

Dangers of the AIDS Vaccine

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October 30th 1998 - Dr. Veljko Veljkovic of the [Institute of Nuclear Sciences](#) (VINCA) in Belgrade has approached NewsTrolls, Inc with his struggle to warn the National Institute of Health (NIH) and the World Health Organization (WHO) about the [current human trials](#) of the AIDS Vaccine in the US and Thailand. Dr. Veljkovic has been involved in [AIDS research for over 10 years](#).

He claims that the current vaccine methods are unsafe and may put the world population at jeopardy from a mutated version of the HIV 1 virus. The mutated virus may go undetectable by current test methods and make the leap to become transmissible by common bacterial infections or common cold type methods. (*not virus but its main pathogenic component which is responsible for induction of disease*) In addition he claims that the AIDS Vaccine may in fact cause the patients immune system to weaken and increase the chance of infection. The potentially negative effects of AIDS vaccines is based on recombinant viruses carrying HIV-1 derived envelope gene.

Dr. Veljkovic concludes in his [studies](#) that "despite the urgent need for preventive AIDS vaccines, it would be wise to introduce a moratorium on clinical trials until there is a serious reexamination of the current concepts for their development. Premature testing, without complete knowledge of the biological and immunological properties of HIV, could produce irreparable and irreversible long term consequences. In this case such vaccines could become the source of potentially new infectious diseases rather than an effective instrument for AIDS prevention."

Although he has brought this problem to the attention of WHO, NIH and Dr. Barney Graham (the inventor of the most promising candidate of the Vaccine) in a series of [letters](#) dating back to 1991, he believes that they have unwisely chosen to ignore the scientific possibility and proceed with the trials. In the letters; WHO, NIH and Dr. Graham while acknowledging the possibility of these Dr. Veljkovics' warnings maintain that the likelihood of this actually occurring is too remote to discontinue the trials.

In an e-mail interview with Dr. Veljkovic I question specifically regarding his studies and efforts to warn.

Q: Are you asserting that current trials of AIDS Vaccines may harm the immune system and create a new resistant strain of HIV 1 that is undetectable by current test methods? In addition are you suggesting that the vaccines may actually cause HIV infection rather than prevent it?

A: HIV envelope protein gp120/160 or its fragments represent the main component of the AIDS vaccines (including this one from VaxGen which is currently in the large scale clinical trial in US). We have showed that this protein reassembles some important properties of the human antibodies which are responsible for regulation of the immune system. For this reason immunization with gp120/160 could harm immune system and make it more vulnerable to HIV. It practical means that some persons immunized with such vaccines (1) could become more susceptible for HIV infection rather than protected, and (2) these persons after become HIV infected are more susceptible for disease progression (could have shorter asymptomatic period). Correct conclusion is: in some persons vaccines may actually increase susceptibility for HIV infection rather than prevent it.

Q: You also suggest that the Vaccine development may lead to a "super bug" of HIV which spreads through populations, undetectable and via Bacterial and virus infectious in a manner that is not necessarily through sexual contact or other traditional means of HIV infections. i.e. something like the common cold. Have you demonstrated this in your studies?

A: One of the widely applied approaches in the AIDS vaccine development is incorporation of the HIV gene coding for gp120/160 into some very ineffective viruses and bacteria (viral and bacterial vectors) or use an attenuated HIV. We have demonstrated that this HIV gene is inherently very recombinogenic (able to make combination with other human and non-human genes). As the consequences of this property, as well as property described in the item 1 it is possible that: (1) genetically engineered pathogen (virus or bacteria) carrying HIV-1 gene coding for gp120/160 or the attenuated HIV which is used as the AIDS vaccine could affect human immune system in similar manner as HIV and could accidentally spread like the common cold, and (2) such vectors carrying this gene could transfer it to other coinfecting pathogens (bacteria and viruses) in this way transferring to them some pathogenic properties of HIV. Such transfer possibly occurred in mycoplasma fermentas coinfecting with HIV, and we have today new chimeric pathogen which is extremely ineffective and which attack

immune system in similar way as HIV producing Gulf War syndrome (see work of Prof. Garth Nicolson). Because of possible release of such pathogens through vaccination, as well as accidentally from labs, we are calling for serious control of such experiments.

Q: You indicated in one of your letters that the "It would appear that the lesson from the Hong Kong flu has not been heeded." Can you explain?

A: Hong Kong Flu is caused by the bird virus which at first time pass the evolution barrier and infect human. Graham's ALVAC vaccine is based also on an bird virus which do not infect humans. But after its modification by incorporation of an extremely recombinogenic element of HIV, nobody could exiled possibility for its evolution in this direction.

Q: Are the WHO and NIH are ignoring this and continuing on with their studies and trials, despite this demonstrated probability?

A: You are right: WHO and NIH although informed about these possibilities ignore them and continue with clinical trials. Similarly behave the AIDS vaccine researchers, although all these possibilities are described in our articles published in the prestigious scientific journal VACCINE.

Q: You are calling for a moratorium on the trials. In the US, many activists have fought hard for accelerated studies and trials to be performed. Do you think NIH and WHO are dangerously ignoring what you have suggested to appease the voice of the suffering individuals?

A: Your conclusion concerning our call for moratorium on the trials is correct.

WHO, NIH and Dr. Barney Graham have not responded to my e-mail questions as of yet. NewsTrolls, Inc will welcome and print any information they wish to communicate in this matter.

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Other selected references concerning Dr. Veljkovics' AIDS research

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