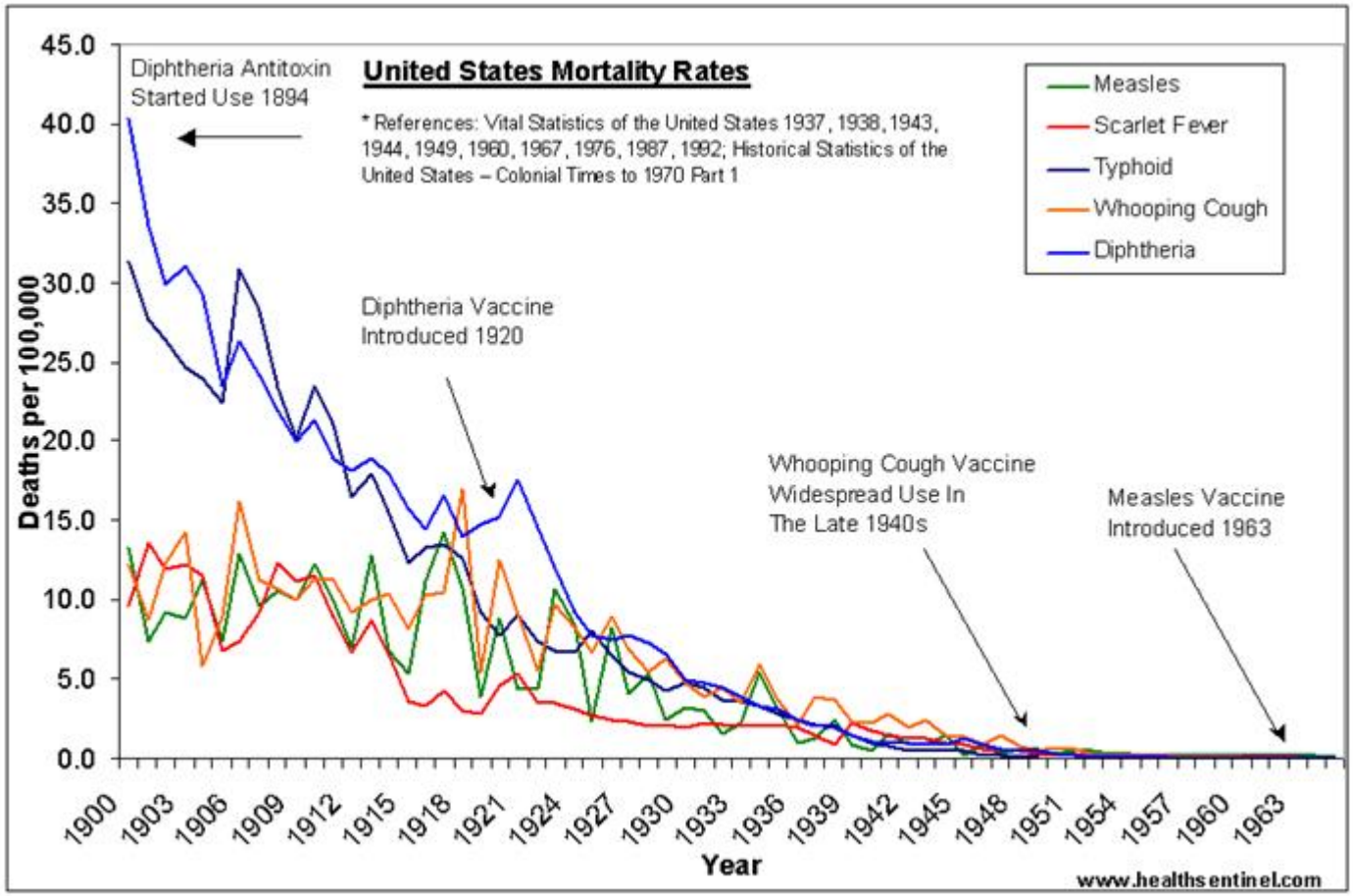
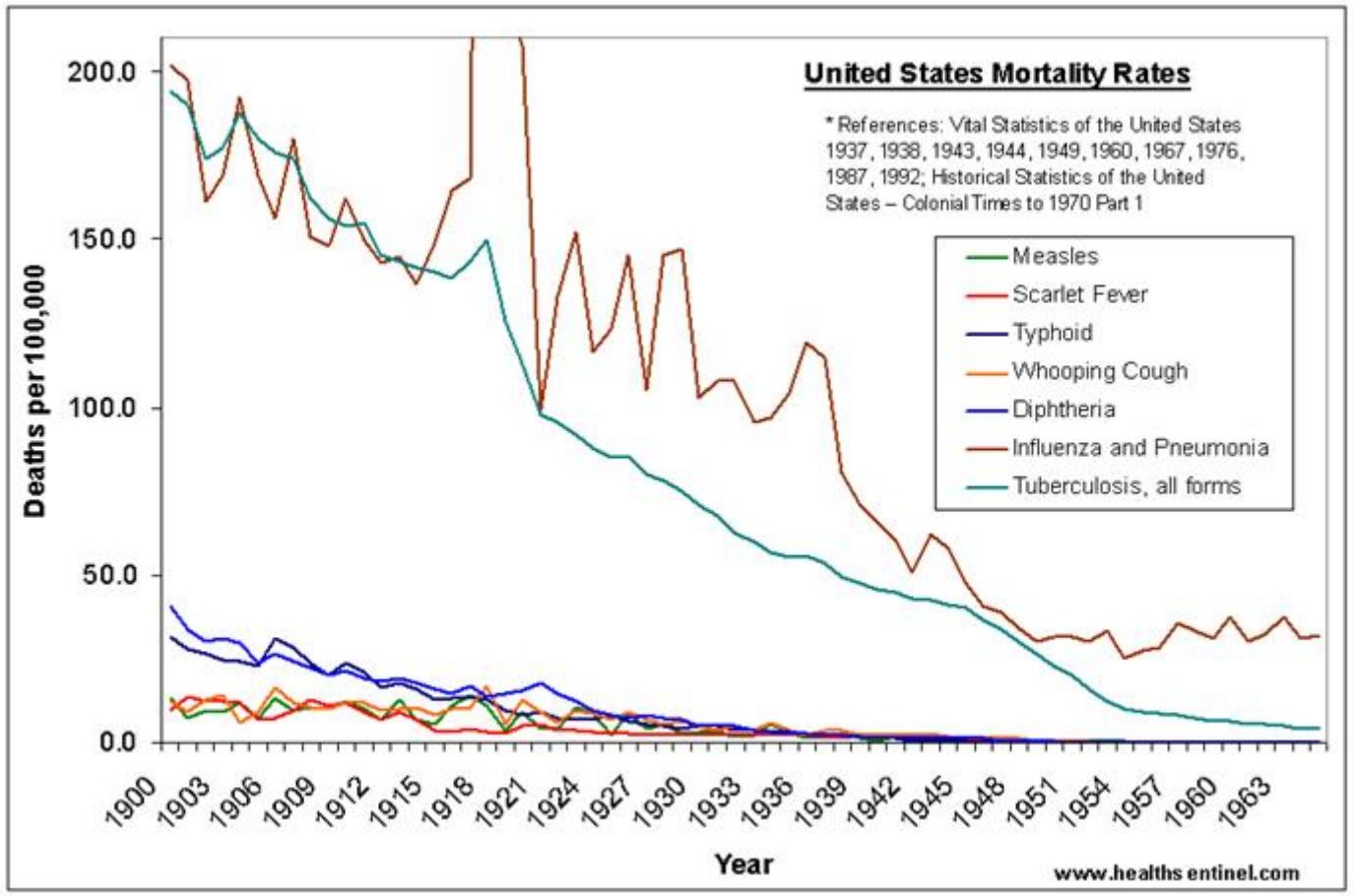
To whom it may concern,

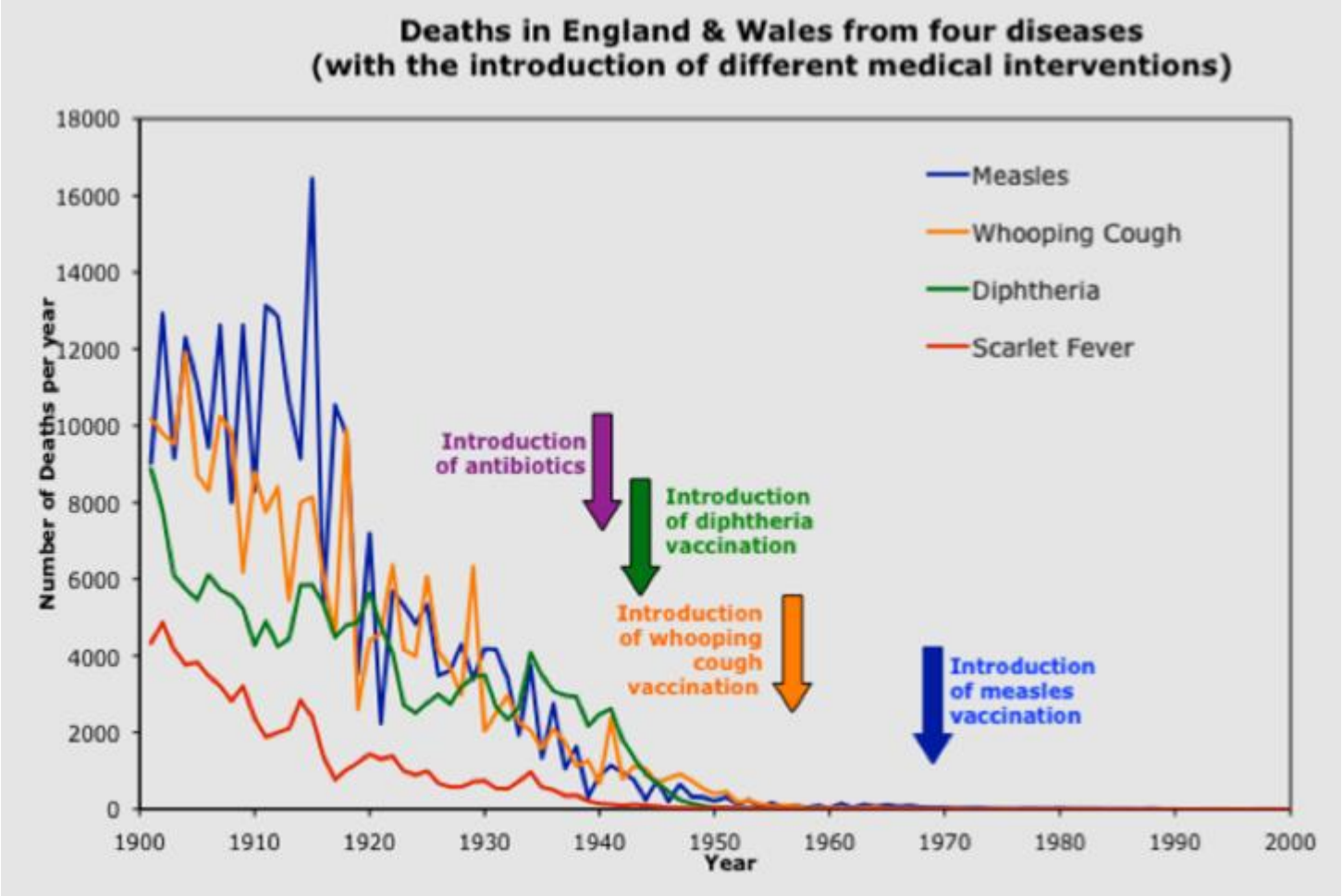
We appreciate the opportunity to make our submission.

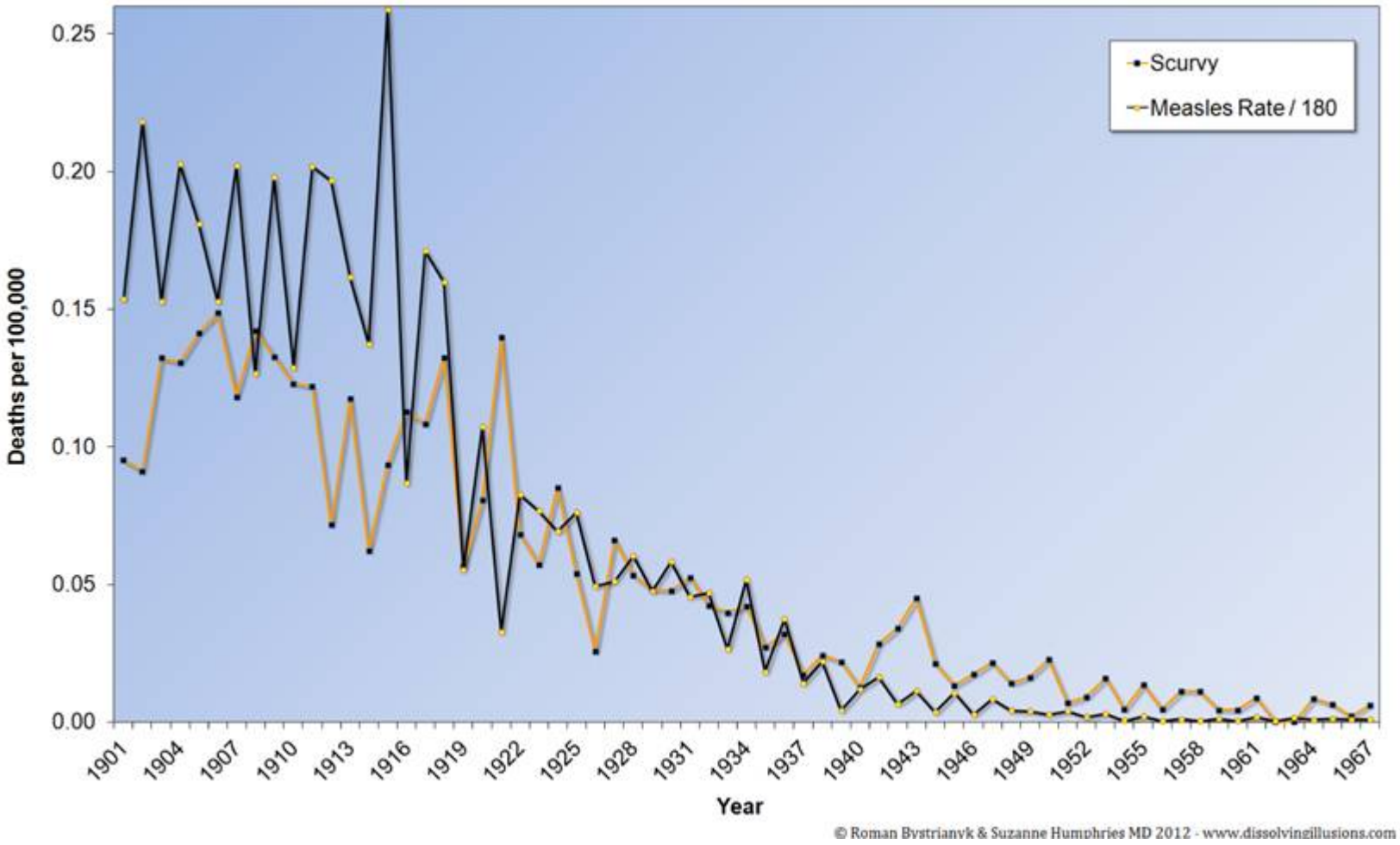
We are stunned by such claims as "*There is no ... medical research to support the choice to not immunise"* in the 'Strengthening immunisation requirements – Fact Sheet'.
This does, however, show how the "No Jab, No Pay" Bill could have been approved, given such a claim.
We have included in this submission, approx **125 medical research articles** that show the horrendous effects of vaccine ingredients and vaccination in general, as well as giving parents good reason to conscientiously object.
Given that there *is* medical research, showing that vaccines and their ingredients **are harmful**, we think that a parent has every right to be able to conscientiously object to vaccination without being penalised.
The findings mentioned in these medical research articles, also appear to correspond with rising health issues in the community.
And the government fact sheet on the internet states *"Immunisation is a simple, safe and effective way of protecting children against harmful diseases that can cause serious health problems and sometimes death".*
According to the medical research articles we have included, *vaccines* can **cause serious health problems including death**.
Disability and death occur from vaccines: http://www.ncbi.nlm.nih.gov/pubmed/22531966
The US Vaccine Injury Program has paid out almost 3billion USD in compensation, as a result.

As you can see in the graphs below, diseases were already on the decline prior to vaccinations.
Even diseases that are not vaccinated against (Scarlet Fever, Scurvy), are following a similar pattern.
The Measles Vs Scurvy graph suggests that a diet increasing in vitamin C (and other important nutrients) helped lead to the decline of measles before the measles vaccine.
This is the answer to eradicating disease, eradicating malnutrition. A person can be fed, but still suffer from malnutrition.
Is it ethical for pharmaceutical companies to take credit for this natural decline, and to make billions out of it, in the process?
Instead, with their vaccinations, they are creating new epidemics of neurological diseases (including schizophrenia), autoimmune diseases and infertility; long term health issues that will also make them billions more in drug sales.


United States Mortality Rates
* References: Vital Statistics of the United States 1937, 1938, 1943, 1944, 1949, 1960, 1967, 1976, 1987, 1992; Historical Statistics of the United States – Colonial Times to 1970 Part 1
Diphtheria Antitoxin Started Use 1894
Diphtheria Vaccine Introduced 1920
Whooping Cough Vaccine Widespread Use In The Late 1940s
Measles Vaccine Introduced 1963
Measles
Scarlet Fever
Typhoid
Whooping Cough
Diphtheria
Deaths per 100,000
45.0
40.0
35.0
30.0
25.0
20.0
15.0
10.0
5.0
0.0
1900 1903 1906 1909 1912 1915 1918 1921 1924 1927 1930 1933 1936 1939 1942 1945 1948 1951 1954 1957 1960 1963
Year
www.healthsentinel.com


United States Mortality Rates
* References: Vital Statistics of the United States 1937, 1938, 1943, 1944, 1949, 1960, 1967, 1976, 1987, 1992; Historical Statistics of the United States – Colonial Times to 1970 Part 1
Measles
Scarlet Fever
Typhoid
Whooping Cough
Diphtheria
Influenza and Pneumonia
Tuberculosis, all forms
Deaths per 100,000
200.0
150.0
100.0
50.0
0.0
1900
1903
1906
1909
1912
1915
1918
1921
1924
1927
1930
1933
1936
1939
1942
1945
1948
1951
1954
1957
1960
1963
Year
www.healthsentinel.com


Deaths in England & Wales from four diseases
(with the introduction of different medical interventions)
Number of Deaths per year
18000
16000
14000
12000
10000
8000
6000
4000
2000
0
1900
1910
1920
1930
1940
1950
1960
1970
1980
1990
2000
Year
Measles
Whooping Cough
Diphtheria
Scarlet Fever
Introduction of antibiotics
Introduction of diphtheria vaccination
Introduction of whooping cough vaccination
Introduction of measles vaccination



Diseases, including diseases that had no vaccination, were already well on the decline, before vaccinations were introduced, due to better hygiene (sanitation) and better nutrition (eg Vitamin C in fruits and vegetables being brought into the cities).

Big Pharma have taken credit for this and every time they introduce a new vaccine, that's a billion dollars a year in profit (of which our government undoubtedly stake their claim in taxes etc).
Big Pharma are not liable for injury or death caused by these vaccines, so they can just keep pumping them out.
Who is liable? Who can a parent sue or seek compensation from, when their child is injured or killed by a vaccine?
There's another 271 vaccines in the pipeline, waiting to be added to the 'schedule' (profit margin).

Also, the claim that vaccines are *vigorously* tested; they most certainly are not:
"Some adverse events are unlikely to be detected in prelicensure clinical trials because of their low frequency, the limited numbers of enrolled subjects, and other study limitations.
Therefore, postmarketing monitoring of adverse events after vaccinations is essential.
The cornerstone of monitoring safety is review and analysis of spontaneously reported adverse events."
http://www.ncbi.nlm.nih.gov/pubmed/12825543
So basically, the real clinical trial of the vaccine begins, once it is being given to the masses.
Our children are their guinea pigs as well as their cash cows.

The other thing that our government are failing to acknowledge, is that the testing of the vaccines, is done by the pharmaceutical companies and the corrupt CDC.
They should be looking at medical research that is done by independent researchers, who are not being funded by, or include employees of, Big Pharma, who bias the research.
http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3482043/
http://www.ncbi.nlm.nih.gov/pubmed/20608245
http://www.ncbi.nlm.nih.gov/pubmed/17602130
http://www.ncbi.nlm.nih.gov/pubmed/16877136

Please see the following independent scientific medical research (no Big Pharma scientists or CDC scientists biasing the outcomes):

http://www.ncbi.nlm.nih.gov/pubmed/24995277
http://www.ncbi.nlm.nih.gov/pubmed/21543527
http://www.ncbi.nlm.nih.gov/pubmed/22531966
http://www.ncbi.nlm.nih.gov/pubmed/25708367

http://www.ncbi.nlm.nih.gov/pubmed/22235057
http://www.ncbi.nlm.nih.gov/pubmed/19106436
http://www.ncbi.nlm.nih.gov/pubmed/25625408
http://www.ncbi.nlm.nih.gov/pubmed/25489565
http://www.ncbi.nlm.nih.gov/pubmed/14976450
http://www.ncbi.nlm.nih.gov/pubmed/16273274

http://www.ncbi.nlm.nih.gov/pubmed/12140745
http://www.ncbi.nlm.nih.gov/pubmed/20816346
http://www.ncbi.nlm.nih.gov/pubmed/24942245
http://www.ncbi.nlm.nih.gov/pubmed/23145070
http://www.ncbi.nlm.nih.gov/pubmed/24690681
http://www.ncbi.nlm.nih.gov/pubmed/24354891
http://www.ncbi.nlm.nih.gov/pubmed/18370243
http://www.ncbi.nlm.nih.gov/pubmed/11770890
http://www.ncbi.nlm.nih.gov/pubmed/12145534
http://www.ncbi.nlm.nih.gov/pubmed/14534046

http://www.ncbi.nlm.nih.gov/pubmed/9756729
http://www.ncbi.nlm.nih.gov/pubmed/25114790
http://www.ncbi.nlm.nih.gov/pubmed/25173055
http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3364648/
http://www.ncbi.nlm.nih.gov/pubmed/21568886
http://www.ncbi.nlm.nih.gov/pubmed/20803069
http://www.ncbi.nlm.nih.gov/pubmed/25382662
http://www.ncbi.nlm.nih.gov/pubmed/25424939
http://www.ncbi.nlm.nih.gov/pubmed/21549155
http://www.ncbi.nlm.nih.gov/pubmed/21225508

http://www.ncbi.nlm.nih.gov/pubmed/24532866

http://www.ncbi.nlm.nih.gov/pubmed/22015705
http://www.ncbi.nlm.nih.gov/pubmed/21350943
http://www.ncbi.nlm.nih.gov/pubmed/25198681
http://www.ane.pl/pdf/7021.pdf
http://www.ncbi.nlm.nih.gov/pubmed/17454560
http://www.ncbi.nlm.nih.gov/pubmed/22015977
http://www.nature.com/mp/journal/v9/n4/abs/4001476a.html
http://www.ncbi.nlm.nih.gov/pubmed/20628444
http://www.ncbi.nlm.nih.gov/pubmed/16264412

http://www.ncbi.nlm.nih.gov/pubmed/12773696
http://www.ncbi.nlm.nih.gov/pubmed/20424565
http://www.ncbi.nlm.nih.gov/pubmed/18482737
http://www.ncbi.nlm.nih.gov/pubmed/20424300
http://www.ncbi.nlm.nih.gov/pubmed/20391108
https://www.youtube.com/watch?v=LZe99K12740
http://www.ncbi.nlm.nih.gov/pubmed/25428645
http://www.unboundmedicine.com/medline/citation/23387884/Aluminum_excytotoxicity_and_neuroautotoimmunity:_the_role_of_the_brain_expression_of_CD32+__Fc%CE%B3RIIa__ICAM_1+_and_CD3%CE%BE_in_aging_
http://www.meerwetenoverfreek.nl/images/stories/Tomljenovic_Shaw-CMC-published.pdf
http://www.sciencedirect.com/science/article/pii/S0162013409001895

http://www.ncbi.nlm.nih.gov/pubmed/21568886
http://www.ncbi.nlm.nih.gov/pubmed/23932735
http://www.ncbi.nlm.nih.gov/pubmed/24675092
http://lup.sagepub.com/content/21/2/223.short
http://www.ncbi.nlm.nih.gov/pubmed/22099159
http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4202242/
http://www.medical-hypotheses.com/article/S0306-9877(08)00493-3/abstract
http://www.ncbi.nlm.nih.gov/pubmed/19004564

http://www.ncbi.nlm.nih.gov/pubmed/11130287
http://www.ncbi.nlm.nih.gov/pubmed/23557144

http://www.ncbi.nlm.nih.gov/pubmed/25189402
http://www.ncbi.nlm.nih.gov/pubmed/25349607
http://www.ncbi.nlm.nih.gov/pubmed/23576057
http://www.ncbi.nlm.nih.gov/pubmed/20882368
http://www.ncbi.nlm.nih.gov/pubmed/6097343
http://www.ncbi.nlm.nih.gov/pubmed/3785512
http://www.ncbi.nlm.nih.gov/pubmed/3513043
http://www.ncbi.nlm.nih.gov/pubmed/2796887
http://www.ncbi.nlm.nih.gov/pubmed/21205225
http://www.ncbi.nlm.nih.gov/pubmed/22591873

We have included the following information, so that you can see that Phenoxyethanol is also known as EGME, and the following studies referring to EGME are actually about Phenoxyethanol (aka. Ethylene glycol monophenyl ether - EGME) which is a glycol ether:
http://en.wikipedia.org/wiki/Glycol_ethers

The FDA says this about Phenoxyethanol, yet it is allowed to be injected into infants and children:
"Phenoxyethanol is a preservative that is primarily used in cosmetics and medications. It also can depress the central nervous system and may cause vomiting and diarrhea, which can lead to dehydration in infants."
http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/2008/ucm116900.htm
"Central nervous system depression or CNS depression refers to physiological depression of the central nervous system that can result in decreased rate of breathing, decreased heart rate, and loss of consciousness possibly leading to coma or death.
CNS depression is specifically the result of inhibited brain activity" - sounds a little like SIDS...

http://www.ncbi.nlm.nih.gov/pubmed/16987687
http://www.ncbi.nlm.nih.gov/pubmed/11853695
http://www.ncbi.nlm.nih.gov/pubmed/21273685
http://www.ncbi.nlm.nih.gov/pubmed/25085197

http://www.ncbi.nlm.nih.gov/pubmed/10207615
http://www.ncbi.nlm.nih.gov/pubmed/6351353
http://www.ncbi.nlm.nih.gov/pubmed/17119255
http://www.ncbi.nlm.nih.gov/pubmed/17293254
http://www.ncbi.nlm.nih.gov/pubmed/15705484
http://www.ncbi.nlm.nih.gov/pubmed/23023030

http://www.ncbi.nlm.nih.gov/pubmed/22895945
http://www.ncbi.nlm.nih.gov/pubmed/18843097
http://www.ncbi.nlm.nih.gov/pubmed/25042822
http://www.ncbi.nlm.nih.gov/pubmed/21058170
http://www.ncbi.nlm.nih.gov/pubmed/25395338
http://www.ncbi.nlm.nih.gov/pubmed/19283656
http://www.ncbi.nlm.nih.gov/pubmed/22235045
http://www.ncbi.nlm.nih.gov/pubmed/11164115

A quote from Dr Blaylock, who is a retired U.S. neurosurgeon, who's achievements include introducing a new treatment for a subset of brain tumours, as well as improving certain operations treating water on the brain. Over the past 15 or more years, he has been studying the effects of immune stimulation on the developing child's brain and has written and published numerous papers for peer-reviewed journals on the subject:

"There is compelling research that shows that stimulating a pregnant animal during mid-term pregnancy dramatically increases the risk of the newborn having autistic or schizophrenic behaviour as it ages or reaches adulthood.
The risk is increased in the order of 14-fold, which is tremendous.
We know that women who get the flu during pregnancy have a similar increase risk of their child developing autism or schizophrenia.
At first, you may assume that the flu virus entering the baby's brain would cause the effect, but careful research found that the virus does not enter the baby's brain.
Rather, it is immune cytokines from the mother's immune reaction to the virus that causes the problem.
Unlike the flu virus, the offending cytokine passes through the placenta and damages the developing brain of the baby.
In essence, they found that anything that stimulated the mother's immune system, could raise the risk of autism and schizophrenia in the baby.
To show that it is not the virus, they stimulated the pregnant animal's immune system with special chemicals alone and got the same effect.

Another set of studies found that stimulating the mother's immune system, during pregnancy, not only increased the baby's risk of having a seizure, but increased seizure risk, even when the child became an adult.
So we see that activating immunity, as with vaccination, can significantly raise the risk of your child having a seizure, even extending into adulthood.
It is also known that stimulating the mother's immune system, during pregnancy, can trigger preeclampsia in the mother and hypertension in the baby, when the baby becomes an adult.
The bottom line is, vaccinating a pregnant women is vary hazardous to the mother's health, as well as the baby.
At this point you may ask—but if a natural flu infection can cause this, as well as vaccination, shouldn't we protect pregnant women by vaccination?
If the vaccine was effective you might make that conclusion, but there is no evidence the vaccine has any effectiveness.
Pregnant women have a state of immune suppression and vaccines are notorious for not working in immune suppressed people.
Even more important is the fact that a woman's risk of getting the flu and having the genetic risk factors for autism or schizophrenia, is small overall, but if you vaccinate all pregnant women, as the CDC is calling for, you will have a large number of babies affected by autism, schizophrenia or seizures because they will all have had intense immune stimulation by the vaccine.
Humans have a long period of intense brain development that occurs after birth.
The most intense period of brain development is during the first two years of life, but for critical areas of the brain used for higher brain function, this can extend to 27 years of age.
Repetitive stimulation of the brain, by giving a series of vaccines, has been shown to significantly disrupt brain development, resulting in learning difficulties, behavioural problems and language problems.
In fact, studies have shown that immune stimulation in small children can also result in schizophrenia in a significant proportion."

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2441883/
http://www.ncbi.nlm.nih.gov/pubmed/18832344

http://www.ncbi.nlm.nih.gov/pubmed/12752028
http://www.ncbi.nlm.nih.gov/pubmed/12865897?dopt=Abstract
http://www.ncbi.nlm.nih.gov/pubmed/21816387
http://www.ncbi.nlm.nih.gov/pubmed/19857543
http://www.ncbi.nlm.nih.gov/pubmed/25762938
http://www.ncbi.nlm.nih.gov/pubmed/24566386

http://www.ncbi.nlm.nih.gov/pubmed/15749254
http://www.ncbi.nlm.nih.gov/pubmed/12514227
http://www.ncbi.nlm.nih.gov/pubmed/16256957

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3203331/
From the above study:

5. Potential Mechanisms of Action

Go to:

Despite the fact that formaldehyde exposure may cause reproductive and developmental toxicity, as suggested by evidence from both human and experimental animal studies, our current understanding of the likely mechanisms of action (MOA) is very limited. To date, few human studies have been designed to investigate possible formaldehyde MOAs, though hypotheses have been generated from limited preliminary results obtained in recent animal studies. Currently, the mechanisms by which formaldehyde is proposed to induce reproductive and developmental toxicity include genotoxicity, oxidative stress, disruption of the activity of proteins, enzymes and hormones important for the maturation of the male reproductive system, apoptosis and DNA methylation. It should be noted that most of the proposed mechanisms are hypothetical and require validation, particularly in reproductive systems.

Auth

levels [51] were also reported. Among the adverse effects observed in formaldehyde injection studies (all intraperitoneal) in male rats were: Leydig cell impairment [54]; decreased testicular weight and levels of serum testosterone [54–55]; decline in sperm count [55], motility [55–56] and viability [56]; increased phenotypic sperm abnormalities, lethal mutations and reduced number of successful matings [57]; and decreased DNA and protein content in the male testis, prostate and epididymis [56]. The only reproductive study to orally administer formaldehyde to male rats found sperm head abnormalities in the exposed group

In the mice studies, mostly male mice were exposed through intraperitoneal (i.p.), intravenous (i.v.), intramuscular (i.m.) and intragastric (i.g.) injection, as detailed in Table 5. One such study found a linear relationship between sperm head DNA alkylation and administered dosages of formaldehyde by injection (i.p. and i.v.) in male CF-1 strain mice [64]. Several studies reported decreased sperm counts and increased rates of deformed sperm cells [60,65–67]. DNA-protein crosslinking (DPC) was observed in the testicular cells of formaldehyde-injected males in two studies [68–69], and one of these studies also reported DNA breakage [68–69]. The only injection study of female mice found irregular estrous cycles, damaged and smaller oocytes and fewer mitochondria and fibrosis in reproductive tissue [70]. In the only oral study of

4.2.3 Other animals Reproductive toxicity studies were conducted on three bird species. During the avian flu epidemic in 2008–2009, a study was conducted to test the effectiveness of formalin-based avian influenza inactivated vaccines. It was found that vaccine preparations containing 0.81% formalin injected intramuscularly significantly reduced egg production in hens, lowered estradiol and hemaglutination inhibition antibody levels and caused a degenerative change in ovarian follicles and the uterus [71].

In their 2001 study, Thrasher and Kilburn also examined the effects of exposure through injection and oral exposure. They found that pre- and post-implantation deaths increased twofold following exposure by i.g. injection [74]. Results following prenatal oral exposure were inconclusive, though physical deformities were observed in the rat pups of exposed mothers [74].

Several studies examined developmental toxicity following injection. As well as examining the effects of formaldehyde on rat fetal development described above, in the same study, Thrasher *et al*. also injected the tail veins of pregnant adult mice with 0.05 ml of 1% formalin containing 3.5 mg of ^{14}C-labled formaldehyde. The animals were killed at intervals from 5 min to 48 hrs, and radioactive formaldehyde incorporation was followed by frozen section autoradiography and liquid scintillation detection. In the first 5 minutes, more rapid uptake of radioactive formaldehyde was observed in uterus, placenta and fetal tissues, compared with other maternal organs. Incorporation of the labeled isotope was found to be greater in fetal brain than the maternal brain and elimination of formaldehyde from fetal tissues was slower than in maternal tissues [74]. Formaldehyde elimination was also shown to be slower in fetal tissue than in maternal tissue following maternal exposure by injection, also in the tail vein, in another study [78]. A Chinese study injected (i.g.) pregnant mice with various concentrations of formaldehyde and found evidence of DNA breakage and damage and DPC, with more severe effects in the fetus than in the mother [79]. Pre- and post- implantation deaths increased significantly with paternal exposure by intraperitoneal injection [80–81]. In a study of 34 pregnant mice who were orally exposed to formaldehyde, 22 died before

Ex vivo studies, examining the effects of formaldehyde exposure on rat and mouse embryos in culture, were conducted. Harris *et al*. exposed mouse whole-embryos (gestation day 10–12) to formaldehyde in culture medium and found that formaldehyde had deleterious effects on embryo growth and viability and produced a depletion of glutathione (GSH) in the visceral yolk sac and embryo [90]. Neuropore closure, crown-rump length and somite number were reduced by formaldehyde. Further, GSH depletion was shown to potentiate formaldehyde toxicity. Hansen and colleagues exposed mouse and rat embryos in culture to formaldehyde by direct addition to the culture medium and by microinjection [91]. They observed a dose-dependent loss in viability and significant increases in incomplete axial rotation and neural tube closure following both exposure routes in mice but microinjection induced these effects at the lowest concentration range tested (0.003 – 0.5 μg). Ten to 15-fold higher concentrations were required to elicit the same decrease in viability and increase in incomplete axial rotation in exposed rat embryos. These findings show that the visceral yolk sac serves a general protective role against toxicity and inherent differences in the embryonic metabolism of formaldehyde may determine species sensitivity.

http://www.ncbi.nlm.nih.gov/pubmed/6389892
http://www.academicjournals.org/journal/JPHE/article-abstract/C98151247042
http://www.ncbi.nlm.nih.gov/pubmed/8077414
http://www.ncbi.nlm.nih.gov/pubmed/11503899
http://www.ncbi.nlm.nih.gov/pubmed/8940226
http://www.ncbi.nlm.nih.gov/pubmed/19003296
http://www.ncbi.nlm.nih.gov/pubmed/26071653
http://www.ncbi.nlm.nih.gov/pubmed/22174836
http://www.ncbi.nlm.nih.gov/pubmed/22591445
http://www.ncbi.nlm.nih.gov/pubmed/22591873

http://www.ncbi.nlm.nih.gov/pubmed/25135887
http://www.ncbi.nlm.nih.gov/pubmed/25475629
http://www.ncbi.nlm.nih.gov/pubmed/9923853

http://www.ncbi.nlm.nih.gov/pubmed/20456974
http://www.ncbi.nlm.nih.gov/pubmed/22575785
http://www.ncbi.nlm.nih.gov/pubmed/24056737
http://www.ncbi.nlm.nih.gov/pubmed/22402185
http://www.ncbi.nlm.nih.gov/pubmed/15202523
http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3482043/

And the below information is included so that you can see that it is a case of history repeating with Big Pharma following in Big Tobacco's footsteps:
http://www.ncbi.nlm.nih.gov/pubmed/17548665
http://www.ncbi.nlm.nih.gov/pubmed/18923118

If vaccinations are so safe, why are doctors risking their careers to speak out against vaccinations?
https://www.youtube.com/watch?v=jDte7BhlCkg
https://www.youtube.com/watch?v=McfXd_Xuojs
https://www.youtube.com/watch?v=NXA30GrCJ1k
https://www.youtube.com/watch?v=4kwgkI1RkF0
https://www.youtube.com/watch?v=K5BF0x354BI
https://www.youtube.com/watch?v=cGNRQ63RDRg
https://www.youtube.com/watch?v=kj4coOe_PNw
https://www.youtube.com/watch?v=BASKGep-CH0
https://www.youtube.com/watch?v=-NzvsZ8Ps_U
https://www.youtube.com/watch?v=5CBty3M7LKI
https://www.youtube.com/watch?v=WJoCDqVXgRI

Below is an excerpt from an interview transcript with Dr Tetyana Obukhanych, who has studied immunology in some of the world's most prestigious medical institutions.
She earned her PhD in Immunology at the Rockefeller University in New York and did postdoctoral training at Harvard Medical School, Boston, MA. and Stanford University in California.
"Before we get started with my interview questions, there is something that I'd like to address upfront and it is:

What implications do you think may be down the line from vaccines grown on various animal organs, e.g., diploid cells (aborted human fetal cells), chicken eggs, monkey kidneys, mouse brains, porcine lung, insects, and now dog kidneys for a new single vaccine being introduced into the United Kingdom in June/July 2012?
We know pig viral DNA (porcine circovirus) was found in Rotarix vaccine; SV40 cancer virus in the first polio vaccine used in the 1950s to early 1970s; Hepatitis A, rubella, and varicella (chickenpox) were cultured on human diploid cells WI-38 and MRC-5; and recombinant DNA was found in the HPV vaccine, Gardasil®.
What do such post-marketing findings portend from your perspective as an immunologist?

As an immunologist, I have a concern that the practice of manufacturing vaccines using yeast, egg, animal, or even human fetal cells, implies that vaccines, by necessity, include some small amount of protein or other products, from these cells or media, in which these cells are being cultured.
I would really want to know whether and how well vaccine manufacturers test their final vaccine products for such unspecified vaccine "ingredients" and how much contamination they discover.
The reason I am concerned about such contamination is because I believe that the exposure to yeast, egg, animal, or human proteins, in the context of immunogenic (antibody producing) stimuli, has the potential to result in sensitization to these proteins, or even to break human immunologic tolerance to "self." The latter is especially relevant to infants, since their immune system is only starting to make the distinction between "self" and "foreign."
Setting this distinction the wrong way from the start, in my view, is likely to pave the road to allergic or autoimmune manifestations."
http://www.vaccinationcouncil.org/2012/06/13/interview-with-phd-immunologist-dr-tetyana-obukhanych-by-catherine-frompovich/

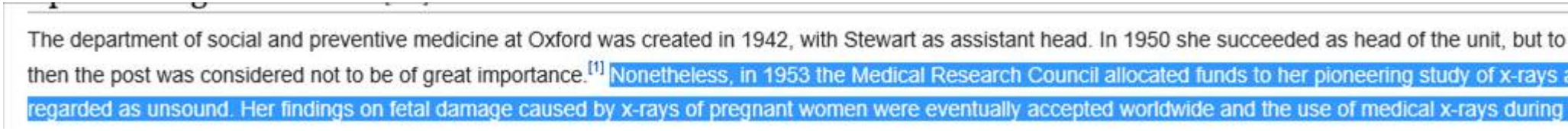
http://www.vaccinationcouncil.org/2011/06/10/basics-of-the-human-immune-system-prior-to-introduction-of-vaccines-are-vaccines-turning-our-children%e2%80%99s-immune-systems-inside-out/
http://www.vaccinationcouncil.org/2011/06/21/risks-damage-basics-of-the-human-immune-system-prior-to-introduction-of-vaccines-are-vaccines-turning-our-childrens-immune-systems-inside-out-part-2/

Parents should not be blackmailed, bullied, intimidated or penalised, for protecting their children from the horrendous effects of vaccination, when there is so much medical research showing the harmful effects of this profiteering procedure.
We reiterate, parents have every right to protect their children, when they have read medical research, such as what we have included in this submission.

The Herd Immunity Hypothesis was not hypothesised with vaccinations (which are unpredictable in efficacy and their waning times) in mind, it was hypothesised with NATURAL LIFELONG IMMUNITY in mind.

The medical establishment, and the government, can look back on a number of crazy medical ideas that were routinely accepted as a great idea at the time, such as:

X-raying pregnant women, in order to see the developing fetus (this went on for over thirty years).
A snippet from: http://en.wikipedia.org/wiki/Alice_Stewart ,a researcher who realised the dangers long before it was *finally* widely accepted by the medical establishment.


The department of social and preventive medicine at Oxford was created in 1942, with Stewart as assistant head. In 1950 she succeeded as head of the unit, but to
then the post was considered not to be of great importance.[1] Nonetheless, in 1953 the Medical Research Council allocated funds to her pioneering study of x-rays
regarded as unsound. Her findings on fetal damage caused by x-rays of pregnant women were eventually accepted worldwide and the use of medical x-rays during

Thalidomide.
http://www.smh.com.au/national/health/australian-thalidomide-managers-knew-drug-was-killing-babies-for-five-months-20150524-gh8h82.html

Lobotomy.
http://listverse.com/2014/11/20/10-awful-realities-behind-the-lobotomy-craze/

Doctors also promoted smoking, before the truth about cigarettes was finally exposed:
https://med.stanford.edu/news/all-news/2012/01/big-tobacco-led-throat-doctors-to-blow-smoke.html
Is it a case of history repeating itself, where money talks?

And of course, electroshock therapy, to turn gay people straight, also went on for decades.

It is also of huge concern, regarding the corruption at the CDC :
https://www.youtube.com/watch?v=cT8hhMMfgOc
https://www.youtube.com/watch?v=tS8H-ARyw34
https://www.youtube.com/watch?v=ZhzUqNkTSIA
https://www.youtube.com/watch?v=ShB_m8Kwuqc

We would also like to add that we believe that a senate inquiry should be held into Big Pharma and their insidious corruption:
http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1497451/pdf/12477914.pdf

We don't know how anyone, who knowingly allows children to be cash cows for Big Pharma, the CDC and the political campaign funding (Big Pharma lobbying) of government officials, can live with themselves, let alone sleep at night.
It is an atrocity that those making billions of dollars every year out of vaccines (and their cling-ons) are getting away with this.

Yours sincerely
Dean and Angela Kelly