

# Health & Healing

YOUR DEFINITIVE GUIDE TO WELLNESS MEDICINE



## Gardasil (HPV Vaccine): Fraud in Plain Sight

Of all the dangerous nonsense perpetuated by Big Pharma and its savage attack dogs in federal and state government, the human papillomavirus (HPV) vaccine is surely the most fraudulent and wasteful.

I've spoken out against this debacle since Gardasil, Merck's HPV vaccine, was approved back in 2006. Now it's in the news again, ever since Michele Bachmann dusted up Texas governor Rick Perry during a presidential candidate debate for issuing an executive order to require vaccination of all 11- and 12-year-old girls in Texas. (This was later revoked by the Texas state legislature.) Mike Toomey, Perry's former chief of staff, was a lobbyist for Merck at that time. If that isn't quid pro quo, I don't know what is.

Nevertheless, all females as young as age 9 through age 26 are being urged to get this vaccine—with or without parental consent or knowledge in some states. They're even recommending it for preadolescent boys and young men!

The whole thing stinks to high heaven, and the most repugnant odors are the clear lack of scientific validity, astronomical costs, and, most of all, the horrific harm inflicted on our children.

### Lack of Scientific Validation

The purpose of Gardasil and Cervarix (GlaxoSmithKline's HPV vaccine), according to the fuzzy logic of Big Pharma, is to prevent cervical

cancer. Regardless of what the drug companies, the Centers for Disease Control and Prevention (CDC), or your child's physician says, not only is there no firm scientific data to support that widespread

contention, but the whole concept is irrational.

The vaccine has been shown to prevent precancerous changes of the cervix, but to assume that these changes will progress to cancer is dishonest and manipulative. Ninety percent of HPV infections clear up spontaneously.

### USPSTF Agrees

Recognizing this, in October the US Preventive Services Task Force (USPSTF) issued new guidelines recommending that women be tested for cervical cancer with Pap tests (not HPV tests) every three years rather than annually because more frequent testing

leads to overtreatment of low-grade changes that would in all likelihood not turn out to be cancerous.

The Task Force further bolstered the stupidity of vaccinating young girls when they changed the screening guidelines to include only women ages 21 through 65, noting that cervical cancer is exceptionally rare in women under age 21.

In any case, cervical cancer is very slow growing, so we won't know whether mass vaccination reduces death rates for 20–30 years! It's all presumption, a huge lottery in which there may well be no winners—other than the drug companies.

### Just the Facts, Ma'am

- ▶ 4,000: cervical cancer deaths per year in the United States (2.4 per 100,000 women). Women are 75 times more likely to die of heart disease than of cervical cancer.
- ▶ 2.3 percent: women ages 14–59 infected with the two types of HPV associated with 70 percent of cervical cancer cases (30 percent are not associated with HPV).
- ▶ 90 percent: HPV infections that clear up on their own.
- ▶ 10–15 years: time for precancerous changes to develop into cervical cancer (average age of diagnosis is 50).
- ▶ Thousands: number needed to treat with HPV vaccine to save one life (theoretical, best-case scenario).
- ▶ \$15 billion: cost of vaccinating all 30 million females in target age range.



## Skewed Statistics

Even more damning are the infection statistics. The vaccine camp underscores the need for mass inoculation by trotting out government statistics showing that more than a quarter of American females ages 14–59 and nearly 45 percent of those ages 20–24 have been infected with HPV.

However, they fail to mention that there are 40 sexually transmitted HPV strains, and those targeted by Gardasil (types 6, 11, 16, and 18) and Cervarix (types 16 and 18) are rare. HPV types 6 and 11, which can cause genital warts, were detected in 1.3 and 0.1 percent of women, respectively, and types 16 and 18, which are linked with some cases of cervical cancer, were present in only 1.5 and 0.8 percent!

Bottom line: very, very few women who have HPV are infected with high-risk strains, and far fewer get cervical cancer. Every year in the United States, about 12,000 women are diagnosed with this cancer, and 4,000 die of it. Of course, any premature death is a tragedy, but we cannot lose sight of the fact that, according to the latest statistics from the National Cancer Institute, only 0.68 percent of women will ever be diagnosed with, let alone die of, cervical cancer.

## Number Needed to Treat

To further underscore the absurdity of universal HPV vaccination, let's look at the concept of "number needed to treat," or NNT, an extremely useful statistic for evaluating any medical treatment. Simply stated, NNT tells us how many people need to be treated with a given therapy to get the desired benefit in one patient. The lower the NNT, the more effective and predictable the treatment.

For example, peptic ulcers are primarily caused by *Helicobacter pylori* bacteria, and antibiotics that eradicate it are an extremely effective therapy. For every 11 patients with *H. pylori* who are treated with antibiotics, 10 are cured of their peptic ulcer. Therefore, the NNT is 1.1 (11 divided by 10).

Another example is statin drugs, which are prescribed to millions of people to lower cholesterol. According to a recent study, in order for statin drugs to prevent one heart attack, stroke, or cardiovascular death (the desired outcome of cholesterol-lowering), they would have to be taken by 1,000 patients, making statins' NNT 1,000 (1,000 divided by 1). The other 999 people per 1,000 who take these drugs and are subjected to their adverse effects get no benefit at all.

## Unacceptable, Sky-High NNT

So what is the NNT of the HPV vaccine in terms of preventing cervical cancer deaths? Even if it completely wiped out cervical cancer—which no one expects it to do—thousands would have to be vaccinated in order to prevent one death. The others would obtain no benefits, yet would be needlessly exposed to the inherent risks of this vaccine. Most statisticians agree that an NNT over 40 is no more than a crap shoot. An NNT in the thousands is an unmitigated fraud, and there's no evidence that the vaccine will save even one life!

We already have a system in place for preventing cervical cancer that works very well: regular Pap tests (every three years for women ages 21–65). Even the most vocal vaccine proponents admit the vaccine doesn't eliminate the need for Pap testing—or that most cervical cancer deaths occur in women who haven't been screened in the past five years. This system has reduced the incidence of cervical cancer from 15 in 100,000 women in 1975 to 6.6 per 100,000 in 2008.

Why fix something that isn't broken? The answer is obvious: Follow the money.

## Astronomical Costs

In the United States, there are roughly 30 million females between the ages of 9 and 26 who are "eligible" for HPV vaccination, which requires three doses spread out over six months at a retail price of \$130 each (\$390 total). That's nearly \$12 billion right into the pockets of Big Pharma.

Now, let's add in physicians' fees and average the cost for the three-dose course at \$500. (Some doctors will charge more, some less.) So \$500 x 30 million patients = \$15 billion. Imagine spending \$15 billion on a vaccination program with no hard evidence that any lives will be saved!

Let's take it a step further and assume this lavish blanket of presumed protection actually works and cervical cancer is eliminated. (Nevermind that a minuscule percentage of HPV-infected women ever develop cervical cancer, that 30 percent of women with cervical cancer have not been infected with HPV, and that we won't even know if the darned thing works for decades.) Guess how much it would cost per life saved in this best-case scenario? \$7.5 million!

If we took that \$15 billion and put it towards food subsidies and other proven health interventions, we could save tens of millions of lives. But,



incredibly, the powers that be prefer to waste it on a fraudulent vaccination program that funnels the money into the coffers of Big Pharma!

## Now They're Going After Boys

As if 30 million girls and young women weren't enough, Merck tried to get Gardasil approved for women up to age 45, but even the Food and Drug Administration (FDA) recognized this absurdity for what it was. However, Big Pharma also has males in their sights, arguing that they too must be vaccinated to prevent the spread of HPV to their sexual partners.

If vaccinating females makes no sense, going after males is a crime against humanity. HPV is almost always an inconsequential infection in males, so the NNT for them is infinity! No male gets any benefit at all. Unfortunately, they are not immune to the adverse effects of the vaccine. In fact, they are likely at greater risk of damage—at least that's what we've learned from the standard childhood vaccinations, which negatively affect two to three times more boys than girls.

As for costs, don't get me started. We would spend another \$15 billion vaccinating all males in the target age range—with zero benefits to them and absolutely no assurance or evidence that this "experiment" would ultimately reduce the rate of cervical cancer in women. There's only one given: Any amount of money spent on such an ill-advised campaign would be 100 percent waste to the public, yet hugely profitable for Big Pharma.

## Horrific Damage to "Gardasil Girls"

I predict that the entire HPV vaccine folly will not only be a colossal failure in terms of health benefits, but it will also leave an expanding wake of "Gardasil girls" suffering with seizures, strokes, chronic headaches, and worse. One of these girls is Zeda Pingel, whose mother Amy Pingel chronicles her daughter's destruction in the excellent, must-read book *Vaccine Epidemic: How Corporate Greed, Biased Science, and Coercive Government Threaten Our Human Rights, Our Health, and Our Children*.



Zeda Pingel, a bright, healthy 13-year-old, before receiving the HPV vaccination in 2008.



Today, Zeda requires a tracheotomy, feeding tube, and around-the-clock care. (Photos courtesy of Skyhorse Publishing)

In 2008, 13-year-old Zeda was a happy, healthy straight-A student and cheerleader with a bright future when, during a routine well-child checkup, her pediatrician suggested she have the Gardasil vaccine. Although neither Amy nor Zeda knew much about it, they went along with the doctor's recommendation. The problems started a week later, and within three weeks, Amy reports, "I began to lose my precious daughter. Zeda stopped talking, stopped eating, stopped walking, and...lost control of her bladder."

## Doctors in Denial

Despite spending months in a top-notch children's hospital specializing in neurological problems and undergoing hundreds of tests, Zeda's doctors couldn't find a single explanation for her rapid deterioration. Given that it started after Zeda was vaccinated, Amy thought it could be related to Gardasil, yet every time she brought it up, the medical team aggressively denied that it could have been involved.

Their denial borders on the diabolical. For weeks, the doctors and nurses accused Zeda of faking her symptoms, even though she was having frequent grand mal seizures. Even worse, they suspected her mother was coaching her to keep up the pretense and went so far as to install 24-hour surveillance cameras in hopes of "proving" that the mother and daughter were involved in a hoax.



Today, Zeda is fed through a gastric tube, breathes through a tracheotomy, and lives in a vegetative state in the living room of her mother's home. Her tragedy is not an isolated incident. Tens of thousands of adverse reactions to the HPV vaccine have been documented—including over 100 deaths.

## Bypassing Parental Consent

One of the most disgusting aspects of this entire charade is the lengths to which they're going in order to force this vaccination program down our throats. Several state governments have enacted laws that require schools to hand out information on the vaccine to sixth graders and their parents and insurance companies to provide reimbursement.

For example, the state of New Jersey delivered HPV vaccine propaganda to parents via their children's backpacks. And, here in California, Governor Jerry Brown recently signed legislation that enables children as young as 12 to be vaccinated against HPV and hepatitis B *without a parent's knowledge or consent*.

Imagine, parents have to sign waivers for their children to go on a school picnic, but 12-year-olds, without parental knowledge or consent, can have toxic substances injected into their growing bodies. This combination of Big Pharma plus government is, in a single word, evil. There is no other way to describe it.

## Parents, It's Up to You

Unfortunately, you can't count on your doctor to help you make educated decisions on the HPV vaccine. Virtually all pediatricians follow the dictates of the American Academy of Pediatrics, CDC, and other handmaidens of Big Pharma and vigorously support every vaccination program that comes down the pike. Their refusal to rock the boat by acknowledging the growing body of evidence about the dark side of vaccines is safe for the doctor but terribly

dangerous for your child. (Just imagine what it would be like if you were Zeda's mother, Amy Pingel.)

Parents, it's up to you to protect your children. Keep the lines of communication open and make sure your kids understand the extreme risks and no proven

benefits of the HPV vaccine. As Amy Pingel says, "...people who pressure you to vaccinate don't own the consequences. Only you, as parents, do."

## In Summary

Folks, it's going to get worse before it gets better. In addition to blowing the cervical cancer angle way out of proportion, vaccine proponents are now fabricating additional "benefits" in order to sell their wares. When a recent small study demonstrated a *potential, preliminary* link between HPV infection and risk of heart attack and stroke, headlines across the country screamed that the vaccine protects against cardiovascular disease! Now, that's a stretch if there ever was one.

It may take many years and, unfortunately, countless injuries and untold numbers

of deaths, but we're not as naïve or stupid as Big Pharma takes us to be. Mark my words. The public will eventually wake up and see the HPV vaccine for what it is—a dangerous, money-grabbing, scientifically invalid fraud.

## References

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- National Cancer Institute. Human Papillomavirus (HPV) vaccines. <http://www.cancer.gov/cancertopics/factsheet/prevention/HPVvaccine>.

## My Recommendations

- ▶ Help me get the word out about the HPV vaccine's ineffectiveness, dangers, and utter waste of resources. Copy this article (copyright permission is granted), send it to 10 people, and ask them to send it to 10 others. The only thing that can slow down this machine is for enough people to voice their outrage over this travesty.
- ▶ To learn more, read *Vaccine Epidemic: How Corporate Greed, Biased Science, and Coercive Government Threaten Our Human Rights, Our Health, and Our Children*, edited by Louise Kuo Habakus and Mary Holland. It is available at [amazon.com](http://amazon.com) and in bookstores or may be ordered from the Freedom of Health Foundation ([thefhf.org](http://thefhf.org), 800-792-4269).
- ▶ Watch *The Greater Good*, a documentary on childhood vaccinations. It is available at [greatergoodmovie.org](http://greatergoodmovie.org) or from the Freedom of Health Foundation.
- ▶ Another good source of information is the National Vaccine Information Center's website, [nvic.org](http://nvic.org).