

Flu Vaccine-Related Miscarriages May Outnumber Swine Flu Deaths

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Lucy was having a normal, healthy pregnancy without any complications until she received the H1N1 vaccination. On a pregnancy support website, she commented, "I should be 11 weeks pregnant today. I had an appointment with my OB/GYN and was told (from info of ultrasound) that my baby stopped growing on the exact day I had my H1N1 vaccine."

A similar story is told by Mandy, who blogged, "I was five weeks pregnant when my doctor suggested I get the H1N1 vaccine. I received the shot on a Thursday and was very sore and achy on Friday. I miscarried my baby on Sunday, just three days after receiving the shot."

Another woman going under the name Regrets stated, "I got both vaccines on Thursday. I was nine weeks pregnant. I miscarried on Sunday. I was told by several doctors to get these vaccines. Now I wish I followed my gut feeling and not get them at all."

Throughout the internet, pregnant women are sharing their personal stories of miscarriages and still births just days after receiving the H1N1 flu vaccine. Often these women state they had strong reservations against being vaccinated. However, after succumbing to pressures from their physicians, they submitted to the vaccine, experienced complications within a period of 3 days, and then miscarried or discovered later from an ultrasound or sonogram that their baby had died.

According to the CDC's Vaccine Adverse Effect Reporting System (VAERS), an interactive site where doctors, hospitals and individuals are encouraged to report serious side effects following any vaccination, there are approximately 110 reports of miscarriages and still births following inoculation with this year's H1N1 and seasonal flu vaccines. Yet VAERS figures are known to be notoriously inaccurate. The CDC itself claims that its database represents only about 10 percent of vaccine adverse effects. This is a very conservative figure. Other studies, however, suggest the database may be as low as 2-3 percent of adverse vaccine incidences. Consequently the number of pregnant women who may have suffered miscarriages from receipt of the influenza vaccines can conservatively be placed at 1,100 and perhaps as high as 5,500, which is greater than the number of deaths claimed to be due to swine flu infection. The most recent number of pediatric deaths from H1N1 infection is only 321. So far the vaccine is already proving to be more deadly than infection with the flu virus.

Eileen Dannemann, Director of the National Coalition of Organized Women (NCOW), has been collecting data and counseling women who have experienced miscarriages and still births following their receipt of the flu vaccines. She has so far received over 200 separate reports, almost twice the number reported in the CDC's VAERS database. During a conversation with Dannemann, she explained that her numbers are still a small percent of the actual incidences that have occurred. Furthermore, the mortality figures being touted by the CDC are erroneous. For example, the CDC claims 28 pregnant women have died from H1N1 infection in Iowa. However, NCOW's investigation with Iowa's Public Health service revealed that no child nor pregnant woman is known to have died from H1N1 infection.

Although miscarriages shortly following vaccination with the H1N1 vaccine have steadily mounted since last October, the pro-vaccine community claims it is strictly coincidental. For example, on a blog in *Science News Magazine* last November, the author wrote, "These miscarriages would have normally occurred even if the moms-to-be had foregone vaccinations. And that's because the average background miscarriage rate for any given day (among women far enough along to recognize they are pregnant) is about 397." The daily 397 miscarriage rate was part of an international study issued by *The Lancet* on October 30 prior to publication. This is now the official statement, case closed. These are the kinds of conclusions that are being called science within the pro-vaccine community and is an excellent example of the medical denialism that permeates our major health agencies.

The flu vaccine falls under the FDA's Category C listing of drugs. The FDA defines this category: "animal reproduction studies have shown an adverse effect on the fetus and there are no adequate and well-controlled studies in humans, but potential benefits may warrant use of the drug in pregnant women despite potential risks." Yet in some cases with the H1N1 vaccine, such as Novartis' Fluzone, even animal reproduction studies were not performed.

Although flu vaccination is not recommended for babies under the age of 6 months, this does not apply to a fetus still in the womb. Studies have disapproved the earlier belief that the placenta acts as a protective barrier to an unborn child. In the past it was thought that chemical toxins in the mother did not pass to the fetus. However, important discoveries performed by the Environmental Working Group and other institutions have shown this is far from the case and unborn children are in fact bombarded with heavy metals and other chemical toxins. There is no conclusive scientific proof that the many vaccine additives do not interfere with fetal development and can have a profound impact on the life of a new born.

Dr. Joseph Mercola references a paper published in the Summer 2006 issue of the Journal of American Physicians and Surgeons, "Influenza Vaccination During Pregnancy: A Critical Assessment of the Recommendations of the Advisory Committee on Immunization Practices (ACIP)." The article refutes the CDC's recommendations that pregnant women should receive the flu vaccine because influenza infection is rarely a complication in pregnant women and there are no safety studies to conclude that flu vaccines will not result in serious reactions to both the mom and her fetus. The paper's conclusion is that "The ACIP policy recommendations of routinely administering influenza vaccine during pregnancy is ill-advised and unsupported by current scientific literature and it should be withdrawn."

According to Dr. Mercola, the entire CDC recommendation is based upon only two scientific papers, and each has been criticized in the medical literature for being seriously flawed. In fact both studies reveal there was no serological advantage between pregnant women receiving a flu vaccination compared to those who didn't. One of the two studies even showed that hospitalization for influenza-like illnesses were increased among vaccinated pregnant women. Only because the papers didn't recommend against vaccinating pregnant women, the CDC and ACIP found reason to twist their importance to mandate their stance on raising pregnant women as a high priority group for flu vaccination.

But what is more alarming is the remarkable disconnection between the CDC's and the FDA's positions regarding influenza vaccination for pregnant women. According to the CDC's ACIP, "vaccination of [all] pregnant women is recommended." However, the FDA's Assistant Commissioner for Policy, Dr. David Horowitz, states, "these are [CDC] recommendations and are not FDA-approved indications for use of vaccines during pregnancy." What is going on here? The major regulatory health agency in the US, the FDA, disapproves of vaccines during pregnancy, yet the CDC, as well as Secretary Sebelius at the HHS, recommend it for all pregnant women?

We must ask ourselves: Why has the American media been so silent on reporting flu vaccinations' adverse effects. Even when the American media honors its responsibility to investigate two or more sides of an issue, it almost universally foregoes objective truth and becomes subservient to the official politically-correct position. As we have seen repeatedly since the first outbreak of swine flu in a relatively small community in Mexico to its metastasis into a full-blown global pandemic, the media has kow-towed federal health and World Health Organization opinions regardless of how scientifically flawed or untruthful they are. Therefore it is not surprising that women, adults, children and unborn babies who have suffered serious adverse effects to the 2009 influenza vaccines are ignored as coincidental. There has been no statement from federal officials at the CDC or HHS that possible deaths, including miscarriages and still births, resulting from flu vaccines should be investigated for the actual cause of death nor to determine whether or not the vaccines played a role.

Rather, instead of performing independent analysis or quality research, the federal health organizations categorically declare any association is untrue. Journalists are then told by official sources that vaccine-related deaths are only anecdotal.

This same kind of scientific cover-up was performed by the CDC and the Department of Defense during the 1990s. At that time, several hundred thousand Gulf War GI's claims of serious neurological and inflammatory disabilities resulting from the experimental squalene-laced anthrax vaccine were ridiculed and left to fend for themselves. Rather than immediately commence with objective studies to confirm whether or not Gulf War Syndrome was caused or partially caused from vaccination, veterans were simply told their illnesses were anecdotal with no scientific basis.

Now, again we are witnessing hundreds, perhaps thousands of women claiming that their completely normal and properly developing fetuses were suddenly killed and miscarried shortly after receiving the H1N1 and/or seasonal flu vaccines. Yet this remains a boring story for the major media and not worth reporting. Can we sit any longer and allow the most innocent among us to be used as income streams to multinational drug makers, the same companies earning billions in profits from the H1N1 pandemic, with no accountability, no apologies and no assistance to those who have been victimized? Can we any longer sit by and allow the most innocent among us to be used as income streams with no accountability, no apologies, and no assistance to those who have been victimized.