

I Say "No" to Flu Vaccines

In the US, national guidelines for receiving an annual flu vaccine extend to almost everyone over the age of six months old. Nevertheless, I recommend that my patients of all ages not take these incessantly promoted immunizations, primarily because of their lack of effectiveness.

In addition, there are some risks from influenza vaccines, including injection site pain, allergic reactions, fever, fatigue, headache, and narcolepsy (excessive sleepiness).

I understand that you have been led to believe flu shots are a modern medical advancement. Your suspicions should be raised because direct advertising to consumers is intrusive, obnoxious, and nonstop. A phone call to your local pharmacist begins with a message to get "the flu shot," which happens to be conveniently provided at the pharmacy without an appointment or a physician's prescription. Supermarkets offer a sizable discount on groceries if you will allow yourself to be injected (or infected) with three or four viral proteins derived from past outbreaks, and sometimes a touch of mercury. Page 2

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Influenza vaccines are composed of either killed or weakened (attenuated) viruses. Multidose vials of killed vaccines contain the well-established toxic metal, mercury (thimerosal), as a preservative. Reported harms of thimerosal on human infants or children include death, malformations, autoimmune reactions, developmental delays, and autism. Single-dose influenza vaccines are mercury-free. Live, attenuated virus vaccines are also a mercury-free alternative offered only to healthy people between ages 2 and 49. The administration of this live virus causes infection, therefore, it is not recommended for those people considered more vulnerable to complications

from this infection: infants, pregnant women, elderly, and immunecompromised patients.

Universal Lack of Real-life Effectiveness

Vaccines are used to provoke an immune response to potentially lifethreatening organisms, a bacteria or virus. From this intended exposure the body acquires immunity in a relatively harmless way. Once stimulated by proteins manufactured by pharmaceutical companies, the body remembers the villains, and if re-exposed to similar agents, like real measles viruses, the immune system quickly launches a counterattack, thereby preventing a fullblown illness. However, all vaccines are not the same. To the point of success in preventing illness, flu vaccines do not live up to the hype.

Summary Reports Show the Scarcity of Benefits:

2010 Cochrane Review found no benefits from vaccinating the elderly.

2012 Cochrane Review showed little benefit for children: "No benefits for those two years or younger. Twenty-eight children over the age of six needed to be vaccinated to prevent one case of influenza.

2012 Lancet Infectious Disease Review showed little benefit in adults: "... evidence for consistent high-level protection was elusive for the present generation of vaccines, especially in individuals at risk of medical complications or those aged 65 years or older."

2013 Cochrane Review found no benefits for healthcare workers or for preventing influenza in elderly residents in long-term care facilities.

2014 European Review found that the 2012-2013 influenza vaccine had low to moderate effectiveness, and recommended that seasonal influenza vaccines be improved to achieve acceptable protection levels.

2014 Cochrane Review found the preventive effect for healthy adults was small: "...at least 40 people would need vaccination to avoid one influenza-like illness...no effect on working days lost or hospitalization seen...benefits for pregnant women were uncertain or at least very limited." The ineffectiveness of commercially produced influenza vaccines is said to be primarily due to their formula consisting of materials derived from three or four viruses selected from previous outbreaks occurring over the past several years. This year's virus is too commonly an entirely new strain, not covered by the immune response initiated by the well-meant flu shot.

A close look at the scientific evidence generated from past campaigns to prevent widespread influenza reveals disappointing results, especially after factoring in the efforts made by the pharmaceutical industries to manipulate the research for their own financial gains.

Aside from Flu, I Do Believe in Vaccinations

In my lifetime I have seen undeniable benefits from vaccines: smallpox has been eradicated, and poliomyelitis occurs so rarely in foreign countries that the few cases make worldwide headlines. Growing up, I thought all infectious diseases would soon be conquered. Mary and I, and all of our children and grandchildren are fully immunized against once common threats, such as tetanus, diphtheria, polio, and viral hepatitis. Hopefully, I am doing more good than harm for my family. As a physician, I have seen patients with all of these diseases.

I am not persuaded by arguments from the anti-vaccine movements. However, my enthusiasm has been tempered over the years. I am very concerned about the additives, especially the aluminum,* found in many of these preparations (Commonly prescribed influenza vaccines do not contain aluminum.) Safer and more effective vaccines are definitely needed.

Immunizations, along with improved sanitation, adequate food (less starvation), and possibly antibiotics have been important advances that have reduced human suffering. To date, the flu vaccine cannot be added to this short list of medical achievements.

*Aluminum is used as an adjuvant (a helper) to stimulate the immune system's response to the killed bacteria and viruses used in many vaccines injected under the skin. The customer is told, without equivocation, that aluminum is proven harmless. This is not true. This toxic metal can cause immediate damage to the nervous system (speech abnormalities, tremors, memory loss, and seizures), and prolonged exposure may cause dementia as serious as Alzheimer's disease.

Featured Recipes

MILLET HAMBURGER

By David Smith of South Lyon, MI

Dave says this makes a great hamburger substitute. It makes a large amount so you can freeze the leftovers and use them later.

Preparation Time: 8 minutes Cooking Time: 2 hours, 45 minutes Servings: variable, makes about 10 cups

3 cups millet
1 cup lentils
9 cups water
4 tablespoons basil
4 tablespoons poultry seasoning
4 tablespoons sage
1 onion, chopped

Place all ingredients in a large pot and bring to a boil, then reduce to simmer, and cook covered for about 40 minutes. Place cooked contents onto large parchment paper lined baking sheet and spread evenly. Bake in oven at 250 for about 2 hours.

Use the baked product as a hamburger substitute in chili, spaghetti sauce, or other hearty casseroles.

ZESTY PESTO SAUCE

Most pesto recipes are filled with olive oil and nuts, but this recipe from my daughter-in-law, Mika McDougall, MD, leaves out all of the oil any only uses a few walnuts. This is delicious and so easy to make, and is an excellent topping for pasta, pizza, salad, or whatever you choose. It is a richer food because of the walnuts, but is used as a topping so the amount of fat per serving is acceptable for most people.

Preparation Time: 10 minutes

Cooking Time: none Servings: 6-8

box or bag of pre-washed baby arugula (usually 5-7 oz)
 bunch of fresh basil (10-15 leaves)
 cloves garlic
 cup walnuts
 lemon, juiced
 cup water
 salt and pepper to taste

Place all ingredients in a food processor and blend until smooth.