

M. Beddow Bayly M.R.C.S., L.R.C.P. quotes

[Beddow Bayly](#)

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"The subject of Vaccination, ... is, fortunately, one on which anyone capable of appreciating figures can form a sound opinion." [The Case AGAINST Vaccination By M. BEDDOW BAYLY M.R.C.S., L.R.C.P.](#)

"Compare these well vaccinated countries with Australia, the least vaccinated country in the world. In 134 years, not one-fifth of the children born have been vaccinated. Yet only three Australian children under five have died of that disease. In the last 50 years, no child under five has died of smallpox, and in the whole of her history, less than one person per annum has died of it, although allowing five years protective period, only 2 per cent, of her population have ever been "protected." [\[1936 Pamphlet\] The Case AGAINST Vaccination By M. BEDDOW BAYLY M.R.C.S., L.R.C.P.](#)

It would seem to be impossible for a rational mind to conceive that a filthy virus derived from a smallpox corpse, the ulcerated udder of a cow, or the running sores of a sick horse's heels, and cultivated in scabbed festers on a calf's abdomen could fail to have disastrous effects when inoculated into the human body. As Professor McIntosh remarked in the Lancet in 1926, "Scientifically it cannot be disputed that from every point of view the injection of virus capable of multiplying in the body of the individual is bad."

Dr. McNalty told the Congress of the Royal Sanitary Institute, in 1927, that acute nervous diseases are on the increase, and are "taking the place of the old epidemics." [\[1936 Pamphlet\] The Case AGAINST Vaccination By M. BEDDOW BAYLY M.R.C.S., L.R.C.P.](#)

Holland, on account of this, suspended her compulsory laws, and in this country, more and more doctors are echoing the question raised by Dr. Jameson, when he wrote in the Lancet last August: "what justification had they for risking children's lives by vaccination as a protection against a disease which does not imperil their lives?" "It was only a matter of time," he continued, " before the persons responsible for the vaccination of those children who die of post-vaccinal encephalitis will be considered by some as guilty of constructive murder." [\[1936 Pamphlet\] The Case AGAINST Vaccination By M. BEDDOW BAYLY M.R.C.S., L.R.C.P.](#)

"Dr. Louis Parkes, Chairman of the Council of the Royal Sanitary Institute, declared in 1922: " Our freedom from smallpox, therefore, could not be attributed to vaccination. It was largely due to the preventive measures taken at the ports, to the

isolation of cases in hospitals, and to the steps taken to control persons who had been exposed to infection." [The Case AGAINST Vaccination By M. BEDDOW BAYLY M.R.C.S., L.R.C.P.](#)

"Perhaps the greatest evil of immunization lies in its diversion of public attention from true methods of disease prevention. It encourages public authorities to permit all kinds of sanitary defects and social problems to remain undressed, particularly in schools. It ignores the part played by food and sunlight and many other factors in the maintenance of health. It exaggerates the risk of diphtheria and works upon the fear of parents. The more it is supported by public authorities, the more will its dangers and disadvantages be concealed or denied."---- M. Meadow Bayly, M.R.C.S., 1944

"The Chief Medical Officer of the Board of Education, SIR GEORGE NEWMAN, has described the procedure as a "safe, practical and efficient method of protection." ...No reference to the disasters which have been recorded in various parts of the world, nor to the severe reactions which are a frequent sequel to the inoculation, is made in these official statements."--[Beddow Bayly](#)

Cawadias (1953) has said that "the history of medicine has shown that, whenever medicine has strayed from clinical observation, the result has been chaos, stagnation, and disaster."--*British Medical Journal, Oct 8th, 1955, p.867* (Quoted in *Clinical Medical Discoveries* by Beddow Bayly)

"In the thirty years ending in 1934, 3,112 people are stated to have died of "chicken-pox," and only 579 of smallpox in England and Wales. Yet all the authorities are agreed that chicken-pox is a nonfatal disease"—M. Beddow Bayly, *Case Against Vaccination*, London, June 1936, p. 5.

"Dr. Thomas Francis did not mention in his key evaluation of the 1954 Salk field trials that those who contracted polio after their first inoculation and before their second inoculation were placed in the "not-inoculated" list.' ([Maurice B. Bayly, The Story Of The Salk Anti-poliomyelitis Vaccine, 1956](#)).

"It is obvious that this practice of screening statistics, apparently in order to suppress facts unfavourable to immunisation, invalidates most of the evidence brought forward by the supporters of immunisation. They have even gone so far as to invent a new disease known as TONSILLITIS IN SCHICK-NEGATIVE CARRIERS to describe cases of *apparent* diphtheria in persons "who had at one time or another been Schick-negative."

It will be noted that whereas at the time of the introduction of antitoxin in 1894 the final diagnosis of diphtheria was changed from clinical to bacteriological and resulted in the inclusion of thousands of ordinary sore throats in the diphtheria statistics and a

consequent fall in the case mortality, a manoeuvre favourable to the use of the antitoxin), the present change, in abandoning the hitherto accepted bacteriological diagnosis, automatically *reduces* the number of cases of diphtheria and therefore produces figures apparently favourable to immunisation, the latest craze.

But in addition to this fundamental change of front there has to be mentioned another alteration in diagnosis. This consists in the refusal to classify cases as diphtheria among the immunised, on the ground that they only present mild symptoms. According to the Medical Officer of Health for Ipswich (see *East Anglian Times*, February 22nd, 1934), it has become the practice not to regard as diphtheria persons who, after immunisation, develop sore throats even though the presence of the Klebs-Loeffler bacilli (hitherto considered to be diagnostic of the disease) can be demonstrated in them.

Such a manoeuvre is not only bound to falsify all subsequent vital statistics, but can be shown to be unjustifiable on grounds of medical pathology, for the assumption that mild cases are not likely to be diphtheria is not borne out by historical records."----

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"It also appears that in spite of the fact that it had been a matter of clinical observation that human beings suffering from a deficiency of Vitamin B6 have a lowered resistance to infection, a considerable number of monkeys were subjected by Bodiant to an investigation in which they were deprived of this vitamin (pyridoxin) and then exposed to infection. The results seemed to confirm clinical experience."--[M.](#)

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"It is difficult to understand why, if no fault lay with the (diphtheria) immunising mixtures in themselves, it has been thought necessary to replace them by different preparations."--[Beddow Bayly](#)

"Dr. R. V. Southcott (*Med. Jour. Aust.* 1953. ii. 281) believes that a child whose tonsils were removed at the usual age of 5-7 yrs suffers trauma to the nerves of the pharynx which increases susceptibility to bulbar poliomyelitis for at least ten years. In an outbreak in South Australia in 1947-48 he found that in 35 out of 39 cases of bulbar poliomyelitis the patient had been tonsillectomised)."--[M. Meadow Bayly,](#)

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"There is no doubt, however, that the risk has been, for some years, vastly exaggerated, seemingly to prepare the public mind to accept the new vaccine."--- [M.](#)

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"There can be little doubt, therefore, that even the vaccination of children against poliomyelitis itself may provide the very conditions which favour an attack and so increase the incidence of the disease."---[M. Meadow Bayly, M.R.C.S.,](#)

"In the *British Medical Journal*, June 5th, 1937 (p. 1182) will be found an account of the death of a Waterford girl, aged 12, and the illness of 23 other children, tuberculosis having developed following the inoculation of Toxoid Antitoxin Floccules."---[Beddow Bayley](#) (1939 Book: The Schick Inoculation Against Diphtheria)

Even Dr. Major Greenwood, Chief Statistician to the Ministry of Health, declared in 1929 that: " In Jenner's classical paper no mistake was omitted that could possibly have been made, and there was a good deal of evidence that Jenner had been a rogue." In his well-known work, " Epidemics and Crowd Diseases" (1935), Professor Greenwood wrote: " Most of Jenner's time during the last twenty years of his life was spent in attempting the impossible, i.e., in attempting to convince his correspondents that no properly cowpoxed person could get smallpox." (p. 264) [\[1936 Pamphlet\] The Case AGAINST Vaccination By M. BEDDOW BAYLY M.R.C.S., L.R.C.P.](#)

In 1919, at Dallas, Texas, U.S.A., **ten children were killed and sixty others made seriously ill** by toxin-antitoxin which had passed the tests of the New York State Health Department. The Mulford Company, at Philadelphia, the manufacturers, paid damages in every case. 2. In 1924, **twenty-five children** in Bridgewater and twenty in Concord, U.S.A., **were poisoned** by toxin-antitoxin. Many had high fevers, and their arms turned black and swelled to two or three times their normal size. 3. In 1924 (September) of 40 children immunised with toxin-antitoxin in a home for infants at Baden, near Vienna, **six died and a number suffered from skin necroses** of various sizes at the site of the injection....4. In 1928, the *Lancet* of February 4th (p. 249), refers to "a more recent Russian disaster " (*Bull. Hygiene*, August 1927, p. 667) in which " 14 children received toxin in place of anatoxin (i.e., toxoid); **eight of them died within two weeks, four of polyneuritis within a month** and two recovered after symptoms of general intoxication." 5. In 1927 also there were **five deaths** in immunised children in China, **thirty-seven others being made seriously ill**. 6. In 1928, at Bundaberg, Australia, **twelve children out of seventeen who were inoculated with toxin-antitoxin died**, the five others being critically ill for some time. The material had been issued and declared safe by the Public Health Department of Queensland.....7. In 1930, at Medellin, Columbia, South America, forty-eight children were inoculated, with the result that many were taken ill during the same night, one died the following afternoon, fourteen others within sixty hours and two more within six weeks—**a total of sixteen deaths**.8. In 1932, at Charolles, in France, 172 children were immunised with anatoxin (toxoid). All were taken ill soon afterwards, developing local abscesses with abundant suppuration, necessitating surgical intervention in several cases. In one case the child died. The parents of the children demanded an official enquiry, but no explanation of the tragedy has so far been forthcoming.....In the province of Chiavari over **80 inoculated children were gravely affected, some being paralysed in arms and legs, others having their sight**

injured. One child died. In Venice and Rovigo severe symptoms, including paralysis, supervened and death occurred in ten cases."--[Beddow Bayley](#) (1939 Book: The Schick Inoculation Against Diphtheria)

"In 1931, DR. I. HARRISON TUMPEER described the following case (*Journal of American Medical Association*, April 25th, 1931, pp, 137a-6):-A girl of five years had received the usual three injections of toxin-antitoxin in 1926 when one year old. In 1927 she was pronounced Schick-negative. She developed diphtheria in 1930, and an injection of serum was given in the left gluteal region, followed three days later by a second dose on the opposite side. In three hours the buttock began to swell and became extremely tender, until eventually the whole region became black and **gangrenous**.In spite of assiduous irrigation of the wound she became rapidly worse, *suffering considerable pain*. Following a blood transfusion on the twenty-seventh day of illness, she became cyanotic, vomited, lost consciousness and **died** a few hours afterwards..... The third case ... reported occurred in a boy aged two years and four months. (*Journal of American Medical Association*, February 18th, 1938, p. 490.) The three usual toxin-antitoxin inoculations had been performed at the age of eleven months. The serum was injected into the buttocks and was followed by an urticarial eruption over the entire body, the edematous swelling of the face being sufficient to close the eyes. He was then given a further injection of serum in the left buttock; within an hour the site became purple, and on the following day a similar injection into the right buttock resulted in a similar reaction. During the next few days the areas of purple swelling extended from the buttocks over the front of the abdomen and right thigh, and large blebs about one and a half inches in diameter appeared; six days later these gave rise to a bloody watery discharge. At this time the child was admitted into hospital, and presented **gangrenous** areas on both buttocks, both sides of the abdomen, and the thighs. There was a patch of pneumonia in the right lung and a left otitis media. Despite the removal of large masses of necrotic tissues, surgical drainage and three blood transfusions, the child **died** in twenty-one days from admission to hospital. (See Figs. 4, 5 and 6.)"---[Beddow Bayley](#) (1939 Book: The Schick Inoculation Against Diphtheria)