Gardasil tragedies -- Where are the reports?

By <u>Cynthia A. Janak</u>
July 3, 2008
http://www.renewamerica.us/columns/janak/080703
Back in June of 2006, the FDA released this statement.

http://www.fda.gov/bbs/topics/NEWS/2006/NEW01385.html

"Today is an important day for public health and for women's health, and for our continued fight against serious life-threatening diseases like cervical cancer," said Alex Azar, Deputy Secretary, U.S. Department of Health and Human Services (HHS). "HHS is committed to advancing critical health measures such as the development of new and promising vaccines to protect and advance the health of all Americans."

"This is the first vaccine licensed specifically to prevent cervical cancer. Its rapid approval underscores FDA's commitment to help make <u>safe and effective</u> <u>vaccines</u> available as quickly as possible. Not only have vaccines dramatically reduced the toll of diseases in infants and children, like polio and measles, but they are playing an increasing role protecting and <u>improving the lives of adolescents and adults</u>," said Jesse Goodman, MD, MPH, Director of FDA's Center for Biologics Evaluation and Research.

Four studies, one in the United States and three multinational, were conducted in 21,000 women to show how well Gardasil worked in women between the ages of 16 and 26 by giving them either the vaccine or placebo. The results showed that in women who had not already been infected, Gardasil was nearly 100 percent effective in preventing precancerous cervical lesions, precancerous vaginal and vulvar lesions, and genital warts caused by infection with the HPV types against which the vaccine is directed. While the study period was not long enough for cervical cancer to develop, the prevention of these cervical precancerous lesions is believed highly likely to result in the prevention of those cancers.

Since the approval of Gardasil thousands of young women and girls have been adversely affected by this vaccine. Here are the newest stats.

6697 reported incidents + 2141 = 8838 (multiple incidents) 103 were considered life threatening 255 were hospitalized 3544 were taken to the ER 1236 had not recovered at the time of the report 159 are disabled at the time of the report 15 have died + 1 = 16 (multiple incident)

I am going to add to this report that there were 12 incidents of blood clots and 3 additional incidents with embolism.

As I have done in past articles I am going to use the 10% rule. That means that approximately only 10% of cases are actually reported.

88380 incidents 1030 considered life threatening 2550 were hospitalized 35440 were taken to the ER 12360 had not recovered 1590 are disabled 160 have died

I am going to tell you about Brooke Petkevicius who was 19. I say was because she is one of the casualties of this vaccine. She was a freshman at the University of California at Berkeley.



Brooke Petkevicius (photograph courtesy of Debra Sonner)

Brooke was born Dec. 4, 1987, in Spokane, Wash. As a teenager she moved to Tigard, Oregon and graduated from Southridge High School in Beaverton, Oregon where she was an outstanding student, acted in a school play and played on the lacrosse team. Brooke was the 2006 winner of a Beaverton Sunrise Rotary Scholarship at Southridge High School. She was an achiever. She placed fifth in a national speaking contest of Future Farmers of America as a sophomore in high school and

was a straight-A student. She also earned six merit scholarships to pay for her Berkeley education.

While at the University of California, Berkeley, she studied social work and was involved in many extracurricular activities, including co-ed volleyball and ballroom dancing.

She played on an intramural volleyball team, went to kickboxing classes at the Recreational Sports Facility "religiously" and had learned that she was going to be a resident assistant next year. She also was a social welfare major, involved in the residence hall assembly and was in training to become a counselor for CalSO in the

summer.

"Brooke did not smoke," said her school friend, Megan Sadowski. "She was possibly one of the healthiest people I've ever met. She never did drugs and rarely drank alcohol. She worked out daily, and took a lot of classes at the gym. She never complained about anything, really. Certainly not her health. She was an amazing, upbeat, caring, healthy young woman and her death was a complete shock."

 $\underline{\text{http://www.metrospirit.com/index.php?ShowArticle_ID=11012201084198300\&cat=1}}\\211101074307265$

This vital young woman died on March 26th, 2007, Fourteen days after her first dose of Gardasil on March 12th, 2007 from a pulmonary embolism or blood clot that blocked the artery between her heart and lungs.

Brooke had dressed to go running with a friend because they were in training for a half-marathon. She walked to the elevator, collapsed against the wall and had a seizure. Brooke was rushed to the hospital and passed away.

She had, however, been on Yasmin birth-control pills for about ten months. But Brooke had none of the other risk factors associated with blood clots. She had never had any problems with blood clots, nor did her family have any history of clotting problems. Subsequent tests of her younger sister and her mother showed nothing genetic. Brooke had no allergies, no tobacco use, and no past substance-abuse problems. Drug tests came back negative.

What is being reported is that the Yasmin birth control pill is the cause of the blood clots as this is mentioned as a side effect.

NOTE: These quotes made an impression on my heart and I wanted to share them with you.

"One of the things I remember most about Brooke was that she was incredibly positive

and always had a wonderful smile on her face," Gordon said in an e-mail. "She had the ability to brighten everything around her and she inspired others to get more involved in their community. This is a great loss to our school and our community."

Hey, I got a quick story that I want to tell you, it's kinda sad, but really cool too. I knew a girl (or heard about a girl) who died suddenly at 19 years old. She was a freshman at UC Berkeley, perfect health and a blood clot killed her instantly. That's the sad part.... the really cool part is that a couple weeks earlier, she shared with friends that her ''dream job'' would be to be THE THANK YOU FAIRY... How cool is that.. Ok, so now she is and I work for her. She wants you to know that there is something you need to be thanked for... I don't know what it is, but you do, and she does too... so consider yourself THANKED, by the Thank you Fairy... God bless you and have a wonderful day...

I have spoken with Brooke's grandparents, aunt and uncle, mom and dad and her sister. They all told me about what a wonderful, kind-hearted young woman she was. She had dreams and aspirations for her future. They told me about how her laughter was contagious and her smile just lit up a room. This was a girl that had it hard growing up, as many of us, but became a stronger person for it. The phrase I like to use is she "took sour grapes and made a fine wine."

During those conversations I did ask this question. Does anyone in the family have allergies? The answer was yes and mainly on the father's side of the family. (This will be important later in this article.)

When talking with her family I could hear the pride and love in their voices when they spoke so lovingly about Brooke. I could also feel the hurt and sorrow that made the pain in my heart swell. This was a girl that was greatly loved by her family but she is now gone from this life. Why, I ask. Why did this have to happen along with the other 15 young girls and women that I have reported? Why are so many being allowed to become disabled? Why, why, why???

The vaccine Gardasil lived up to its slogan of "One Less." Brooke is one of the 16 deaths that have been reported on the VAERS database.

VAERS ID 275438 **Vaccination Date:** 2007-03-12 **Age** 19.0 **Onset Date:** 2007-03-26

Days later: 14

 Sex
 F
 Submitted:
 2007-04-02

 State
 CA
 Entered:
 2007-04-02

Vaccination	Manufacturer	Lot	Dose	Route	Site
HPV4	MERCK & CO. INC.	0263U	0	IM	LA

Administered by: OTH Purchased by: UNK

Symptoms: Cor pulmonale Coronary artery thrombosis Echocardiogram abnormal Pulmonary congestion Pulmonary embolism Pulmonary oedema Sudden cardiac death Thrombosis

Given Gardasil vaccine dose #1 3/12/07. No adverse reaction reported. Collapsed and died on 3/26/07 secondary emboli (records unavailable). 4/3/07 T/C to coroners bureau to request prelim COD. Spoke w/investigating deputy who stated autopsy done at Medical Center. T/C to physician at Medical Center who is actually a cardiologist, not pathologist, who had responded to the code & pronounced. Spoke w/secretary who states from Death Certificate COD is sudden cardiac death and pulmonary embolism. Echocardiogram revealed very enlarged right ventricle & small left ventricle as well as large blood clots within both the right atrium & right ventricle. Letter faxed to pathology department to request final autopsy report.

Life Threatening Illness? No **Died?** Yes (date died: 2007-03-26)

Disability? No Recovered? No

ER or Doctor Visit? No

Hospitalized? No Current Illness: None Diagnostic Lab Data: Previous Vaccinations:

Other Medications:

Preexisting Conditions: None

With Brooke it was easy to make a connection to the vaccine because of the timing being 2 weeks after the shot. But for many young girls and women this is not the case. Their symptoms have started gradually so the connection to the vaccine is lost.

I am going to tell you about families that are going through this tragedy very slowly. These families have contacted me and told me their story of tragedy and hope.

The first one is about a 15 year old young girl. Her story started on September 12th of 2007.

Michelle was 14 at the time of her second vaccination. She was just the average teenager enjoying herself and having fun with her friends.

She worked hard and really struggled to do well in school and was in honors classes. She was a real achiever.

When talking to her mother I could hear the pride in her voice about Michelle's accomplishments. They were not like Brooke's but she also had dreams for her future and goals that were very important to her. I also asked Michelle's mother if there was a family history of allergies and her answer was yes. (This will be important later in this article.)

This family did not know that September 12th would be the day that would change their life.

This is what this family's life has been like.

When the Gardasil adverse reaction started we started logging it to see if there was a pattern and there was no pattern. The migraine headaches went on for months and she would just scream. It was so hard because we did not know what to do.

She has been in and out of the hospitals and emergency rooms, several dozen doctor appointments, dozens of trips for blood work. She has been on approximately 40 different types of medicine including Demerol to stop the pain. They have checked for anemic, valley fever, thyroid problems, allergies, asthma, sinus infections, chest x-rays, MRI, CT scans, eyes checked, EEG, upper GI, endoscopy (scope), etc. She has had migraine headaches that were every day and were so bad that she would scream. She missed approximately 40 days of school. She now is having major heart burn, migraine headaches and has acid reflux, inflamed esophagus, chills, and fevers. We have spent over \$10,000 out of pocket that the insurance did not cover. This was just for a vaccine to help prevent cervical cancer! It is amazing what side effects they did not tell you.

When is it going to end? This has totally changed our life and what we do on a daily basis.

Michelle had an extremely bad headache last night. The headache started around 8:00 pm. She still had a headache at 10:00 pm. She went to sleep hoping that it would go away. My husband was checking on her about 11:45 pm. She started to cry and within 15 minutes it was extremely bad. She could not touch her head, she was screaming and crying. She said that it felt like someone was hitting her with a board. Behind her right eye was extra painful. I gave her Axert at 12:00 midnight. At 12:10 am I gave her Demerol (Meperidine 50 mg-generic version) and a nauseous medicine (Hydroxyzine Pam 25 mg). It takes about 30 minutes for it to start working. She went to bed about 1:00 am and finally fell asleep sometime later. She also got very cold around 1:00 am and I put four afghans on her.

She slept until 11:30 am today. I had to get up at 5:30 am to go to work tired. When I talked to her around noon today she seemed to be ok. She said her eyes were a little sensitive.

Lately she has been complaining that her joints hurt and she is very tired. We had more blood work done to check her white blood cells and check for inflammation today. There was a third test but I am not sure what it was for. We are going to see the naturopathic doctor to go over the results. I have also asked him that we run the test to check for heavy metal poisoning. The naturopathic doctor mentioned Chelation therapy is a method they use. Chelation is the administration of chelating agents to remove heavy metals from the body.

I spoke with Michelle's mother the other day to get an update on how she was doing. I am happy to say that Michelle is doing better under the care of her new doctor and the family is hopeful that she will recover in time.

This family has been going through this for almost 12 months now. Is this necessary?

I want to tell you about another young woman Brittney.



Brittney had just turned 21, had finally gotten her fibromyalgia/chronic fatigue under control, finished spring quarter and felt great. She was working out in the gym lifting weights, doing aerobics, swimming, hiking, finally at the peak of her health when our family doctor suggested she take the HPV vaccine. I was with her and we both were hesitant since she was doing so well. Would you believe this trusted doctor went on to scare us by telling us that Brittney could get this virus through casual contact (sweat) from another college student by holding hands or during a lab experiment gone wrong! (Yes, we were shocked by this frightening thought, but told the doctor we would think about it- we were very naive.) About 13 days after her 21st birthday, Brittney had to go to the doctor for a checkup. Unfortunately, I wasn't with her at the time and she was then convinced to take the HPV vaccine. Her life would never be the same again.

The adverse reactions began slowly, a fainting spell within 24 hours for no reason, then an odd occurrence a few days later- she was on a date and suddenly couldn't move or speak though her eyes remained open and she could hear. A floating sensation came over her and then slowly she began to lose consciousness. This lasted about five to eight minutes. Her date thought she had died. After she came to, she thought the whole episode was somehow related to her fibromyalgia in a new way. Nothing like it had ever happened before to her. One week later, Britt was with a group of friends at an amusement park when her legs suddenly gave out, hammering pain ran up and down her thighs and calves. This lasted about 15 minutes, and then it ended as abruptly as it came on. None of this made any sense when taken as isolated incidents- but I kept track of all of them since they made me very concerned. The leg pain would come and go the rest of the summer, but in a much less intense manner.

On August 24, Brittney had her second Gardasil injection — within a week pressure in her head began to build up. She would push up on her scalp to try to relieve the pain. We noticed she would barely open her teeth when talking at that time. When asked about it she said she hadn't noticed, but after thinking about it realized that there was pressure in her jaw as well. Not long after her legs began to feel rubbery.

Within days she was falling down from the weakness that was growing in her legs along with terrible pain. By September 20, she was sent to the ER by our family doctor- pressure was so great in her head and jaw that Britt was passing out. She couldn't walk without help, there was mushiness to her neck below the skull, and she had tingling and numbness coming and going in her limbs. A CT scan and spinal tap was done with nothing unusual found. She was never seen by a real doctor while in ER and was dismissed as having some sort of virus. (Dilaudid w/Phenergan was used to help control the pain while in the hospital. It helped for short periods to relieve the pressure and pain in her head, neck, legs and back.) After this we saw several specialists, including a neurologist who felt she needed psychiatric help. Finally, she met with an ENT specialist who suggested ******* Clinic. After consulting with our family doctor she was scheduled to meet with a rheumatologist at CC. When we met with this Dr. he seemed the only voice of reason. He also suspected GBS or another peripheral neurological disorder. He had our daughter admitted to the hospital through ER since no beds were available for further testing by a neurologist. Things went downhill fast from there. Britt was only given an MRI of the head, neck and back region. No other tests except blood were taken. Several teams of neurologists saw her, but none of them could make up their minds as to what she had. One team said stress, another said psychosomatic disorder, and another a brain virus. (By this time it was late October) She was never given another LP to see what her protein count was. She had a high SED rate and another blood test that came back as unusual, but that only made the situation more confusing to the doctors. She was put on Dilaudid w/phenergan round the clock, and an air mattress that constantly massaged her back and legs. (She had no reflexes below the knees when admitted) Then a psychiatric team was introduced for some odd reason. I wasn't allowed to be in the room with her during their extensive questioning, but she informed me they were suggesting that she had been abused as a child or by a boyfriend while in high school! I was outraged and called the first doctor we had seen who had her admitted. He was quite surprised and ordered his own team to do special blood tests of his own. After five days she was released with no diagnosis and sent home. The massaging air mattress did help- she could walk again by the time we left. I believe the dilaudid helped as well.

Four days after this experience, Britt felt the pressure in her head begin to recede. It took about three weeks, but by Thanksgiving she was mostly back to normal and looking forward to getting back to college. Her legs still hurt off and on and the pressure in her head was a slight bother, but not like it had been. WE thought she was on the mend! She signed up for winter classes, took part in the Christmas musical/drama at church, even singing a solo and acting in a short skit despite the leg pain. Then everything went downhill again. Christmas day she could hardly walk again. By New Years she was on the couch with pressure in her head so great it was

like being in a vise. She started falling down again, so she canceled her winter courses. Another neurologist was suggested closer to home, so we scheduled an appointment in late January. She was dragging her right leg again by that time and needed a wheelchair to get round.

The neurologist didn't believe she had any problem, though she had very little reflexes in her legs. But since they were icy cold to the touch he did an EMG. Nothing was found so he sent her home in more agony than before. He had no idea what to do for her. Britt began swelling up in her right leg and hand and they turned bright hot red. I found her passed out on the floor of her bedroom the day after the EMG. All I could think to do was rub her hands with cold lotion which calmed the heat down and then the swelling. She has had swelling off and on ever since.

I called a health coach at our insurance company for help. They recommended she see an immunologist. It took many tries, but finally found one who would see her. He ran some tests and after all was said and done announced she had some sort of peripheral neurological disorder and needed to see a neurologist. Deja Vu?! I was reluctant, but my husband wanted to try once more. He was losing faith in the medical community, but wanted Britt to get help for her pain. She was still passing out and couldn't be left alone. We saw the next neurologist who after ten minutes and not finding any reflexes from the knees down stated she had some sort of psychosomatic disorder. When questioned about Gardasil, why the Dilaudid helped, why the massaging mattress helped he nearly stumbled over himself backing out of the room. We also told him that our daughter was seeing a psychiatrist to manage chronic pain and psychosomatic disorder had been ruled out. His answer to everything was, "I don't know. I have no idea."

WE took Brittney to an alternative doctor who tested her hair, blood and urine. He found high levels of Aluminum, mercury, and nickel in her system. Since she cannot eat solid food, she is borderline hypoglycemic, has low T7 problems, is slightly anemic and has lost 18 lbs. She weighs between 113 lbs and 118 lbs, stands 5'4" and is nearly a rack of bone. She now lays in the dark since light hurts her eyes, is in constant pain, her liver and spleen are tender and swollen and her legs go numb off

and on. It takes several hours of massaging to bring them back. We are all worn out and we wonder if there are any decent doctors left in the world. She is now fighting congestion in her chest. I make her get up and move around with my help or some type of movement. Give her breathing treatments to release the mucous in her chest, but there is nothing I can do to help her pain, swelling and pressure that is ever constant. This isn't living!

We have already had Brittney's hair, blood and urine tested- that is how we knew about the heavy concentration of aluminum, mercury and nickel in her system. This alternative doctor was the first we saw who recognized Brittney's condition and put her on the organic/supplemental diet. It was helping, but going was slow since she couldn't eat from pressure and pain in her head and jaw. Now that this D.O. is on board and has added the pain patch, muscle relaxer (very gentle one) and Prevacid to help with digestion she is beginning to eat solid food again with the organic/alternative diet. The D.O. said he had no problem working with the alternative doctor! He believes this is what has kept our daughter going this long, but she needed relief from Pain right away.

The alternative Dr is giving her vitamins and supplements, non-dairy and organic foods which she can digest better. But they are soft. She can't chew yet. We are pumping her up on protein drinks as well. This doctor is convinced that Gardasil is the reason she is in this condition and so are we.

We are so ready for this- just yesterday we found a doctor who told us that "YES, the GARDASIL vaccine did this terrible thing to your daughter" — and he put her on a pain patch, a muscle relaxer and something to help her stomach while he researches some possible way to reverse the affects of the vaccine! Our prayers are being answered on the physical end and others need to know what has happened in her life! Brittney is finally seeing the light at the end of a very long tunnel!

My daughter has suffered cruelly for the past eight months since her second Gardasil injection. If we had known the early signs of adverse reactions to this vaccine after the first one, we would have never let her take the second shot.

I have also spoken to Brittney's mother recently and she said that Brittney is doing better but is still weak. They are trying to build her up physically so they can start the detox therapy that the doctor suggested. Right now she is still too weak by the doctor's standards.

During this conversation I asked if there was a family history of allergies. The answer, once again, was yes. (This will be important later in this article.)

As you can see the doctors are clueless as to the true reason why these girls are disabled. So where are all the reports, not on VAERS because the vaccine connection has been lost?

Since putting this article together I have been contacted by other families that I will feature in future articles. This is a horrible tragedy worthy of Shakespeare.

I have been asking myself what connects all these young girls and young women. What was the one thing that they all had in common? When I spoke to these families I asked if there was a family history of any type of allergy. The answer was yes. Some family member had an allergy that could be a seasonal allergy to asthma.

I went on the websites that I frequent and asked the people there if there was any family history of allergies like mother, father, uncle, aunt or grandparents. I have received comments from 14 families, so far, and they all answered yes. I am waiting for one family to tell me no. This spurred me into action.

Then I went on to the National Vaccine Information Center to the Medalerts page

http://www.medalerts.org and did a search for allergies. This is what I found when I entered the word allergy in the current illness section.

There were 239 reports where the girls themselves had allergies. Here is a sample of what I found.

Penicillin allergy

Sulfonamide allergy

Drug Hypersensitivity

Latex allergy

Iodine allergy

Allergic Rhinitis

Allergic to antibiotics

Allergy to cats

Food allergy

After finding this out I once again looked at the ingredients of the HPV vaccine to see if there was any ingredient that could have any relation to my allergy connection. This is what I found.

Gardasil is the only vaccine that I know of that has L-Histidine listed as a buffer agent for the ingredients of the vaccine.

http://www.patentstorm.us/patents/6251678/fulltext.html

c) a histidine buffer which provides for a pH range of the vaccine solution of from about pH 6.0 to about 6.5; and

Histidine is an amino acid that is very important to our system. This is a brief description of Histidine.

http://www.anyvitamins.com/histidine-info.htm

Histidine is an essential amino acid, manufactured in sufficient quantities in adults, but children may at some time have a shortage of this important vitamin. It is one of the basic (reference to pH factor) amino acids due to its aromatic nitrogenheterocyclic imidazole side chain. This amino acid is metabolized into the neurotransmitter histamine and the set of genes that produce the enzymes responsible for histidine synthesis.

Histidine is also a precursor of histamine, a compound released by immune system cells during an allergic reaction.

It is needed for growth and for the repair of tissue, as well as the maintenance of the myelin sheaths that act as protector for nerve cells.

It is further required for the manufacture of both red and white blood cells, and helps to protect the body from damage caused by radiation and in removing heavy metals from the body.

In the stomach, histidine is also helpful in producing gastric juices, and people with a shortage of gastric juices or suffering from indigestion, may also benefit from this nutrient.

Now, on to what I think is going on here. I **beg** the medical research community to **please** check into my theory. **Please**.

What if all these girls, 8838, have a family history of allergies? It would stand to reason that they <u>may have</u> an elevated Histidine/Histamine level in their systems. Now, you are injecting additional L-Histidine via the vaccine further raising that level to an overload state. The body, at this time is reacting to the viral ingredients in the vaccine violently. The immune system also recognizes the overload state of the Histidine because of the infusion of L-Histidine to be a threat to the body. So not only is the immune system reacting to the HPV it is reacting to the Histidine. Now the

immune system has the memory that Histidine is a threat. Therefore, when the body produces the Histidine the immune system proceeds to destroy it.

Now let us go back to my quote about Histidine.

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Up until this point the body has been maintained and the myelin sheaths are intact. The body has been successfully removing the heavy metals from the body. The stomach is producing the appropriate amount of gastric juices, etc.

Now you have the immune system destroying the Histidine that is needed to maintain these vital body functions. Eventually, these functions break down. This could be a gradual process; therefore the onset of severe symptoms may not be immediate. It could take weeks or months before a person would take note that something was wrong. It would depend on the person and/or their tolerance level.

In the reports you have these symptoms:

Cough, wheezing, shortness of breath, chest tightness, difficulty breathing, tremors, autoimmune thrombocytopenia, leucopenia, Evan's Syndrome, GBS (Guillain-Barre syndrome), rash, hives, fibromyalgia, arthritis, weakness of the extremities, paralysis and the list goes on.

To me the lay person this sounds like an immune response. But, I want you to consider one other thing. One of the functions of Histidine is the removing of heavy metals from the body. If the Histidine is no longer able to do this function due to the immune system attacking it, you will have a gradual build-up of heavy metals in the body. Eventually, over time, the heavy metals will lodge themselves in the vital organs of the body. This will also create what is called heavy metal toxicity.

http://www.jigsawhealth.com/articles/heavy-metal-toxicity-symptoms.html

You may have heavy metal toxicity if you are experiencing any of these symptoms:

- Chronic pain throughout the muscles and tendons or any soft tissues of the body
- Chronic malaise general feeling of discomfort, fatigue, and illness
- Brain fog state of forgetfulness and confusion
- Chronic infections such as Candida
- Gastrointestinal complaints, such as diarrhea, constipation, bloating, gas, heartburn, and indigestion
- Food allergies
- Dizziness
- Migraines and/or headaches
- Visual disturbances
- *Mood swings, depression, and/or anxiety*
- Nervous system malfunctions burning extremities, numbness, tingling, paralysis, and/or an electrifying feeling throughout the body

Note: Heavy metal toxicity can produce vague symptoms that sometimes are mistaken for other chronic conditions such as Autism, Chronic Fatigue Syndrome, depression, Multiple Sclerosis, and a host of other serious disorders. Discuss heavy metal toxicity with your healthcare professional before receiving any diagnosis or treatment for a serious chronic condition.

Basically, your body is being poisoned by heavy metals so I looked up the CDC explanation of poisoning symptoms.

http://www.cdc.gov/nasd/docs/d000801-d000900/d000817/d000817.html

Poisoning Symptoms

Each chemical family attacks the human body in a different way. General poisoning symptoms include the following.

Mild Poisoning

Headache, fatigue, weakness, dizziness, restlessness, perspiration, nausea, diarrhea, loss of appetite, loss of weight, thirst, moodiness, soreness in joints, skin irritation, eye irritation.

Moderate Poisoning

Severe nausea, severe diarrhea, excessive saliva, stomach cramps, excessive perspiration, trembling, no muscle coordination and muscle twitches, extreme weakness, mental confusion, blurred vision, difficulty in breathing, cough, rapid pulse, flushed or yellow skin, weepy eyes.

Severe Poisonings

Fever, intense thirst, increased rate of breathing, uncontrollable muscle twitches, pinpoint pupils, convulsions, inability to breathe, unconsciousness.

The aluminum in the vaccine is another minor component to this whole theory but for now, I will end here.

NOTE: <u>I need your help</u>. I tried to research L-Histidine vaccine studies to see if L-Histidine or Histidine ever had human or other testing for how it would work with a vaccine and I found nothing. I did find a lot of studies that involved Histidine overload, though. If there is anyone out there that knows that testing was done to prove that L-Histidine or Histidine is indeed <u>safe</u> when used in a vaccine, please send me the link to the website or the data via email. I will post that information in my next article.

All 8838 families are in my prayers every day. May God bless you.

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