

Thimerosal – A Serious Reason to Avoid the Flu Vaccine

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All across America, millions of people are being vaccinated against the flu. They are being vaccinated under the good faith that what they are being told repeatedly about the efficacy and safety of the annual flu shot for everyone over the age of six months is trustworthy and true. As we have reported previously, these assertions are vague and uncertain. A thorough review of the scientific literature should convince us that flu vaccines are not harmless. It is also uncertain whether the flu shot confers any significant protective benefits to certain age groups, such as infants, small children and the elderly. Neither is there unequivocal assurance that it is safe for people with weak immune systems or physically compromised by different illnesses.

The clinical trials most cited to convince us that the flu vaccine is effective, are seriously flawed. And in most cases, these trial designs and protocols are so defective and prejudiced that the only rational conclusion to be drawn is that they are conducted more for advertising vaccine propaganda than for concerns of public health and safety.

In the US and Canada, government health authorities advise every person over the age of 6 months be vaccinated against influenza. As reported recently by CNN, not a single European country advises its citizens to be immunized against the flu. According to the WHO organization, this is because “global health experts say the data aren’t there yet to support this kind of blanket vaccination policy.”[1] Furthermore, if European health ministries were to mandate flu vaccinations, as is being done in many American clinics and hospitals, there would be an enormous public reaction. Europeans value their civil rights, their freedom to decide what medicines or toxins to put in their bodies, and prize the popular tenet that government has no authority to legislate what drugs—and vaccines are

classified as drugs—that a person should put in his or her body. If other developed countries are unable to guarantee their citizens about flu vaccine efficacy, then why do American and Canadian health officials believe they can make such promises?

If physicians, pediatricians, nurses and pharmacists are unable to guarantee that the flu vaccine protects one from infection, then is the vaccine safe?

Americans are increasingly turning their backs away from the flu vaccine. During this current flu season, less than 50% of Americans are getting vaccinated. This is worrying to government health officials who have stockpiles of vaccines to dispense. This is why during every flu season there are great efforts made by federal agencies to distort statistics in order to trump up the seriousness of any given flu season. Besides the American public's suspicions about the flu vaccine's efficacy, a second fear contributing to public adversity to the flu shot is the persistent inclusion of mercury. The question of safety revolves around several key vaccine ingredients, and in flu vaccines this includes ethylmercury better known as thimerosal.

In order to assess the verity of vaccine safety, we must consult the scientific experts and the literature addressing thimerosal's toxicokinetics and toxicodynamics. Most important, greater weight should be given to studies designed and performed by individuals and institutions without invested interests and funding from private pharmaceutical firms. In fact, because our own CDC's vaccine advisory groups are scandalously enmeshed with corporate interests, studies marked with CDC's support, funding and approval must be read objectively and with a healthy dose of suspicion.

It is now well documented that peer-reviewed medical literature coming forth from the private vaccine industry, with or without collaboration from federal health agencies (in particular, the CDC), characteristically lack scientific rigor. The studies customarily include biases and confounders favoring vaccine efficacy and

safety and data is notoriously cherry picked. In addition, the pharmaceutical industry dominates most sources for medical literature's financing. When we situate the private industry's coup d'état to control medical literature in the larger context of the revolving door between government agencies and private industry, we can better understand the huge financial incentives for government officials to jump on board Big Pharma's gravy train. In effect, the drug industry has purchased mainstream media's dissemination of information on health issues. The level of pro-drug/vaccine domination of medicine and health policies is nearing completion. Consequently, it is becoming increasingly difficult for the American public to discern who to believe about the truth of vaccine safety.

What does the actual literature show? Here is a sample of the independent and scholarly body of peer-reviewed studies that should warn us of the dangers of thimerosal-containing vaccines, such as the flu shot.

- A survey of all published medical research from two of the worlds largest medical databases found that neurotoxic activity of low dose thimerosal in isolated human and animal brain cells in all studies is consistent with the neurotoxic activity of mercury in general.[2]
- A study of boys given the triple series of Hepatitis B vaccine when it contained thimerosal found that they were more susceptible to developmental disability than were unvaccinated boys.[3]
- In poorer communities, flu vaccines containing thimerosal are still distributed to mothers and small children. A study looking at embryonic exposure to thimerosal discovered that the mercury adversely affects early stage development of serotonergic neurons.[4]
- Primate studies found mercury from thimerosal-containing vaccines affected the brain and contributed to microgliosis and neuroinflammation. These are conditions documented in an autistic brain.[5]
- A biological study looking at the effects of thimerosal in childhood vaccines given to rhesus primates found pathological evidence in the brain's amygdala that contributed to abnormalities similar to autism.[6]
- Thimerosal disrupts the respiratory functions in the mitochondria of

- astrocytes, the most common brain cell. The mercury's deterioration of the mitochondria eventually leads to cell death.[7]
- Thimerosal-exposed mice were shown to retain higher levels of inorganic mercury in their kidneys that contributes to later renal failure.[8]

What is the conclusion from this? The American Academy of Pediatrics, once adamantly opposed to thimerosal in the late 1990s, is today one of the largest advocacy groups for keeping mercury in vaccines. Did the science behind thimerosal toxicology somehow change? No, rather to the contrary. If we follow the money trail of corporate interests to decrease costs and increase profit in sales, permitting thimerosal in vaccines and systematically whitewashing its serious health risks makes more sense.

Thimerosal is extremely toxic. Therefore flu vaccines containing thimerosal are toxic too. With thimerosal concentrations at approximately 25 ug/0.5 mL in some flu vaccines, this is more than enough to trigger neurological damage. However, no two individuals will manifest injury in the same manner. Over the decades, a variety of abnormalities have been documented and it is hazardous to believe thimerosal-containing vaccines present no neurological risk in normal development.

Over a decade ago, the CDC data confirmed the relationship between thimerosal in vaccines and autism relationship. This alarming discovery resulted in federal health officials convening the secret session at Simpsonwood to decide the course of action to avoid a public backlash. The solution was to revise, manipulate and distort the data in order to avoid a financial and public health confidence crisis and an escalating distrust in vaccines. If the CDC research had first been released to the major media and announced across America, there would have been tens of thousands of class action suits filed on behalf of vaccine injured children. Therefore, instead of acknowledging thimerosal's toxic threats, health officials demanded the data be manipulated in order to make it seem the reverse is true: thimerosal does not contribute to autism. Based on biological and

toxicological research, we know the CDC's claim is factually false. But we know from in vivo and in vitro biological studies that their proclamation is a lie.

Fortunately, there is a trend to phase thimerosal out of all vaccines licensed in the US. Today, only 5 of the 30 licensed childhood vaccines contain thimerosal. Two of those contain trace amounts (a DTaP and influenza vaccine). The remaining three are seasonal flu vaccines that contain higher concentrations of 25 ug/0.5 mL; these pose the greatest risk. Many European countries have ceased thimerosal-containing vaccines altogether. Today, US health officials need to follow the example of other countries who exhibit greater concern for the safety and health of their populations. However, until that time that the AAP, CDC and FDA put aside their conflict of interests on behalf of private drug makers and begin to pay attention to more reliable medical facts, they will continue to betray the public health and well being of the nation.

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