

Editor's Notebook: Bernard Rimland, Ph.D.**The MMR/autism controversy: should we believe the IOM?**

You have seen the headlines:

Panel Finds No Link Between Childhood Vaccines, Autism (*New York Times*)

No Links Found Between Childhood Vaccine, Autism (*Los Angeles Times*)

US Expert Group Rejects Link Between MMR and Autism (*The Lancet*)

Is it true? Has the autism/MMR link been scientifically disproved? Absolutely not!

The above headlines refer to a report published by the heretofore respected Institute of Medicine (IOM), a branch of the National Academy of Sciences. You may be thinking: If a prestigious independent group such as the IOM rejects the autism/MMR connection, there must be good reason for doing so. Why shouldn't I accept that verdict?

You shouldn't accept the verdict for several reasons. One is that the headlines are wrong—the IOM did *not* reject the hypothesis that the MMR is a possible cause of autism. The headlines were based on a press release written by individuals with suspected links to the vaccine manufacturers, and did not accurately reflect the actual statement by the IOM itself. Representative Dan Burton, who has conducted intensive investigations of the evidence linking vaccines to autism, and had insisted on excluding from the IOM panel those with a conflict of interest, was furious when he found that individuals with ties to the vaccine manufacturers had distorted the position of the IOM report to make it appear to wholly reject the autism/MMR link. He noted that two of those who issued the press release appeared to have ties with the vaccine manufacturers, and he has vowed to determine the extent of their conflict of interest. Burton's very normal grandson became autistic soon after receiving in one day multiple vaccines containing 40 times the acceptable level of mercury.

The IOM report actually said: "*Although the committee has concluded that the evidence favors rejection of the causal relationship at the population level between MMR vaccine and ASD, the committee recommends that this issue receive continued attention... its conclusion does not exclude the possibility that MMR vaccine could contribute to ASD in a small number of children...*"

This is an exceedingly weak statement, considering the evidence at hand (see below), but it certainly does not reject a causal link. (And what does "at the population level" mean?) Autism currently occurs in about one child in 130, far above the 1-in-2500 figure reported in the 1970s and 1980s, before the MMR triple vaccine was introduced. And 1 in 130 is quite consistent with what *both* the IOM and the vaccine critics claim: "MMR may cause autism in a small number of children." The IOM statement thus supports, not refutes, what the MMR critics contend. De-

spite the headlines, the safety of the MMR is clearly not assured. The media have been duped by the medical establishment's spinmeisters, with the intentional complicity of the IOM.

It is the medical establishment's burden to have proven that the vaccines are safe, not the critics' burden to prove them unsafe. Safety testing should have been done 20 years ago, when the MMR triple vaccine replaced the measles, mumps, and rubella vaccines which were given separately, over a period of time, and when the number of vaccines was 8 rather than 22. As we pointed out in ARRI 15/1, the UK expert panel charged with evaluating the safety of the MMR said, "Being extremely generous, evidence on the safety [of the MMR] was very thin," "The granting of a product license was definitely premature," and, "In almost every case observation periods were too short to include the time of onset of late neurological or other adverse events. Interaction between vaccines had not been considered adequately with multiple vaccinations and potentially ill-equipped immune systems."

A spokesperson for the *Journal of Adverse Drug Reactions*, in which the above statements appeared, stated, "All the reviewers conclude that something needs to be done about the MMR, and that there is a case to answer against the vaccine."

The fact that the IOM report was misrepresented by the drug industry's spinmeisters does not exonerate the IOM from having shirked its responsibility to report that:

1. The MMR had not undergone adequate safety testing.

2. The practice of injecting increasingly large numbers of vaccines—many containing large amounts of mercury and other toxins—into the bloodstreams of immature infants was never evaluated for safety.

3. The Vaccine Adverse Event Reporting System (VAERS) is a travesty; fewer than 10 percent of side effects are ever reported.

4. Thousands of U.S. and U.K. families say—and can demonstrate with videotapes and photos—that their children were normal prior to being vaccinated, reacted badly to the vaccines, and became autistic shortly after.

5. A number of clinical laboratory studies demonstrate that vaccines may cause chronic damage to the G. I. tract, immune system, brain, and other organs. Several such studies have been reported in past issues of the ARRI. Wakefield, Sabra, Singh, O'Leary and Kawashima are among the authors whose work documents lingering vaccine effects on children on the autistic spectrum, compared to normal controls.

The IOM report pays little heed to this evidence, instead focusing attention on several deeply flawed epidemiological studies.

None of the laboratory studies were mentioned in the popular press reports.

Why did the IOM stoop to issuing such a devious, misleading report, thereby incurring a permanent blot on its credibility? The IOM is an instrument of mainstream medicine, and mainstream medicine has an enormous stake in the public belief that vaccines are safe. During the past decade, mainstream medicine has suffered a hemorrhage of patients who have been flocking to practitioners of alternative medicine. Too often have prescription drugs have been found more dangerous than the illness. When the link between the use of unsafe, mercury-laden vaccine and autism, ADHD, asthma, allergies and diabetes becomes undeniable, mainstream medicine will be sporting a huge, self-inflicted and well-deserved black eye.

Then will come the billion-dollar awards, by enraged juries, to the children and their families. I can't wait.

Be that as it may, the parents of today are confronted with the question: "What do we do about vaccinations?" Even as I write these words, the California legislature is conducting hearings to decide if two more vaccines, Hepatitis A and Prevnar, will be required before children can be admitted to day care or kindergarten. Parents of vaccine-injured children are opposing these measures. When will it end? Profit, not public health, is the goal of many who advocate the use of all of these unnecessary vaccines.

Alternative medicine provides a much more rational approach to preventing disease—including the diseases that are a direct result of vaccines—bolstering the immune system. Even during the most horrific epidemics—the bubonic plague, smallpox, polio, and AIDS—most humans escape death, despite exposure to the pathogen. Why? Obviously, because their immune systems were competent to defend the body. That is the immune system's job. Can we enhance the immune system's capacity to defend us? Of course! Rely on nutrients, not drugs.

As we have pointed out previously (ARRI 12/1), providing the immune system with the nutrients it needs by means of a high quality multiple vitamin/mineral supplement, with extra amounts of vitamins C, A and E, as well as extra selenium and zinc, can make a big difference in your—and your child's—vulnerability to pathogenic viruses, bacteria and yeasts. Such fortification of the immune system is especially important in the weeks preceding and following vaccinations.

The Autism Research Institute has compiled, from several reliable sources, advice to parents concerning vaccinations. To receive a copy, send a self-addressed, stamped business size (#10) envelope marked "vaccine advice" to ARI.