

CHILDHOOD VACCINATIONS – A HOMEOPATHIC VIEW

This is a summary of material from a few sources, and can be used by parents as a source of information about vaccinations. This is a general review rather than a critical examination, and parents are advised to reach any decision together with their homeopath and their GP.

Overview

Vaccination presents a difficult choice. On the one hand it is aimed to prevent serious diseases whose mere name terrifies us, like polio or tetanus; on the other hand we tend to instinctively reject the idea of injecting young babies with pathological materials.

In order to shed some light on the issue, the following issues are discussed:

- Overview of the vaccination program in the UK
- The philosophical basis for vaccination
- Appraisal of individual vaccines
- Possible side effects of vaccinations
- Homeopathic alternatives to vaccinations

To be sure, the paper is written from the point of view of homeopathy which is very critical of vaccination; there's a lot of pro-vaccination information from conventional medicine sources.

My conclusions are, as could be expected, somewhat complex: vaccinations have some effectiveness, but certainly not to the extent claimed by the health authorities; they might have nasty side-effects, but sometimes this risk is lower than the threat of disease; conventional vaccines are not the only option, but if they are given some of the damage can be later reversed. The main conclusion is that, unfortunately, no-one can make the decision for parents. It is important, however, that parents have information from both pro and anti vaccination sources before they make up their minds.

1. Introduction to vaccination

The rationale behind the mass vaccination campaign is twofold:

- Prevention of serious diseases, which are sometimes fatal
- Eradication of diseases from the planet through the protection given to all or most of the possible carriers.

The current recommended vaccination schedule in the UK is:

DTaP/IPV/Hib (Diphtheria, Pertussis, Tetanus, Polio, Hib influenza)	2 months	3 months	4 months	3-5 years (not Hib)	13-18 years (not Pertussis, Hib)
Meningitis-C	2 months	3 months	4 months		
MMR (Mumps, Measles, Rubella)	12-18 months	3-5 years			
BCG (tuberculosis)	Baby - if likely to be exposed				

Vaccination is appealing in the progressive view it offers – eradication of disease and proactive control of health; it is a part of the modern and industrial attitude, based on seeing the body as a machine and diseases as enemies that should be fought with all possible means. However, the truth about health, disease and prevention is more complex: both because disease and health have to be considered in a wider, holistic, context and because the application of vaccines is rife with problems.

2. The philosophic issue – imposing our will on nature

The idea that diseases should be eradicated from the world raises some worries. Disease is part of life and is, homeopaths believe, a reflection of a state of being. Trying to remove a disease from the world all together might “upset the balance of Nature in fundamental ways that we can barely imagine” (Moskowitz, p.1).

Since disease is a reflection of a human condition, trying to eradicate it can only have one result – its substitution by a different disease, which will often be more dangerous and difficult to treat.

Contrary to the all-out war attitude to disease, many holistic thinkers claim that being sick in some of the childhood diseases is actually positive, as it allows the immune system to mature. Head (1999) says that after recovering from measles, for example, “there is usually a growth spurt, more energy, a clearer mind and increase in the child’s well-being” as well as better ability to deal with other viral infections.

3. The practical issue – how beneficial are individual vaccines?

The next question to ask is whether the UK vaccination program is targeting the right diseases and to what degree is the program effective. Following is a short benefit-to-risk evaluation of vaccination to each disease. The list starts with the case of lowest benefit to risk ratio, and ends in the case of apparent possible highest benefits.

Rubella

This is a mild disease with a very slight chance of serious complications. Its main danger is in case it is contracted during the first trimester of pregnancy, when it might cause fetal damage. The vaccine’s effectiveness is questionable. In one study 80% of *previously vaccinated* soldiers contracted the disease. Administration of the vaccine was connected to diseases such as glandular fever and chronic fatigue syndrome. It is clear that protection before pregnancy is important, but it seems that the best way to gain it is to actually have this mild disease, possibly through “rubella parties”, which were eagerly organized by mothers in the past. The current vaccination program actually pushes the disease into the more dangerous childbearing years: in the 1960s the average age of contracting Rubella was 8, in 1993 it was 17.

Mumps

Is another reasonably mild disease, in which complications are rare. It is more serious if contracted at puberty, at which time it might lead (a rare complication) to sterility in males. The situation is similar to rubella: as the vaccine is not very effective, taking it can often prevent getting mumps at childhood and lead to developing the disease in later years, when it is more dangerous. Contracting it naturally is possibly the best solution. Vaccination has several possible side effects, including the possibility of autism, which has recently been strongly denied by government agencies.

Measles

Is a more serious disease, but again children that contract it recover swiftly apart from a low possibility for serious complications. Measles was a deadly disease in the 19th century and until the middle of the 20 century (it is still deadly in third world countries, where mal-nourishment is common). Its near-disappearance is generally attributed to the vaccination program. However, death rate from the disease was falling fast *before* the introduction of the vaccine or of antibiotics, and it is not normally dangerous now. Again, the vaccine is not very effective - in a recent measles epidemic in the US 40% of the sick children had been vaccinated. The vaccine has potentially serious side effects including convulsions, encephalitis, wasting and many more.

Diphtheria

Has nasty symptoms, but its occurrence in the west is now extremely low (4 cases a year in the US). The disease was virtually eliminated *before* the introduction of the vaccine. Possible side effects of the vaccine are arthritis and damage to the central nervous system.

Pertussis (whooping cough)

Whooping cough is potentially very serious, because if infection occurs, mortality in under 5 months can reach 40%; mortality then decreases rapidly with age. This leads to giving the vaccine very early. Current incidence in the west is quite low and it has been declining fast before the introduction of the vaccine. There’s usually a degree of weakness in the system before contraction, so healthy, breast-fed babies (there’s protection through breast milk) are in lesser danger. The downside in vaccination is that this is one of the most toxic vaccines, and several European countries have now stopped this vaccine following

connection to side effects like SIDS (Sudden Infant Death Syndrome), asthma (according to one study – increases probability by 5.43 times) and neurological damage.

It is interesting that in a recent British outbreak of whooping cough fully vaccinated children contracted the disease in substantial numbers. More importantly, the rate of serious or fatal complications from the disease was reduced only slightly in vaccinated compared to non-vaccinated children. This might be interpreted to show that even if the vaccine offers some protection against *contracting* the disease it doesn't actually help those children that are most sensitive to it, because it doesn't reduce complications. A similar phenomenon of reduction in incidence but no reduction in death rate is seen in other vaccines as well.

Polio

Wild (paralytic) polio is virtually non-existent now. Mild polio, which is more widespread, is often indistinguishable from common cold. Wild polio can cause permanent paralysis if contracted after the age of 3 years (although babies are getting 3 doses before the age of 6 months). The polio vaccine has the advantage of being delivered through the mouth, the way the disease is contracted, and not directly to the blood stream. On the other hand, there are serious doubts as to its effectiveness, and the current vaccination procedure, with live virus that is often transmitted from the vaccinated baby to others, may actually preserve a disease that was already in a quick decline before the introduction of the vaccine¹.

Tetanus

Death rate if the disease occurs is 40%. However, it is now difficult to contract tetanus as it is mainly carried in horse and cow manure (to a lesser degree also in feces of dogs and cats), and because the bacteria dies upon exposure to the air. This means that one can only contract it through a deep penetrating wound that was neglected for a few hours and occurred in area where there were animal feces sometime in the past (the spores can remain in the ground for decades). The incidence of the disease in the UK is extremely low, and is limited to old people and drug-users (the incidence and mortality rates of tetanus in developing countries are higher, and traveling with children will call for a fresh review of *all* diseases/ vaccines). The vaccine, as usual, can cause side effects.

There is definitely no need for this vaccination before a baby can freely walk (but the vaccine is nevertheless given 3 times before the age of 6 months). Careful wound hygiene is the most important step to take, and deep wounds can also be treated homeopathically to avoid complications. On top of all that, there is post-injury "passive immunization" treatment – injection of antibodies, which should bring immediate protection in case of a deep wound even with no vaccination history. Intravenous doses of Vitamin C are also effective.

Hib (Haemophilus influenzae type b)

Hib is an infection that can cause a number of major illnesses like blood poisoning, pneumonia and meningitis. The disease can be fatal, especially for young children who are not breast-fed; in case of contraction treatment in whichever form must be immediate. On the other hand, the vaccine has questionable effectiveness and is connected to a myriad of side effects.

More vaccines

There are more vaccines currently offered in the US than there are in the UK (eg: hepatitis, chickenpox, flu). We should expect numbers in the UK to grow as well. One of the recent additions is vaccine to Men-c, protecting against one type of bacterial meningitis, which was recently introduced here. There's not enough critical information about this vaccine.

¹ Formerly deadly diseases, like scarlet fever and typhoid, have disappeared without vaccination. Could polio have followed if left alone? Dr. Salk, one of the developers of the polio vaccine, admitted in 1977 in a *Science* article that the vaccine is the principle reason for polio still present in the US and other countries (quoted by Golden).

4. Side effects common to all vaccines

Causes

Apart from the specific side effects of each vaccine, other side effects are possible due to the procedure of artificially introducing pathogens:

1. Administration – injecting pathogens bypasses the normal pathways of infection, which our immune system is designed to protect (almost all infection occurs through the respiratory system), and goes directly into the blood stream, thus shocking the body
2. Adjuvants – chemicals are used to prevent the body from quickly dismantling and excreting the pathogens. Some of these contain mercury. The danger is both the prevention of the natural immune response and in the introduction of neuro-toxins directly into the system
3. Preparation – some vaccines are prepared in animal tissue. This can lead to possible genetic abnormalities and cross-species disease transference²
4. Quantities – the quantity injected is massive compared to natural infection.

On top of that there are possibly other direct risk factors such as:

1. Faulty production
2. Faulty administration
3. Immediate allergic response
4. Abnormal sensitivity of patients.

Side effects

These factors might be manifested as the following side effects:

- Short term: the child becomes upset and irritable, develops temperature, soreness of the injection site, cough or runny nose. Anaphylactic shock (severe allergic reaction, deadly if not treated) is also possible
- Medium term: repeated, painless ear infections; sleeplessness, inability to concentrate; encephalitis
- Long term: destabilization of the whole immune system. Tina Head, a homeopath, says that she was “prompted to consider the question of mass vaccination by the enormous number of children who came for treatment (following vaccination) with vague symptoms and low-grade illnesses that would not respond to any type of medicine, including homeopathy.” More on the long-term effects in the next section.

The accumulation of data regarding side effects has caused one doctor investigating cot death to say that “vaccination is the single most prevalent and most preventable cause of infant death... the call for suspension of vaccination is now inevitable”³.

5. What do vaccines actually do? Possible long-term damage

Dr. R. Moskowitz, an MD and a homeopath, presents a disturbing theory as to what reaction the vaccine actually creates in the body. He starts by describing the immune reaction in case of normal infection, and goes on to describe the reaction to vaccine. This will be quoted in some length because I find that the discussion helps to understand the possible long-term influences of vaccines on the immune system.

“The process of coming down with and recovering from an acute illness like the measles involves a general mobilization of the entire immune system, including:

- 1) Inflammation of previously sensitized tissues at the portal of entry;
- 2) Activation of white blood cells and macrophages (scavenger cells) that find and destroy the foreign elements;
- 3) Release of special serum protein fractions to expedite these operations and numerous other mechanisms, of which the production of specific antibodies (which is what the vaccine does) is only one, and by no means the most important.

² Eg – one view of AIDS is that it is such a difficult disease to treat because the virus originates in a monkey – the “jumping gene” theory.

³ Dr. V. Scheibner; quoted in Golden, p. 26.

“This splendid outpouring leaves little room for doubt that acute illnesses are in fact the decisive experiences in the normal, physiological maturation of the immune system as a whole.

“In contrast, when the artificially attenuated measles virus is injected directly into the blood, it bypasses the normal portal of entry, producing at most a brief, mild inflammatory reaction at the injection site, but no incubation period, no local sensitization, no real possibility of eliminating it via the same route, and no generalized immune response to prime the immune system in the future. Indeed, by cheating the body in this fashion, we have accomplished precisely what the evolution of the immune system seems to have been designed to prevent: we have introduced the virus directly into the blood and given it free, immediate access to the major immune organs...

“To be sure, we have also achieved the production of specific antibodies against the virus, which can be measured in the blood, but now only as an isolated technical feat, with no massive outpouring and no general improvement in the health of the organism. Indeed, I fear, exactly the opposite is true: the exorbitant price we have to pay for these antibodies is for the maintenance of the virus in the cells of the immune system for prolonged periods of time, maybe permanently, which in turn presupposes a generalized weakening of our capacity to mount an effective response not only to measles, but to other acute infections as well.”

Moskowitz continues by saying that in his eyes vaccination does not confer a genuine immunity to the disease, but rather some sort of chronic immune *tolerance* to it.

Moskowitz uses the term “latent viruses”, and claims that the imperfect immune response, which is not powerful enough to actually remove the pathogen, might create a permanent enemy within. The chemical treatment given to vaccines to make them stay in the tissues for the longest possible time aggravates this danger. Moskowitz theorizes that these latent viruses are connected to the huge increase in autoimmune diseases, which is the most worrying medical phenomenon of our time (these are diseases in which the body attacks its own cells, and include nearly all the current serious diseases: cancer, rheumatoid arthritis, multiple sclerosis, lupus, ME...). There is a possibility, he says, that autoimmune diseases are not due to “the body going crazy”, or a genetic predisposition, as it is generally assumed now, but are actually justified – that the body merely tries to remove tissue that is perceived as foe, due to the presence of latent viruses.

6. The homeopathic alternative to vaccination

All systems of holistic medicine view microorganisms not as the cause for disease but rather as opportunist invaders to an already weakened body. Hence, the first priority for maintaining health is always to strengthen and balance the organism as much as possible. Even the World Health Organization maintains that “the best vaccine against common infectious diseases is an adequate diet”. Adequate, balanced nutrition which includes all the vitamins and minerals needed by the body, a healthy psychological environment together with constitutional treatment (homeopathic or other) in case it is necessary, are the most important steps to take in order to avoid complications of childhood diseases.

Nevertheless, it does make sense to consider prophylactic protection from certain diseases. In one rare study of homeopathic prophylaxis the result was 89% success in prevention of childhood diseases (Golden, p. 142). This is similar to the success rate of conventional vaccines, which is estimated at 75%-95%. Further research in this field is necessary.

Even homeopathic vaccinations shouldn't be used in a routine, indiscriminate way; as discussed earlier, it is sometimes good to allow a child to go through a disease.

7. Mitigating the damage of vaccination

Some parents might find it difficult to reject conventional vaccination all together. In such cases, they can still control a few factors which might minimize the damage:

a. Start vaccinations later in life

The immune system is maturing very quickly over the first months of life. Possible damage from vaccines will therefore decrease if the application is postponed. Even postponing vaccines so that they are taken only after the age of 6 months can be of benefit⁴.

B. Avoid using combination vaccines

This decreases the load on the system. There's also evidence that the immune system cannot cope with too many stimuli at once, so the level of protection offered by combination vaccines is lower.

c. Choose only specific vaccines

Avoiding combination vaccines allows the parent to weigh risk to benefit ratios for every disease, and to choose only specific vaccines.

d. Re-consider vaccination in specific cases

Parents should be very careful in cases where there is likely to be an adverse reaction, namely:

- In times of acute illness or fever
- Hypersensitivity, history of previous adverse reaction or allergic conditions
- Strong family history of adverse reaction to any vaccine
- Having any chronic disease
- Current treatment with any drug that depletes the immune system, including antibiotics.

e. Use homeopathy to undo some of the damage

In cases vaccines were given we can use homeopathic remedies to reduce the side effects of the vaccines. Remedies can be taken either immediately after the vaccine, or on later date, to reduce the damage caused by the vaccine. Such a treatment will be especially warranted if a child's health has deteriorated after receiving a certain vaccine.

Further reading

Golden, I., Vaccination? A Review of Risks and Alternatives, 1998

A detailed book about vaccination. Very useful, although the editing leaves much to be desired. Written by an Australian homeopath.

Head, T., An Educated Decision, 1999

Written by an English homeopath that might be, on occasion, trigger-happy with homeopathic remedies.

Moskowitz, R., Unvaccinated Children, at www.healthy.net

Good review of the philosophic background vaccination

Neustaedter, R., Vaccine Guide (Revised Edition, 2002)

One of the best comprehensive and accessible sources for information, thoroughly researched, including reviews of technical and political issues. Written by an American acupuncturist and homeopath. Can get a bit long-winded at parts.

⁴ In 1975 the Japanese government changed the starting age for giving DPT from 3 to 24 months. There was a sharp reduction in side effects, including SID. Long-term death rates from whooping cough remained unchanged.