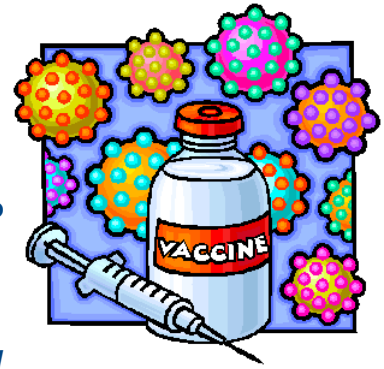




# Vaccination

## Questions and Answers

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### ABSTRACT

Vaccination is regarded as the most important health advance in the twentieth century by many health professionals and lay people. The dramatic decrease in morbidity and mortality from disease that occurred in the course of the that century has been credited to the introduction of specific vaccines, scant acknowledgement having been given to improved social conditions.

Despite questioning of the safety and efficacy of vaccination by reputable medical men since its introduction, debate has been, and is, increasingly discouraged. Information published in scientific journals is used to support this position, other views being regarded as 'unscientific'.

However, using evidence available in refereed medical journals and analysing the data rather than relying on the conclusions, raises serious questions about the safety and efficacy of vaccination and presents a different view to that provided by the Department of Health in the UK and abroad.

The first part of this presentation looks at how a doctor could change from being a firm supporter of the 'Universal Childhood Immunisation Program' to strongly questioning its validity; why morbidity and mortality from infectious diseases have fallen so drastically over the course of the twentieth century and natural infections and immunity vs vaccination and artificial immunity.

In the second part we will look at the meaning of 'science' and the proportion of medical and surgical practice that is evidence based. Using Montori and colleagues' *'Users' guide to detecting misleading claims in clinical research reports'*, we will critically analyse the important Finnish Twin MMR Study: a double blind randomised controlled trial of MMR vaccine vs placebo. The aim is to encourage delegates to appreciate that the conclusions of scientific papers should not be taken at face value, and to obtain the skills needed to assess a study in its entirety, so that they can make their own deductions, before accepting the message of the authors.

As highly trained health professionals we must be able to evaluate such data ourselves in order to practice appropriately, in addition to being able to provide the information our patients need to fulfil the requirement for informed consent.

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### Part 1 Resources

**'Vaccinatable Diseases and their Vaccines'**, by Dr Jayne Donegan, a detailed review of vaccination and disease ecology using the methodology described above and is fully referenced. It can be downloaded at <http://www.jayne-donegan.co.uk/>, -> **articles**. Some references or abstracts are available free through PubMed (<http://www.ncbi.nlm.nih.gov/pubmed/>)

**'The Green Book'**, Department of Health (DoH) UK, This 2006 edition can be downloaded free. It presents the DoH view on vaccines and vaccination procedures for all the vaccine preventable infectious diseases that may occur in the UK. <http://www.dh.gov.uk/en/PublicHealth/HealthProtection/Immunisation/Greenbook/index.htm>

**The Informed Parent**, a very helpful resource for information on vaccination and health promotion to recommend to your patients. Membership is £15 pa. The current subscribers pack includes a very good, practical article about management of tetanus prone wounds. <http://www.informedparent.co.uk/>

**Promoting Natural Immunity** The **Arnica** Network was formed in 2007 by parents concerned about the

vaccination program and interested in the role of Natural Health in disease. There are now 50 Amica groups nationwide providing information and support for families with an interest in natural immunity. [amica.org.uk/](http://amica.org.uk/)  
**'The Pink Book'**, Epidemiology and Prevention of Vaccine-Preventable Diseases, the US version of the green book, packed with information, download for free <http://www.cdc.gov/vaccines/pubs/pinkbook/default.htm>  
**National Vaccine Information Centre** (NVIC) is responsible for launching the vaccine safety and informed consent movement in America since the early 1980's: The Founder was a co- author of *A shot in the Dark* <http://www.909shot.com/About.htm>

**Child Health Safety** in depth research into the role of government & pharmaceutical companies in the introduction of new vaccines and the handling of adverse reactions. Includes 'Vaccines Did Not Save Us – Two Centuries of Official Statistics' graphs from ONS data. <http://childhealthsafety.wordpress.com/>  
**'The Truth About Vaccines'** by Dr Richard Halvorsen, a London GP: an extremely well researched and interesting book. The section on the licensing of the MMR vaccine is well worth reading. [www.drhalvorsen.co.uk/](http://www.drhalvorsen.co.uk/)

## Part 2 References

Montori VM, Jaeschke R, Schünemann HJ, et al  
**Users' guide to detecting misleading claims in clinical research reports**  
BMJ 2004;329:1093-1096 accessed February 2011 FREE  
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC526126/?tool=pubmed>

Donegan GMC Transcripts for day 1 - GENERAL MEDICAL COUNCIL 2004  
[www.whale.to/vaccine/Donegan%20070807%20Day%201.doc](http://www.whale.to/vaccine/Donegan%20070807%20Day%201.doc) accessed February 2011 FREE

Elliman D et al Measles, mumps, and rubella: prevention  
**Clinical Evidence. Search date July 2007** accessed February 2011 Subscribers only  
<http://clinicalevidence.bmj.com/ceweb/conditions/chd/0316/0316-get.pdf>

Virtanen M, Peltola H, Paunio M, Heinonen OP  
**Day-to-day reactogenicity and the healthy vaccinee effect of measles-mumps-rubella vaccination**  
Pediatrics. 2000 Nov;106(5):E62 accessed February 2011 FREE  
<http://pediatrics.aappublications.org/cgi/reprint/106/5/e62>

Peltola H, Heinonen OP  
**Frequency of true adverse reactions to measles-mumps-rubella vaccine. A double-blind placebo-controlled trial in twins** Lancet. 1986 Apr 26;1(8487):939-42 Not available online  
ABSTRACT

The vast majority of adverse reactions following immunisation of children with live measles-mumps-rubella (MMR) vaccine were shown in a double-blind, placebo-controlled, cross-over study in 581 twin pairs to be only temporally but not causally related to the vaccination. The true frequency of side-effects caused by MMR vaccine, estimated from the discordance rates of individual signs and symptoms between MMR vaccinees and their placebo-injected twins, was between 0.5 and 4.0%. Moreover, respiratory symptoms, nausea, and vomiting were observed more frequently in the placebo-injected group than in the MMR vaccinated group.

**British National Formulary no 60 (2010) 5.1.4 Neomycin Aminoglycosides**  
<http://bnf.org/bnf/bnf/current/3831.htm> accessed February 2011 Subscribers only

**ScienceLab.com Material Safety Data Sheet Phenol red MSD**  
[http://www.sciencelab.com/xMSDS-Phenol\\_red-9926479](http://www.sciencelab.com/xMSDS-Phenol_red-9926479) accessed February 2011 FREE

**M-M-R® II (MEASLES, MUMPS, and RUBELLA VIRUS VACCINE LIVE) monograph**  
[http://www.merck.com/product/usa/pi\\_circulars/m/mmr\\_ii/mmr\\_ii\\_pi.pdf](http://www.merck.com/product/usa/pi_circulars/m/mmr_ii/mmr_ii_pi.pdf) accessed February 2011 FREE

**SPC PRIORIX MMR Vaccine Electronic Medical Compendium**  
<http://www.medicines.org.uk/EMC/medicine/2054/SPC/Priorix/> accessed February 2011 FREE

**SPC MMRVAXPRO MMR Vaccine Electronic Medical Compendium**  
<http://www.medicines.org.uk/EMC/medicine/20968/SPC/MMRVAXPRO/> accessed February 2011 FREE

**World Health Organization, Annex 3 Requirements for measles, mumps and rubella vaccines and combined vaccine (live) A.4.2.1 Tests on virus seed lots Tests for neurovirulence**  
WHO Technical Report Series, No. 840, 1994 p111  
[http://whqlibdoc.who.int/trs/WHO\\_TRS\\_840\\_\(part2\).pdf](http://whqlibdoc.who.int/trs/WHO_TRS_840_(part2).pdf) accessed February 2011 FREE

*If your patients would like to discuss vaccination or travel issues with Dr Donegan, or if you would be interested in hosting a lecture or workshop in your area, please call: T/F 0044 (0)20 8632 1634 (and leave a clear message) or email: [jaynelmdonegan@yahoo.com](mailto:jaynelmdonegan@yahoo.com)*