

Unvaccinated Victim of Medical Hysteria

In 48 states, parents have the right to exempt their children from all vaccinations. Whether or not anyone disagrees with their decision is immaterial to that right. In light of the social and political opposition to such a choice, parents who embark upon such a course of action often have to face much greater obstacles than just learning about the dangers of vaccines. Parents can be victimized by uninformed people in authority who think they can enforce their own illegal opinions upon the public.

Dr. Colleen Conger-Brass and Dr. Michael Brass recently found themselves in just such a situation. Their son, Sean, is a San Jose, California fifth-grader. On February 1, 2001, they got a call from the principal, with whom they had a good relationship. He informed them that they had a choice: Sean could be "regressed" into the fourth-grade class, or kept at home indefinitely. The reason: Sean's teacher was pregnant, and her OB/GYN informed her and the principal that being exposed to an unvaccinated child would place her fetus at risk of birth defects.

The OB/GYN was referring to the extremely rare possibility of birth defects, supposedly acquirable by women that contract rubella in the first four months of pregnancy. The pregnant teacher had been vaccinated for rubella, with the standard MMR shot.

Not wishing their child to spend an extra year in school, the parents opted to keep him at home. For the next week they agonized about the situation, trying to find some legal or scientific way out of the dilemma. It was shocking and baffling to them that their child could be suddenly deprived of his education just because they had exercised their right not to vaccinate.

During this time the parents contacted the Santa Clara County Health Department to see what its stance was. The department responded immediately with a letter that stated that in all of Santa Clara County there had only been two cases of rubella since 1992, with the exception of a small epidemic that occurred in a local jail. That's two cases in nine years in a county with over a million people. It also quoted California Health and Safety Code, Section 12035, providing for a child to be excluded from school if exposed to a communicable disease. In this case, the Santa Clara County Health Department stated: "There is no reason to believe an exposure to rubella has occurred."

Still, the school persisted in excluding the child. The principal was relying on the incorrect and wildly unscientific opinion of the OB/GYN, who had sent the school a letter apparently claiming that there was a high likelihood of birth defects from Sean being in the same classroom with the vaccinated pregnant teacher. The parents were at their wits' ends, and were given no time estimate about how long this exclusion was to continue.

Finally, on March 6, the principal called from school and informed the parents that Sean could now come back to school because the teacher had left, apparently at the advice of the OB/GYN. It seems likely that the school's lawyers had informed the principal of the school's tenuous legal position in excluding a legally exempted and healthy child from attending school.

Is everything fine, now, when this family has to suffer great emotional trauma and the child loses part of his education while those in authority figure out what the law is?

Let's take a closer look at the situation. The doctor's intent and actions call up two areas of concern: issues of law and issues of science.

Law

Article 3, Section 6025 of the California Health and Safety Code reads:

"Any pupil age 18 months or older who has received all the immunizations ... required for his/her age ... or who has documented a permanent medical exemption or a permanent beliefs exemption to immunization ... shall be admitted unconditionally as a pupil to a given public or private elementary or secondary school, (or) child care center."

This law is very clear. These parents signed the California exemption form, as provided by state and federal law. These laws are not subject to interpretation by unilateral, arbitrary, self-appointed guardians of the public health. The issues of exemption from vaccination have been decided in meticulous detail after years of study by the U.S. Dept. of Public Health and by the California Department of Health and Safety. This doctor sought to place himself above state and federal law by imagining that he had some new insight into the medicolegal arena of immunization, which heretofore had never occurred to any of the experts. Luckily, he arrived just in time to save us.

Such hubris is egregious in itself, but what is even more remarkable is that the school principal followed this course of action without question, and immediately removed the child from the classroom. This action was a second, independent decision for which the school may now bear responsibility and liability for violations of these parents' rights to education without discrimination.

Outside New York City, an attorney named James Filenbaum specializes in cases involving violations of parents' rights to exemption from immunization and in vaccine damages compensation cases. In a recent telephone conversation with Mr. Filenbaum, discussing the case of Sean Brass, Mr. Filenbaum explained some of the possible dangers a school may be looking at by relying on a questionable medical opinion. For a school to deprive a healthy child of his legal right to education because of a single speculative medical opinion, this action may violate civil rights that are specifically defined in federal law (Federal Title 28, Section 1983).

Science

The doctor's position may be summarized as follows: He had the notion that since the teacher was pregnant, she was susceptible to getting rubella from the unvaccinated child, and thus of transferring the disease to her unborn fetus, resulting in a likelihood of birth defects. And this is in spite of the fact that the teacher herself has been vaccinated with MMR.

Trying to follow the logic of such reasoning is a daunting task. Since the teacher was vaccinated, shouldn't that make her immune to the disease? If she is immune to the disease, what difference does it make even if this child gets the disease? Wasn't that the purpose of the vaccine - to protect her from the disease? So now the doctor wants the child to be vaccinated with that same vaccine to protect the child from the disease, right? But if vaccination didn't protect the teacher, why would it protect the student?

First of all, this doctor is creating undue hysteria by imagining multiple events, each of which has only a remote possibility of occurring alone. The chances of them occurring in sequence are geometrically infinitesimal. Those events are:

1. that the child will get rubella in the next few weeks, before the teacher becomes four months pregnant;
2. that the teacher would catch rubella from the child before he stayed home sick;
3. that the teacher would spread the disease to the fetus, and that would cause a birth defect.

Let's look at the first scenario. The student is not sick. In his county of a million people, there have been only two cases of rubella in the past nine years. The chances that Sean gets rubella in the next few weeks are very small. The incidence of rubella in the U.S. is now at its lowest rate in history.¹ The rare dangers of a mother getting rubella during pregnancy are only in the first 16 weeks, as far as a fetus is concerned.¹ The teacher is already at 12 weeks. So what are the chances of this healthy student being one of the two in a million cases of rubella in nine years during the next four weeks? You couldn't place the bet!

One can't help but wonder where Sean would acquire rubella, as all the other kids in the school were vaccinated. Doesn't the vaccination work?

The second scenario: the teacher catching rubella from the student. How could that happen? She's been vaccinated. And let's not forget the prime fact here: The child is healthy. It would take a lot more than medical paranoia to make him sick.

The third scenario: birth defects. What are the chances? According to the latest edition of the *Merck Manual*, the chances of birth defects are less than three percent as a result of the mother getting the vaccine during early pregnancy.¹ The chances of birth defects from the mother contracting rubella are so low they have not been calculated. No figure is even estimated in the *Merck Manual*. So, taking all three of these events together, they would all have to happen in sequence for this student to cause a birth defect in the teacher's fetus. Such likelihood is astronomically low. The chances are much greater that the woman would be killed in an auto accident during the same time. It would make more sense to take away her driver's license.

Let's introduce some rational discourse into this overblown situation. Virtually all medical sources agree that rubella has historically been a mild, self-limiting disease of childhood that requires no treatment. Most baby-boomers got the disease, had slight discomfort for a week, and now have full immunity for life.

In the early '60s, along came the MMR vaccine, a trivalent that was never tested as such. (Wakefield) Mendelsohn estimates an 85 percent immunity to this mild disease before the vaccine was introduced. The selling point (the big scare) - with no solid statistics of incidence - was the remote possibility of fetal damage. It became the slogan that won FDA approval and inclusion into the mandated schedule. Since then, we've never looked back.

All these shenanigans still wouldn't be so bad if the vaccine were harmless. Unfortunately that's not the case. Merck admits that the vaccine confers immunity for "about 11 years." That's not immunity. Real immunity is something only the human body can create after getting a disease. The problem with rubella is that the vaccinated person can still contract rubella after the artificial immunity wears off. But by that time they're usually adults, and the atypical version is a much more serious disease in adulthood.

Remember, atypical rubella is a manmade disease; it never existed before the vaccine.

The other problem with the vaccine is side effects. Here is a partial list of rubella vaccine side effects taken from the 2001 *Physicians Desk Reference*,² which includes: fever; syncope; headache; dizziness; vasculitis; diarrhea; vomiting; nausea; thrombocytopenia; leukocytosis; lymphadenopathy; anaphylaxis; bronchospasm; arthritis; myalgia; encephalitis; paresthesia; Guillain-Barré; skin rashes; and burning at injection sites.

Don't believe this? Good. Check the references, and the rest of the discussion that follows in my book, *The Sanctity of Human Blood*.³ You may be surprised to learn that we traded a mild disease that has been around for centuries causing very little trouble, for a serious mutation that is doing its part in the "de-evolution" of the human genome.

The premier Australian researcher in the area of vaccinations is Viera Scheibner, PhD. The doctor hammers home the most devastating side effect of experimental vaccines like MMR and DPT. Worse than the above list of side effects and occasional death, is the evolutionary *cul de sac* in which our disregard of the scientific method is encircling us. Viera likens what vaccines are doing to overall human DNA - our genome - to making a "Xerox of a Xerox of a Xerox of something." Look at it after 10 generations, then 50. There is a constant "de-evolution," diluting, and weakening the DNA that took our species a million years to evolve. We're truly messing with the "good stuff."

So - what do we learn from the case of Sean Brass? His parents had a right to choose not to vaccinate their son. Even those of us who may not agree with that decision would agree on their right to make it. Personal freedoms that we do not defend are inexorably eroded away, day by day, by a thousand little media slurs, and a thousand shrugged shoulders. The chances of the first 10 amendments making it through Congress today are slim to none. Most people don't even know what the Bill of Rights is. We were the only country in the history of the world that would even consider placing all that freedom, all that power in the hands of the people. Now many Americans seem to think it's fine to hand these hard-won, precious rights back to the government, because they're too busy to educate themselves about the principles involved.

Why should we study vaccines? Though it's our doctors' job, we need to learn what's good for our children, and to demand it.

In the words of abolitionist Wendell Phillips - "The price of liberty is eternal vigilance."

1. *The Merck Manual*, pp 237; 2185; 2328.
2. *Physicians Desk Reference*, p. 1967.
3. O'Shea T. *The Sanctity of Human Blood: Vaccination Is Not Immunization*.

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