

Mercury, Immunizations and the Global Vaccine Agenda



Prairie
Collaborative for
Immunization
Safety

David Ayoub, MD
raypoke@mac.com

My motivation

Does vaccinal mercury cause autism?

Why did this happen?

It is better to embrace an ugly truth
than find comfort in a beautiful lie

AutismOne Conference

Chicago, Illinois May 27, 2004



Dr Andrew
Wakefield



Kathleen Stratton
IOM

“the minutes of that closed meeting have been made available.....the [CDC] wished the committee to come to a negative decision”

IOM Meeting minutes

- showed bias and predetermined decisions
- conflicts of interest unrecorded
- IOM governing council of 20
 - Gail H. Cassell
 - 1) Eli Lily, VP infectious disease;
 - 2) member Directors Advisory Committee, CDC
 - 3) NIH, other CDC roles

“we are not ever going to come down that it
[vaccines and autism] is a true side effect,”

Marie McCormick, *-IOM Committee chairman*
IOM Safety Review meeting, page 97

“We will never have it here.[that causality is established] I think that actually you don’t have to agonize over it. Not to prejudge your decision over the next 3 years, but I will bet you 100 bucks you will never come up with a category 5. It won’t even cross your mind.” pg 123

“Chances are, when all is said and done, we are still going to be in this category [Category 2]. It is just a general feeling that we probably still are not going to be able to make a statement.” pg 74

Kathy Stratton, Ph.D. -*IOM study director*
IOM Safety Review meeting

IOM “independent” members

- Merck, Eli Lilly and other vaccine makers
- WHO
- Bill and Melinda Gates Foundation
- numerous Med School faculty


An Investigator's Notes

- victim
- means
- suspects
- intent
- motivation

“It’s good for you” Theory #1

- intentional as preservative
- safe and effective
- We are wrong!

“It’s good for you” Theory #1

- intentional preservative
 - safe and effective
 - We are wrong!
- 

“Oops” Theory #2

- no intent to harm
- intentional coverup
- motivation:
 - protection of profits
 - reduce liability
 - protection of livelihood

- “You can’t convince them (CDC) this is right. Do you know why? Because they already know it. They told me they know it. They cannot admit it because of civil and criminal, potential problems. You can’t convince someone who already knows it.”

- Mark Geier, M.D. - Chicago, Illinois May 30th, 2004 @AutismOne Conference

*“A problem cannot be solved
by the same consciousness that created it”*

-- Albert Einstein

Simpsonwood Transcript

Dr. Weil, pg. 207: "The number of dose related relationships are linear and statistically significant. You can play with this all you want. They are linear. They are statistically significant .. you can't accept that this is out of the ordinary. It isn't out of the ordinary."

Dr. Bernier, pg 198 "the negative findings need to be pinned down and published."

House Committee on Government Reform,
Subcommittee on Human Rights and Wellness
Congressional Record, Dan Burton-May 20, 2003

“Thimerosal used as a preservative in vaccines is likely related to the autism epidemic. This epidemic in all probability may have been prevented or curtailed had the FDA not been asleep at the switch regarding the lack of safety data regarding injected thimerosal and the sharp rise of infant exposure to this known neurotoxin. Our public health agencies' failure to act is indicative of institutional malfeasance for self-protection and misplaced protectionism of the pharmaceutical industry. “

- “...the litigation will be gigantic, the settlements will be in the 100’s of billions of dollars, and hundreds, perhaps thousands, careers. . .will be sullied, some careers will be ruined, destroyed, never recovered.”

Congressman Dave Weldon, R-Florida

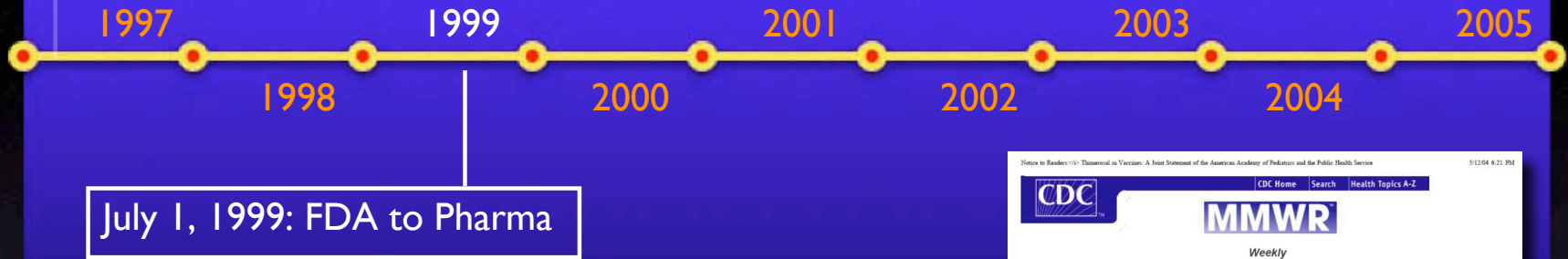
AutismOne Conference, Chicago, Illinois: May 29th. 2004

Key AMA Statement

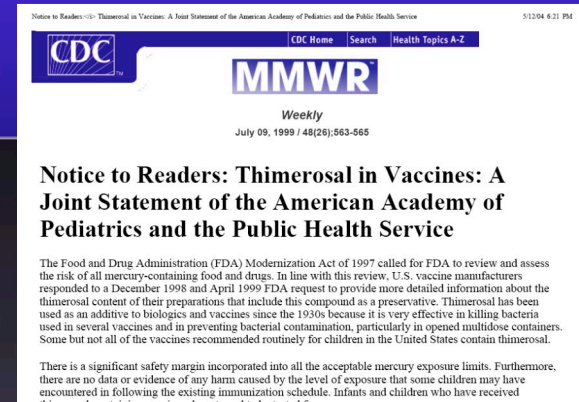
- “The IOM report released today provides reassurance to patients and physicians, and will allow them to focus on other medical needs, safe in the knowledge that vaccines they received are indeed safe and that **mechanisms to monitor continued safety in the United States are working.**”

AMA News; May 19, 2004

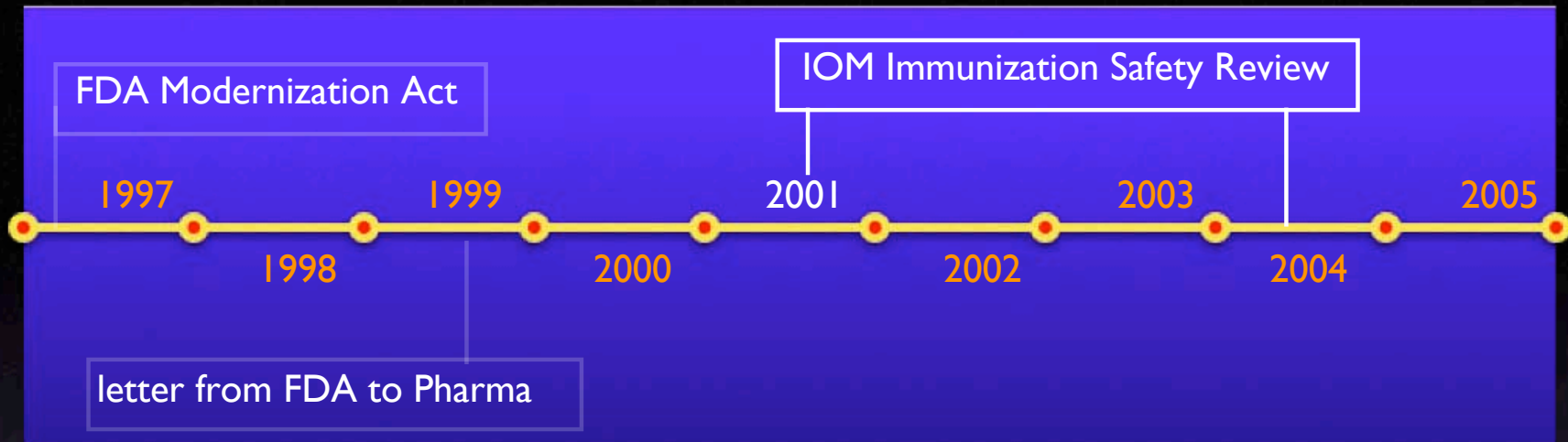
FDA Modernization Act



July 9, 1999



“There is a **significant safety margin** incorporated into all the acceptable mercury exposure limits. Furthermore, there are **no data or evidence of any harm caused by the level of exposure that some children may have encountered**. . . . Nevertheless, because any potential risk is of concern, the Public Health Service (PHS), the American Academy of Pediatrics (AAP), and vaccine manufacturers agree that **thimerosal-containing vaccines should be removed as soon as possible.**”



Institute of Medicine, Immunization Safety Review Committee

	Conclusions	Recommendations
<p>July 16, 2001</p>	<p>“...the hypothesis that exposure to thimerosal-containing vaccines could be associated with neurodevelopmental disorders is not established and rests on indirect and incomplete information, primarily from analogies with methylmercury and levels of maximum mercury exposure from vaccines given in children, the hypothesis is biologically plausible.”</p>	<p>-use of thimerosal-free DTaP, Hib, HepB -consider removal of thimerosal</p>

AUTISM A.L.A.R.M.

Autism is prevalent

- 1 out of 6 children are diagnosed with a developmental disorder and/or behavioral problem
- 1 in 166 children are diagnosed with an autism spectrum disorder
- Developmental disorders have subtle signs and may be easily missed

Listen to parents

- Early signs of autism are often present before 18 months
- Parents usually DO have concerns that something is wrong
- Parents generally DO give accurate and quality information
- When parents do not spontaneously raise concerns, ask if they have any

Act early

- Make screening and surveillance an important part of your practice (as endorsed by the AAP)
- Know the subtle differences between typical and atypical development
- Learn to recognize red flags
- Use validated screening tools and identify problems early
- Improve the quality of life for children and their families through early and appropriate intervention

Refer

- To Early Intervention or a local school program (do not wait for a diagnosis)
- To an autism specialist, or team of specialists, immediately for a definitive diagnosis
- To audiology and rule out a hearing impairment
- To local community resources for help and family support

Monitor

- Schedule a follow-up appointment to discuss concerns more thoroughly
- Look for other features known to be associated with autism
- Educate parents and provide them with up-to-date information
- Advocate for families with local early intervention programs, schools, respite care agencies, and insurance companies
- Continue surveillance and watch for additional or late signs of autism and/or other developmental disorders

For More Information: www.medicalhomeinfo.org



The recommendations in this document do not indicate an exclusive course of treatment or serve as a standard of medical care. Variations, taking into account individual circumstances, may be appropriate.

January 2004

This project is funded by a cooperative agreement between the American Academy of Pediatrics and the National Center on Birth Defects and Developmental Disabilities at the Centers for Disease Control and Prevention.

Jan 2004

What a difference 3 years make!

Institute of Medicine Immunization Safety Review Committee

	Conclusions	Recommendations
July 16, 2001	<p>“...the hypothesis that exposure to thimerosal-containing vaccines could be associated with neurodevelopmental disorders is not established and rests on indirect and incomplete information, primarily from analogies with methylmercury and levels of maximum mercury exposure from vaccines given in children, the hypothesis is biologically plausible.”</p>	<p>-use of thimerosal-free DTaP, Hib, HepB -consider removal of thimerosal</p>
May 17, 2004	<p>“...evidence favors a rejection of a causal relationship...Given the lack of direct evidence for a biological mechanism and the fact that all well-designed epidemiological studies provide evidence of no association....”</p>	<p>“...cost-benefit assessments regarding the use of thimerosal-containing and thimerosal-free vaccines and other biological productsshould not include autism as a potential risk.”</p>



AAP EXPANDS ANNUAL INFLUENZA VACCINE RECOMMENDATIONS FOR YOUNG CHILDREN

Below is a news digest on a policy statement published in the May issue of [Pediatrics](#), the peer-reviewed, scientific journal of the American Academy of Pediatrics (AAP).

For Release: May 3, 2004, 12:01 am (ET)

CHICAGO - The American Academy of Pediatrics (AAP) has expanded its recommendations for annual influenza immunizations to include children ages 6 through 23 months, as well as close contacts and caregivers of children under age 2.

AAFP: Influenza Vaccination Wrongly Avoided During Pregnancy

By Emma Hitt

Special to DG News

ATLANTA, GA -- October 5, 2001 -- A review of literature on the safety of vaccines during pregnancy indicates that some are safe.

The review also shows that doctors tend to think, incorrectly, that influenza vaccine is contraindicated in pregnant women.

Dr. David Wallis, with the University of California - Los Angeles, and colleagues presented the information today at the American Academy of Family Physicians annual conference, in Atlanta, Georgia.

Influenza Vaccine Safe at Any Stage of Pregnancy

REUTERS 

By Megan Rauscher

Fri Apr 29, 11:35 AM ET

NEW YORK (Reuters Health) - Women in the second and third trimester of pregnancy can safely be immunized against influenza, according to a new study.

The influenza vaccine is "widely underused in all populations and age groups, and yet, it is one of two vaccines that is routinely recommended for pregnant women in the US (tetanus is the other one)," Dr. Flor M. Munoz from the Baylor College of Medicine told Reuters Health.

To reaffirm the safety of the vaccine, particularly when administered in the second and third trimester, Munoz and colleagues in Houston analyzed data from five influenza seasons

ADVERTISEMENT



The advertisement features a white iPod shuffle with its earbuds and a white charging cable. The background is a vibrant, multi-colored design with a dark blue top section containing the Citibank logo, a light blue middle section with the text "FREE iPod® shuffle when you bank online.", a green horizontal stripe, and a pink bottom section with a green "DETAILS" button and a right-pointing arrow.



Flu Shots May Soon Be Recommended for All

[✉ Email this Story](#)

May 12, 8:32 PM (ET)

By LINDSEY TANNER

CHICAGO (AP) - Perhaps within five years, the government is likely to recommend annual flu shots for every American - not just young children, the elderly and other at-risk people, public health advocates predict.

The government panel that sets U.S. vaccine policy already has

Google s
[Debt Cons](#)
- Debt & C
Counseling
Become De
Today

Mercury-containing Flu shots* in early childhood will exceed the EPA guidelines for maximum daily mercury exposure

Age	Avg Wt for age	Max allowable mercury exposure (for avg weight at age)	mercury in flu shot	Factor over EPA limits
6 mo	7.7 kg	0.77 mcg	12.5 mcg	16.2 x
12 mo	10.5 kg	1.05 mcg	12.5 mcg	11.9 x
24 mo	12.3 kg	1.23 mcg	12.5 mcg	10.2 x
36 mo	14.5 kg	1.45 mcg	25 mcg	17.2 x
4 yr	16.3 kg	1.63 mcg	25 mcg	15.3x
6 yr	20.5 kg	2.05 mcg	25 mcg	12.2 x
fetus	1.0 kg [†]	0.01 mcg	25 mcg	250 x
adult	70 kg	7.0 mcg	25 mcg	3.5 x

* based on EPA RfD, (0.1 mcg/kg)

† example for 28 week gestation

Is the EPA_(0.1 mcg/kg/day) RfD too high?

	new RfD (mcg/kg/day)	x
Stern 1993	0.07	14
Gilbert & Grant-Webster 1995	0.025 - 0.06	17 - 40
Rice 2004	no threshold low enough	-
Murata 2004	no threshold low enough	-

[Home](#)[News](#)[Travel](#)[Money](#)[Sports](#)[Life](#)[Tech](#)[Weather](#)

arch

ered
by  [Wash/Politics](#)[Washington home](#)[Washington briefs](#)[Election 2004](#)[Government guide](#)[Health](#)[Health home](#)[Medical resources](#)[Health information](#)

Health and Behavior

[E-MAIL THIS](#) | [PRINT THIS](#) | [SAVE THIS](#) | [MOST POPULAR](#) | [SUBSCRIBE](#)

Posted 10/15/2004 11:44 PM Updated 10/16/2004 12:34 AM

FDA confirms Chiron flu shots not usable

WASHINGTON (AP) — None of the flu vaccine quarantined in Britain last week is safe for Americans to use, U.S. health officials confirmed Friday — ending last hopes that at least some of the shots would prove salvageable.

More testing uncovered additional contaminated batches of Chiron Corp. flu vaccine, in addition to serious manufacturing problems cited by British regulators.

Is there evidence of intent to harm?

Conspiracy!

Theory #3

- intention of harm
- motivation:
 - profit
 - harm
 - both

Eli Lilly Strattera for ADHD

- 1 in 8 children are in special ed classes
- Eli Lilly's new drug Strattera will be used in 7-9% of these children

The following table summarizes our net sales activity in 2004:

Product	Year Ended December 31, 2004			Year Ended December 31, 2003
	U.S. ¹	Outside U.S.	Total	Total
	(Dollars in millions)			
Zyprexa	\$2,422.2	\$1,997.6	\$ 4,419.8	\$ 4,276.9
Gemzar	565.1	649.3	1,214.4	1,021.7
Humalog®	685.4	416.2	1,101.6	1,021.3
Evista	667.9	344.8	1,012.7	922.1
Humulin®	422.7	575.0	997.7	1,060.4
Animal health products	555.7	459.8	798.7	726.1
Strattera	656.4	10.3	666.7	370.3
Fluoxetine products	387.2	231.7	559.0	445.1
Anti-infectives	110.2	387.6	478.0	489.9

To thimerosal activists, the notion of Lilly profiting from the ADHD epidemic was at the least ironic. Conspiracy theorists went further. They returned to the internet with **wild speculation about evil companies whipping up toxic stews for children, possibly on purpose, creating a built-in market for their products.** The thought was too nauseating to consider. Most Safe Minds parents would not allow their paranoid fantasies to drift quite that far into Hollywood horror film territory.

But Albert was ready to make the leap. “I just read the Wall Street Journal,” he wrote to Lyn and Sallie on Thanksgiving. **“First, Lilly makes money by poisoning our children and causing autism and ADHD,”** he said. **“Then they make money by making medication that does not work.**

from *Evidence of Harm*, David Kirby

“Could there be an economic incentive to keep the mercury flowing into our bodies? Poison with one hand and treat with the other while avoiding liability?”

“Autism and Alzheimer’s Disease”

Kenneth Stoller, M.D. Redflagsdaily.com 3/6/05

On Machiavellian Theory

- “. . . creating a problem prompts the economic opportunity for a solution. In today’s global health arena, there is great incentive to manufacture health and environmental problems, have mainstream media herald them, thereby inducing anxiety, even hysteria, which leads to mass consumption of expensive chemical or pharmaceutical solutions.”

Principles of Amplification and Machiavellianism

Mach•i•a•vel•li•an

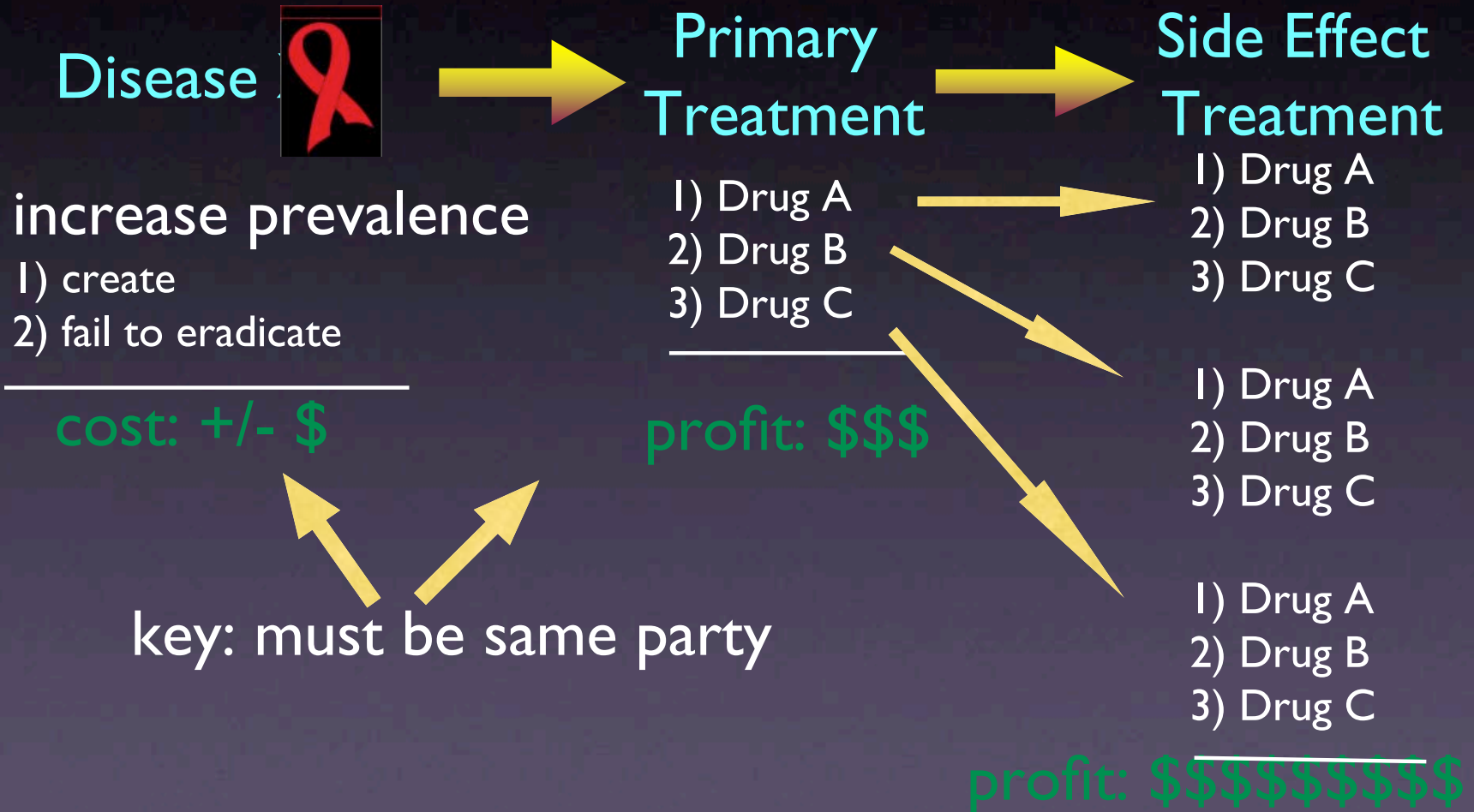
— *adj.*

1. of, like, or befitting Machiavelli.
2. being or acting in accordance with the principles of government analyzed in Machiavelli's *The Prince*, in which political expediency is placed above morality and the use of craft and deceit to maintain the authority and carry out the policies of a ruler is described.
3. characterized by subtle or unscrupulous cunning, deception, expediency, or dishonesty: *He resorted to Machiavellian tactics in order to get ahead.*



Niccolo Machiavelli (1469-1527)

Machiavellian Pharma Model



Machiavellian Pharma Model



rising incidence
1) increase vaccines and thimerosal
2) fail to eradicate- attack truth

cost: \$

- 1) Drug A
- 2) Drug B
- 3) Drug C

profit: \$\$\$

- 1) Drug A
- 2) Drug B
- 3) Drug C

- 1) Drug A
- 2) Drug B
- 3) Drug C

- 1) Drug A
- 2) Drug B
- 3) Drug C

profit: \$\$\$\$\$\$\$\$\$\$

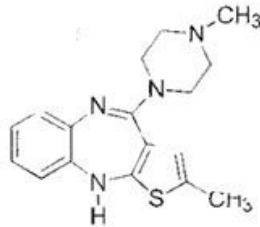
IOM May 17, 2004

“Researcher’s time would be better spent pursuing other culprits, experts added.”

“. . . we recommend that future research be directed towards other lines of inquiry. . . that offer more promise.”

Eli Lilly, Zyprexa, & the Bush Family

The diseasing of our malaise



By [Bruce Levine](#)

In 2002, British and Japanese regulatory agencies warned that Zyprexa may be linked to diabetes, but even after the FDA issued a similar warning in 2003, Lilly's Zyprexa train was not derailed, as Zyprexa posted a 16 percent gain over 2002. The growth of Zyprexa has become especially vital to Lilly because Prozac—Lilly's best-known product, which once annually grossed over \$2 billion—having lost its patent protection, continues its rapid decline, down to \$645.1 million in 2003.

At the same time regulatory agencies were warning of Zyprexa's possible linkage to diabetes, Lilly's second most lucrative product line was its diabetes treatment drugs (including Actos, Humulin, and Humalog), which collectively grossed \$2.51 billion in 2003. Lilly's profits on diabetes drugs and the possible linkage between diabetes and Zyprexa is not, however, the most recent Lillygate that Gardiner Harris broke about Zyprexa in the *New York Times* on December 18, 2003.



Conspiracy!

Theory #3

- intention of harm
- motivation:
 - profit- Machiavellianism
 - harm - genocide??
 - both

WHO Information Meeting on Removal of Thimerosal from Vaccines & Its Implications for Vaccine Supply May 21, 2002, Geneva

- “develop a strong advocacy campaign to support ongoing use of thimerosal”
- “lobby ministry of health and senior regulators”
- “recognizing the importance of maintaining usage of multidose vaccines in global markets that are effectively protected against field contamination, they effectively supported WHO’s plan to recommend the continued use of thimerosal in vaccines”

special feature

A *byronchild* world exclusive

www.byronchild.com

All rights reserved. © Byron Publications P/L, 2005

A Dragon by the Tail

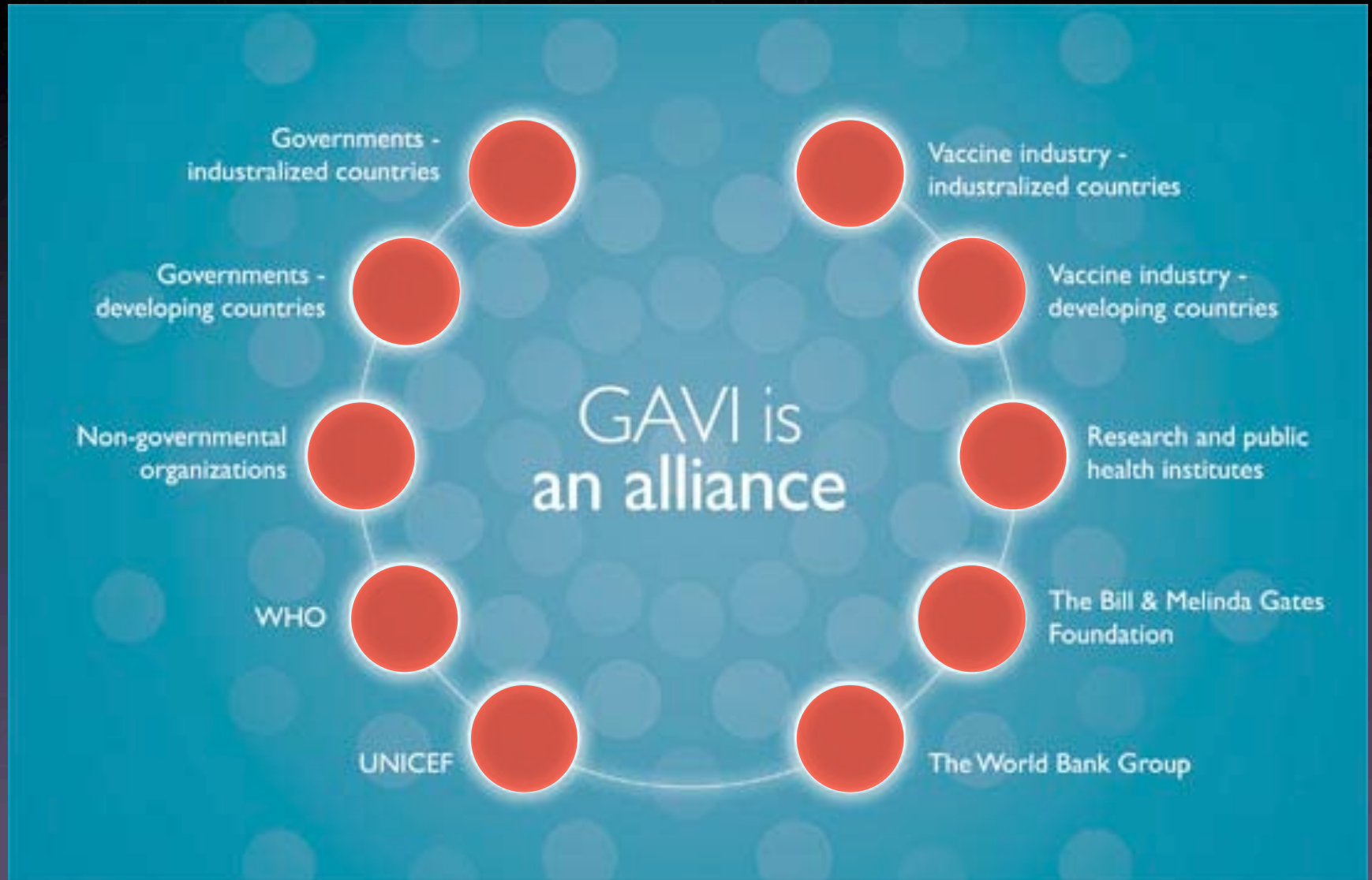
By Lisa Reagan

On the eve of an historic, billion-dollar world vaccination campaign, a leaked transcript ignites questions of vaccine safety and research corruption. Meanwhile US senators fast-track a bill to protect vaccine manufacturers from litigation. With millions of children's lives at stake, and billions of dollars to lose, will a merger of philanthropy, big business and compromised science win an epic race between medical ethics and institutional agendas?

In this world exclusive, *byronchild* exposes how the most powerful medical research bodies in the United States compromise their vaccine safety research for vested interests, as they assist in a global vaccine policy, while a federal bill looms in the background to protect it all.

“[IOM report used] to formulate standardization of case definitions for Adverse Events Following Immunizations, for Global dissemination through GAVI”

The Really Ugly The Global Vaccine Agenda



Global Alliance for Vaccines and Immunizations Goals

- improve health poorest 70 nations
- exclusively via vaccines
 - research
 - deliverance
 - implementation
 - government rewarded, industry incentives

GAVI

- launched 1999 with \$754 million- Gates foundation
- >\$1B committed, \$12-15B goal
- HiB, DTP, HepB, yellow fever, OPV
- future vaccines (HIV, rotavirus, pneumococcal, TB)



Supporting nations

- USA
- Canada
- UK
- EU
- The Netherlands
- Sweden
- Norway
- Germany

Recipient nations

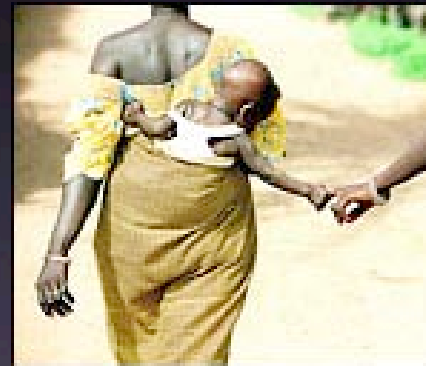
Uganda (\$92M)
Nigeria (\$81M)
Kenya (\$80M)
Pakistan (\$72M)
Bangladesh (\$68M)
Yemen (\$59M)
Ghana (\$53M)
Zambia (\$50M)
Congo (\$49M)

DISPENSING HOPE

BILL GATES' GLOBAL HEALTH GAMBLE



Rockefeller Foundation



The new products and approaches that come out of these initiatives will be incorporated into the broader mission of GAVI, an umbrella group composed of the Gates Foundation, PATH, UNICEF, the World Bank, pharmaceutical companies, the World Health Organization, the Rockefeller Foundation and other global health players. The alliance is designed to be a

Gates said that "Taking our lead and our inspiration from work already done by The Rockefeller Foundation, our foundation actually started GAVI by pledging \$750 million to something called the Global Fund for Children's Vaccines, an instrument of GAVI."

He also praised the Rockefeller family's century of philanthropy, saying, "It seems like every new corner we turn, the Rockefellers are already there. And in some cases, they have been there for a long, long time."

Dec 15, 2000 Rockefeller University *news¬es*

Rockefeller Related Organizations

 [Printer-Friendly Version](#)

POPULATION COUNCIL ARCHIVES, 1952-1966

Size: 51 cubic feet

Contents: The collection includes correspondence, memoranda, reports, minutes, agendas, and financial material.

Arrangement: Arranged in five series:

1. General Files, 1952-1966
2. Grant Files, 1958-1966
3. National Committee on Maternal Health, 1958-1966
4. Organization Files, 1956-1966
5. Subject Files, 1955-1966

Photograph Collection: Yes

Organizational History: The Population Council was founded by John D. Rockefeller 3rd in 1952 and is an independent nonprofit organization. It is international in the composition of its Board of Trustees and its staff, as well as in the nature and extent of its activities. The Council helped raise the issue of population growth to global attention, and has helped to further understanding of the relationship between fertility, population growth, and socioeconomic development.

Did you know

John D. Rockefeller 3rd established the Population Council in 1952 and played a leading role in efforts to bring the problem of overpopulation to global attention.

THE ROCKEFELLER ARCHIVE CENTER

[ABOUT US](#)[RESEARCH](#)[GRANTS](#)[COLLECTIONS](#)[PUBLICATIONS](#)[THE ROCKEFELLERS](#)

COLLECTIONS

Papers of Individuals

 [Printer-Friendly Version](#)

THE KENNETH C. SMITHBURN PAPERS 1922-1974

In Series I, files are arranged alphabetically by name and subject. In Series II, diaries are arranged chronologically. Materials in Series III are arranged alphabetically by type of material and thereunder alphabetically or chronologically. In Series IV, printed materials are arranged chronologically.

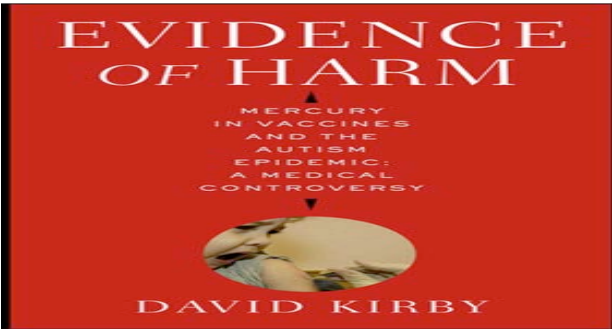
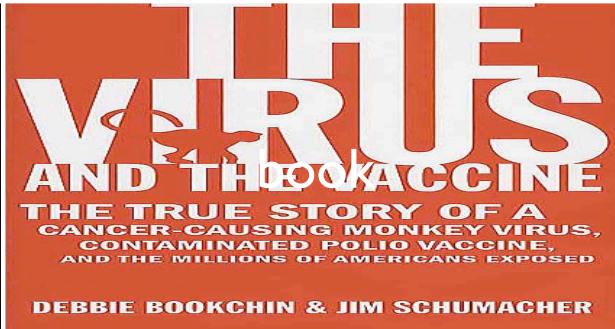
Series I - Subject Files

Series I, Subject Files, contains Smithburn's professional correspondence and experimental data arranged in the order in which they were received. Thus, within these files, both unique and routine materials are intermingled. Information about Smithburn's appointment in 1938 to the Yellow Fever Unit in Entebbe is found in correspondence with the Rockefeller Foundation in folder 60. Correspondence with colleagues Alec Haddow (1943-1964), Stuart Kitchen (1946-1964), and Paul Maurice Weinbren (1955-1959) contain ongoing

Did you know

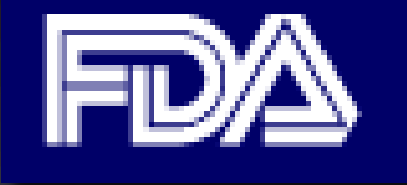
In 1911, Peyton Rous, a scientist at the Rockefeller Institute for Medical Research (now the Rockefeller University), discovered that a virus can cause cancer. His discovery earned him the Nobel prize in 1966.

Parallel Perils

SV40, polio vaccine and cancer	thimerosal, childhood vaccines and autism
Rockefeller researcher Peyton Rous	Rockefeller researcher K.C. Smithburn, MD
Hilleman audio	Hilleman memo
IOM exonerated Oct 22, 2002 flawed epidemiology	IOM exonerated May 17, 2004 flawless epidemiology
	



Department of Health and Human Services



Engineering

Sciences

NRC

IOM

The National Academies

National Academy Sciences	1863
National Research Council	1916
National Academy Engineering	1964
Institute of Medicine	1970

At present, 33 faculty of Rockefeller University are elected members of the U.S. National Academy of Sciences

Fourteen members of the Institute of Medicine are currently associated with The Rockefeller University.

Award Recipients

Ralph M. Steinman (2002)

Günter Blobel (2000)

Barry S. Collier (1999)

Paul Greengard (1999)

Bruce S. McEwen (1998)

Jan L. Breslow (1997)

David D. Ho (1997)

Torsten Wiesel (1996)

Elaine Fuchs (1994)

Jules Hirsch (1993)

Emil C. Gotschlich (1988)

Vincent P. Dole (1971)

Joshua S. Lederberg (1971)

Maclyn McCarty (1970)

THE ROCKEFELLER COMMISSION REPORT

Population and the American Future

The Report of The Commission on Population Growth and the American Future

from: The Center for Research on Population and Security

“After two years of concentrated effort, we have concluded that, in the long run, no substantial benefits will result from further growth of the Nation’s population, rather that the gradual stabilization of our population through voluntary means would contribute significantly to the Nation’s ability to solve its problems. We have looked for, and have not found, any convincing economic argument for continued population growth. The health of our country does not depend on it, nor does the vitality of business nor the welfare of the average person.

THE ROCKEFELLER COMMISSION REPORT

Population and the American Future

The Report of The Commission on Population Growth and the American Future

from: The Center for Research on Population and Security

“By its very nature, population is a continuing concern and should receive continuing attention. Later generations, and later commissions, will be able to see the right path further into the future. **In any case, no generation needs to know the ultimate goal or the final means, only the direction in which they will be found.**”

John D. Rockefeller, 3rd Mar 27, 1972

National Security Study Memorandum

200 (NSSM200)

Implications of Worldwide Population Growth for U.S. Security and Overseas Interests

- Henry Kissinger, National Security Council
- April 24, 1974 (declassified 1989)
- focus: “international political and economic implications of population growth”

National Security Study Memorandum

200 (NSSM200)

conclusions:

- unprecedented growth rates
- LDC's growing faster
- required US imports could be threatened
- risk of global de-stabilization
- urgent, immediate measures taken to reduce fertility

National Security Study Memorandum

200 (NSSM200)

*measures**:

- reproductive health (abortion, condoms)
- sex education
- improved health
- women's equality
- day care
- government participation
- improve social security
- reduce infant mortality

* The World Population Plan of Action, World Population Conference

National Security Study Memorandum

200 (NSSM200)

*methods**:

- assistance to LDC's gov't
- activities not appear coercive
- emphasize "individual rights"
- emphasis on mass media

* The World Population Plan of Action, World Population Conference

National Security Study Memorandum

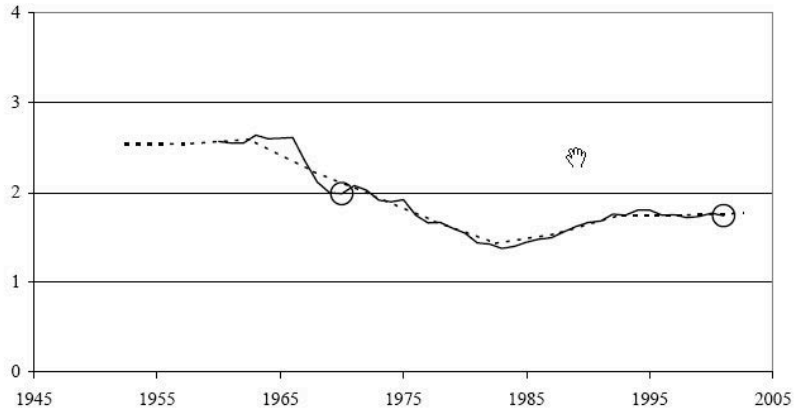
200 (NSSM200)

*goals**:

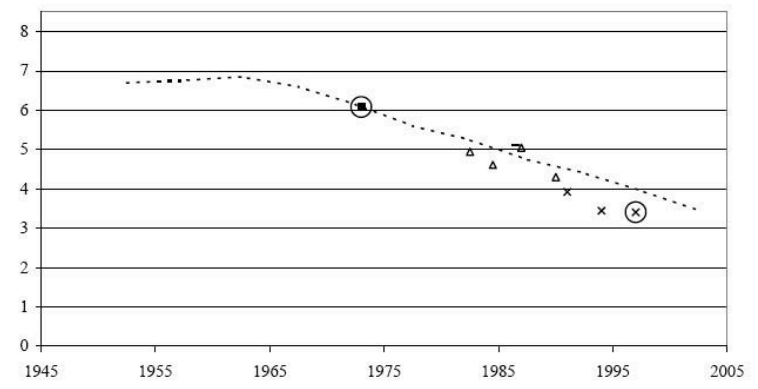
- replacement fertility in developing countries by 1985
- replacement fertility in LDC's- 2000

* The World Population Plan of Action, World Population Conference

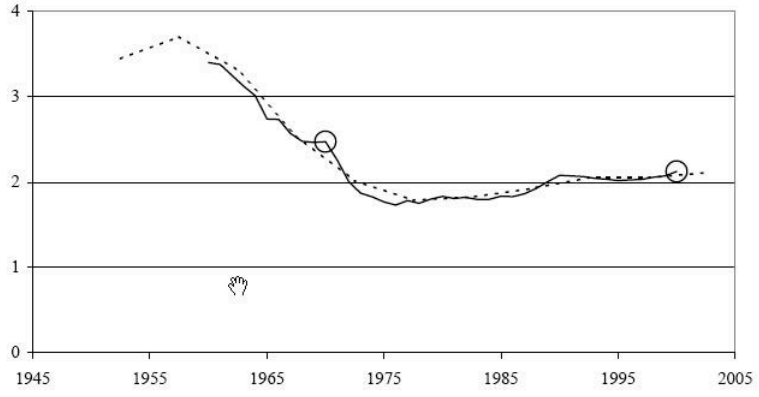
Total fertility rates



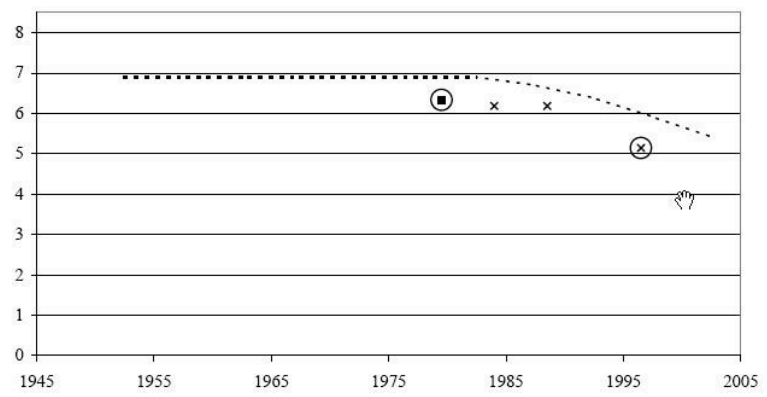
Total fertility rates



Total fertility rates



Total fertility rates



Comparing Lists

targets

NSSM 200

Bangladesh

India

Pakistan

Indonesia

Philippines

Thailand

Egypt

Turkey

Ethiopia

Nigeria

Brazil

Mexico

Columbia

GAVI vaccine list

Uganda

Nigeria

Kenya

Pakistan

Bangladesh

Yemen

Ghana

Zambia

Congo

Burkina Faso

India

Indonesia

Tanzania

Comparing Lists

targets

NSSM 200

GAVI vaccine health list

Bangladesh

#4

Uganda

India

#24

Nigeria

Pakistan

#34

Kenya

Indonesia

#52

Pakistan

Philippines

#77

Bangladesh

Thailand

#5

Yemen

Egypt

#80

Ghana

Turkey

#26

Zambia

Ethiopia

#6

Congo

Nigeria

#10

Burkina Faso

Brazil

#94

India

Mexico

#112

Indonesia

Columbia

#31

Tanzania

National Security Study Memorandum

200 (NSSM200)

CONFIDENTIAL

The U.S. strengthened its credibility as an advocate of lower population growth rates by explaining that, while it did not have a single written action population policy, it did have legislation, Executive Branch policies and court decisions that amounted to a national policy and that our national fertility level was already below replacement and seemed likely to attain a stable population by 2000.

The U.S. also proposed to join with other developed countries in an international collaborative effort of research in human reproduction and fertility control covering big-medical and socio-economic factors.

The U.S. further offered to collaborate with other interested donor countries and organizations (e.g., WHO, UNFPA, World Bank, UNICEF) to encourage further action by LDC governments and other institutions to provide low-cost, basic preventive health services, including maternal and child health and family planning services, reaching out into the remote rural areas.

Comparing Lists

players:

NSSM200

- World Bank
- WHO
- UNICEF
- donor countries
- UNPFA
- “private organizations and groups”

GAVI

- World Bank
- WHO
- UNICEF
- donor countries
- UNPFA
- “private organizations and groups”

* The World Population Plan of Action, World Population Conference

Difficult Questions

- Is GAVI activity involved with covert population control measures?
- Does thimerosal play a role?

Difficult Questions

- 1) Do the other GAVI partners have a background of population control activity or beliefs?

Bill Gates

- gave \$1.7 million to UNPFA *April 23, 1998 CWNews.com*
- gave \$10 million to “collaborative research on reproductive health” to UNDP/UNFP/WHO/World Bank
- gave \$2.2 billion to UNPF 2/11/99
- gave \$1.7 million International Planned Parenthood

Bill Gates

- “An interest in family planning brought the Gateses to the door of a Seattle nonprofit firm called Program for Appropriate Technology in Health. PATH has spent years working on population, reproductive health and vaccine safety issues....to the Third World.” *3/21/01 SeattlePI Reporter*
- “Vaccination campaigns often run into these questions. Is there some hidden agenda? Something wrong with it?” Even in the United States you’ll often see articles about the anti-vaccine crowd, and the awful thing is that can scare people away and in many cases even the rich countries you’ve ended up with a lack of coverage that has ended up in children dying.” *5/17/05 SeattlePI Reporter*

THE UNITED
NATIONS
POPULATION
FUND:

Assault on the World's Peoples

Douglas A. Sylva, Ph.D.

THE INTERNATIONAL ORGANIZATIONS
RESEARCH GROUP

New York City

THE INTERNATIONAL ORGANIZATIONS
RESEARCH GROUP

THE UNITED
NATIONS
CHILDREN'S
FUND:

Women or Children First?

Douglas A. Sylva, Ph.D.

Catholic Family & Human Rights Institute



WHITE PAPER SERIES

NUMBER THREE

	Dom	foreign
Packard Foundation	23	82.7
Ford Foundation	6.4	36
Hewlett Foundation	6.5	15.7
Buffet Foundation	8.2	6.9
Rockefeller Foundation	.1	12.5
MacArthur Foundation	.6	7.3
Turner Foundation	3.4	4
Int'l Fund Health Fam Plan	0	6.4
Open Society Institute	4	2
Summit Charitable Foundation	0	4.3
Mellon Foundation	1	2.5
Goldman Fund	1.6	.7
California Endowment	2.2	0
Clark Foundation	2	0
Atlantic Foundation of NY	2	0
Merck Fund	1.6	.2
RW Johnson Foundation	1.8	0
Moriah Fund	.6	.7
General Service Fund	.9	.3
Gates Foundation	3.1	114.5
	\$96.6 M	\$300 M

Life Research Institute

118 Foundations
year 2000

Money Spent in
Support of Abortion

Difficult Questions

- 2) Is there evidence that vaccines can deliver antifertility products? Have they been used?

MEDICAL
INTELLIGENCE
UNIT

BIRTH CONTROL VACCINES

G.P. Talwar
Raj Raghupathy

R.G. LANDIS COMPANY

VACCINATION AGAINST PREGNANCY



MIRACLE OR MENACE?

JUDITH RICHTER

A WELL-MEANING BUT CONTROVERSIAL POPULATION POLICY

Nigeria has formally adopted a population policy to protect the health of its mothers and children through measures to limit population growth. The announcement came from Prince Bola Ajibola, the Attorney General and Minister of Justice, who noted that "the prevailing cultures, religions and traditions make it an onerous task but it is a task that must be done". The current population of Nigeria is not exactly known and generally extrapolations are made from the 1963 census figures. Population Bureau International, an American based census bureau, has estimated the population to be 108.6 million. The World Development Report for 1987 puts the growth rate at 3.4%—one of the highest in the world—and, according to a United Nations demographic estimate, by the year 2025 Nigeria will become the 4th most populous nation in the world with 338 million people, coming only after China, India, and the USSR. The infant mortality rate has fallen from 187 per 1000 in 1960 to 90; the adult death rate has dropped from 27 per 1000 to 13; and life expectancy has risen from 37 to 54 years. There have therefore been strong warnings from population agencies for Nigeria to decrease the rate of population growth through vigorous family planning programmes, "otherwise the future generation of Nigerians would not have enough food, housing, education, health services and jobs".

The goals of the National Population Policy are to improve the standards of living and the quality of life of the people; to promote their health and welfare especially through preventing premature death and illness among high-risk groups of mothers and children; to achieve lower population growth rates through reduction of birth rates by voluntary fertility regulation methods that are compatible with the attainment of economic and social goals of the nation; and to achieve a more even distribution of population between urban and rural areas. As regards mothers and children, the goals are to reduce the proportion of women who get married before the age of 18 years by 50% by 1995 and by 80% by the year 2000; to achieve birth spacing of a minimum of 2 or more years in at least 50% of fertile married women by 1995 and in 80% by the year 2000; to reduce pregnancies of mothers below 18 years and above 35 years of age by 50% by 1995 and by 80% by the year 2000; to reduce the proportion of women bearing more than four children by 50%

“During the recent National Immunisation Campaign (vaccination for childhood diseases and tetanus toxoid for pregnant women), in some villages the women escaped and hid in the bushes thinking that they were going to be given injections to stop them from having children.”

Lancet, June 4, 1998

50 previously sterilized women were given 250 to 1000 mcg of the antigen. Each woman

Allegations of Td-HcG

- Mexico 1994 Comite' Pro Vida De Mexico
- Philippines 1995 BBC Report
- Nicaragua 1993

The Human Laboratory

BBC Transcript Nov 5, 1995

“Our fertility cycles are all fouled up, some of the women among us have bleeding and miscarriages, some have lost their babies at a very early stage.....Three out of four vials were positive for HCG.”

Mary Pilar Veroza

From: smpv@edsamail.com.ph

Subject: antifertility vaccines

Date: April 26, 2005 1:48:06 AM CDT

To: raypoke@mac.com

-Greetings from the Philippines. I would like to respond to your questions on anti-fertility vaccines because we were involved in investigating the **tetanus toxoid vaccines in 1995**. We suspected that they contained beta HCG because some of the women who submitted themselves to the mass vaccination program of the government complained of **miscarriages and other side-effects**. This involved **five injections within a year to girls and women starting age 14 to 44, reproductive age. A random sampling of the vials donated by WHO and UNICEF did contain traces of beta HCG**. We reported this to the Department of Health but they concluded that these were just noise traces and that the nuclear laboratory tests done were not the proper test to have been conducted. Our suspicions were stronger when we found out that experiments on anti-fertility vaccines using tetanus and cholera were being done in India. Phone call interview with Dr. Talwar of India revealed that he indeed was doing the experiments. But subsequent laboratory tests on other vials conducted by neutral groups were rejected by the government and even Vatican advised us not to make such a big issue out of the anti-tetanus immunizations so we just dropped it after the government committed not to conduct massive anti-tetanus vaccinations anymore but would just give it to pregnant women with full consent.

for more information, you can visit this other website simbahayan.org.ph

I am Sister Pilar Verzosa, the national coordinator of Pro-life Philippines. Many thanks for your concern. God bless you.

Neonatal Tetanus

Neonatal tetanus is virtually unknown in the United States, but it kills nearly half a million children each year in developing countries. PATH is participating in the *Partnership for Child Health*, a five-year global immunization campaign to eliminate neonatal tetanus. Launched in 1998 by UNICEF and Becton Dickinson and Company, the campaign uses two safe-injection devices developed by PATH and licensed to Becton Dickinson — Uniject™ and SoloShot™ — to administer neonatal tetanus immunizations to millions of expectant mothers. PATH also helped to identify a tetanus toxoid vaccine supplier and will assist in implementing immunization campaigns in targeted countries.



News & Events

Bill and Melinda Gates Foundation Joins UNICEF and BD in Effort To Prevent Newborn Deaths in Developing World

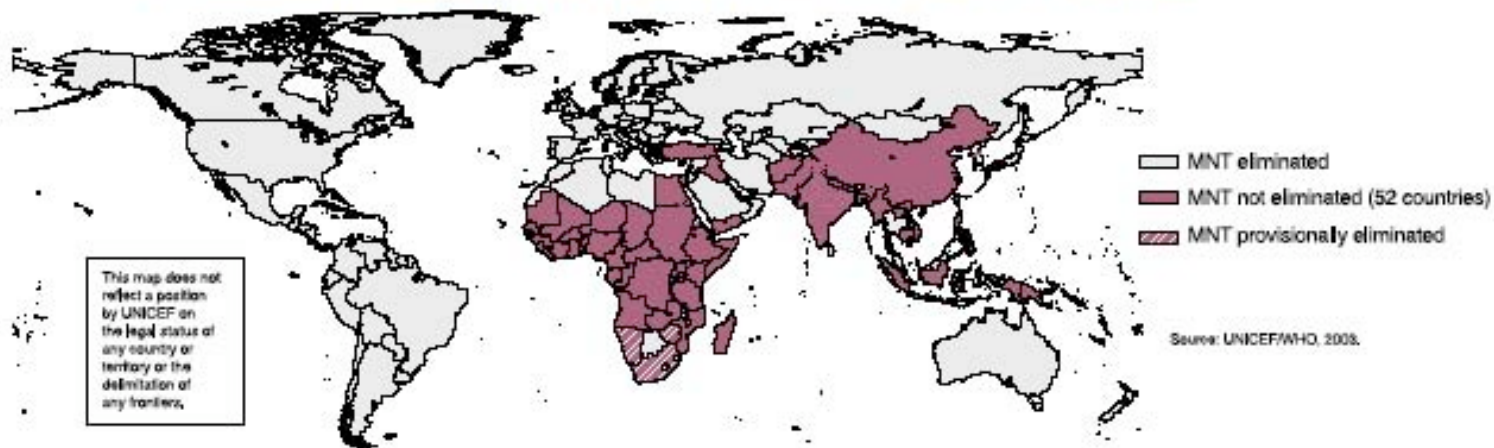
Foundation Awards \$26 Million To Eliminate Maternal and Neonatal Tetanus (MNT) by 2005

Sunday, November 21, 1999 -- Contact: Guy Taylor
U.S. Committee for UNICEF
(212) 922-2659

Trevor Neilson
(206) 709-3112
Bill and Melinda Gates Foundation

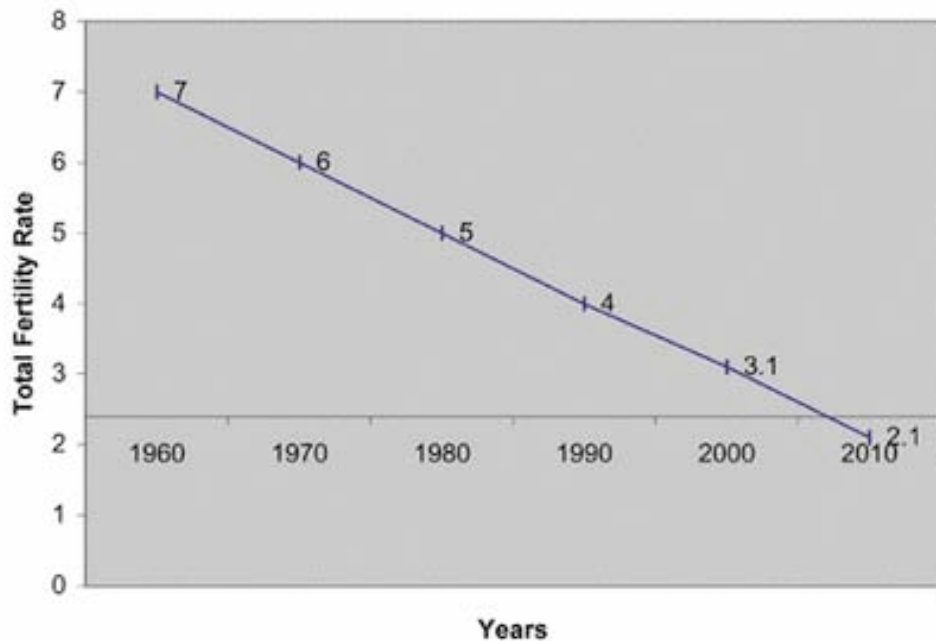
NEW YORK, NOVEMBER 21 — "The U.S. Committee for UNICEF (The United Nations Children's Fund) received today a \$26 million grant from the Bill and Melinda Gates Foundation. The gift will be used in the fight to eliminate maternal and neonatal tetanus (MNT), a disease that was responsible in 1998 for nearly 250,000 deaths in developing nations. Although tetanus killed just one newborn in the U.S. last year, it is one of the world's most serious diseases that afflicts infants and their mothers.

PROGRESS IN THE ELIMINATION OF MATERNAL AND NEONATAL TETANUS



In 1995 maternal and neonatal tetanus was not yet eliminated in 82 countries. By the end of 2003, the number had fallen to 52.

Philippines: Demographic Suicide



Editorials

Protecting **adolescent** girls against **tetanus**

Would save many lives in the developing world

Time and again **tetanus** has been described as a neglected disease.¹ An estimated 8 million babies and 2 million children and adults may die from **tetanus** during the 1990s, mostly in developing countries--despite the World Health Organisation's call to eliminate the disease by this year. Vaccination to prevent post-abortal and maternal **tetanus** has been largely ignored. The primary aim of prevention programmes has been to eliminate neonatal **tetanus**²; the two commonest prevention programmes--immunisation of preschool children and of pregnant women--have omitted **adolescent** girls.

This article

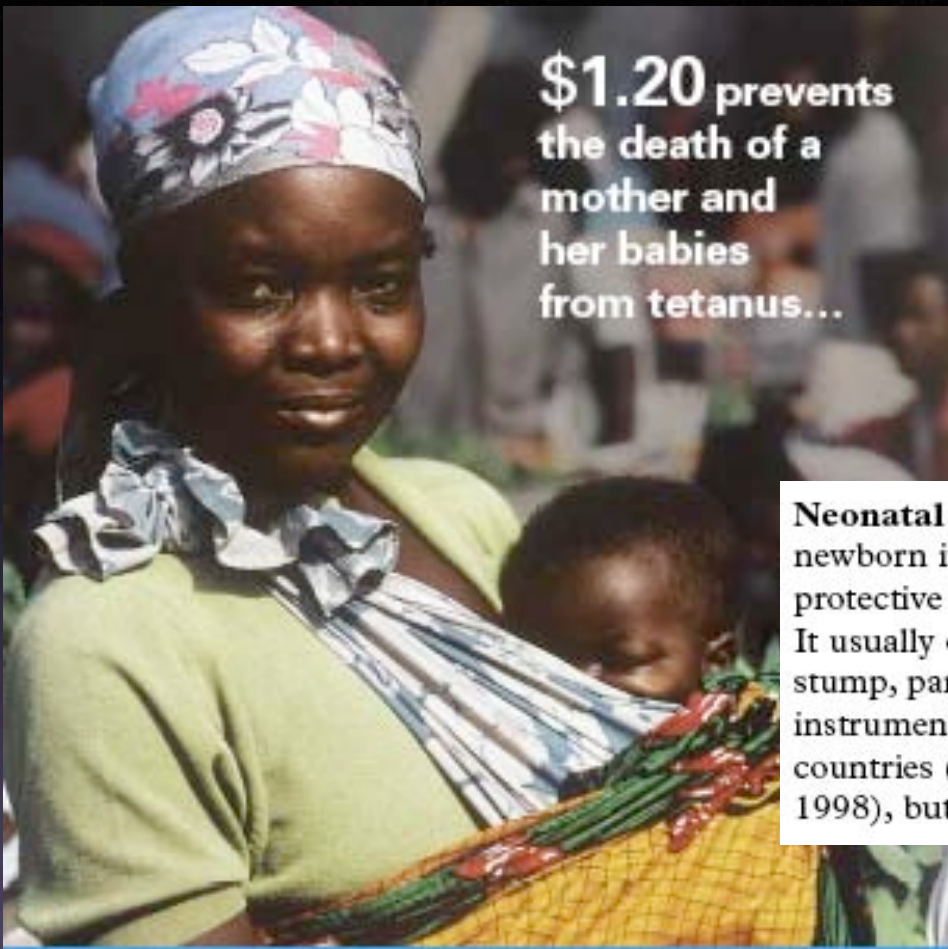
- ▶ [Full text](#)
- ▶ [Respond to this article](#)
- ▶ [Alert me when this article is cited](#)
- ▶ [Alert me when responses are posted](#)
- ▶ [Alert me when a correction is posted](#)

Services

- ▶ [Email this article to a friend](#)
- ▶ [Find similar articles in BMJ](#)
- ▶ [Find similar articles in PubMed](#)
- ▶ [Alert me to new issues of the journal](#)
- ▶ [Download to citation manager](#)

PubMed

- ▶ [PubMed Citation](#)
- ▶ [Articles by Brabin, L.](#)
- ▶ [Articles by Briggs, N. D](#)




\$1.20 prevents
the death of a
mother and
her babies
from tetanus...

Neonatal tetanus is a form of generalized tetanus that occurs in newborn infants. Neonatal tetanus occurs in infants born without protective passive immunity, because the mother is not immune. It usually occurs through infection of the unhealed umbilical stump, particularly when the stump is cut with an unsterile instrument. Neonatal tetanus is common in some developing countries (estimated more than 215,000 deaths worldwide in 1998), but very rare in the United States.

ELIMINATING MATERNAL AND NEONATAL TETANUS

For every child
Health, Education, Equality, Protection
BEYOND HUMANITY

unicef 

How effective is HCG?

0013-7227/98/403.00/0

Endocrinology

Copyright © 1998 by The Endocrine Society

Vol. 139, No. 4

Printed in U.S.A.

Neonatal Immunization against Gonadotropin-Releasing Hormone (GnRH) Results in Diminished GnRH Secretion in Adulthood

I. J. CLARKE, B. W. BROWN, V. V. TRAN, C. J. SCOTT, R. FRY, R. P. MILLAR,
AND A. RAO

Prince Henry's Institute of Medical Research (I.J.C., V.V.T., A.R.), Clayton, Victoria 3168, Australia; Commonwealth Scientific and Industrial Research Organisation Division of Animal Production (B.W.B.), Blacktown, New South Wales 2148, Australia; Department of Physiology (C.J.S.), Monash University, Clayton, Australia; Victorian Institute of Animal Science (R.F.), Department of Natural Resources and Energy, Werribee 3030, Australia; and Medical Research Council Research Unit for Molecular Reproductive Endocrinology (R.P.M.), Regulatory Peptides Research Unit, Department of Chemical Pathology, University of Cape Town, Cape Town, South Africa

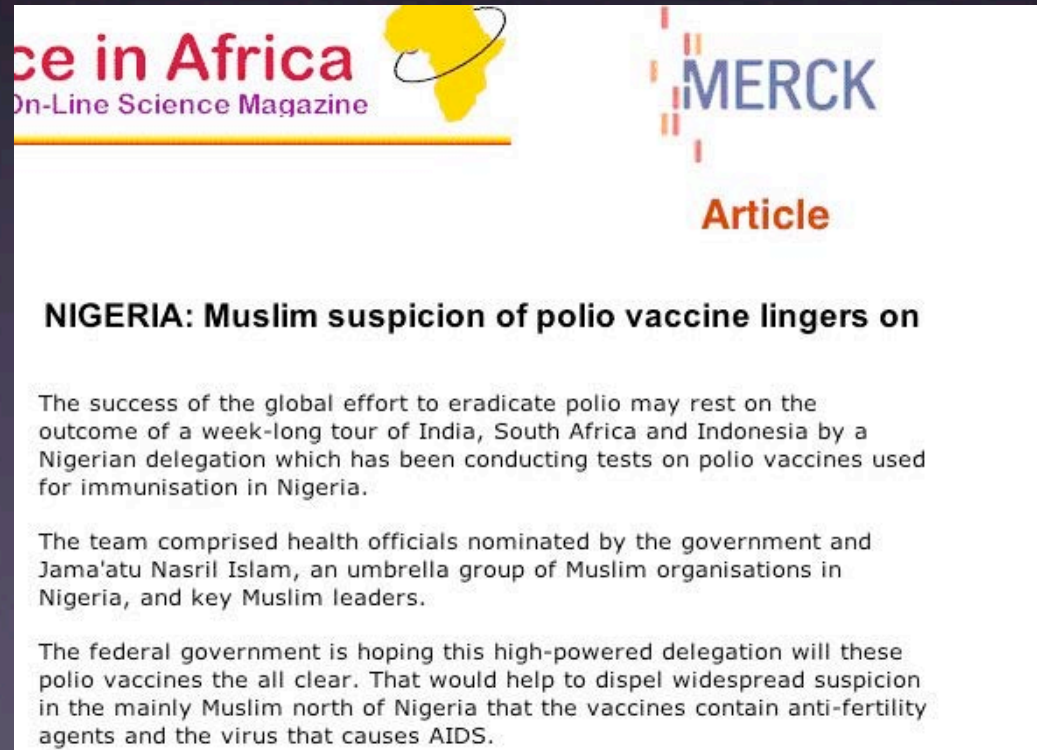
ABSTRACT

The effects of neonatal immunization against GnRH were studied in sheep after they had reached adulthood (3–4 yr) and the antibody titers had fallen to undetectable levels. The immunized animals had small gonads, and the females did not have large follicles (>3 mm) or corpora lutea in their ovaries. Compared with controls, the immunized animals had low or nondetectable levels of LH and FSH in

and FSH levels. The sampling of hypophysial portal blood, with a newly described method, showed that the secretion of GnRH was reduced in the immunized animals, but the amount of GnRH in the median eminence was similar in the control and immunized ewes. The pituitary content of LH and FSH was reduced in the immunized ewes as was messenger RNA for the gonadotropin subunits and the GnRH receptor. These data indicate that neonatal immunization does not

Contamination of Polio Vaccine

- Oct 2003 Northern Nigeria (Kano, Daduna, Zamfara)
- Gov't testing, confirmed in India labs
 - estradiol
 - carcinogens
 - HIV



The screenshot shows the top portion of a web article. On the left is the logo for 'Science in Africa On-Line Science Magazine' with a yellow map of Africa. On the right is the 'MERCK' logo. Below the logos, the word 'Article' is written in orange. The main title of the article is 'NIGERIA: Muslim suspicion of polio vaccine lingers on'. The text below the title discusses a Nigerian delegation's tour of India, South Africa, and Indonesia to test polio vaccines, and mentions the presence of health officials, Jama'atu Nasril Islam, and Muslim leaders. It also notes the federal government's hope that the delegation will clear up widespread suspicion in the north of Nigeria that the vaccines contain anti-fertility agents and the AIDS virus.

Science in Africa
On-Line Science Magazine

MERCK

Article

NIGERIA: Muslim suspicion of polio vaccine lingers on

The success of the global effort to eradicate polio may rest on the outcome of a week-long tour of India, South Africa and Indonesia by a Nigerian delegation which has been conducting tests on polio vaccines used for immunisation in Nigeria.

The team comprised health officials nominated by the government and Jama'atu Nasril Islam, an umbrella group of Muslim organisations in Nigeria, and key Muslim leaders.

The federal government is hoping this high-powered delegation will these polio vaccines the all clear. That would help to dispel widespread suspicion in the mainly Muslim north of Nigeria that the vaccines contain anti-fertility agents and the virus that causes AIDS.

1: Ther Immunol. 1995 Jun;2(3):147-57.

[Related Articles](#), [Links](#)

Development of a hormone neutralizing vaccine, using GnRH-glycyl-PPD, for use in the treatment of oestrogen-dependent disorders.

Ferro VA, O'Grady JE, Notman J, Stimson WH.

University of Strathclyde, Department of Immunology, Glasgow, UK.

The aim of this study was to develop an effective and nontoxic vaccine, suitable for use in humans, which was capable of effectively controlling oestrogen levels. Female Sprague-Dawley rats were immunized with a conjugated analogue of gonadotrophin releasing hormone, GnRH-glycyl-PPD. This resulted in high levels of neutralizing antibody which disrupted GnRH function and

FOR EMBARGO UNTIL 11.00 GMT, 4 MAY 2005

GLOBAL GATHERING YIELDS 'ROAD MAP' TO INTENSIFY ACTION AGAINST TB IN AFRICA

**\$1.1 billion needed in 2006-2007 to strengthen TB programmes and
address HIV-associated TB as yearly toll climbs to 540,000 deaths**

Addis Ababa - At a groundbreaking meeting of the global Stop TB Partnership today, leading African and international health and development officials unveiled a detailed "Road Map" to halt Africa's spiralling epidemic of tuberculosis, which in combination with HIV is overwhelming many health services in the region.

Investigation launched into death of WHO Stop TB professional officer



A police investigation is underway following the death of Lisa Véron, 30, who died as a result of a violent act on the evening of 10 January in Harare, Zimbabwe. The loss of such a remarkable and wonderful person has deeply shocked all her colleagues.

Lisa joined WHO in April 2000, initially working in Geneva for the Health Promotion department. To strengthen her public health background, she then spent two years working for a Geneva-based organization, developing and managing various projects related to infertility.

Her commitment to global health brought her back to WHO at the start of 2002, when she was appointed as a technical officer for the Tuberculosis Strategy and Operations team of the Stop TB Department.



Dr. Helene Gayle directs the Bill & Melinda Gates Foundation's HIV, TB and Reproductive Health Program. Her portfolio includes more than \$1.2 billion in grants to prevention, treatment, and research programs.

She has served as a health consultant to international agencies including the World Health organization, UNICEF, the World Bank and UNAIDS, and has worked extensively in Africa, Asia and the Americas. She currently co-chairs the Global HIV Prevention Working Group, an international panel of HIV/AIDS experts convened by the Gates Foundation and the Henry J. Kaiser Family Foundation.

IOM Governing Council Member!

Difficult Questions

- 3) Does thimerosal fulfill criteria as an anti-population agent?

Proposition 65 & NTP statements

mental retardation
developmental toxicity
intrauterine deaths
perinatal deaths
other malformations
low birth weight
low birth size
growth retardation

Impact of heavy metals and immunological factors in woman with repeated miscarriages

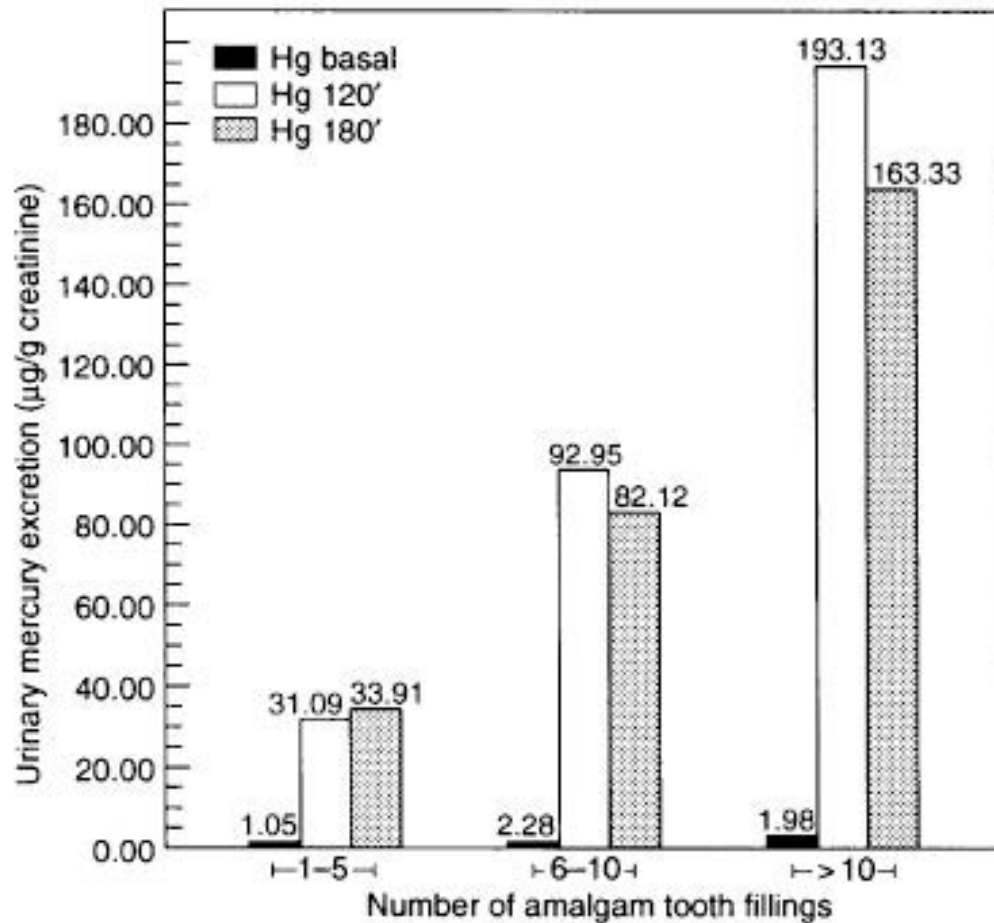
Gerhard, et al Human Reprod 1998; 4(3): 301-309.

Table VII. Progesterone concentrations, maximum urinary cadmium and mercury excretion and metal score in women with different causes of repeated miscarriages

Parameter	Unit	hormonal Group 1 ^a	anti-phospholipid Group 2 ^b	non-hormonal Group 3 ^c	<i>P</i>
Progesterone ^d	ng/ml	4 (2.5–5.5)	12 (9–15)	11 (7.5–15.5)	0.05
Cd max ^e	µg/g creatinine	0.7 (0.46–1.39)	0.3 (0.22–0.56)	0.6 (0.4–1.3)	0.06
Hg max ^f	µg/g creatinine	113 (62–207)	62 (37–152)	57 (34–113)	0.05
Metal score		8.5 (6.5–10)	6.5 (4–8.5)	8 (5–9)	0.16

Impact of heavy metals and immunological factors in woman with repeated miscarriages

Gerhard, et al Human Reprod 1998; 4(3): 301-309.



The rise and fall of Pink Disease

Ann Dally, *Society for Soc Hist Med*, 1997

“Meanwhile, the cause having been identified and accepted, pink disease disappeared, but its consequences emerged much later, in an unexpected quarter, as a cause of male infertility.”

Thimerosal in Vaccines

History & Current Status

Prior to its introduction in the 1930's, data were available in several animal species and humans providing evidence for its safety and effectiveness as a preservative ([Powell and Jamieson 1931](#)). Since then, thimerosal has been the subject of several studies (see [Bibliography](#)) and has [a long record of safe and effective](#) use preventing bacterial and fungal contamination of vaccines, with no ill effects established other than minor local reactions at the site of injection.

Studies on Safety and Effectiveness of Thimerosal:

1. Batts AH, Narriott C, Martin GP, et al. The effect of some preservatives used in **nasal preparations on mucociliary clearance**. *Journal of Pharmacy and Pharmacology* 1989; 41:156-159.
2. Batty I, Harris E, Gasson A. Preservatives and biological reagents. *Developments in Biological Standardization* 1974;24:131-142.
3. Beyer-Boon ME, Arntz PW, Kirk RS. A comparison of thimerosal and 50% alcohol as **preservatives in urinary cytology**. *Journal of Clinical Pathology* 1979;32:168-170.
4. Gasset AR, Itoi M, Ishii Y, Ramer RM. **Teratogenicities of ophthalmic drugs**. II. Teratogenicities and tissue accumulation of thimerosal. *Archives of Ophthalmology* 1975;93:52-55.
5. Goldman KN, Centifanta Y, Kaufman HF, et al. Prevention of surface bacterial contamination of **donor corneas**. *Archives of Ophthalmology* 1978;96:2277-2280.
6. Keeven J, Wrobel S, Portoles M, et al. Evaluating the preservative effectiveness of RGP **lens care solutions**. *Contact Lens Association of Ophthalmologists Journal* 1995;21:238-241.
7. Naito R, Itoh T, Hasegawa E, et al. Bronopol as a substitute for thimerosal. *Developments in Biological Standardization* 1974;24:39-48.
8. Wozniak-Parnowska W, Krowczynski L. New approach to **preserving eye drops**. *Pharmacy International* 1981;2(4):91-94.

Studies on Safety and Effectiveness of Thimerosal:

1. Batts AH, Narriott C, Martin GP, et al. The effect of some preservatives used in **nasal preparations on mucociliary clearance**. *Journal of Pharmacy and Pharmacology* 1989; 41:156-159.
4. Gasset AR, Itoi M, Ishii Y, Ramer RM. Teratogenicities of ophthalmic drugs. II. Teratogenicites and tissue accumulation of thimerosal. *Archives of Ophthalmology* 1975;93:52-55.

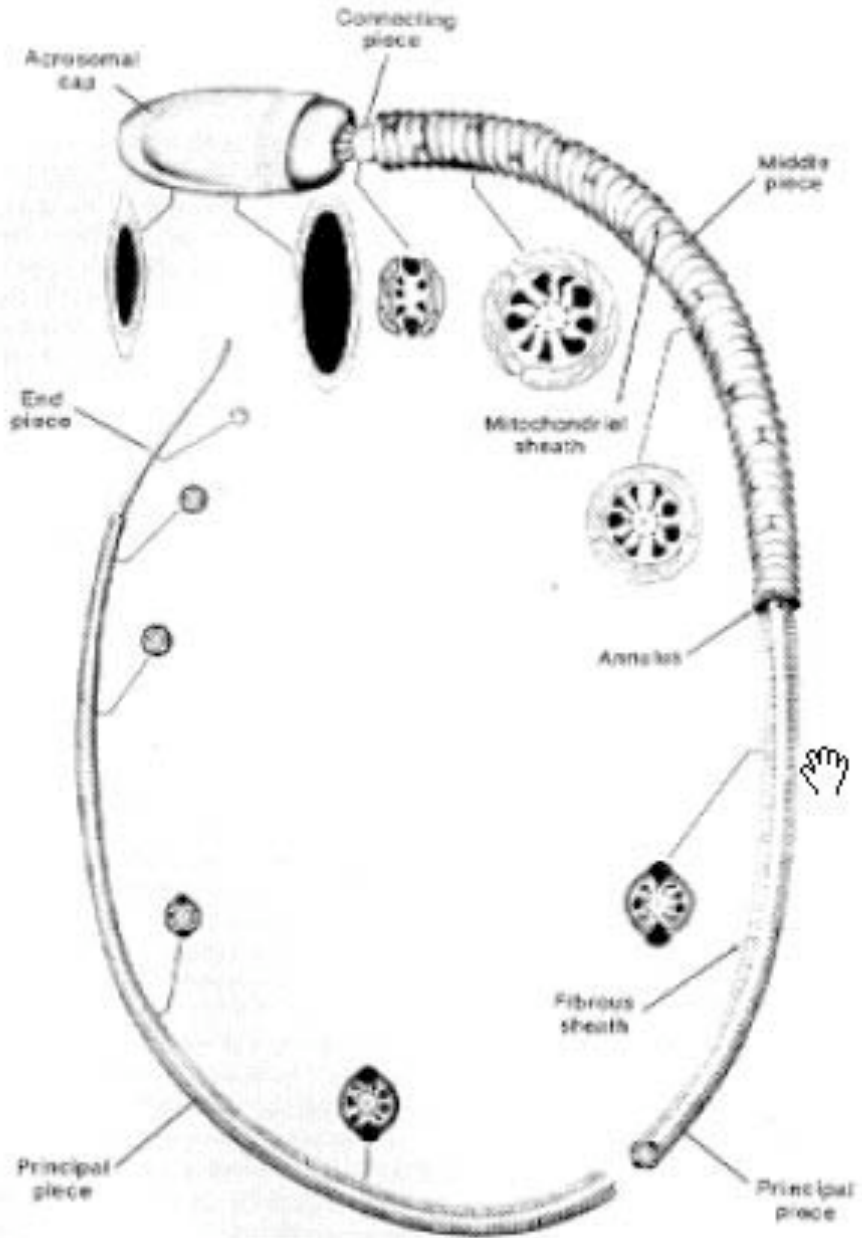
The effect of some preservatives used in nasal preparations on the mucus and ciliary components of mucociliary clearance.

Batts AH, Marriott C, Martin GP, Wood CF, Bond SW.

Department of Pharmacy, Brighton Polytechnic, UK.

Efficient mucociliary clearance is a function of the physical properties of the mucus coupled to appropriately functioning cilia and may be altered by substances affecting ciliary beat frequency (CBF). Therefore the effect of preservatives on CBF was investigated using a photoelectronic technique. Methyl-p-hydroxybenzoate, propyl-p-hydroxybenzoate, chlorbutol and chlorocresol inhibited beat frequency, an effect which was reversible upon rinsing out the first three compounds but not chlorocresol. The effect of chlorhexidine and phenylmercuric borate on CBF was complicated by an interaction with chloride ions in the media used. EDTA did not appear to be ciliotoxic, while the effect of benzalkonium chloride was variable. Thiomersal halted ciliary beating after 40-100 min. Mucociliary clearance may also be affected by an alteration of the physical properties of the mucus layer, therefore the effect of each compound on the rheological properties of purified pig gastric mucus glycoprotein was investigated. None of the preservatives significantly altered the viscoelastic properties of the gel, measured using dynamic techniques.

Cilia and sperm



Relationship between semen parameters and mercury concentrations in blood and in seminal fluid from subfertile males in Hong Kong
 Choy, et al, *Fertil Steril*, 2002 Aug;78(2):426-8.

TABLE 1

Correlation between seminal fluid mercury concentrations and sperm morphology and motion characteristics.

Variable	Correlation coefficient ^a	P value
Abnormal morphology	0.26	.02
Irregular head	0.49	<.001
Microcephaly	0.24	.04
Abnormal midpiece	0.30	.01
Abnormal acrosome	0.03	NS
Sperm motion characteristics		
VCL ^b	-0.008	NS
VSL ^c	-0.21	.03
LIN ^d	-0.21	.03
ALH ^e	-0.20	.04
VAP ^f	0.21	.03

^aNS = Not significant

“semen mercury concentrations are associated with abnormalities in sperm morphology and sperm motion in vivo”

Gasset AR, Itoi M, Ishii Y, Ramer RM. Teratogenicities of ophthalmic drugs. II.

Teratogenicities and tissue accumulation of thimerosal. *Arch Ophthalmol* 93: 52-55., 1975

Rats (n=10/group) were injected with 1.0 ml of 0.2% or 2.0% thimerosal i.p. from GD 6-18.

Rabbits (n=7) were given 2 drops of 2% thimerosal in both eyes six times a day on gestation day 6 and four times a day on gestation days 7-18.

An increase in intrauterine death was reported, with the incidence in rats being 1%, 14% and 36% in controls, 0.2% and 2.0% thimerosal groups, respectively. The incidence of in intrauterine death in rabbits was 15% in controls and 39% in thimerosal-treated animals.

Teratogenicities of ophthalmic drugs. II.

Teratogenicities and tissue accumulation of thimerosal.

Gasset AR, Itoi M, Ishii Y, Ramer RM (1975). Arch Ophthalmol 93: 52-55.

author's conclusion:
“no teratogenic effect”

rabbits and topical thimerosal:
increase risk of fetal death 14-36 x

rats and intraperitoneal thimerosal:
increase risk of fetal death 2.6 x

Difficult Questions

- 4) Is it cost effective to fight a war on population with vaccinations?

Syringes cheaper than guns

- Iraq war \$3.9 Billion per month (July 03)
- Iraq and Afghanistan: \$300 Billion (Jan 05)
- entire GAVI funding: \$ 1-2 Billion

Difficult Questions

- 5) If the vaccine “agenda” is anti-population, would future vaccines be developed targeting women in their reproductive years?

[News Front Page](#)

[World](#)

[UK](#)

[England](#)

[N Ireland](#)

[Scotland](#)

[Wales](#)

[Politics](#)

[Business](#)

[Entertainment](#)

[Science/Nature](#)

[Technology](#)

[Health](#)

[Medical notes](#)

[Education](#)

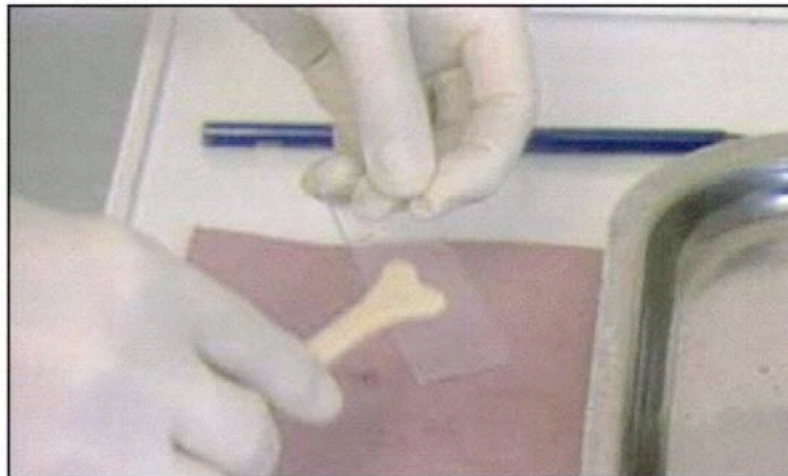
[Talking Point](#)

[Country Profiles](#)

[In Depth](#)

[Programmes](#)

Cervical cancer vaccine success



The vaccine could mean an end for smear tests

A vaccine to protect women from one of the biggest cancer killers could be available within five years.

Is this a possibility?

- vaccines used first in USA to legitimize International agenda
- aimed at pregnancy, neonate, young children
- mandated to establish “Mindset”
- Pharma infiltrated every link in the chain of healthcare delivery
- thimerosal part of “plan”
- IOM CRITICAL
- exported program to “poor”, overpopulated countries

Immunization Safety Review Committee

Meetings



MMR Vaccine and Autism: March 8, 2001

Thimerosal-Containing Vaccines and Neurodevelopmental Disorders: July 16, 2001

Multiple Immunization and Immune Dysfunction: November 12, 2001

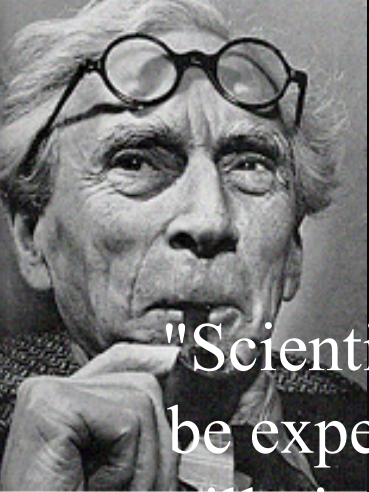
Hepatitis B Vaccine and Demyelinating Neurological Disorders: March 11, 2002

Simian Virus-40 Contamination of Polio Vaccine and Cancer: July 11, 2002

Vaccinations and Sudden Unexpected Death in Infancy: October 28, 2002

Influenza Vaccine and Neurological Complications: March 13, 2003

Immunization Safety Review: Vaccines and Autism: Feb 9, 2004 (report 5-17)



Bertrand Russell, 1953

"Scientific societies are as yet in their infancy. . . . It is to be expected that advances in physiology and psychology will give governments much more control over individual mentality than they now have even in totalitarian countries. Fichte laid it down that education should aim at destroying free will, so that, after pupils have left school, they shall be incapable, throughout the rest of their lives, of thinking or acting otherwise than as their schoolmasters would have wished. . . . **Diet, injections,** and injunctions will combine, from a very early age, to produce the sort of character and the sort of beliefs that the authorities consider desirable, and any serious criticism of the powers that be will become psychologically impossible. . . ."

It just can't be



The greater the lie, the more readily
it will be believed.

Adolf Hitler in *Mein Kampf*

Genocide (aka population control)

- *geno•cide*. the deliberate and systematic destruction of a racial, political or cultural group
- *cul•ture*. a particular stage of advancement of civilization

THE INHERENT RACISM OF POPULATION CONTROL

By

Paul Jalsevac

Published by *LifeSiteNews.com* – A division of *Interim Publishing*



Copyright *LifeSiteNews.com*, 2004

*Permission given for photocopying or laser or inkjet printing
for personal, classroom or advocacy use*