

## Media Sweetheart Paul Offit's Vaccine Lies Deconstructed: A Mind-Blowing Interview with Dr. Suzanne Humphries

By Mike Adams

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Suzanne Humphries, MD, is an internal medicine and kidney specialist who received conventional medical education. After seeing mainstream doctors and hospital staff categorically ignore routine vaccine injuries occurring in her patients, Dr. Humphries began researching vaccine science which validated her concerns about the injections.

Dr. Humphries, who co-authored *Dissolving Illusions: Disease, Vaccines, and the Forgotten History* in 2013, recently joined Jonathan Landsman for an interview at the Vaccine World Summit, where she exposes the myths and lies surrounding vaccine research.

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www.DissolvingIllusions.com www.VaccineWorldSummit.com

Jonathan Landsman: Welcome to the Vaccine World Summit. I'm your host, Jonathan Landsman. Our guest is a conventionally-educated medical doctor with specialties in internal medicine and nephrology. After seeing vaccine injuries in her own patients that were categorically ignored by the mainstream doctors and administration in her workplace, she started researching vaccines to disprove the claims that doctors made out of ignorance to refute her own experience and those of her patients. The resistance she encountered only showed her how important it is to keep researching and bring out the truths she discovered to the public. She has co-authored a book, Dissolving Illusions: Disease, Vaccines, and The Forgotten History, which is available on Amazon.com. And today, you're about to discover the hidden truths behind the safety and effectiveness of vaccines. Please join me in welcoming Dr. Suzanne Humphries to our program. Dr. Humphries, welcome.

Dr. Suzanne Humphries: Thank you, Jonathan. Thank you for having me.

Jonathan Landsman: Dr. Humphries, the mainstream media has been constantly highlighting the Disney Land <u>measles</u> outbreak and blaming this on unvaccinated children. What are the facts about this outbreak?

Dr. Suzanne Humphries: Okay, well, it's very important to understand the exact numbers because if you just listen to the news, you would think that something that has never happened before is going on and the world is being taken by storm by this terrible deadly measles virus. And what happened is as of February 11th of this year, there were a total of 125 measles cases, with rash, that occurred between December 28th, 2014 and February 8th, 2015. It is said that the origin of these outbreaks was at the Disney California theme

park, although they have no idea who the index case is or where that person came from. Anything you hear on the news is just surmising and assumption; they have no idea. What we know about the 110 patients that are California residents, there's a breakdown of who was vaccinated and who wasn't vaccinated, and this is what to really look for when looking at these reports. Among those 110 California patients, 47 of them, which is nearly half, had an unknown or undocumented vaccination status. And this is very interesting because these cases were all diagnosed and confirmed, yet, for some reason, they weren't able to determine if these people were vaccinated or not. And so, it's usually just assumed that these people are unvaccinated when they're reported.

However, it's possible that they could have all been vaccinated with one, two, or three vaccines. Okay, then we know there were 13 vaccinated people, 5 of whom had 1 dose of the <u>vaccine</u>, 7 had 2 doses, 1 had 3 doses, and 1 had immunoglobulin seropositivity documented, which indicated a prior vaccination. Now, we have the unvaccinated, of which there were 49. Of them, one guarter of them couldn't have been vaccinated anyway because they were too young, so they're counted as unvaccinated, even though these are not people that exempted out. That leaves us with 37 more vaccine-eligible people, and all we know is that 28 of them - 18 of the 28 that are left over were children less than 18 years old, and 10 were adults. Now, we're left with 9 that we can't account for, but Dr. Schuchat of the CDC keeps saying that there were many cases that weren't vaccinated because they were sick at the time when the vaccine was due. And I find that an interesting comment, especially given my history of knowing that when you vaccinate sick people, very bad things happen, yet the CDC is continuously pushing, and the message there is not to opt out of vaccines just because you're sick. So, all in all, we have 18 patients, out of 110 patients, who we can say were of vaccinating age, less than 18 years old, 28 total that were opting out of vaccines, 10 of which were adults. And this is what we're making a big fuss out of.

Jonathan Landsman: Just to back up what you're talking about, Dr. Humphries, I have read, by just digging around a little bit on my own, you can clearly see that there are hospitals in the United States that actually advise cancer patients, people who are really sick, and their family members – anyone who might be visiting these sick people – that those sick people should be avoiding, at all costs, those people who are vaccinated with live viruses.

Dr. Suzanne Humphries: That's right. And they have to say that because they know that these people – I've got several articles sitting in front of me that have diagnosed vaccine-strain measles shedding and sick children days to weeks after they're vaccinated. So, it's a proven fact, yet it's continuously denied that measles vaccines can induce shed after they're injected. The same with inhaled influenza, the same with oral polio vaccines or rotavirus vaccines, and we also know this is true for rubella. So, indeed, we're told that the unvaccinated are who we should fear, and that's only in the move to get people 100% vaccinated, but they have to admit, and try to warn people that are immunosuppressed, because otherwise, immunosuppressed people will come down with these diseases and everybody will know for certain how that happened.

Jonathan Landsman: Yeah, you've already given me plenty to think about, Dr. Humphries. Now, in shifting gears, there's a very famous pediatrician, maybe not to everybody out there, but I do want to talk about this doctor, Dr. Paul Offit, who seems to think that all vaccines are good, and, in particular, that religious exemptions to vaccines actually threaten public safety. Talk about his latest article, "What Would Jesus Do", and why his views are so dangerous.

Dr. Suzanne Humphries: So, for those of your listeners who have never heard of Paul Offit, or maybe don't know much about him, I will tell you that he is the Chief of Infectious Diseases at the University of Pennsylvania, he is a medical doctor, and he is also the coinventor of a rotavirus vaccine, which is a diarrhea vaccine, called Rota Teq, which is given to infants. He is also a former ACIP voting member, and these are the people who tell us which vaccines should be given to our children, and he's the author of several pro-vaccine books, and one that is also against natural supplements. He is an internationally-renowned expert, it seems, on just about everything, including all forms of religion, but basically, he is Big Pharma's pit bull in a white coat, and the media's sweetheart pro-vaccinator. So, Paul Offit is very much in favor of removing all exemptions from vaccination, except for the select few who have been wounded, mostly by medical treatments themselves, and then the few who happen to come down with diseases of the immune system. For all the rest of us, all of our philosophical exemptions and all of our religious exemptions have been viciously under attack by him for years, now, and this attack is currently mounting.

And part of his platform is that he goes back into a situation that happened in the late 1980s, early 1990s, and this was: in 1990-'91, there was an epidemic in his hometown of Philadelphia, and about 400 of those people belonged to two different church groups who had kind of extreme views and didn't believe in doing anything except prayer - they didn't even believe in intravenous fluids, vitamin A, none of these other things, and not going to the doctor. And as a result of that neglect, actually, there were several deaths in that population, and so, Dr. Offit got very upset about this. There were only 6 children left out of 400 and some who didn't get measles, so it's kind of like closing the barn doors after the horse was out; most children had uneventful measles and recovered. And so, he called in the courts, and these remaining 6 children were forcibly vaccinated, but the courts really went overboard at that point, and Dr. Offit goes on about, 'we did this and we did that,' when he talks about it. He says the ACLU refused to get involved; what he doesn't tell you is that that's not true at all. Because the courts demanded that families notify the city whenever any child missed 3 days of school, whenever public health doctors had to examine preschool children once a month, even after they were immunized, and they were also told to locate all other churches in the city that rejected medical care. And the ACLU actually did get involved in that point, and they said, 'if you don't back down on these points, we'll be appealing them.'

So, there's something in the article that Dr. Offit talks about, "What Would Jesus Do About Measles?" that he talks about this whole situation that happened in the 1990s, and as a result of this extreme situation, and these very extreme-believing Christians, he wants to take religious exemptions away from everyone and say that they're child abuse, when, in fact, really, he's just using this as a tool in order to obtain the end that he wants to obtain. He doesn't tell you that that year was a year of climbing incidents of measles. See, we had a little honeymoon period in the early 1980s, where the incidents went way down, and then around '88, '89, '90, '91, we're seeing between 20-27,000 cases per year. So, he's making a big deal about these 400; the fact of the matter is that there were 9 deaths in Philadelphia that year, out of some 900 people that were affected, and 5 of those deaths were in children who were severely debilitated with underlying medical diseases, so, in fact, those kids were pretty much sitting ducks to start with, and so, they could have been knocked off at any time from any infection or even from a hospital-acquired infection.

So, Dr. Offit wrote this op-ed piece in the New York Times last week, called "What Would Jesus Do About Measles" and I find this really interesting because he's outspokenly said that

he is an Atheist and he calls himself a Secular Jew. And so, I think it's really interesting that he's able to make commentary on the gospels and on what Jesus would have done and saying that he would have lined up every child to have them all vaccinated. I think his comments are totally offensive and they're totally out of school, and they completely leave out the more important aspects of the situation. And what people are never told is how to deal with a child who has measles, and that was never done by the public health, it's still not done by public health today, we don't hear from the CDC; all we hear about are these minority cases, and they're used as a platform to get us all vaccinated and to shut us all up.

Jonathan Landsman: Dr. Humphries, while you're talking about this, I think we really need to bring up this aspect, as well, and that's the pro-vaccine advocates out there, besides Dr. Offit – and, by the way, for those people who are interested in reading directly what his views were, it was a New York Times article. So, I want to ask you, though, about the pro-vaccine advocates that are in the media and other people in conventional medicine. They all say this line – just like they're all from the same family – they say, 'all vaccines are safe and effective.' Can we talk about what they might be hiding from us? Like, for example, how effective are these vaccines? Let's talk about that.

Dr. Suzanne Humphries: Okay, well, I'd like to tell you about the measles vaccine and that effectiveness because there is a story, here, that is undeniably backed by a massive amount of scientific literature, that you are not going to hear from Paul Offit or from the mainstream media, and it's extremely important, and that is that when people used to get the measles, they would develop lifelong immunity, 75-85 years, we know for certain, and that was in the setting of ongoing circulation of the virus. It's also funny that Dr. Offit will continuously say that the only people who think that measles isn't a problem are people who didn't live through epidemics, and I've actually found to be quite the opposite; that the people who lived through the epidemics are sitting around saying, 'I don't know what the big deal is.'

Okay, so we have that as a baseline of what it used to be like. In those days, little babies never got infected with measles; they were protected by their mothers for a couple of years while they were breastfeeding, and there are even studies that show that this effect of protection from breast milk can last up to 10 years. So, these babies were never on the list of the susceptibles before the vaccine was invented, and neither were older adults. The vast majority of children that were infected started around the school-age children and ended up around 15 years of age, about 95% of all kids were infected by that period. And it came in slow waves, only when there were susceptibles, and it was a very controlled pattern with the benign disease, as you can read in the 1959 British Medical Journal, when doctors were reporting.

So, they decided to create a vaccine because it could be done, as Dr. Langmuir said. And so, they created this vaccine and licensed it in 1963. The first vaccine actually turned out to be a total disaster, and then it caused something called atypical measles, which I don't have time to get into now, and then they had another vaccine going at the same time which was not very attenuated, meaning it was very virulent and actually caused cases of measles that they had to be giving immune globulin to the kids while they were vaccinating them – which is basically a blood product – and there were all kinds of problems with that. But by around 1980, they finally developed a highly-attenuated vaccine by passaging it through all kinds of cells, including monkey kidney cells, human cells, chicken cells, and they were basically able to make this virus mutate in such a way that it didn't cause a horrible measles-like disease during the vaccine.

And so, what happened was the rates of transmission did go down after this vaccine was really up and running, the attenuated vaccine, and there were high amounts of uptake throughout the school-age children. And by 1981, the reported cases of measles had dramatically dropped and everybody was celebrating and thought that we had really finally done it, never mind the fact that in the beginning we were told it was going to be one shot and eradication would happen by 1967. Well, that turned out to be a total joke. So, statisticians can rightly call this 1981 period a honeymoon period because it actually ended quite abruptly, and throughout the '80s, we started to see thousands and thousands and tens of thousands of cases per year back in the United States. And then the second shot was added, and a lot of people think that second shot was added as a booster, but, in fact, it's well documented, by some of the most prominent vaccinologists today, and in the past, that that second shot was added in order to mop up the cases of people who didn't respond at all to the first shot. So, that was the intention of that second shot; it wasn't supposed to be a booster because it was known that there was primary vaccine failure, which was not uncommon at all, and we also now know that there's secondary vaccine failure meaning that in a period of perhaps 1-10 years, there's significant waning of immunity that's induced by this vaccine.

And so, what happened around these years that Dr. Offit is spouting his mouth off about, with this outbreak in Philadelphia, is that there was massive outbreak; what he's not telling you is that the reason for that is actually because of the vaccine, and, even worse, is that what we were seeing were secondary vaccine failures. What we were seeing were young babies being infected, which never used to happen, what we were seeing were older children and adults being infected, which never used to happen, and we're seeing that today. Even Dr. Schuchat said there are lots of adults that are getting infected today, and that shouldn't have happened in this vaccine that is supposed to protect us for life. Well, it turns out that because of the vaccine, the kids that actually handle the disease best are protected for a short period of time, whereas the young babies, and the rest of us, aren't.

So, what we're walking around with now is basically a disintegration of any kind of immunity that was built up by the vaccine, and what I predict in the next few years is that all adults are going to be told that we need to have several series of boosters throughout the rest of our lives in order to maintain this "herd immunity." So, that's the story that you're not going to hear from the CDC; all you're going to hear from them and Paul Offit are these crazy Christians who aren't vaccinating their kids, these crazy religious people who are lying and opting out of vaccines, these philosophical exemption people who are quacks and don't understand science – and that would include me, by the way, even though I have several degrees in different sciences, and a degree in physics, and have worked in a lab and done my own research, I'm also considered a quack who doesn't understand science. Because those of us who do understand the science understand that it is, indeed, a problem of vaccine failure and not just a problem of failure to vaccinate.

Jonathan Landsman: It's beyond my imagination, as well, Dr. Humphries, when we talk about influenza, the flu shot; everywhere, you hear about the flu vaccine and, conventionally speaking, you have to get it to prevent the flu. But what, again, most people don't hear about is that the 2014-2015 invention for this winter season, it just doesn't even work. Conventionally speaking, the CDC, they flat-out admit it, and taxpayers, they fund the CDC, all the money from the Federal government that goes into giving to the pharmaceutical industry, all of this money for the flu vaccine for this year; they're spending a fortune of money, all of these dosages, and they're pushing it out in all the pharmacies

throughout the United States, and then they admit quietly, somewhere where you have to go look for it in research, which very few people are doing, they admit that this year's invention is a complete failure.

Dr. Suzanne Humphries: They admit that. And guess what? Something about the measles vaccine, that I found really startling in my recent research, is that the vaccine failures that we're seeing today were actually all predicted in our medical literature. There was a Dr. David Levy, in 1984, who predicted the problems that were to come, and that was during the period where there was just the single vaccine. But then, there's a Dr. Heffernan, from 2009, who did his own predictions based on very sophisticated mathematical analyses during a two-vaccine period, and what he said, verbatim, is, "we predict that after a long disease-free period, the introduction of infection will lead to far larger epidemics than that predicted by standard models." And even more compelling, he said that, "large-scale epidemics can arise with the first substantial epidemic not arising until 52 years after the vaccination program has begun," well, guess what year 52 years is? 2015. So, now, can you see why the CDC is staying up late at night and having panic attacks?

Jonathan Landsman: Wow, this is incredible information, Dr. Humphries. And another thing, too, that I would like to highlight – I'm sure you shake your head at the same thing, as well – in terms of the payouts, we're talking about people who get injured by all sorts of vaccines, in particular, large amounts of money are mostly paid out because of the flu vaccine. We're talking, literally, billions of dollars since its invention of this payout for injured people, which was in the mid-'80s, but yet, we keep hearing the same thing – vaccines are safe and effective – and they never mention this court system that they created, which was designed not to give out money to people who get injured for all sorts of reasons, and they still approved billions of dollars in payouts for those that got injured from vaccines. I'm sorry, something like that tells me right away that it is not completely safe and effective, these vaccines, at all.

Dr. Suzanne Humphries: Well, guess what? If you'd say that to Paul Offit, he'll tell you, 'yes, we are so generous that we set up a system whereupon we compensate people for things that really aren't related to the vaccines, and that is just so that we can feel like we're really good people and tell you what good people we are.' But the fact of the matter is that if you look at what they consider to be coincidence and what they consider to be a real problem, I also find interesting when it comes to the measles vaccine because, if you take encephalitis, for instance, their message is always set: if you're infected with a wild case of the measles, your encephalitis was from that virus. But if you get a vaccine, your encephalitis is only a coincidence, unless they say it happens between 5 and 15 days after the vaccine, whereupon the vaccine court might compensate you if you fit their qualifications, and the reason that's so interesting is because the vaccine injury compensation plan even ignored that Merck and the FDA stated otherwise that encephalitis can occur within 30 days after vaccination.

So, the vaccine court basically started out with a much broader net, that it would cast over and catch more of these vaccine injuries. And, as Dr. Anthony Morris, who worked at the FDA, so eloquently said, a couple of decades ago, was that because they were paying out so much money back then, they realized they were going to go broke, so what they did is they narrowed down the compensation tables. So, it's very difficult to get compensated, but all anybody has to do to know that MMR has significant reactions, apart from looking at the data sheets and the records of the billions paid out by vaccine court to the minority of

families of injured children, you can just put relevant terms into the search engine for the vaccine adverse event reporting system, and hundreds upon hundreds of cases of side effects and death reports to all these vaccines will come up, including Paul Offits' vaccine, which causes intussusception, and there are also cases of death after that vaccine was given.

Jonathan Landsman: And, Dr. Humphries, a lot of physicians are actually shocked when I inform them that in the courts today, and in the past, we're talking billions of dollars that have been paid out by these criminal organizations. It sounds really weird to put it this way, but the pharmaceutical industry has already been convicted in the courts for massive fraud, and right now, as we speak, there is a court case where two virologists are actually suing Merck for the deception, for the outright scientific fraud, for over 10 years, now, where Merck has tried to deceive the public with all of these scientific studies that show how effective the MMR vaccine is; in reality, they're not effective at all, and these two virologists are saying, flat-out, that they manipulated data just to deceive everybody about how really ineffective these vaccines really are.

Dr. Suzanne Humphries: That's absolutely right, and when you follow the rabbit trail, that's where you will end up, and that's why this orchestrated attack on parents, on doctors, on all the anti-vaccine people, even on people like Dr. Dears and Mark Blaxill, who aren't even anti-vaccine, but are just saying, 'hey, we need to take a look at this because there seems to be a relationship between vaccines and diseases and vaccines and autism. And what's really happening is, in my opinion, at the center of this, is the Pennsylvania drug company, as you said, called Merck, which is the manufacturer of the MMR2 vaccine, and Gardasil, and Vioxx, and without a doubt, Merck is keeping the Senate political wheels well-greased, as well as making sure that there are significant news blackouts. Notice – have you seen anything about the whistle-blowers anywhere on CNN, anywhere on any news outlet? No, you haven't, and it's notable that not one mainstream media outlet covered the fact that in November last year, a judge threw out every single spurious argument that Merck's lawyers made to have the MMR whistle-blowers case systematically thrown out of court.

Now, this is a case about how Merck used a fraudulent antibody test to raise the mumps vaccine efficacy somewhere from around 68% on its own up to around 95-100% after several manipulations of testing and data, in order to ensure licensure. The ineffective mumps vaccine continues to rake in money for Merck as this hearing drags on, and it's pretty amazing when you think of the money and the medical and political power that Merck's lawyers have, yet not one of them could come up with an argument to convince the judge to dismiss the case. And, in fact, when you read the judgment, which I did, you get the feeling that all Merck's lawyers did was really annoy that judge. So, Merck and the provaccine movement with people like Paul Offit, Arthur Caplan, and the like, are working cap in hand, and they all need a pro-vaccine majority society to have solidly swung around to their views because in about two years, that case will come to its conclusion, and unless the judge is bribed, it's highly unlikely that it will go well for Merck.

So, Garadsil isn't going well for Merck; Gardasil was supposed to reposition Merck's profitability after the Vioxx disaster and other legal judgments that have gone against them. So, should the MMR case go against them, and a class action for Gardasil also be well-supported, Merck will be history, and that's one reason why Julie Gerberding was head-hunted from the CDC to head Merck's vaccine division. So, in this war, the shop window, appearance and sound bites are everything. Anyone who thinks that the constant mantra of 'the science is settled' has any validity has allowed someone else to do their thinking for

them. So, the bottom line is that Merck is positioning in the likely case that they're going to lose this court case. If they lose this court case, they need to have nobody be able to exempt from vaccination; that way, Merck stays afloat, and the CDC, the FDA, the politicians, and the like can keep their cash flow going. That's what's going on here.

Jonathan Landsman: Dr. Humphries, I want to cover a few other things that I feel are particularly important, and I'm going to be giving a shout-out to all of the conventionally-trained medical doctors that are listening to this summit right now. I know if you're sitting on the fence and you're not sure, and you've never heard any of this information before, I want you to listen very closely to what you're about to hear from Dr. Humphries, and I also want the parents out there to listen very carefully, as well, because there's a lot of anxiety, Dr. Humphries, as I'm sure you can imagine. The regular person out there, the general public, is very confused, they're getting intimidated by conventional medical doctors, they feel a sense that they don't want to make a mistake and hurt their own children, their own family; it's all understandable. I want to cover some of the other things that people never hear about before they get vaccinated, and I'm talking, in particular, about this herd immunity. You brought it up already as a concept. I want to ask you: is it really that important to ensure the safety of the public that we have herd immunity?

Dr. Suzanne Humphries: Well, it's really not possible to have 100% immunity. Let's look at China, for instance; China is a country who has a 99% vaccination compliance in their children, and last year, they had 100,000 reported cases of measles and 50,000 confirmed cases of measles. So, even in a population where you're say, 99-100% vaccinated, you're still going to have the disease; there's no way around it. So, when you talk about herd immunity, this was a term that was developed by Dr. Hedrich in the early 1900s, when he observed, very meticulously and carefully, the yearly trends of the susceptibles and when outbreaks would happen. And what he noticed was that when the susceptibles rose up to around 45-50%, there would be some outbreaks of measles, and when the susceptibles went down to about 35%, those outbreaks would stop. So, there was still a large amount of children who didn't get infected during each wave, but there are kind of a slow and steady trend of infections that would happen in the children who could handle it most easily while the rest of the population was protected.

And so, that's where the term 'herd immunity' came from, and it's basically being co-opted by the pro-vaccine to give some sort of a fantasy that if we have a high enough vaccination rate that these things will go away and be eradicated, when, in fact, that's really never happened as a result of a vaccine. And that's really what our book is about because I had to answer some of my own questions - 'well, where did smallpox go and where did polio go?' And there are answers to those questions, and it really doesn't have a heck of a lot to do with the vaccine. So, this whole idea of herd immunity and protecting the kids who can't get vaccinated is very interesting because there's this doctor named Dr. Gregory Poland, who comes from the Mayo Clinic and he's also the Editor-in-Chief of the journal, Vaccine, and he's doing some really interesting and important work right now. And he's doing work on the genetic variation of all of us, and he's acknowledging that this one-size-fits-all paradigm of vaccinations isn't working, and that he says that we need to develop new measles vaccines to better suit the population because we're so diverse; racially, we're diverse, ethnogenetically, what we're eating, what our vitamin status is, and this all affects the genetic response, which is incredibly complicated, to how we respond both on a cellularimmune basis and a humoral-immune basis.

So, to just think about the complexity of us, genetically, to say that we can inject everybody

with the same thing and provide immunity, it's really laughable. It's actually hysterical; it's just never going to happen, and what's going to happen in the meantime is that Merck's belly is going to get fatter and fatter and fatter as they rake in the money because we're all going to have to need more and more vaccines, and this is always the trend. Just look at Gardasil: we started out with Gardasil – only had four antigens in it. All these kids lined up for Gardasil, and guess what? Now, we have a new and improved Gardasil, and guess who has to line up again to get that vaccine? And this is what we see for everything; they're developing a new pertussis vaccine because the old one doesn't work, and on and on it goes. There's always improvements and revaccination that can happen because no vaccine has ever been shown to do what it's predicted to do, period, end of story.

Jonathan Landsman: But clearly, as you said, it definitely is benefitting the pharmaceutical industry for all of these vaccines. I want to address another concept that we hear constantly, at least in terms of conventional wisdom, as that goes, Dr. Humphries, and that is this idea of unvaccinated children being a greater risk to society. Clearly, you've already talked about the example in China where everybody's vaccinated, for the most part, and they still have their issues over there, and they have infectious diseases they have to deal with at the tune of 100,000 more. But what do you say to people who say the unvaccinated children are a grave risk to society. What do we do?

Dr. Suzanne Humphries: Well, what we really should look at is who's not immune, because it's who is susceptible, it's not who's not vaccinated, because for different vaccines, it actually turns out that the unvaccinated actually deal with the diseases better and become less of a problem when it comes to herd immunity. But Paul Offit says that the unvaccinated are a danger to society, but anyone who spreads any infection in society is a potential threat to vulnerable people, whether it's measles, influenza, herpes simplex – you name the pathogen. So, how many people do you know who get a cold and insist on still going to work? Even in the medical system, you can see doctors and nurses, and you wouldn't think that they would think any better. So, Offit's assumption is that unvaccinated are always the ones who start it; that's the CDC's assumption, as well. Do we know that the alleged Measles Mary in Disneyland wasn't vaccinated? After all, there were people with one, two, and three shots during that period, and Dr. Schuchat said, on the 28th of January, that we know adults are now getting it and spreading it.

I have a medical article in my possession today by Dr. Rota on two doctors in a hospital who were three-times vaccinated, who got the measles and then continued to work while they were contagious. In every previous outbreak, look at the medical articles and you will see that doctors' offices and hospitals are major infection transmission focal points with infection rates over 25%; in one case, I saw 80% of all the measles were gotten in doctors' offices. So, why not say that the medical system is one of the biggest spreaders, not only of measles – far worse than Disneyland – but many other infections, too, because they are. So, blaming 18 unvaccinated exempted children in California under the age of 18 for this outbreak and ignoring the other parts of the issue, it's just ludicrous and it's completely manipulative.

Jonathan Landsman: And we also hear so much that vaccines have a possible link to autism, even in mainstream media outlets; they can't keep this one out of society and hidden in the dark. But every time they bring it up, they say, 'well, it was a possible link, and it was linked to some studies by Dr. Andrew Wakefield, and all of that was discredited and nobody should be thinking about it at all.' So, what do you say, Dr. Humphries? Do vaccines, at all, cause autism?

Dr. Suzanne Humphries: Well, it's really funny to me, also, when I watch Paul Offit and the like on TV and the first thing they say, it's almost like they were trained, like puppies, how to respond when somebody brings up autism, and the only thing they'll say is Andrew Wakefield, and it was dispelled and his reputation was destroyed, and they'll go tell that story. Well, that's really convenient to make someone into a scapegoat, especially when they threaten your paradigm, and the reality is that Andrew Wakefield, he didn't even come up on my radar at all until well after I noticed and investigated the science for myself over the real problems with vaccinating adults for flu and pneumonia. And I finally got around to reading his report after it was withdrawn, and I saw that it was just a case study of 12 children, and the conclusions read that more study was needed. That was it. That's what he said: 12 cases.

Wider reading showed me that he had said some things at a press conference, which started a storm, and then there were allegations that he made lots of money from it, which, when I followed that up, turned out to be untrue. All that money went into the Royal Free Children's Hospital coffers and paid the bills for a technician to manage the study. Then, there were allegations about some vaccine he was supposed to have an interest in, and that he's all in it for the money, and at that point, it started to look really ridiculous, especially when you consider that Gregory Poland – his primary interest is measles – has patents on new types of vaccines, especially when you consider that Paul Offit co-invented a vaccine. And it's okay that the children's hospital in Pennsylvania sold that royalty for \$182 million and Offit received untold millions from that; he said he felt like he won the lottery. So, that vaccine has quite a few deaths and severe injuries, as I mentioned, and while most of us go into medicine because we want to heal people; anyone who tells you that the money isn't attractive, well, they're just lying. So, to pick on Wakefield using money as an incentive to do something that he didn't do anyway is a bit hypocritical.

So, what interested me about measles and autism was this: that there were researchers that came after Wakefield's 1998 report. One of them - and remember this name, Dr. V. K. Singh - look him up; in 2002, he wrote some articles and did some very good biological studies on this large series of autistic children, and what he found in those studies will blow you away. He basically found that the response to the measles, mumps, and rubella vaccine, and those autistic children, in their blood, was off the wall compared to normal children, and on top of that, he found that there were myelin basic protein antibodies that correlated highly to those kids who were autistic that were not in the controls. He found antibodies to the caudate nucleus in the brain. He went in front of Congress and he testified the most elegant congressional testimony, and the result of that was the wonderful studies that we know of, the Danish studies, which have been largely refuted as either fraudulent or very poorly designed. But there's another researcher that we never hear of, because we only hear of Andrew Wakefield, but look into a doctor named Dr. Stephen Walker from Wake Forest University. In 2006, I have a study that he put together, and it was not an easy study to do; he got 275 patients with regressive autism and bowel disease, and what he did is he took some specimens from the bowel and he did polymerase chain reaction analysis, and what he found in there was vaccine-strain measles. His funding dried up for that project, Dr. Singh's money dried up, we never heard from them again. Dr. Wakefield stuck it out and they stuck it to him, and that's what happens when you stick a needle in the eye of the giant.

So, is there any relationship between autism and vaccines? Well, how are we supposed to know when scientists who even get close to showing any association are treated the way Dr.

Wakefield was. And we don't know what happened to Dr. Singh; I haven't heard from him. He's now doing other kinds of research, but he was literally pleading in front of Congress, passionately, to please look into this connection between the measles, mumps, rubella vaccine and autism. Now, personally, I don't think the measles, mumps, and rubella vaccine is solely responsible for autism. I think it's a very complicated process that can start in the womb, and the brain is a very sensitive organ, the immune system in the brain is sensitive, and there are lots of things that can tip it off, and that's why we can't just blame mercury on autism, we can't just blame measles, mumps, rubella vaccine on autism; it's a constellation of insults that go into creating an autistic brain, and until we do a study that's on completely vaccinated versus completely unvaccinated children, and look at the breastfeeding trend and the birth modes in those children, we will never be able to make the conclusion, and the pro-vaccine will be able to continue with their mantra that we don't need to look at it, "science is settled," and anybody who disagrees with it is a criminal or an idiot.

Jonathan Landsman: Yeah, just to keep this on the ground, Dr. Humphries, of course, the pharmaceutical industry will never do a study like you just described that we would need so that we could actually point to a particular study and say, 'aha; look at these startling results.' But the bottom line is, as you were talking about insults, everybody should understand, it's a common-sense thing, you don't even have to have a medical degree, that all of these environmental toxins, as you say, Dr. Humphries, from when the woman, before she even conceives, and what the father was eating and the mother was eating. And then, of course, when the child is born, the vaccines that are pumped in, the water, the food, the air quality; we see this from all different levels. We see glyphosate in the environment being sprayed as a toxic herbicide ingredient all over the food that we have, especially since the 1990s, we see this vaccine schedule that has gone way up from when you were a child.

When we add up all of these things, when we see mercury-laced fillings that are being put in the mouths of people all over the world, and they're telling everybody, 'oh, it's just silver fillings, don't worry about the mercury vapors coming out into your head and causing systemic inflammation and bowel problems which then affect your brain and your heart and your life.' All of these toxins clearly can't be good, yet, on the pro-vaccine side, and the pro-chemical side, the answer is always the same: each one of these little topics I brought up, 'it's just so little, we shouldn't worry about it at all; just go back to sleep and don't think about this.'

Dr. Suzanne Humphries: I couldn't have said it any better than that. And they will say something like, 'well, formaldehyde, there's more formaldehyde in a pear than there is in your injection,' and completely disrespecting the fact that an injection is brought into the body in a different way than a pear is. And the same goes for aluminum. The data and the information and the hard-core science that's out there from real scientists, Dr. Offit says that aluminum is no big deal to give to a child because they get tons of it in breast milk and tons of it in formula. Well, Dr. Offit apparently ignored the many studies that show that aluminum disrupts over 200 biological processes in plant and animal life, and the fact that when you inject it into the body, it's completely different than eating it, and especially when you inject it into a little baby whose kidney function isn't up to speed, sometimes for up to two years. So, he is completely out of school when he talks about aluminum. So, if you ever want to take on a vaccine battle, take on aluminum, because that, in my opinion, is the easiest one to win because there are even studies by Dr. Thomas Jefferson who looked into this aluminum problem a few years back, and what he found was there was no good data to say that aluminum was safe. But the conclusion was because if we were to take aluminum

out of the vaccines, we have nothing to replace it with as an adjuvant, and it could threaten the vaccine program worldwide. And so, in other words, why we might have a dangerous compound in the vaccines that there's no top limit on, we're not going to look into it any further because we don't want to disrupt the vaccination program.

Jonathan Landsman: Dr. Humphries, I want to talk about this a little bit more; again, just mentioning this to the pro-vaccine community, and right away, I'm being labeled as a kook or some crazy person to even suggest that we ought to look at the measles virus itself. And so, I want to ask you: how dangerous is this measles virus? Yes, of course, as you're an adult, it's not something you want to get, but let's talk about it in practical terms. How dangerous is it? And also, more importantly, as a physician, what would you suggest to all those healthcare providers out there that are listening, how would you treat the virus?

Dr. Suzanne Humphries: Okay, well, there are a couple of issues that stem from those questions. Yes, the measles virus actually can be very dangerous for children who have a chemically castrated immune system or for babies whose mothers have no antibodies because they're vaccinated, or for babies that are on infant formula and not breast milk, for children who are fed junk food instead of real food, whose parents have no idea how to treat measles in their children, who don't understand anything about vitamin A, bone broth, good rest, hydration, fresh fruits and vegetables that are high in nutrients and vitamin C because all of those things feed into the frontline cellular immune system, which is the key to dealing with measles. So, if your cellular immune system is not functioning properly, you are a sitting duck for measles. So, that means – and Dr. Gregory Poland has also shown this – that vitamin A changes the epigenetic profile of your cellular immune function. So, we have ways; you feed the cellular immune system properly, and it works.

So, the bottom line is, as always, it's not about the microbes so much as it's about the person. So, for some people, measles can be very dangerous; for the vast majority of people who it can be dangerous for, there are things that can be done. And instead of the CDC and Dr. Anne Schuchat coming on and talking constantly about vaccines, if she once in a while even said, 'make sure your kids are getting a diet plenty in vitamin A, foods that have high vitamin A, make sure they're well-nourished, make sure you're giving them bone broth, make sure you're supporting their cellular immune system by getting proper minerals,' that would really go a long way. So, that's that part of the measles danger, but listen to this: the natural measles virus is very different from the vaccine virus, and these are things that I've recently discovered, and I've actually been quite surprised.

So, as everybody knows, the route of entry of a wild virus is through the mouth – you inhale it, it goes into the lungs, then it goes into the immune system, basically, through infecting certain immune cells in the lungs that have a receptor called CD150. So, it's able to get into the lymph organs of the body, and it circulates through those lymph organs like the spleen and the thymus and the appendix and the tonsils. And then, after a while, it uses another receptor called Nectin-4, and that's when it goes to the epithelial cells, where you see those spots in the mouth that look like red spots with white on top, and where you see the rash. So, that's the normal response to a measles virus, and the rash is actually a good thing because it shows that your cell-mediated immune system is working. The vaccine virus is totally different and it's really startling. It's been serially attenuated in many types of human and animal cell cultures for decades, and then it's injected. So, route of entry is different. Then, it is taken up by a completely different set of receptors in the body called CD46, and what's interesting about this is that while the CD150 is for the wild measles, the CD46, where the vaccine virus can go into, makes that vaccine virus accessible to every nucleated

cell in the body. And the reason that CD46 receptor for the vaccine measles virus and laboratory strains is available is that the original virus was passaged on monkey cells, called Vero cells, which allowed that change in the vaccine virus to go into those receptors.

So, right there, my knowledge stops because, while the medical researchers have a good idea how measles infection spread naturally, nobody has published anything explaining how an injected virus using different receptors spreads throughout the body, yet we know the studies that Dr. Walker has shown, we know the studies that Dr. Singh has shown, we know what Dr. Wakefield has shown – that we're finding vaccine-strain measles virus retained in the body that shouldn't be happening. If you have a good immune response because you've been infected the proper way and have a good cell-mediated immunity, you don't retain the virus anymore, and you certainly don't retain it in diseased organs of your body.

Jonathan Landsman: Dr. Humphries, everything you're describing here is exactly what most people never hear about: this crazy notion - and I say that with my tongue firmly placed inside my cheek, here - the crazy notion that the immune system can actually handle so many things if given the tools needed, that our bio-terrain is so important inside of us, the fluids in our body, how we feed ourselves, how we emotionally feel, our thoughts. All of this actually has a great deal of power over how strong or how weak our immune system is. None of this is told to people. The message that most people are told is: 'you're weak, these germs are out there, these viruses are out there, those bacteria are out there and they're very dangerous, and you should be very afraid, and stay away from people that are sick, and who knows what could happen to you,' and it's a constant state of fear that they want to put everybody in. It's very disempowering and it also places all the power in the hands of the pharmaceutical industry to come in and save the day, which leads me to a question I need to ask you. In your opinion, why is it that the mainstream media is coming down so hard on people, especially the physicians out there, who have any reservation about vaccines? You talked about it a little bit at the beginning, but I'd like you to address it one more time because it really is the most I have ever seen in years.

Dr. Suzanne Humphries: Right, and I talked about why that is - the end-point with Merck and the CDC and the likes of Paul Offit and Arthur Caplan. But let me tell you, basically, what the focus is, because it might just put a few dots together for your listeners. But the first thing is that they want to remove all pockets of unvaccinated children as soon as possible because that will prevent any possibility of doing any large-scale fully-vaccinated and nevervaccinated study. But also, that way, people like myself, and I'll tell you that I first woke up when I saw a group of never-vaccinated kids in one place, and it's because they don't want doctors like me to be able to put the pieces together and see that clinically, the unvaccinated often go through their entire childhood with a level of health that most doctors never see and most doctors would never believe. Second, there's a massive witch-hunt going on here, which is exemplified by a recent CNN piece where the presenter portrayed various people - it was actually comical because she was talking about how these various people funded organizations that were anti-vaccine and the total was something like \$1 million. But Bill Gates and all the billions of dollars that private people give to medical establishments, that's perfectly fine. Third, they want to shut down all the pro-vaccine parents who are now so vocal about their vaccinated children disintegrating in front of their eyes as a result of vaccination. If they can cut them off at the knees, that will help their goal, so in my opinion, it's very important today that those parents do not keep quiet. Fourth, Paul Offit is slapping every single radio show host by telling them that they're part of the problem because they allow air space to people like me, and Jonathan, he would say you

should be in journalism jail. Fifth, they would love to de-license any doctor who speaks out against vaccines because they hope that that will leave parents doctorless and bereft of meaningful support for their ideals.

Doctors currently have a lot of pressure on them to do what the vaccine gods tell them to do. Paul Offit is now going around to different medical schools and coaching them how to coach their doctors to persuade their patients to vaccinate. He's advocating a one-time warning for doctors to kick patients out of the office. So, what does that do? If doctors who disagree with Offit are de-licensed, then where are parents going to go? Parents are tossed out of his wife's practice, as he says, and they have nowhere to go. So, Offit hypocritically will put those parents in a position where if their children get sick with anything, they have nowhere safe to go. If they end up in a hospital, they have to put up with such venom spat on them, like the likes of Offit, and yes, that happens, and I have some recordings of parents who that has happened to. So, what Offit is doing, actually, is he's alienating the vaccine refusers with bullying and with absolute crap science and then trying to take away all their alternatives; natural supplements, homeopathy, alternative practitioners, both MDs and DOs, and any practitioners who are against vaccines. So, he's really got people up against a wall. And I don't know if you noticed this, but recently, Mayo Clinic partnered with Google to completely change the way health information comes up on Google searches, and the reason they say is because they want to get this quack science out of the way, the pseudoscience out of the way, and deal with the vaccine dispensers.

So, isn't that interesting, especially given that Mayo Clinic is where Robert Jacobson and Gregory Poland work, two of the most prominent vaccine scientists. I also found it interesting that the congressional hearing this week; it was actually organized before the Disneyland outbreak, and guess what? It wasn't publicized in a normal way, so nobody really got to put in any dissent, and the most one-sided arguments full of lies that I have actually ever heard about vaccines; it was pretty much the same old story by a congressman who clearly had an agenda. But the focus here isn't a short-term focus, it's a long-term. If the Mayo Clinic and Gregory Poland and Paul Offit can restrict your reading to what they want you to know, if they can restrict your access to medical care based on your vaccination status, if they can threaten and silence any doctors who speak against vaccines, if they can stop the media from telling any other story than theirs, and if they can do that in a way that the pro-vaccine parents agree is a wonderful step in the right direction, then what they've done is that they have insidiously installed a medical dictatorship and most people would probably never notice.

Jonathan Landsman: This is what I find the most disturbing, Dr. Humphries, and I'm sure you would agree: we're doing this program, we have experts like yourself and many other physicians speaking out about this, their reservations, their concerns, and talking about things that people are not hearing in the mainstream media. It's unfortunate, but it doesn't make it less significant or less necessary that we do these kinds of programs to get the information out. The problem is that a lot of people are not hearing about this information, and what's most disturbing to me is this one-sidedness, the approach that they're taking. The pro-vaccine people are quite aggressive with what you've been describing, really trying to shut down any kind of opposition, they want to control everything. When we talk about mandatory vaccination policies, they're being very forceful in their approach, and just on a common-sense level, Dr. Humphries – I'm not a physician, nor do I pretend to be, or any kind of expert in science at all – but just on a common-sense level, if something like the MMR vaccine, the flu shot, any of these vaccines that we hear about, if they were so great,

why would they be so upset?

Why wouldn't they just welcome open debates and come up with the science and come up with the data that supports it? But all the pro-vaccine people all sound the same; they keep name-calling people like you or me kooks or anti-vaxxers or conspiracy-theory people, and it's a lot of name-calling. And what I hear people who have reservations about vaccines, like yourself, like myself, what we keep bringing up are actual court cases, actual scientific data that explains why we have reservations. It really seems like the opposite of what they're saying, but what's most disturbing is the forceful nature and the dictatorial style that you have described in this program. It really is something that needs to stop. We all have to wake up to what's going on here; it's a bunch of nonsense, and we cannot put up with this anymore.

Dr. Suzanne Humphries: That's right. And the reason they do this is because they know that we have the truth on our side, and they know that when we get any mainstream media coverage at all, there are going to be certain factions of the population that listen and go, 'whoa, there might be something I don't know that I should look into this.' And, in fact, I read an article yesterday that talked about: the more that even the pro-vaccinators bring up the controversy, the more non-vaccinators evolve out of the population. So, now, the current situation, the recommendation to all of the media broadcasters, is just to say nothing. So, they stopped the pro-vaccine thing to some degree, and now, they're just starting to kind of guiet it down. And they know they're financially winning, they know that they have the politicians; they don't need to invite debate. But the thing is, Paul Offit said the other day, 'I don't know what's going to un-ring this bell,' and that's an old attorney saying because what happens is, in a jury, when someone in the jury hears something, you can't make them forget it. And, see, that's why, in a sense, they're losing, because when people hear the truth and it resonates with them, they don't forget it, and then they can't be convinced, and all the convincing that they try to do by training medical students and bullying doctors, all it's going to do is serve to create more adversity to them. And so, what they have to do is just come down almost like the Gestapo and try to turn this into a medical police state, essentially.

Jonathan Landsman: Dr. Humphries, I want to thank you for your time, and I want to thank our listeners for joining us today. Be sure to listen to the many other shows available to you on this page, and more importantly, please use our social sharing feature to give this information to your friends and family. Plus, if you haven't done so already, subscribe to the Natural Health 365 newsletter by entering your email address on the right side of this page. You'll receive weekly updates on important health topics, access to our free weekly shows, plus some great gifts. I'm your host, Jonathan Landsman; I hope you enjoyed this program. Thank you so much for your support. Talk to you soon. Take care.

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