

# **TETANUS AND POLIO VACCINES -SOME FACTS FOR PARENTS WHO ARE WORRIED ABOUT THESE DISEASES** by [Viera Scheibner](#) (Jan 1998)

*Mrs J Woods letter in the Summer 1997 edition of The Informed Parent inspired me to write this letter to the Editor of TIP. J Wood stopped any further vaccinations when she realised that her fully vaccinated child developed a most frightening episode of whooping cough and suffered chronic ill health for years because of all those vaccines injected into his system.*

*Interestingly, the specialist confirmed to her that the child's immune system was not very strong, but the GP called her irresponsible when she decided not to continue with any further vaccine injections (I would not worry very much about a GP's advise since GP's in the UK labour under a major monetary conflict of interest in vaccinating). She stood her ground, however, but is still worried about diseases like tetanus and polio.*

1. Tetanus is a very rare disease in developed countries: there are only about 12 cases of tetanus per year in Australia, and half of those who got it were vaccinated. Perhaps the most interesting thing about tetanus is that those who get it do not develop immunity to it. How does one get tetanus? Well, from deep puncture wounds. In other words the pathogen (*Clostridium tetani*) is literally injected into the body via the deep puncture wounds. Vaccine injection does the same thing: it bypasses the normal portals of entry (the mouth and nose) and delivers the pathogen and toxins straight into the blood stream which triggers an unnatural, abnormal, deranged immune response called sensitisation.

Far from immunising, tetanus (and other) vaccine injections make the recipients more susceptible to diseases. J. Wood clearly saw it in her child: chronic ill health, recurrent coughs and colds for years. It is very likely, that the obvious improvements of her child's health was achieved by him finally developing whooping cough in its acute form. --any parents report either a marked improvement or disappearance of 'asthma' after their vaccinated children developed acute whooping cough. Medical research demonstrated that having whooping cough prevents asthma. One must wonder how much of that 'asthma' is just a chronic whooping cough as a result of the vaccinated child's immune system being deranged by vaccination and not being able to mount a proper, acute, immune response.

If this does not make sense, then perhaps something else will: the New England Journal of Medicine published in 1984 that tetanus booster injections result in the same derangement of T4 and T8 cells as seen in AIDS patients. A 'mysterious' new

syndrome emerged in the US: thousands of children are developing AIDS symptoms (with deranged T4 and T8 cells) without being HIV positive. My well-considered opinion is that it comes from that T (standing for tetanus) in the DPT vaccine.

2. Polio has been painted as some natural scourge of humanity. Yet, epidemics and outbreaks of polio in Europe go back to only less than 100 years. The 1949-50 and later outbreaks of polio were demonstrably caused by intensified diphtheria and whooping cough vaccination, tonsillectomies, other injections (painkillers) and a variety of traumas. They invented a name for it: provocation poliomyelitis. Even though this has not been discussed in literature, the earliest outbreaks were no doubt triggered by intensified smallpox vaccination. The evidence for this connection comes from Egyptian excavations: some mummies had withered limbs; but of course, variolation (a crude form of smallpox inoculation) has been practised thousands of years ago, and most particularly, in Egypt.

When the first, injectable, polio vaccine was tested on 1.8 million American children, within a few days they had a huge epidemic of paralytic polio: in the vaccinated, their parents and other contacts. They called it the Cutter incident and claimed that some of the vaccines (produced by the Cutter Laboratories) contained live polio virus. So, the company withdrew their vaccines despite polio vaccines produced by other manufacturers also causing paralysis in this outbreak.

The OP vaccines are officially causing paralysis, allegedly only 10-12 reported cases per year in the USA. The word 'reported' is the key word here. With the mass use of the polio vaccines and continuing occurrence of polio in the vaccinated, the necessity arose to redefine the disease polio. The classical definition of polio is a disease with residual paralysis which resolves within 2 months (usually within days). The new definition of polio now is 'a disease with residual paralysis persisting for more than 60 days.' This is the secret formula of 'eradication' of polio. Children are still getting polio, but those cases which resolve within 60 days (which represent some 90% of cases) are not diagnosed as polio. A new disease emerged: viral meningitis and as the incidence of polio plummeted, so did the incidence of viral meningitis sky rocketed.

The best (and perhaps most frightening) example of these "elegant administrative moves" is how they allegedly eliminated polio in the Americas (meaning South America). The Journal of Infectious Diseases published in 1991 the results of a major vaccination drive between 1985 and 1989 to eliminate polio. Within 4 months they had a huge outbreak of paralytic polio (350 cases). They decided to reformulate the vaccine. Now if this outbreak had occurred in the unvaccinated they would not have had to reformulate the vaccine. The outbreak occurred in the vaccinated.

However, the outbreaks with ever increasing number of reported cases of 'flaccid paralysis' in the vaccinated continued. So what did they do? They started discarding most of the reported cases of flaccid paralysis. Out of 2094 reported cases they only 'confirmed' 130, the rest (1964) were discarded. They published a graph which shows ever increasing number of reported cases as shadowy columns in the background and the ever decreasing numbers of confirmed cases as black columns in the forefront. I praise them for publishing it this way: any discerning and unbrainwashed reader can see very clearly what happened in the Americas between 1985 - 1989: mass vaccination caused sustained outbreaks of paralytic polio and they tried to camouflage it by discarding the vast majority of cases. When they finally stopped the program in 1989, even the number of reported cases (shown as those shadowy columns in the background) went down.

The same happened in other countries: huge epidemics of paralysis followed mass-vaccination drives.

How many vaccines does the child need to be protected? Children are given ever increasing numbers of 'boosters'. Why? This trend makes sense only when you consider that all those outbreaks and epidemics of any 'vaccine preventable' diseases occur in the vaccinated. The vaccines are ineffective.

A shortage of space does not allow me to elaborate more on this interesting subject'

There is only one immunity: the natural immunity which is achieved by children going through infectious diseases of childhood. They are here to prime and mature the immune system of children and they represent developmental milestones. Perhaps more on this subject in some of the next issues of TIP. Some problems with infectious diseases are results of mismanagement: if a child with severe measles is given antibiotics instead of vitamin A and C and its fever is suppressed you are asking for trouble.

And last but not least: no matter how worried anybody is about diseases, one should remember one important thing, namely that vaccines do not prevent diseases, they make you sick.