

Vaccine hurts 1 child in 15,000, or 100,000, or 300,000, or....

(Fresno Bee, DPT report 1984)

How many children are hurt by pertussis vaccine? The figure most often cited, at public health clinics all over the country, is one permanent case of brain damage in 310,000.

Sometimes the word *doses* or injections is noted. Often, it isn't, creating an impression that the number refers to children.

Since three doses are given to infants in the first six months, the odds seem to be that one child in roughly 100,000 will suffer permanent brain damage.

Not everyone agrees with those figures.

Dr. Kevin Geraghty, Bay Area Physicians for the Study of Pertussis Vaccines: "I'm convinced in my heart of hearts that 100 American infants a year are dying and another 250 are brain-damaged from DPT. I would be prepared to clinically defend that to scientists."

Geraghty believes as many as one in 15,000 children suffer brain damage and as many as one in 35,000 die following DPT vaccination.

Other experts read the statistics in other ways.

Dr. Alan Hinman, director, national Centers for Disease Control, Atlanta: "If one considers brain damage as being the most severe adverse reaction, the maximum number of children a year is about 50."

[Dr. James Cherry](#), professor of pediatrics and chief of the Division of Infectious Diseases at the Center for the Health Sciences, University of California at Los Angeles: "The risk may be one in 100,000 children. I actually used one in 62,000 children when I calculated risks and benefits."

Dr. John Robbins, until last year director of the Bureau of Biologics at the Food and Drug Administration, now a researcher at the National Institute of Child Health and Human Development:

"About everyone agrees that the incidence of major complications is almost infinite. You have to go to the hundreds of thousands before you see a permanent complication, one in a half a million, maybe one in a quarter million."

Dr. Edmund Burke, professor and pediatric consultant, Mayo Clinic, Rochester, Minn.: "We have some and they are very, very rare. Vaccine reaction [brain damage] is about one in 300,000."

Figures worldwide vary according to which study is examined. For example, in Great Britain two studies were completed on the whooping cough vaccine in the mid 1970s.

The Committee on Safety of Medicines concluded that one in 53,000 children vaccinated was severely brain-damaged. The National Childhood Encephalopathy study determined that one in 100,000 children was left permanently brain-damaged by the DPT shot. (For comparison, polio vaccine causes severe damage in one in about 5 million children.)

In West Germany, the government stopped recommending the shot after a Study showed one in 39,000 children was affected.

In Sweden, two studies done by Dr. Justus Strom surveyed more than 200,000 children and looked at 10 years of whooping cough in the country. Strom found three times more brain damage and disorder caused by the vaccine than caused by the disease, a rate of one in 46,000 children.

Robbins calls the Swedish study "100 percent bull." He charged that Strom "put cases in there that had nothing to do with the vaccine. He's a doctor who studied this in 1973-74 and wrote an article. Just because it's in the scientific literature doesn't mean it's correct."

The figures accepted and used by the federal government and the American Academy of Pediatrics come from the British National Childhood Encephalopathy study: One in 100,000 children are permanently brain-damaged.

"What they don't tell you," Geraghty said, "is that the vaccines vary. For example, they [British] don't immunize until 6 months of age; we start at 2 months. They give it three times; the U.S. gives it five times. They do not give it to kids we routinely give it to, plus our vaccine is at least 50 percent stronger than theirs."

Cherry, considered one of the country's DPT experts, agreed that the U.S. and British vaccines are different, "but they probably aren't very different. One of the problems is that the American density standard is different than the International standard.

"I must admit, I've reread and reread those and I'm not sure I know about the strength of the Vaccines."

As for the age variation, Cherry said, "At one point, the British were giving it fairly late.. Now they give it at 3 months, 5 months and 10 months. But that's all they do.

And that, he said, "is probably wrong." Because school-age children don't get booster shots, they can carry the infection home to babies who are too young for immunization : .

Robbins said, "There's no difference in the vaccines, and their [British] reaction rates are the same as ours."

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