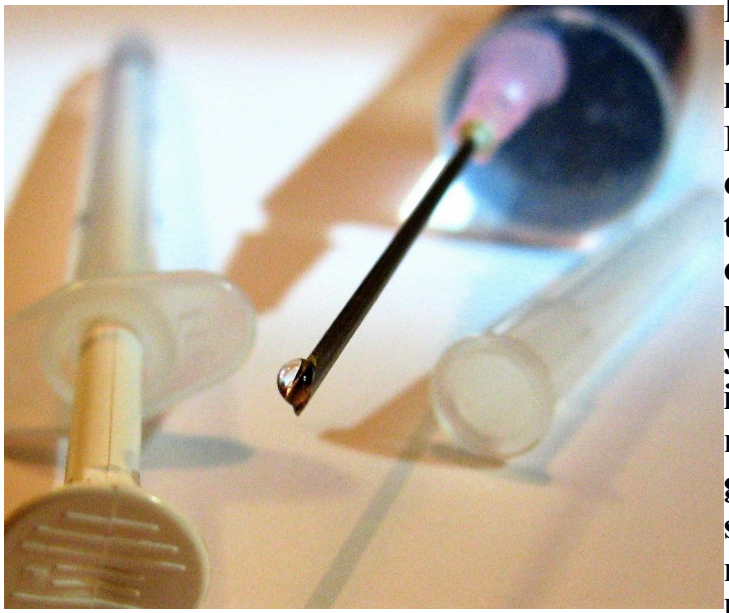
How to safely vaccinate children



It is very clear what people want, but somehow this very clarity can lead to a great deal of confusion. People want themselves and their children to be healthy, diseases try to continue existing, medical companies want to maximize their profits, conspiracy theorists want you to be anti-establishment (or is it all just another level of manipulation towards some hidden goal) and politicians want to make sure they cannot be blamed and maintain power. The problem is how to recognize who is talking to you. They all use facts, statistics, research, scare tactics and unfounded allegations in their propagandistic approach to getting what they want. To make matters even more confusing it is not always clear who the message is coming from so what kind of propaganda it is and to what end. Objective science is no more than a means to end to these propagandists to say nothing of statistics and skewed comparisons.

To make sense of information becomes almost impossible if facts are not presented to promote understanding, but rather as weapons. As a parent I am fortunate to have studied molecular biology at Leiden University, so I could piece together a better vaccination strategy for my own kids which I will gladly share with you.

-Before vaccination epidemics caused vastly more deaths than can be blamed on vaccination. Population death rates for individual diseases were sometimes close to 0,5% (1 in 200) and given the amount of diseases the combined risk becomes significant. It is clear the risk of death is smaller now. This change is, however, not only due to vaccination, but also due to improved hygiene, food safety standards, medicine and reduced prevalence of serious diseases in our environments. Due to the great amount of factors involved in reducing disease related death we can not be sure how strong the effect of only vaccination is on the population. We do know that the protection vaccination offers is significant reducing the death rate of those exposed by between 50 and 90%. So ***without the side effects vaccination would be a boon to people wishing themselves and their children to remain healthy.***

Just an example of how we are manipulated:

'The amount of aluminium in a vaccine is similar to that in a day's dose of baby formula'. True. But what is conveniently left out is that only 0,3% of ingested aluminium enters the bloodstream and that baby formula contains up to 100 times more aluminium than breast milk. So the previous message is identical to this one: *'The amount of aluminium entering the body through a vaccine is up to 30 thousand times higher than a daily dose of breast milk.'* Which message sounds more safe to you? The same fact can be used both to promote or dissuade depending on how it is told or what is left out.

-We know that ***mercury as well as lead is always harmful and neurotoxic.*** There is no safe minimum dosage or tolerance for mercury or lead despite legal limits suggesting otherwise. Also it is almost ***impossible for the human body to remove mercury once absorbed because it tends to accumulate***. Fortunately many modern vaccines now minimize mercury content.

-We know that doses of more than 100 microgram/litre of aluminium in the body are strongly correlated to neural problems. So aluminium concentrations above this should be considered toxic. It is unknown if there is a safe tolerance level for aluminium or if it should be minimized just like mercury and lead. ***Currently vaccine dosage is unlike other medicine NOT related to body weight. Adult vaccines are used for the vaccination of children.*** Experimentation on children is unethical and therefore there is no direct experimental data on vaccine safety relating to dosage. There is no reason to assume however that babies are more tolerant to overdosing, rather the opposite is likely, so it is safer to consider dosages toxic to adults toxic to children as well.

-We know that adults are able to eliminate about 60% of the aluminium in their bloodstream. The rest becomes deposited in bones, internal organs and the brain. Infants however are able to eliminate only 25% of aluminium so 75% of the aluminium becomes lodged in their bodies causing the toxic effect of the aluminium on children to be almost twice of that in an adult. So ***the impact of aluminium is 1.875 times higher on infants than on adults.*** The toxic effect is likely to be far greater still because of the sensitivity of the still developing brain to chemical influences.

-We have manufacturer's data on how much aluminium they claim to put into their vaccines. Assuming these are true we can calculate below which body weight we know them to be toxic for an adult brain.

Type:	**Aluminium:** (microgram)	**Adult toxic limit:**	**Child toxic limit:** (x1.875 to account for reduced elimination)
Prevnar 13	125	1,25 kg	2.3 kg
Pentavax	330	3,3 kg	6,2 kg
Infantrix	370	3,7 kg	6,9 kg
Synflorix	500	5 kg	9,4 kg

-While we have no precise data on how tolerant a child's brain is compared to that of an adult we do have animal studies which show the general sensitivity to toxins to be about 2 to 3 times higher in young compared to adults. So ***if we wish to minimize the risk of mental problems due to aluminium toxicity we should multiply the toxic limit by 3 to account for the differences in metabolism and maturation.*** This would result in the following weight limits for vaccination:

Type:	**Aluminium:** (microgram)	**Adult limit:**	**Child possibly safe limit** (x3,75/x5,625, elimination &	**Child likely safe limit:** immaturity modifiers)
Prevnar 13	125	1,25 kg	6 kg	7 kg
Pentavax	330	3,3 kg	12,4 kg	18,6 kg
Infantrix	370	3,7 kg	13,9 kg	20,8 kg
Synflorix	500	5 kg	18,75 kg	28,1 kg

-I was unable to find exact data on how long aluminium which enters the organs remains in the body. Just that it becomes barely soluble so it will have a long half-life and that it accumulates with

age in both the brain and the lungs. Because of this I unfortunately cannot ascertain what would be a safe vaccination interval, but if we wish to prevent a toxic build up the interval will probably be quite long or chelation with deferoxamine, if the child is old enough, in between vaccinations may be needed despite the drawbacks of losing other minerals as well.

Conclusions:

While disease **may** cause more harm than vaccination if contracted we know that vaccination **will** cause harm when performed below these weight limits or by allowing aluminium to accumulate to toxic levels. While I am in favour of vaccination protection I cannot safely vaccinate my children at an early age or with short intervals because of the safe weight limits. I hope that the amount of aluminium in new vaccines will become reduced to make them suitable not only for adults, but for children as well. In France a petition was held to make vaccines aluminium free, which research suggests would still work quite well. Children are most at risk from permanent injury or death due to disease. Unfortunately I have to conclude that most modern vaccination programs are harmful to children due to their being based on age instead of weight and they do not take aluminium build up into account. It is a sad state of affairs that there is a lack of vaccines adapted to children's toxic tolerances.

It would seem the government is not sufficiently protecting the public against developmental toxins and may itself have fallen victim to it's own or the medical industry's propaganda rather than following unbiased science and instituting the manufacture of suitable vaccines for early vaccination of children or detoxification in between vaccinations. It is also possible the government has decided that the reduced mental capacity of their subjects is a fair trade off for the protection vaccines bestow, but it is hardly an ideal situation.

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