300950>

... last word

"There have been many advances in medical knowledge and understanding of vaccine damage since the scheme was launched in 1978.

*Since then, numerous reliable research papers have been produced that demonstrate that vaccinations are *safer than they have ever been and a *rigorous licensing regime ensures that safety is of paramount importance.*

*It is worth noting that most of the disabling conditions claimed to have resulted from vaccination can also occur *spontaneously in unvaccinated children and adults. "*

The Department of Work and Pensions Central Team Freedom of Information Team attempts to justify the reason why just 5 claims were successful in the last 2 years from over 150 applications in their latest FOI update (2019).
*We will be asking for references for claims

Further Information & Support

www.vaccineinjury.uk
www.followingvaccinations.com
www.jabs.org.uk
www.informedparent.co.uk
www.arnica.org.uk
www.narcolepsy.org.uk
www.vaccineriskawareness.com
www.timeforaction.org.uk
www.lightacandle.eu
www.efvv.eu

UK Association of HPV Vaccine Injured Daughters

www.facebook.com/AHVID.UK 07752 945545

Reporting Vaccination Adverse Events

<https://yellowcard.mhra.gov.uk>

Freedom of Information Requests

<https://www.whatdotheyknow.com/search/vaccine/all>

The Vaccine Damage Payment Scheme

<https://www.gov.uk/vaccine-damage-payment>

<https://www.legislation.gov.uk/ukpga/1979/17/contents>

Silenced Witnesses: Vol. I & II

The Parents' Story. The Denial of Vaccine Damage by Government, Corporations and the Media www.slingshotpublications.com



We are calling for:

- * Parents to continue to be allowed to make an informed choice about the right health care options for their own families without prejudice
- * Parents to be provided with clear information about the risks and the benefits of medical products and procedures
- * More balanced public debate and media reporting around vaccine safety and efficacy
- * Greater independence and transparency of vaccine safety and efficacy trials
- * Improved data collection systems for adverse reactions to vaccines

When medical risk is involved parents should always have a choice.