Editor's Notebook: Bernard Rimland. Ph.D.

Autism, vaccines, and an answer to bioterrorism

"The history of progress is a chronicle of authority refuted." I don't know who said it, but I totally agree—especially where autism is concerned. The authorities were dead wrong in saying that covert maternal rejection caused autism, that behavior modification (now ABA) was useless, that megavitamin therapy and gluten/casein-free diets were ineffective, and in claiming that there was no increase in the prevalence of autism.

And they are wrong again—disastrously wrong—in claiming with a spate of self-serving quasi-scientific studies that vaccine damage is not a cause of autism. The vaccine issue, which you have read about in ARRI articles and editorials since 1992, will be settled in the courts now that a public and media outcry has forced Congress to remove the wording in the Homeland Security Bill which would have protected the vaccine manufacturers from lawsuits holding them accountable for the harm their products have caused.

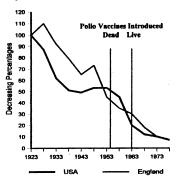
There is yet another area in which the authorities have again been shown to be wrong—an area which has been given far too little attention. Despite the sacred cow status of vaccines, the truth must be told: Not only has the safety of vaccines been vastly overstated, so has their efficacy. Vaccines are nowhere near as effective in preventing diseases such as measles, pertussis, polio and smallpox as the drug companies, the professional medical associations, the FDA, and the CDC would have you believe.

I shared the commonly held beliefs about vaccines until I began to study vaccine safety and efficacy a dozen years ago. There is a huge literature on the subject, but because criticizing vaccines is a taboo subject, those who have questions about vaccine safety have been given scant attention and scant respect. That situation is rapidly changing, now that the bioterrorism threat and mass vaccinations are front-page news. Better late than never to address the issues of vaccine safety and efficacy.

There are thousands of articles and many books documenting vaccine problems. Two new books that I heartily recommend are Vaccines: Are They Really Safe and Effective?, 2nd edition, 2002, and Vaccines, Autism and Childhood Disorders, 2003, both by Neil Z. Miller. The Safe and Effective? book, bolstered by 916 references, should be required reading for everyone—even if the "reading" consists only of looking at Miller's 30 startling graphs. At the top of column 2 is a sample of a Miller graph, based on official government statistics. He presents similar graphs for measles, pertussis and smallpox.

The medical authorities would have you believe (see the CDC website) that vaccines have caused the decline in these diseases. Not so! Read what Miller has to say.

The Polio Death Rate
was Decreasing on its Own
Before the Vaccine was Introduced



From 1923 to 1953, before the Salk killed-virus vaccine was introduced, the polio death rate in the United States and England had already declined on its own by 47 percent and 55 percent, repsectively. Source: International Mortality Statistics (1981) by Michael Alderson.

Preventing disease

As I have pointed out on a number of occasions on these pages, too little attention has been paid to the fact that the vast majority of individuals exposed to a disease do not succumb to it, even in the worst epidemics. The bubonic plague killed one third of the population of Europe. The 1918 flu epidemic killed many thousands in the U.S. Why did the survivors survive? The answer is that their immune systems were able to cope effectively with the pathogens.

Thus, a wise approach to protecting against infections and other pathogens is to bolster the immune system—and we have safe, effective ways of doing this, as I pointed out to the Department of Defense in a letter in 1999 during a period when many military personnel were (rightly) concerned about anthrax vaccinations:

The difference between individuals in their susceptibility to pathogens depends, in part, upon their genetic makeup, and also in part upon the efficacy of their immune system. The immune system, like every other system in the body, is highly dependent upon the nutritional status of the individual.

A great deal of scientific evidence shows that poorly nourished individuals are at much greater risk for adverse effects from pathogens than well-nourished individuals. A great deal of evidence also shows that supplementing with certain nutrients can greatly increase the ability of the immune system to resist attack by pathogens.

A case in point: Dr. Archie Kalokerinos, an Australian physician, was awarded a medal by the Australian government for his discovery that simply giving vitamin C to Aborigine children before they were vaccinated cut the death rate from 50% to practically zero. (De-

scribed in his book, Every Second Child.)

Research shows that in addition to vitamin C, vitamin B6, vitamin E, selenium, zinc, dimethylglycine, and certain other nutrients have strongly powerful synergistic effects upon the immune system.

An unpublished study at Fort Detrick showed dimethylglycine, an extremely safe nutrient known to enhance immune function, reduced mortality in guinea pigs given a lethal dose of anthrax. A 1990 study at Clemson University showed rabbits given DMG improved 300% to 1000% in immune functioning over control animals.

Yes, the same DMG that helps so many autistic children can protect against anthrax!

These nutrients are available as nutritional supplements at low cost and pose no risk of adverse effects, even if used at relatively high doses. It is here proposed that an experiment be conducted whereby a population of military personnel—perhaps 10,000 who are to receive vaccinations over a period of 6 months would be identified. Half of this population would, on a random basis, be given a combination of nutritional supplements agreed upon by experts as being both totally safe and beneficial for effective immune system function. The other half of the population would receive placebos. Careful records would be kept of all health problems and complaints in the total population, and at the end of 6 months, the code would be broken to determine whether the supplementation by immuneenhancing nutrients was effective in eliminating or significantly reducing the number of symptoms. Note that enhanced immune function should reduce symptoms from all causes, not just possible vaccine-related symptoms.

In the civilian population there is a great deal of concern, and it is growing rapidly, about the possibility that certain vaccines, particularly the MMR, DPT, and hepatitis B, may be bringing about serious illness, including autism, in children. It is here contended that if the children were given appropriate immune-enhancing nutritional supplements for 30 to 60 days prior to their vaccinations, the number of adverse reactions might be greatly reduced, or perhaps even eliminated. Conducting the proposed study would be much more feasible in the military than in the child population.

The Department of Defense did not reply to my letter.

Neil Miller's books are available from ARI. See insert in this issue or www.autismresearchinstitute.com. Order several copies and spread the word.