PANDEMIC FLU

Protecting yourself from the H1N1 flu.....

AND the vaccine

Brian of the Adamson Family
Introduction

From the author

"In a time of Universal deceit, telling the truth is a revolutionary act" George Orwell

Once again, the flu season is upon us. However, this year, in particular, it has a very ominous feel to it, not least because of the fear and worry that has been created by hysterical Governments and their media counterparts.

But fear not, there is little to be concerned about with regard to H1N1 “Swine” flu when you understand the facts and are able to separate them from the fiction that is mass produced and transmitted by those in “authority” on a daily basis.

Only by being informed can you decide for yourself how to deal with the limited threat that is poised by this man-made flu and the threatened “pandemic” it has been promised to cause. If you are not informed, then you are operating, literally, in ignorance, which is, of course, how our lords and masters would prefer we continue – it makes their job much easier and the resultant profits much bigger!

By necessity, this booklet has been produced with some urgency, in order to inform as many people as possible of the current situation, that they might protect themselves and their loved ones.

As a consequence, it has been necessary to omit much of the intended content and to shorten each of the sections into an easily digestible and understandable format.

I sincerely hope that it helps you to understand what is behind the situation in which we find ourselves and what you can do about it. Forewarned is forearmed, as they say, and after reading this story you will be both warned about what it is those in power are trying to do to us and armed to prevent it from affecting yourself, your family and those you care about.
As a result, of the urgency of this message, I have decided, despite my personal financial circumstances, to distribute this message for free. It is simply TOO important to get this message to as many people as possible, as fast as possible to risk reducing the circulation of the material by charging for it.
I trust though, that this does not detract from the value of the information this message contains and I hope that it is able to help you and those you care about to overcome the issues now facing us.

Should that be the case, I would be most grateful if you would consider making a donation, however small, to enable me to continue this work and to further develop Natural Health Information Centre that it may help many more people in many more ways. But please, read the "book" first, and then decide.

Thank you

Brian of the Adamson Family

October 2009
Background - 2009 "Swine flu" (H1N1)

What's really happening?

Unless you have been hiding under a rock for the past few months (and if ever there has been a justification for doing so, this story is surely it!), you will have been bombarded by the media into a frenzy of fear by the promised global flu pandemic. It is said that tens, hundreds of thousands, even millions are expected to die as the result of the dreaded H1N1 virus suddenly morphing from a mild, inconsequential flu into a “seasonal monster”. This, as various ‘authorities’ have assured us, will make it a virtually unstoppable killer, which will decimate populations around the World, in much the same way as the 1917-18 “Spanish Flu” did.

As the virus is “new”, humans, it is said, will have no natural protection from it...unless the fantastically responsive and public-spirited pharmaceutical industry can somehow produce enough of their miracle vaccines in time to save us.

Or so the story goes.

Day after day, night after night, in the newspapers, the TV news, current affairs programs and wherever else it can catch a sound-bite, this is the ‘reality’ we are spoon-fed by a compliant media with nothing better to do than take the latest Government spin and ram it down our
necks so often that it becomes a truth by repetition. “If they’re all saying it, it must be true”, mustn’t it?

Well, sit down, get yourself a cup of water/tea/coffee or even a stiff drink – you might need it – and we’ll examine the evidence to see exactly what the threat is and what we must do to protect ourselves and those we care about.

The 2009 “Swine Flu” Pandemic

What “they” tell us.

As the media (TV, Newspapers, etc), “health” authorities, Governments etc would have us believe, a new virus appeared suddenly in spring 2009, first in Mexico, then quickly spreading to other parts of the World.

Because this virus is “novel” (i.e. new) to science, it is assumed that humans will have no defence against it and that it will become a major threat to international health, requiring a response from Governments and health authorities around the World (including the World Health Organisation (WHO), which has appointed itself as THE definitive international health body – more about them later).

As a result of this, the pharmaceutical industry has requested (and been given) a number of previously unthinkable incentives to develop the “vaccine” that we are being persuaded is the only thing that can save us, namely:

- Massive Governmental funding (particularly in the USA, but elsewhere as well)
- Huge amounts of pre-orders from virtually ALL Governments for the 9as-yet) non-existent “product”, resulting in massive windfall profits.
- Almost unheard of exemption from the normal regulatory approval systems for the “Product”, in an effort to speed up the process.
- Immunity from prosecution, should the resulting product be defective or damaging in any way (this is absolutely unprecedented).
- 100% Government and media support to spread the “vaccination” message and, if necessary, ensure that all
members of each population are injected – whether they want to be or not.

Apart from being highly unusual, these measures are questionable at best and, as will be seen, may be not only immoral and socially unconscionable, but quite probably highly illegal, equating to fraud on a massive scale and even criminal insanity.

Prior to any vaccine even being available, the public is being conditioned to accept it without question and to harbour fear, suspicion and aggression towards anyone who, for whatever reason, declines to be vaccinated voluntarily. Some Governments (see below) have already passed legislation to enforce vaccination upon their populations, whilst most others (under pressure from the WHO) are hastily amending existing plans and legislation to make this possible.

If this were occurring in one or two countries, it might be dismissed as a local phenomenon and the whims of an overprotective Government. However, this is not the case – the problem is global and regardless (indeed IN SPITE) or the evidence, it affects us all. There are many reason why this might be so, but none is so secretive, so full of deception and as downright concerning as the WHO.

For now, let’s stray from the story presented by the media and stick to the verifiable FACTS of what has happened so far this year:

**The story so far:**

- October 2003 – the US military, in association with infectious disease specialists, digs up the bodies of 1918 “Spanish flu” victims in the Alaskan permafrost, thereby resurrecting the disease. They take it away to army labs, where they begin gene-splicing elements of the World’s worst flu virus onto modern strains, thereby creating the very “novel virus” that they say they are trying to prevent! ([http://www.greenleft.org.au/2003/558/29373](http://www.greenleft.org.au/2003/558/29373))
- October 2004 - Despite concerns from virologists all over the World, they continue their dangerous attempts to weaponise 1918 flu. (Experts fear escape of 1918 from lab: New Scientist; Oct 21 2004)
- 2005 - Bird Flu “pandemic” threatened
- July 2008 - 3 Polish Doctors and 6 nurses face criminal charges when trials of an H5N1 “Vaccine” kill numerous homeless people
who were given the untested “vaccine” without their knowledge. 
(http://www.telegraph.co.uk/news/worldnews/europe/poland/2235676/Homeless-people-die-after-bird-flu-vaccine-trial-in-Poland.html)


- August 2008 – Baxter Pharmaceuticals files its patent application number US 20090060950A1, specifically identifying H1N1 as a target organism, 9 months before the virus emerges. (http://www.theoneclickgroup.co.uk/news.php?start=2760&end=2780&view=yes&id=3581#newspost)

- February 2009 – Baxter Pharmaceuticals is caught attempting to cause a pandemic of H5N1 bird flu, by contaminating their ordinary “flu vaccines” with the live virus. This is an extraordinarily serious event, which WOULD have, without doubt sparked a global “bird flu” pandemic, had it succeeded. Such a pandemic is highly unlikely in nature, as we discovered in 2005. (http://www.legitgov.org/baxter_sends_live_avian_flu_viruses_270209.html)

- March 17 2009 – The first case later confirmed to be “swine Flu” is reported in Mexico (http://www.webcitation.org/5jhPR679t)


- 13 April 2009 – The first deaths from “swine flu” are reported in Mexico City, 3 days before the US Presidents visit. Mexican President Calderon declares a national emergency 12 days later. (http://www.bloomberg.com/apps/news?sid=aEsNownABJ6Q&pid=20601087)

- 25 April 2009 – WHO declares a “Public Health Emergency of International Concern”. (http://www.who.int/mediacentre/news/statements/2009/h1n1_20090425/en/index.html). This is the first of many steps the WHO will take to create panic, fear and public outcry, enabling
them to take control of national Governments, police and health resources.


- 11 June 2009 – WHO declares a level 6 pandemic, enabling it to take control of Police and health authorities in ALL member countries and to dictate ANY health policies it decides are OK. This is mandatory for all member countries (virtually all countries worldwide) and literally means that national sovereignty no longer exists. An unelected independent group of “scientists” closely connected to pharmaceutical companies now controls World policy concerning the very products produced by that industry, as well as national Governments. ([http://www.who.int/mediacentre/news/statements/2009/h1n1_pandemic_phase6_20090611/en/index.html](http://www.who.int/mediacentre/news/statements/2009/h1n1_pandemic_phase6_20090611/en/index.html))

- June 2009 – US Secretary of Health and Human Services, Kathleen Sibelius grants immunity to prosecution for manufacturers of swine flu vaccines and the adjuvants they contain! ([Legal immunity set for swine flu vaccine makers](http://www.who.int/mediacentre/news/statements/2009/h1n1_pandemic_phase6_20090611/en/index.html)). This follows the last “swine flu” debacle, which cost the pharmaceutical industry billions of dollars in compensation claims for the horrific deaths and injuries their products caused.

- 7 July 2009 – So far there are 4,910 reported cases in Mexico, 27,717 in the USA and 70,893 Worldwide. Reported deaths are 85 in Mexico (1.7%), 127 in the USA (0.46%) and 311 Worldwide (0.44%). ([http://www.newsmax.com/health/vaccine_swine_flu/2009/07/07/232717.html](http://www.newsmax.com/health/vaccine_swine_flu/2009/07/07/232717.html))

- 13 July 2009 – WHO issues its “Recommendations on pandemic (H1N1) 2009 vaccines, which admits that “most patients experiencing uncomplicated, self-limited illness”, but makes vaccinations MANDATORY in all 200 member countries! ([http://www.who.int/csr/disease/swineflu/notes/h1n1_vaccine_20090713/en/index.html](http://www.who.int/csr/disease/swineflu/notes/h1n1_vaccine_20090713/en/index.html)). This insanity is absolutely refuted by the evidence to date, which shows that (as they, themselves admit) the disease is largely SELF-LIMITING (i.e. people get better by themselves) and does NOT require treatment of any kind.
• 23 July WHO stops tracking H1N1 cases – from now on, all cases of “flu-like illness” will be considered to be swine flu! (http://bamintel.blogspot.com/2009/07/h1n1-update-vaccine-test-who-ceases.html). That includes all other types of “flu”, including seasonal flu, the common cold etc. From now on, no distinction will be made between the various illnesses. The media totally fails to mention this when citing “official” figures.

• 29 July 2009 – The US military “wants to establish regional teams of military personnel to assist civilian authorities in the event of a significant outbreak of the H1N1 virus” later in the year. Once again, this is unprecedented in most countries. We have a “self-limiting” illness with no requirement for treatment – why then, would military intervention EVER be needed? (http://edition.cnn.com/2009/US/07/28/military.swine.flu/)

• 4 August 2009 – Greece becomes the first country to admit that it will force everyone in the country to be vaccinated, despite only having 700 cases and 0 deaths. (http://tvnz.co.nz/health-news/greece-vaccinate-population-swine-flu-2881876). This is particularly ironic as Greece was one of the only countries in Europe to escape the severity of the 1917-18 flu. Coincidentally, at that time, they also refused to allow their soldiers (who fought alongside many others who dies of this “flu” in WW I) to be “vaccinated”. Most other countries accepted the “vaccines” enthusiastically and were afterwards struck by death on a massive scale!

• 6 August 2009 – WHO ADMITS releasing pandemic virus into the population. (http://www.who.int/csr/disease/swineflu/notes/h1n1_safety_vaccines_20090805/en/index.html). Now stop and think about this for a minute. We are told that Governments are trying to PREVENT the spread of this virus and any subsequent effects, but here the WHO (and therefore the Governments it now controls) ADMITS that they have been doing it all along. Exactly what is the agenda here? It is certainly NOT health.

• 21st August 2009 – A leaked Government document shows that the French Government intends to forcibly vaccinate the whole population, with or without their consent. The event is ignored by the regular media. (http://www.sante-jeunesse-sports.gouv.fr/IMG/pdf/Circulaire_vaccination_090824.pdf). The usually militant French ignore this and, when questioned, simply
say that “they can’t do that”…..oh really? (from personal conversations with numerous friends in France)

- 28 August 2009 – WHO declares “Most countries in the Southern Hemisphere (represented by Chile, Argentina, New Zealand, and Australia) appear to have passed their peak of influenza activity and returned to baseline activity” Yet does not drop “vaccination” requirements for these countries. (http://www.who.int/csr/don/2009_08_28/en/index.html ). Once again, the inconvenient fact that the flu is self-limiting and mild by comparison with regular flu are ignored in favour of blanket vaccination with an untested vaccine of doubtful provenance.

- 18 September 2009 – Finland announces that it will start vaccinating the whole population in October, despite the fact that there is no epidemic in Finland. Force is not ruled out. (http://www.theflucase.com/index.php?option=com_content&view=article&id=635%3Afinland&catid=1%3Alatest-news&Itemid=64&lang=en )


Official “Swine flu” death rates

<table>
<thead>
<tr>
<th>Death rates</th>
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Each of the above facts are verifiable from a multitude of sources and demonstrate that what is going on in Governments and the media has absolutely NOTHING to do with the arrival, spread and virulence of this “novel flu”. If this is the case (which it patently is), then what is the agenda? Who is behind it?

And perhaps most importantly, what can we do about it?
Perhaps a few short history lessons are in order. After all, the old adage is still true “he who does not learn from the mistakes of the past is doomed to repeat them”.

The most recent and perhaps the most obvious example with which we can compare is the “bird flu” scare of 2005. It has many parallels to the current situation and can teach us a lot about both what is intended and how to deal with it.
Infectious disease – a short history.

What happened during the 2005 bird flu “epidemic”?

(I am including here an article I wrote in early 2006 on “Bird flu”, more or less as it was written at the time)

According to the story we’ve been fed so far, bird flu – or to give it its ‘proper’ title “Avian Influenza (H5N1 Bird Flu)” – is something to be very scared of. It was first ‘noticed’ in wild and commercial bird flocks in the far east, particularly China, Korea, Vietnam and Thailand.

Notably, several of these countries are involved in large-scale commercial bird farming, with flocks of millions of birds that can barely be imagined. Supposedly, these commercial flocks were infected by wild birds, causing infections that killed massive numbers of birds and triggered the authorities to massacre millions more on the basis of “public safety”, in an effort to prevent the spread of the problem to other flocks and, potentially, humans.

In moves that are hauntingly reminiscent of the British Governments efforts to contain the equally-well advertised “foot and mouth” epidemic (for those who don’t know, foot and mouth is a self-limiting disease that does nothing to affect either the quality of the meat or dairy products from cattle and sheep and does not affect humans in
any meaningful way – a bit like
the cow equivalent of a cold!),
Governments throughout Asia
have decimated their bird
stocks. Complete farms have
been wiped out and countless
swathes of countryside bathed
in a chemical cocktail that
would make anyone with even a
basic knowledge of chemistry
shudder.
This has led to... an ever-
growing increase in the number
of countries that are “infected”,
with suspect birds turning up in all sorts of places, including Greece,
Turkey and a quarantine facility near Heathrow airport in England.
Of course, the real cause of concern is that the “virus” is extremely
virulent, i.e. it is spread easily and rapidly and that it might jump to
humans and cause catastrophes not seen since the “Spanish Flu” that
was blamed for the deaths of millions of people in 1918/1919. If this
were to happen, we are told; millions are likely to die worldwide and
nowhere will be safe from infection.
So after detecting this “disease” in tens, or even hundreds of
thousands of birds, and the destruction of millions of perfectly healthy
animals, exactly what is the human cost so far? Given the media
onslaught, we could expect thousands, even tens of thousands of
deaths all over South-East Asia. All those poor souls who couldn’t buy
a face-mask in time must be dropping in the streets at an alarming
rate. The people doing the killing would be expected to be particularly
at risk, given that there is no vaccine yet – wouldn’t you think?
To date (January 2006) there have not been tens of thousands of
deaths, or even infections in humans. There have not even been
thousands, and only recently have the figures climbed into the 100’s.
What? Only 200 deaths so far from the 580 or so cases of this
incredibly virulent, unstoppable bug that will flatten the World? Even
that sounds like a lot!
And well might it be, until you realise that South-East Asia has the
highest population density on the planet, that it has literally millions
upon millions of birds being “grown” commercially. As is well
recognised, these massive populations, both human and avian, are
among the poorest in the World, with meagre diets and little in the
way of nutrition to help them fight off disease. With this in mind, and
given the nature of this “virus”, there should have been MILLIONS of deaths already, especially as, even in a country the size of the UK (approximately 60 million people) there are thousands of deaths EVERY YEAR from nothing more sinister than bog-standard, ordinary flu.

What is not made clear is that virtually ALL of the cases of bird-flu to date have been in farm workers involved in the production of infected birds.

So why is this over-populated, under-nourished, hotbed of disease waiting to happen not been decimated by bird-flu, you might ask? And if you did, it would be a very good question 😊.

You might want to follow it with something like... Haven’t I heard all this before? And again, you’d be right. Exactly the same formula was used a year or two ago to instil widespread fear all over the World from the dreaded SARS, which was also promised to be the “new plague”, killing millions Worldwide. In fact, so severe was this threat that borders were closed, whole areas “decontaminated” (again with horribly poisonous chemicals) and Asian countries (again....hmmm, why ASIAN countries, just when they are beginning to become economic powerhouses in their own right?) were left with their economies collapsing from lack of visitors right at the peak of their
season, whilst the pharma companies thought it was Christmas all over again.

And what was the outcome?

We’ll be discussing SARS a bit more later, but suffice it to say, it didn’t live up to its media, or Government (effectively the same thing) reputation, not by a long way.
Spanish Flu

Much of the hype concerning bird flu is centred around its threatened capacity to kill on a scale seen only once in history, with the so-called “Spanish” flu of 1918.

The controversy regarding this particular outbreak starts with its name. You would be forgiven for assuming that it originated in Spain, which is exactly what you are intended to think. However, this is a prime example of both primitive “spin-doctoring” and total avoidance of factual accuracy.

In fact, the outbreak almost certainly stemmed from the military camps of the First World War the “Spanish” appellation was conceived to surreptitiously move public opinion against that nation, “following two decades of disputes between America and Spain over colonization of the Caribbean Islands, Hawaii and the Philippines beginning with the Spanish American war”. ¹ In addition, the Spanish media of the time was one of the least censored in the World and could therefore report (relatively) freely on the scale of the problem, whilst the media in other countries was highly controlled and reported very little. Consequently, most of the news concerning the problem came out of Spain, earning it the dubious honour of being linked forever with the most damaging flu in history.

The fact that this particular flu killed millions of people is not in question (although the fact that viruses were not discovered in man until 1933 is somewhat suspicious!). What is questionable is WHY this flu was so deadly? The official view is that it was a very lethal strain that was easily transmissible, but this in itself is not the whole truth and is not borne out by the facts.

In reality, there were many other factors that contributed to the problem, all of which are known to be significant contributors to the spread (and lethality) of infectious disease.

Primary amongst these was the festival on inhumanity that was World War 1. Popularly known as the most devastating war in history (whether it deserves that title or not), this was a most gruesome, barbaric and awful war, with death and destruction on a scale rarely, if ever, seen before or since. Apart from all the novel ways of sending one’s enemies to the next World that were invented, such as the tank and aerial bombardment, one more insidious and equally lethal method was developed and used by both sides. It was difficult to detect and almost as difficult to defend against and so was used and feared enormously by both sides. That weapon was poison gas.

The recent discovery of WWI trenches in Northern France shows the extent to which the soldiers went to protect themselves from gas attacks. Apart from the use of gas masks, there were elaborate methods developed to seal off the trenches to prevent gas from entering them and ingenious ventilation systems which attempted to draw (presumably) fresh air from other areas. In addition, another weapon was developed in an attempt to protect against the effects of the various poison gases in use......vaccinations.

**WWI Vaccinations**

The First World War saw the first widespread use of vaccinations in military personnel (a practice that has continued ever since - with, or without consent). Almost all of the "allied" countries submitted their armies to this particular atrocity, with few exceptions. One such exception was Greece, which refused to have its soldiers "vaccinated". This may have earned it the wrath of the other "allies", but it also earned Greece a rather enviable reputation - virtually the ONLY country in Europe to avoid the "Spanish Flu" pandemic.

The less fortunate soldiers of other countries had to endure multiple "vaccinations" against everything from poison gas to typhus. Some
sources estimate that each soldier was given 14 to 25 vaccinations and army records clearly show the effects - from soldiers dropping dead immediately after the injection to massive increases in the diseases being "vaccinated" against. As the story of the homeopath (below) shows, those that refused the vaccines did NOT get the diseases, even when they spent much of their time helping those who were sick (and who, invariably HAD taken the "vaccines"). At a time when the BEST pharmaceutical-oriented doctors were losing 1/3 of their patients to the "flu", those using natural "treatments" rarely, if ever lost ANY of their patients.²

Aspirin.

Nowadays, we think of aspirin as a fairly run-of-the-mill medication for minor illnesses, but, when it was first introduced in DATE, this was most certainly NOT the case. The introduction of aspirin was made by its originators, Bayer pharmaceuticals, with a great deal of fanfare. Such was the hype that (much like today) people were persuaded to use aspirin for anything and everything, but especially, for infectious diseases involving fever (pyrexia in medical terms).

Unfortunately, fever plays a hugely important role in the fight against infection, preventing bacteria, viruses etc from multiplying so that the immune system can muster its forces to see them off. Without this important defence the bugs multiply rapidly and remorselessly until they overwhelm their unfortunate host. This is why the most serious infections are almost invariably accompanied by fever - the body deliberately raises the core temperature to above 101-102 degrees Fahrenheit, above which, the bacteria / viruses simply cannot multiply - their reproduction comes to a complete halt until the temperature drops again.

Whilst it may be uncomfortable (and in extreme cases, life-threatening in itself), fever is therefore a very important defence mechanism which buys vital time for the immune system to recognise the attackers, prepare relevant antibodies and rush them into full-scale production to beat the bug.

Enter aspirin, which, amongst many other effects, is a powerful antipyretic (fever-reducing agent). This artificially REDUCES body temperature, therefore undoing all the good work that the body is trying to do whilst it mobilises its defences. The result is a reduction in

² Swine flu Expose, Eleanora I. McBean Ph.D., N.D. (see http://www.whale.to/v/mcbean.html)
fever, which allows the bugs to continue multiplying BEFORE the immune system has had time to organise its response. This causes a far more serious illness and, in the words of an eye-witness (see below) untold misery and many, many deaths.

**The homeopath's story.**

The following is an extract of the chapter on the influenza epidemic of 1918 from the upcoming history of homeopathy book by Julian Winston, the long time editor of the National Center of Homeopathy's, Homeopathy Today. 3

It was called "the Great White Plague." It is hard to imagine the devastation caused by the Flu Epidemic of 1918-19. People who lived through it reported that someone who was up and well in the morning could be dead by evening.

Dr. H. A. Roberts was a physician on a troop ship at the time. Another boat pulled alongside to get any spare coffins- its mortality rate was so high. On his return to port, the commander said to Roberts, "used all your coffins?" To which Roberts, who had been treating his ship with homeopathy, replied, "Yes, and lost not one man!"

The following is an extract from an article entitled "Homeopathy In Influenza- A Chorus Of Fifty In Harmony" by W. A. Dewey, MD that appeared in the Journal of the American Institute of Homeopathy in 1920.

Dean W. A. Pearson of Philadelphia collected 26,795 cases of influenza treated by homeopathic physicians with a mortality of 1.05%, while the average old school mortality is 30%.

Thirty physicians in Connecticut responded to my request for data. They reported 6,602 cases with 55 deaths, which is less than 1%. In the transport service I had 81 cases on the way over. All recovered and were landed. Every man received homeopathic treatment. One ship lost 31 on the way. H. A. Roberts, MD, Derby, Connecticut.

In a plant of 8,000 workers we had only one death. The patients were not drugged to death. Gelsemium was practically the only

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remedy used. We used no aspirin and no vaccines. -Frank Wieland, MD, Chicago.

I did not lose a single case of influenza; my death rate in the pneumonias was 2.1%. The salycilates, including aspirin and quinine, were almost the sole standbys of the old school and it was a common thing to hear them speaking of losing 60% of their pneumonias.-Dudley A. Williams, MD, Providence, Rhode Island.

Fifteen hundred cases were reported at the Homeopathic Medical Society of the District of Columbia with but fifteen deaths. Recoveries in the National Homeopathic Hospital were 100%.-E. F. Sappington, M. D., Philadelphia.

I have treated 1,000 cases of influenza. I have the records to show my work. I have no losses. Please give all credit to homeopathy and none to the Scotch-Irish-American! -T. A. McCann, MD, Dayton, Ohio.

One physician in a Pittsburgh hospital asked a nurse if she knew anything better than what he was doing, because he was losing many cases. "Yes, Doctor, stop aspirin and go down to a homeopathic pharmacy, and get homeopathic remedies." The Doctor replied: "But that is homeopathy." "I know it, but the homeopathic doctors for whom I have nursed have not lost a single case." -W. F. Edmundson, MD, Pittsburgh.

There is one drug which directly or indirectly was the cause of the loss of more lives than was influenza itself. You all know that drug. It claims to be salicylic acid. Aspirin's history has been printed. Today you don't know what the sedative action of salicylic acid is. It did harm in two ways. It's indirect action came through the fact that aspirin was taken until prostration resulted and the patient developed pneumonia. -Frank L. Newton, MD, Somerville, Massachusetts.

Aspirin and the other coal tar products are condemned as causing great numbers of unnecessary deaths. The omnipresent aspirin is the most pernicious drug of all. It beguiles by its quick action of relief of pain, a relief which is but meretricious. In several cases aspirin weakened the heart, depressed the vital forces, increased the mortality in mild cases and made convalescence slower. In all cases it masks the symptoms and
renders immeasurably more difficult the selection of the curative remedy. Apparently aspirin bears no curative relation to any disease and it ought to be prohibited. -Guy Beckly Stearns, MD, New York

Three hundred and fifty cases and lost one, a neglected pneumonia that came to me after she had taken one hundred grains of aspirin in twenty-four hours. -Cora Smith King, MD, Washington, DC

I had a package handed to me containing 1,000 aspirin tablets, which was 994 too many. I think I gave about a half dozen. I could find no place for it. My remedies were few. I almost invariably gave Gelsemium and Bryonia. I hardly ever lost a case if I got there first, unless the patient had been sent to a drug store and bought aspirin, in which event I was likely to have a case of pneumonia on my hands. -J. P. Huff, MD, Olive Branch, Kentucky.

In reading the accounts of the epidemic it seems that most of the deaths were caused by a virulent pneumonia that was especially devastating to those who depressed their system with analgesics-the most common being aspirin.

The Physician from whom I first learned homeopathy, Raymond Seidel, MD, HMD, said that he decided to be a homeopathic doctor during the flu epidemic when he was working as a delivery boy for a homeopath in New Jersey. Raymond Seidel told me that he decided to become a homeopathic doctor when he was a ten-year old delivery boy for a local homeopath. He said, "I saw that the people who were taking aspirin were dying, about half those who were drinking a lot were dying, and those that received homeopathic remedies were living."

Clearly, the story of the "Spanish flu" is not entirely truthful and vested interests have used it to their benefit many times. That it is being used once again to create fear and panic (and therefore drive people to accept a dangerous, untested "vaccine") is criminal insanity.
Earlier, we briefly discussed SARS, or Serious Acute Respiratory Syndrome, as it is more properly known.

Who can forget the shocking news as reported by our trusty media in early 2003 – impending doom, panic-buying, shortages of face-masks (which trebled in price!), thermal cameras and “quarantine” teams in airports around the World, closed borders, public terror and, perhaps inevitably, and most disturbingly, calls for the ever-present saviours of the modern World, the pharmaceutical industry, to rescue us with rushed, untested and potentially lethal new vaccines, that, given the urgency of the situation, would be spared the tediously laborious but frighteningly unreliable (even at its most “carefully” slow) drug approval system.

So serious was the impending disaster that so-called leading authorities led us to expect the infection of billions. ⁴

Of course, as ever, the ingenious, altruistic boffins in big-pharma had just the right thing up their sleeves, ready to go into production at a moment’s notice, if only Governments would spare them the expensive and slow approvals process... and allow them to market the results at

⁴ “One billion to be infected with SARS within 60 weeks”. Daily Record, 23rd April 2003.
extortionate prices. Ah, isn’t it great to know there’s a white knight there just when you need them?

Given, the media hype, you’d imagine anyone that came in contact with SARS was destined for a hole in the ground. For example, this was what Hong Kong surgeon Professor Andrew Burd told the BBC:

“With this SARS we have colleagues fighting for their lives. We have an invisible killer in our midst. We are at war, but our enemy has no name, no identity. Now, as I sit at home with my young son quietly sleeping and my wife pottering in the background, I wonder what tomorrow will bring”.5

Alarming stuff, indeed… except for the “pottering” wife, apparently, who didn’t seem to be taking it quite as seriously!

However, SARS was not all it seemed. Those who bothered to look under the media veneer of hype at the actual facts would find a very different story indeed.

Rather than the “new”, “mutated” and “deadly” disease it was purported to be, little, if anything could differentiate SARS from common or garden flu. Eventually, this was even admitted by the World Health Organisation, which accepted that many of those initially diagnosed with SARS, turned out to have other common problems on further investigation.6 Indeed, this is not surprising, given the diagnostic criteria put forward for the “disease”:

- Respiratory illness of unknown cause since 1st Feb 2003
- Temperature greater than 100.4 degrees
- One or more symptoms of respiratory illness such as cough, shortness of breath, difficulty breathing
- Within 10 days of symptoms, the patient travelled to a place where SARS has spread in the community or had close contact with a suspected SARS victim.7

Hardly the kind of specific symptoms required to diagnose a “new”, “deadly” or “threatening” disease! On the contrary, it sounds a lot like plain old flu. Not one of the required “symptoms” can be considered as specific to SARS. In fact, the Hong Kong health minister even admitted this very early in the scare when he told BBC Newsnight that there was no test available to distinguish SARS from any other

7 Defining SARS. http://www.startribune.com/stories/1556/3848032.html
respiratory infection and that the vague, flu-like symptoms were common to numerous other previously existing conditions. 8

So what did differentiate SARS from plain old flu? Perhaps it was a lethal killer, consuming all who came in contact with it? Unfortunately (for the fear mongers) not. Despite the UK ITV 10 O’clock News (just to show we’re not especially biased against the BBC) which announced the shocking development of 23 deaths in a single day throughout Asia, the death rate of SARS was nothing to write home about. In fact it seems it was very much a damp squib.6 In a population of billions, giving a mortality of around 1 in 10 million this is not only a drop in the ocean, it compares very unfavourably against common flu, which, in 2002 alone, killed 26,000 Americans – approximately 1 in 10,000 9, so common flu is 100 times more lethal than SARS!

So “deadly” was the SARS “epidemic” that it killed only a few hundred people, compared to the thousands that could have been expected to die in a comparable flu “epidemic” (which, of course it wasn’t – an epidemic MUST involve a specific proportion of the population, which SARS never even looked like achieving at any point”.

Are you beginning to see that all that is breathed may not be deadly and that the media are somewhat more than economical with the truth?

Unfortunately, those in the affected areas weren’t quite so discerning, and some were so terrified by the hype that they even killed others they suspected of having the disease for no better reason than the victim sneezed, leading his killer to worry that he might have the infection!10

Although this is an extreme example, it reflects the sinister way in which we have given up our civil liberties to “protect” ourselves from various impending “threats”, be they “terrorism” or of other origins.

The way in which many of those diagnosed with SARS were quarantined against their will, subjected to violent and dangerous medical procedures and then forced to pay for the privilege is indicative of the extreme nature of the Police-state type environment in which we now find ourselves.11 Take a look at the latest set of “homeland security” or “anti-terror” laws and you’ll get an idea of what’s in store as and when the politicians decide the time is right

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8 BBC Newsnight, 2nd April 2003
9 ITV 10 O’clock news, 27th April 2003
(whether there is a credible threat or not – with a compliant media, it really doesn’t matter!).

In fact, talking of the media, there’s something of an enigma that was never mentioned on the television, in the newspapers, on newsnight or anywhere else, it would seem, other than in the pages of an excellent book by health researcher Steven Ransom. In all of the myriad coverage of SARS, both at home and abroad, Ransom noticed that not one of the reporters wore a protective face-mask! Hardly the behaviour one would expect from professional journalists in a “deadly” environment – or did they know more than they were letting on?12

Ransom even wrote to the BBC to raise the issue. Not surprisingly, he never got a response from the department responsible.

So what was the “infectious disease” reported as SARS.

Without direct access to the case notes and samples collected at the time, it is very difficult to say with certainty what was actually at the bottom of the problem, although it seems clear that we can be relatively certain it wasn’t as deadly or virulent as we were led to expect. However, there is one event that offers at least what could be a partial explanation, namely the “SARS” outbreak at the “Amoy Gardens” housing complex in Hong Kong.

Notorious for its overcrowding and cramped living accommodations, Hong Kong was one of the first places where “SARS” raised its head. The mass media portrayed the Amoy Gardens as just another apartment block with nothing to distinguish it from any other. The facts, as reported by Steven Ransom, show that it was something else entirely.

“No mention was made of the appalling sanitation system in those buildings. Records from the management office confirmed that there had been numerous complaints from residents on the emission of foul gas from the floor drains indicating the likelihood of the failure of the U-traps in these apartments. Droplets from the free-flowing sewage were being blown into the residents’ individual apartments” 10

As Fintan Dunne, editor of sarstravel.com succinctly put “In other words... the first headline-grabbing high-profile mass-infection, so called SARS incident arose from the oldest disease source known to man: exposed human excrement.” 13

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In the end, the decision is up to you – does this sound like some deadly, mutated, ultra-virulent superbug or just the old adage – don’t crap where you eat?

Unfortunately, such tendencies to ignore the obvious (and the evidence) usually lead to the calls for us all to be vaccinated, whether we want to or not. But are vaccinations all they’re cracked up to be?
Predictably, no sooner was the commotion regarding the impending disaster of a bird-flu pandemic unleashed than the media (and therefore the public) started jumping up and down demanding that the pharmaceutical companies be allowed to develop new vaccines and rush them to market, approved or not and to hell with the cost!

In the UK, and presumably elsewhere, the pharmaceutical PR machine used its shark-like sense of smelling profit and kicked into overdrive, flooding our “news” and media with “we can do it... with a huge slice of Government funding (oh, and, by the way, can you excuse us the regulatory process please?)”, “inadequate stocks to treat everyone” and “bird-flu could save our factory” messages designed to lull us all into

A) accepting that the “pandemic” is unavoidable
B) expressing our indignance at the “uncaring” authorities and
C) somehow thinking such a tragedy could be a positive thing – if only for big pharma and its paid-for-many-times-over, hyper-profitable production facilities.

Having worked for many years in the marketing and clinical research departments of 4 different pharmaceutical companies, I know just HOW profitable they are and exactly how far they are prepared to go to increase the bottom line!
In fact this has been the case with every recent health issue from infections to MS, “ADHD” to cancer – it seems that trial by the media (which actually amounts to no trial at all) is adequate to stir up sufficient frenzy to scare the authorities to act, regardless of the consequences, proper procedure or, most worryingly, the evidence.

And let’s be clear here, the evidence for vaccines is **conclusive** and it is very, very bad.

Since their humble, trial and error, indeed highly barbaric beginnings\(^1\), the development, testing and manufacture of vaccines have changed very little. They have NEVER been shown to be consistently effective, have ALWAYS been shown to be seriously dangerous (just look at the information leaflet that comes with ANY vaccine for proof!) and regularly fatal. They almost always contain contaminants and preservatives in concentrations that are known to be extremely toxic and which exceed safety limits many times over.

Of course, this is in direct contrast to the average public perception of vaccination. The public has been conditioned by many years of innuendos, semi-truths and downright lies, into accepting that vaccination is the answer to just about everything and especially those nasty, dangerous infective diseases that used to kill lots of people (didn’t they?). In fact, the reality is somewhat different and when understood is very disturbing as a precedent for the control of public perceptions.

To begin with, children these days are being “vaccinated” against more and more relatively innocuous diseases. Whereas in the sixties and seventies, a child might have had 2 or 3 shots, many children now receive 16 in the first 18 months of life and 28 by 5 years! \(^2\) This is lunacy. The preservatives alone contained in these “vaccines” have the potential to totally destroy a child’s immune system – and we wonder

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\(^1\) Rattigan, Pat, Assault on the species. Nemesis 1997
\(^2\) CDC child vaccination schedule, 30 Jan 2006. [http://www2a.cdc.gov/nip/scheduler_le/schedule.asp](http://www2a.cdc.gov/nip/scheduler_le/schedule.asp)

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why so many children are developing allergies? Let’s look at some of those preservatives and other vaccine contents.

Apart from the bug the vaccine is supposed to be protecting from, vaccines contain many and varied chemical concoctions, whose presence is justified either as a preservative (i.e. to stop other bugs from growing there) or as an adjuvant, which is supposed to increase the effectiveness of the vaccine itself. The most common of these are:

Thimerosal: A preservative composed primarily of the toxic metal mercury, one of the most poisonous substances known to man. Effects, “Ten of 13 infants exposed to topical applications of a thimerosal tincture 0.1% for the treatment of exomphalos died; Immediately Dangerous to Life or Health” 21

Formalin: Another preservative largely composed of formaldehyde, which is used primarily as embalming fluid and for preserving clinical specimens of tissue indefinitely. Effects – “In a survey of 57 embalmers who were exposed to atmospheric concentration below 2 ppm, there was a high incidence of symptoms of irritant effects on the eyes (81%) nose & throat (75%). Other respiratory effects included cough (33%), chest tightness (23%), wheezing (12%), & shortness of breath (11%). On the basis of the results, 10% were acute bronchitics, & 30% were chronic bronchitics.” 22

Aluminium Sulphate: An adjuvant thought to boost the effectiveness of the vaccine. Aluminium is toxic in water and thought by many to be responsible for Alzheimer’s disease. Effects include “involving the digestive, (sore throat, gastric upsets), skin rashes, backache, and musculoskeletal problems; and with general neuropsychological (anxiety, depression, cognitive problems such as partial loss of memory and concentration ability) complaints and generalized fatigue.” 23

Phenol: A disinfectant, known poison “Phenol is toxic with a probable oral lethal dose to humans of 50-500 mg/kg. Some individuals may be hypersensitive with lethality or serious effects at very low exposures. Rapid absorption and severe systemic toxicity can occur after any route of exposure including skin. Death and severe toxicity are usually due to effects on the CNS, heart, blood vessels, lung, and kidneys.” 24

Ethylene glycol: Normally used as antifreeze, this is the chemical that sparked the 1980s Austrian wine scare. Effects - “Available data from acute poisoning cases indicate that the kidney is the critical organ for the toxicity of ethylene glycol. Available data are inadequate to assess the potential adverse neurological or immunological effects associated with long term exposure to ethylene glycol, although

neurobehavioral and neurological disorders have been reported in cases of acute ethylene glycol poisonings in humans. In the limited number of investigations examined, neurological effects have not been observed at doses below those that have induced renal toxicity. 25

Benzethonium chloride: Another antiseptic. Effects include “Ingestion may cause vomiting, collapse, convulsions, coma.; Highly toxic by ingestion; 1 gram may be fatal.” 26

Methylparaben: another preservative and antifungal. Effects include “as constituents of antibacterial ointments, dermatological preparations, and proprietary lotions and skin creams ... /parabens/ are recognized causes of severe and intractable contact dermatitis.” 27

And the daddy of them all, Squalene.

Although a normal component of healthy brain and nerve tissue, and a beneficial component of olive oil, squalene, when used in vaccines, is extremely dangerous. The reason for this seems to be the method of administration. Whereas olive oil can be broken down in the gut into its component parts for transportation around the body, squalene (as an oil and water emulsion) is NEVER found in the blood. When injected as a vaccine “adjuvant”, however, it is administered directly into the blood, causing a massive immune response (which is, of course, exactly why it is used). Unfortunately for us, this immune response is not helpful. Recognising the squalene as foreign, the immune system develops antibodies to attack and remove it, as foreign substances are NEVER tolerated in the blood. So far so good.

However, the immune system can’t distinguish between squalene in the blood and squalene elsewhere (e.g. the brain and nerves) and starts attacking all the squalene it can find – with devastating results. The first vaccine to contain a squalene adjuvant was the disastrous one that killed and paralysed many thousands in the threatened “swine flu epidemic” of 1976. Although the “outbreak” was limited to the army infectious disease base where it started, the public were persuaded to queue up for “vaccinations” voluntarily, and kept coming until the insurance companies said they would not pay for it any more, as too many people were dying and developing the debilitating nerve disease which came to be known as “Guillain-Barré syndrome” (it should, of course have been called vaccine-mediated neuropathy, but that would have been too obvious). In the end, the deaths and

25 Hazardous substances database entry for Ethylene glycol, at http://toxnet.nlm.nih.gov/cgi-bin/sis/search/r?dbs+hsdb:@term+@rn+@rel+107-21-1
26 Hazardous substances database entry for Benzethonium chloride, at http://toxnet.nlm.nih.gov/cgi-bin/sis/search/r?dbs+hsdb:@term+@rn+@rel+121-54-0
27 Hazardous substances database entry for Methylparaben, at http://toxnet.nlm.nih.gov/cgi-bin/sis/search/r?dbs+hsdb:@term+@rn+@rel+99-76-3
crippling disabilities are EXACTLY what you would expect from a “vaccine” containing squalene.

But that didn’t stop the pharma companies, no way. Although they tried to hide it for many years, information is now leaking out concerning the “vaccinations” given to soldiers that took part in the first Gulf War in 1990. “Gulf War Syndrome” is a very well recognised collection of problems suffered by a HUGE proportion of the soldiers involved in that conflict. Characterised by multiple different nerve and brain disorders, amongst other things, it therefore comes as no surprise that the “anthrax vaccine” that was given to ALL soldiers without consent or ANY information concerning its contents, did indeed contain squalene. The resultant plethora of problems faced by those returning from the war (and the MANY deaths associated with “Gulf War Syndrome”) speak for themselves.

The vaccines so far announced for the 2009 “swine flu” ALL contain squalene, and in doses far exceeding those in the two cases just mentioned, some say 100 times more. Look out for the adjuvants MF59 in Novartis products, AF03 by Sanofi-Pasteur and AS03 in those produced by Glaxo-Smithkline.

All this would be bad enough if it was unexpected, but it wasn’t. Animal studies of squalene have been conclusive, leading several countries to ban its use to date. A 2000 study published in the American Journal of Pathology demonstrated a single injection of the adjuvant squalene into rats triggered “chronic, immune-mediated joint-specific inflammation,” also known as rheumatoid arthritis. In other studies, all of the injected animals died.

“Animal studies using this adjuvant have found them to be deadly. A study using 14 guinea pigs found that when they were injected with the special adjuvant, only one animal survived. A repeat of the study found the same deadly outcome.”

Summary

As can be seen, when taken alone, any one of these “components” is toxic and can cause major problems, including death. Taken together in various combinations, as is the case in EVERY vaccine, it is a recipe

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30 Autoimmune Technologies, Gulf War Syndrome: ANTI-SQUALENE ANTIBODIES LINK GULF WAR SYNDROME TO ANTHRAX VACCINE http://www.autoimmune.com/GWSGen.html
31 The American Journal of Pathology, The Endogenous Adjuvant Squalene Can Induce a Chronic T-Cell-Mediated Arthritis in Rats, 2000 http://ajp.amjpathol.org/cgi/content/abstract/156/6/2057
for disaster and a major assault on the myriad delicate systems that control all body processes, not least the immune system.

The case against vaccines is compelling. Why else would the Vaccines Compensation Program exist?

In order to demonstrate just some of the tricks of the trade, let’s look at how the first vaccines were conceived and created. As will be seen, little has changed in recent years.
Smallpox

Wheeled out at every available opportunity by the “vaccinate everyone against everything” camp is the “indisputable” success of the national vaccination programs in eradicating smallpox from the Western World. Indisputable, that is, unless you look at what actually happened rather than the media and pharma spin, a process that conclusively proves the opposite!

The “credit” for the development of the smallpox “vaccine” belongs to one Edward Jenner, a barber, chiropodist and back-room manufacturer of “vaccines” from cow-pus and hair.33 Masquerading as a doctor, although he never passed any medical exams34, Jenner was considered a bit of a nut by his contemporaries, and his “success” in treating smallpox often resulted in the death of his patients within months to tuberculosis, not unlike the modern-day cancer physician’s concept of “cured, but dead” as a result of their treatment. In fact, Dr A Wilder, Professor of Pathology and former editor of the New York Medical Times commented, in reference to Jenner’s experiments “Consumption (tuberculosis) follows in the wake of vaccination as surely as effect follows cause”.35

It took Jenner many “formulations” and several years before he managed in 1807 to convince a sceptical Royal College of Physicians to reluctantly accept his rationale and rather dodgy method of preventing the disease, a concept, which, even at that stage, he was totally unable to back up with any factual data.

Dr William Hay had this to say to the Medical Freedom Society about Jenner’s dubious concept, which Jenner himself admitted showed “no protective virtue” in its early incarnations.36

“It is nonsense to think that you can inject pus – and it is usually from the pustule end of the dead smallpox victim – it is unthinkable that you can inject that into a little child and in any way improve its health. The body has its own methods of defence. These depend upon the vitality of the body at the time. If it is vital enough, it will resist all infections; if it isn’t vital enough, it won’t. And you can’t change the vitality of the body for the better by introducing poison of any kind into it.”

33 Rattigan, Pat, Assault on the species. Nemesis 1997
34 Rattigan, Pat, Op cit
35 Miller, N Z, Vaccine: Are they really safe and effective? Santa Fe, New Atlantean Press, 1993
If only such ethics and common sense existed in modern medicine. Alas, it seems to be extinct.

Of course, Hay was referring to the usual methods of defence employed by the body to filter out potentially dangerous pathogens and prevent them from entering the body, such as the skin, the mouth, nose and other parts of the respiratory and alimentary systems. These all include specific structures and processes that make it almost impossible for pathogenic bacteria and viruses to enter the body and cause disease unless the body in question has a seriously compromised immune system – such as one that has just been filled with poisons injected directly into the blood or tissues, as in the case of “vaccinations”. One example of this is the intense, virtually unstoppable urge to vomit if one has consumed food that is “off”.

“Vaccination” neatly avoids all of these protective mechanisms by injecting the bug in question – along with a raft of poisonous chemicals that are themselves enough to give any immune system a serious battering – directly into the blood of the recipient, where bacteria are never meant to reach! In fact, so serious is bacteraemia, as it is known when it occurs independently, that it frequently results in death. Furthermore, so paranoid is the body about keeping the blood pure that, even if swallowed and not vomited out, bacteria and toxins in food are neutralized by the stomach and liver, to be eliminated by the liver and kidneys.

During the Gloucester smallpox epidemic of 1896, the outspoken vaccine critic Dr Walter Hawden made the following comments to the residents of Gloucester on the “horse grease” (derived from the seborrheal lesions on the legs and feet of horses kept in poor stable conditions) that Jenner had added to his latest “formulation”:

“I had better, at the outset, state to you distinctly the position I occupy on the subject. I stand here not only as a medical man, but as a father and a citizen. As a medical man I look upon vaccination as an insult to common sense, as superstitious in its origin, unscientific in theory and practice, and useless and dangerous in its character; while as a father and a citizen I view the compulsory Vaccination Acts as demoralising in their tendencies, degrading in their character, cruel and unjust in their enactments, and an unwarrantable interference with parental responsibility and liberty, such as ought not to be tolerated in a country like England, which has boasted of her civil and religious freedom for generations past.
It seems that a man had been seeing to the grease upon a horse’s heels and had gone to milk the cows without washing his hands. The result was that it produced that peculiar kind of disease known by the name of horse-grease cowpox. “This”, said Jenner, “is the life-preserving fluid!” and he went home to write about the wonderful virtues of horse-grease cowpox. However, it was necessary to perform an experiment, and he inoculated a boy named John Baker with horse-grease, direct from the horse’s heels. He intended later to inoculate him with smallpox in order to see whether it would take, but the poor boy died in the workhouse directly afterwards from a contagious fever contracted from the inoculation.37

Here, we can see the potential for “vaccinations” to produce immediate and fatal results, a fact which has changed little in the intervening years. One common ingredient of virtually all vaccines – formaldehyde – which is normally used to preserve dead tissue, is known, for example to cause, amongst other things, cancer, including leukaemia and cancer of the brain, colon and lymphatic tissues.38 Is this really what we want to be injecting into ourselves? Into our children?

Eventually, Jenner found the winning formulation that was to guarantee his success, if not the success of his vaccine! Both the Royal College of Physicians and the Parliament were convinced to accept routine vaccination on the basis of nothing more than Jenner’s assertions and the promise of “large revenues”. In this, at least, he proved to be correct and vaccines remain today a tidy little earner, with the much-touted Tamiflu now earning a healthy $100 per shot for the questionable “benefit” of reducing the duration of flu (sometimes) by a day or so, balanced by some severely unwelcome side-effects.

In the words of US National Institutes of Health physician, Dr James A Shannon, “The only safe vaccine is the vaccine that is never used”.39

**Smallpox eradication – proof of effect?**

The proof of any pudding, as they say, is in the eating, and this particular pudding not only takes some digesting, but leaves a distinctly unpleasant taste in the mouth as well as a rather worrisome chemical cocktail in the blood.

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38 McTaggart, Lynn, The Vaccination Bible. What Doctors Don’t Tell You Limited, 2000

But does it actually do any good? The statistics with regard to smallpox are not all they are cracked up to be and most certainly not what you have been led to believe.

The best comparison is a direct one, and in this case we have the benefit of having the opportunity to directly compare the effects in vaccinated and non-vaccinated populations during the worst smallpox epidemics of the late 19th century.

After the instigation of forced vaccination in the early 1850s, over 95% of the population had been vaccinated when the largest ever smallpox epidemic begun in 1870. Over 42,000 people lost their lives to this epidemic, despite (or perhaps, because of?) the high vaccination rate. In towns and cities with lower vaccination rates, the death rate was observed to be much lower.40 As a direct consequence of this, whole towns refused to get vaccinated.

One such town was Leicester – at that time a bustling metropolis of 200,000 inhabitants. After the appalling failure of the vaccine to protect people during the 1870 outbreak, the population refused the official edict to accept the needle and instead relied on the age-old process of improving sanitization and quarantining those affected. Consequently, in the outbreak of 1892, Leicester suffered only 19 cases of smallpox per 10,000 people, compared to 123 per 10,000 in Warrington, where 99.2% had been vaccinated.41 The death rate in Warrington was similarly 11 times higher than in Leicester.42

Overall, the two towns that had refused vaccination – Leicester and Dewsbury – had the lowest death rates in the whole country!43

Amazingly, these statistics are often used to support the pro-vaccination stance, even though they overwhelmingly show that vaccination makes the situation worse, rather than better. Even the World Health Organization admits that, in many countries where smallpox was eradicated in the 1970s, it was achieved through a policy of surveillance and containment after the failure of vaccination to resolve the problem.44

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40 Rattigan, Pat, Op cit.
41 Rattigan, Pat, Op cit.
42 McTaggart, Lynn, Op cit
43 Rattigan, Pat, Op cit.
A typical example of this was Sierra Leone, where vaccination had failed to have the desired effect. Following the decision to eradicate the disease in 1968 after achieving the highest rates Worldwide, policies of identification and quarantine proved effective, and 15 months later, the last case of smallpox in the country was recorded.\textsuperscript{45}

The case with other vaccines is much the same, consisting of dubious concepts, even more dubious data, investigational bias and downright lies. This conforms to a much larger and more general concept which people are beginning to wake up to, as discussed in the next chapter.

\textsuperscript{45} British Medical Journal, 1995; 310: 62
**Problem, reaction, solution**

**Population control of a different sort!**

The one thing that can be shown to be consistent in all of these recently threatened “pandemics” is that the joint forces of mass media and it’s Government accomplices have done everything they can to create fear, panic and a demand for action amongst the general population whilst strictly limiting any rational discussion of the “problem”, proper comparisons or factual accuracy.

This is, in fact a well tried-and-tested technique, commonly referred to as problem-reaction-solution.

In short, this requires that some massively-dangerous bogey-man (or at least, a concept of one) is “discovered”, which threatens to undermine any and all aspects of society that the population find either comforting or enjoyable. This has the desired effect of creating untold fear, panic and desperation, at least in the media themselves, justifying their own subsequent calls for an urgent reaction to prevent the said bogey-man from bringing on doomsday.

At no point is the public required to participate in the process, although if they do, it clearly adds extra leverage to the situation and makes them even more likely to accept the draconian “protections” that are prescribed to resolve the issue, which then quietly fizzles away, given that it didn’t really exist in the first place.

Of course, now and again, there has to be a real, preferably spectacular event to justify all the false alarms and these are now arriving with increasing regularity and convenience just as the “required” legislation needs a boost to gain approval by either the public or their supposed representatives in Government. In fact, such convenience, once it is recognized, becomes blindingly apparent and massively worrying in its frequency and proximity to important events such as elections and the passing of “safety and security” legislation like that implemented in the last few years.

As an example, the “Patriot Act” that was rushed through the US Congress following the horrific 911 events is recognised as having stripped numerous basic rights from US citizens, as well as breaching the US constitution, that frustratingly troublesome “piece of paper” that GW Bush hated so much. Once the event had happened, the
conveniently pre-prepared bill was wheeled out and passed without dissent, vastly degrading human rights in the process.

As Benjamin Franklin said “They who can give up essential liberty to obtain a little temporary safety, deserve neither liberty nor safety”.

Inevitably, it occasionally backfires, and who can forget the recent humiliation of the British Prime Minister when his utterly unjustified attempt to increase detention without trial from 14 to 90 days was denied by Parliament. Of course, it will appear again, in some other guise, in the not-too-distant future, probably after another “terror” attack, just to give it a boost. What was completely ignored by the media in this particular event was the totally scandalous use of public money to fly Government ministers back from important foreign engagements in order to support the ego of a Prime Minister by adding their votes to his plan. Isn’t it great to have a free press!

In the case of pandemic flu, the intention is obvious, and is most blatantly evident in the actions of the US Government. During the bird flu debacle of 2005, having created the panic, it announced that not only would the Government pay almost 4 BILLION dollars for antiviral medications and vaccines (from which Defense Secretary Rumsfeld is set to profit very handsomely), but it would also seek to release a further $6-10 billion for provision of a vaccine against a disease that had yet to arrive in the country, let alone kill anyone.46

Of course, the 2009 is no different, with big pharma netting huge Government subsidies to create the “vaccine” quickly, as well as selling millions of doses of untested and potentially deadly “vaccine” to both Government and the uninformed public, who are most likely going to be FORCED to have the vaccination, whether they want it or not.

However, there is one aspect of the 2009 swine flu outbreak which is decidedly MORE sinister than usual, and may be the worst example of “problem-reaction-solution” that we have ever been unfortunate enough to experience.

In early 2009, Baxter Pharmaceuticals, of Vienna Austria, packaged and sent 72Kg of “vaccine material” to laboratories in 16 other countries, for production of that winter’s seasonal flu “vaccine”. Not mentioned on the labelling, packaging or anywhere else was the fact that Baxter had generously included a rather novel extra ingredient – LIVE H5N1 Bird Flu! The contaminated material was destined to be used in the production of millions of doses of “flu vaccines”, which, had they been administered to the public as intended, would have sparked a massive pandemic with the potential for a very high mortality rate.

In addition to the mortality and morbidity that could be expected just from having the live bird flu in the vaccine, its proximity to the “live attenuated” bugs that were MEANT to be in the vaccine provided the ideal breeding ground for the virus to mutate from the relatively uninjectious bird-specific strain that was used, to a new, super-infectious human variant – the very thing that caused all the concern about “bird flu” in the first place!

Ever so conveniently, some 3 years earlier, Baxter had signed a very lucrative deal with the Austrian Government to provide 16 million doses of “bird flu vaccine”, should such a pandemic evolve. The success of their attempted distribution would therefore have been VERY lucrative, both within Austria and in the international markets.

We only know about this case because of the extraordinary courage shown by two people. The first is the lab technician who took it upon himself to test the material received in the Czech Republic and discovered the H5N1 “surprise”. The second is the highly respected medical writer who discovered the story in a local paper and decided that something was not quite right about it being absent from ALL the mainstream media.

Jane Burgermeister was perturbed that such a potentially huge and fatal release of highly dangerous (and strictly controlled) material was being utterly ignored by the national media in Austria, as well as the media elsewhere. As a consequence, she started researching the issue and eventually filed criminal charges against Baxter with the Austrian Police, in an attempt to have the matter properly investigated and relevant actions taken. Quite rightly, she questioned how such

dangerous material, which is supposed to be kept in secure “level 3” biohazard facilities (the 2nd highest degree of biohazard containment) could possibly have been “mixed” with routine vaccination material.

Jane Burgermeister explains the Baxter Debacle in this fascinating interview with Project Camelot (Internet connection required).

By all normal standards both of good manufacturing practice and biohazard containment, this should not have been possible and certainly couldn’t have happened by accident. The uncomfortable conclusion was that it MUST have been deliberate, which opens a whole new pandora’s box of criminal possibilities. Consequently, the charges, which are very detailed and specific, accuse Baxter of attempted Genocide. They now also involve both the WHO (World Health Organisation) and the Austrian Government, who, it is claimed, were both complicit in trying to cover up the whole event.

Coming in such close proximity to another incident, where canisters of “swine flu” material were being transported on a PUBLIC train in Switzerland, and mysteriously exploded, causing much fear, panic and a great deal of contamination48, this event is EXTREMELY suspicious and may well go down in history as one of the worst cases of “problem-reaction-solution” ever discovered.

48 [http://www.spiegel.de/international/zeitgeist/0,1518,621598,00.html](http://www.spiegel.de/international/zeitgeist/0,1518,621598,00.html)
“Swine Flu Pandemic” Déjà vu – We’ve seen it all before

By now (hopefully), you are starting to think that there may be more to this year’s threatened “pandemic” than is fed to us by the compliant media and their Government buddies – good for you! In fact, we’ve seen the whole scenario before, with very little (if anything) to distinguish it from the current “threat”, and, more to the point, it was provably a complete fabrication.

In early 1976, a group of US soldiers was alleged to have been infected with a “deadly” new strain of flu. Although there was absolutely NO evidence to connect the outbreak to pigs, it was quickly dubbed “Swine Flu”, and the combined efforts of the pharmaceutical lobby and the media sprung into action with the predictable hype. It didn’t take long for the fear-mongering to start, and it came, notably, from the supposed guardian of US efforts against bugs of all kinds, the Centers for Disease Control (CDC).

In his review of the affair, Professor Hiram Caton commented “The CDC’s vigilance systems were triggered. The new virus was thought to represent a major mutational shift in human influenza viruses. There was no immunity to it in the general population. Could it cause a national pandemic?”

Such was the scale of the hype that immediately, the “experts” were predicting a disaster on the scale of the 1918 flu epidemic, suggesting that millions could die (sound familiar?).

The response of the Ford Government was predictable and utterly consistent with all the other “scare” tactics - $135m was immediately made available for a “readily available” swine flu vaccine, and surprise,

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50 Ibid.
51 McBean, Eleanor. Swine Flu Exposé; http://www.whale.to/vaccine/sf.html
surprise, the ever-vigilant pharmaceutical industry just happened to create one in double-quick time. Unfortunately for them, although only one person, the first poor soldier to contract the “new strain” died of the actual flu, at least thousands were maimed or killed by the so-called “vaccine” that was rushed out to combat it, eventually resulting in the refusal of insurers to pay for the “vaccine”.52

In her exposé of the affair, vaccine historian Eleanor McBean sums it up thus:

“At the present time of writing, October 1976, a group of medical opportunists have taken upon themselves the dictatorial authority to declare the threat of a sweeping epidemic of swine flu which they said was similar to or related to the 1918 epidemic of Spanish influenza which wiped out 20,000,000 people worldwide.

This declaration was supposed to scare all the people into their vaccination centers to be shot full of experimental vaccine poisons, while they, the promoters, raked in the profits.

The arrangement was that $135,000,000 of the people’s money was for vaccine doses for all the 215 million people in this country, at 50 cents a shot...

So many people were killed and paralysed by the vaccine that the campaign had to be stopped.

The swine flu vaccine campaign was such an obvious fraud, with no epidemic – not even one authentic case of swine flu anywhere in the world – it makes us wonder about the sanity of the promoter.

Many people who saw through the fraud from the start tried to get warnings in the papers, on TV, and through other channels of communication, but the media turned a deaf ear.”53

As further summarized by researcher Stephen Ransom54

- “An epidemic was declared, for which there was no proof

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53 McBean, Eleanor, op cit
- The flow of disinformation was brought to the public almost exclusively through the national media outlets which had magnified the situation to monstrous proportions

- A vaccine was swiftly proffered for the solution

- $135m was paid to pharmaceutical organisations who, with their close ties to the mainstream press, were the instigators of the fearsome headlines

- Minority voices, calling attention to the extreme fraud associated with the campaign, supplied the mainstream media with all the necessary information to expose the scam.

- The minority voices were completely ignored.”

Is this starting to sound familiar yet?

Well, let’s end this section with a complete doosie of a fact related to the current “scare”. Under the directions of US Secretary of War, Donald Rumsfeld (he of the aspartame scandal) has been ordered, on behalf of the US Government, 100 MILLION doses of the controversial flu “treatment” Tamiflu, which AT BEST might reduce the duration of flu symptoms by up to 1.3 days\(^55\) – whoopdee do! Worse, research shows that Tamiflu can actually make the severity of flu worse than doing nothing.\(^56\)

Now, Tamiflu is made by the mighty Roche pharmaceutical giant under licence from a little-known company called Gilead Sciences Inc., whose chairman (since 1997) is... drum roll please... a certain Donald Rumsfeld – NOW are you starting to see how this works?

The cost to the taxpayer of this little conflict of interest scam – a whopping $100 per dose, for a staggering payout of $10 Billion. Not a bad day’s work for rummy eh? And what has the mainstream press had to say about this utterly scandalous behaviour so completely against the public interest (apart from the law and any code of morals)?


\(^{55}\) Tamiflu official website. [http://www.tamiflu.com/faq_tamiflu.asp#expect](http://www.tamiflu.com/faq_tamiflu.asp#expect)

Thank goodness for the free press!

So what can we do to prevent “swine flu”?

Prevention of the threatened "swine flu" is little different from prevention of "normal" seasonal flu and consists of both common sense and less-common defensive measures.

Thanks to the utter control that the pharmaceutical companies have of all national regulatory agencies, this is where I have to be a bit careful, as they make it illegal to talk about any "treatment" that does not involve drugs OR for any non-medic to give what could be construed as medical device.

I am therefore going to pass on to you the sound advice given by natural physician Dr Joseph Mercola and give you a few links to some other information about which you can make up your own mind. That way I AM NOT GIVING YOU MEDICAL ADVICE, merely passing on information - what you choose to do with it is up to you (don't you just hate the way they try to control everything...grrrrr!).

Dr Mercola recommends:

Boost your immune system (for example, with regular exercise) and consider the following supplements

- **Omega 3 EPA.** Omega-3 is an essential fatty acid (i.e. MUST be in the diet, as it can't be made by the body) that is a major component of brain and nerve tissue as well as performing many other vital functions in the body. It is also intricately involved in the function of the immune system.

  Most people are so deficient in Omega-3 fatty acids that the detectable levels are negligible! It is mainly found in nuts, seeds and fish oils such as cod-liver oil (but be careful of your source, as much fish oil is contaminated). See [here](#) for more information.

- **Polyphenolic Flavonoids.** These powerful antioxidants help protect body tissues against damage and remove toxins and other nasties from the body.

- **Vitamin E.** Another important antioxidant, Vitamin E is poorly stored by the body and is an important component of cell
membranes amongst a great many other functions. Good sources include Wheat-germ oil (as well as other fresh nuts and seeds), Mayonnaise, Soy oil, turnip greens, butter and blackberries

- Zinc. Zinc is one of the most important minerals in the diet and is required for proper food metabolism as well as immune system function. It also plays key roles in skin, kidney, eye, hormone and muscle function as well as being a component in over 200 enzymes. Good sources of zinc include Fresh "popcorn", sesame seeds, root ginger, peas, cheese nuts and grains (shellfish are a great source of Zinc, but may be contaminated by other toxins).

- Selenium / Glutathione. A powerful antioxidant, selenium is thought to be particularly important as an anti-ageing mineral as well as helping rid the body of toxic compounds and metals. It is an important component of glutathione, which is essential to healthy immune function. Sources include molasses, nuts, whole grains and shellfish (see above). It is also found in brown rice, lamb, garlic and cooked mushrooms, as well as beer- which sounds like a delicious combination to me!

- Magnesium. One of the most abundant minerals in the body, magnesium plays key roles in maintaining healthy bones, teeth and is vital to the brain and nervous system as well as muscle contraction. It is involved in hundreds of enzyme reactions, and plays an important role in energy metabolism. Good sources include kelp, whole grains, nuts and beans. See here for more information.

- Vitamin D3 (5-10,000 IU). Magnesium also plays a very important role in vitamin D absorption and metabolism. These days, many people are deficient in Vitamin D due to low levels of sunlight exposure, which is the most traditional source of Vitamin D (find out more about the BENEFITS of sun exposure HERE). The most effective form is Vitamin D3 (cholecalciferol), which is around 5 times more potent that Vitamin D itself. Good sources (apart from 20 minutes sun exposure a day) include Oily fish, eggs, butter and other dairy products as well as shitake mushrooms.
And avoid, if you can

- trans fats (margarine, shortening and anything cooked in vegetable oil)
- iron supplements (unless you're a menstruating woman)
- Mercury (most fish)
- And, of course, the "vaccine"

Exercise is hugely important to immune system function and boosts many other body processes - try to get at least 20 minutes vigorous exercise 3 times a week, especially in the winter. (fitness and health permitting, of course).

There are a number of other products that are thought to have important functions in relation to infectious disease. Almost without exception they have been ridiculed and even criminalised by the medical profession, usually because they work so well!

You are strongly recommended to find out more about [colloidal silver](#) and [Miracle Mineral Supplement](#)

**Treatment of Flu**

We've all been there and it's not pleasant. Although many people talk of having the "flu" whenever they get a sniffle, true influenza is downright debilitating and usually keeps you in bed for a week or two at least.

Keeping yourself and your immune system healthy is a great form of insurance against the flu, but what can you do once it strikes?

Most medical advice centres around bed rest, plenty of fluids and, if family is to be believed, grandma's chicken soup (the old ways are often the best!). However, the above "prevention" methods would not hurt and many people swear by natural products such as grapefruit seed extract, which I personally have tried, to excellent effect.

As has already been said, the current "swine flu" is reported by the WHO themselves as being "generally mild" and less significant than the usual seasonal flu varieties, so you really should not stress yourself about it. The most important thing is that you inform yourself and take some simple precautions (such as those mentioned above) as
well as taking reasonable steps to avoid known sources of the flu, such as schools and, of course, hospitals!

Nothing is more important in the fight against infectious disease than a healthy immune system. Your job is to get it healthy and keep it there - then it will look after you when any nasty bugs come a-knocking.

IMPORTANT

Anti-pyretic (anti-fever medications) such as aspirin and paracetamol can be VERY dangerous if you have the flu. If you have not already read it, please read the page on 1917-18 "Spanish flu" for more information.

Avoiding the Vaccine

Regulations and laws concerning the right to refuse vaccination vary from country to country; however, basic human rights allow you to refuse the forced administration of ANY substance into your body. If in doubt, refer to the UN Universal Declaration of Human Rights 1948 for further information (just Google it), as well as your national Human Rights legislation.

There are, however, some very brave souls who have taken it upon themselves to provide specific information regarding the various processes already established to register your protest and protect yourself from forced vaccination. For further information see THIS list of vaccine exemption procedures.
Conclusions

The much-hyped "pandemic" the media have been ramming down our throats for months now is far less dangerous than the "vaccines" they are trying to persuade us (or force us) to take as a "preventative" measure. Time after time the same arguments have been used to cause mass fear and panic in exactly the same way as they are been used now. On each occasion, not only was the "threat" created and manipulated by the media, Governments and pharmaceutical companies, but the solutions that they provided were far more dangerous than the infections they claimed to be preventing or treating.

This year's event is, however, MUCH more serious than the previous efforts, such as "bird flu" and the 1976 "swine flu". Not only have the pharmaceutical companies and WHO been caught trying to release the very "threats" they claim to be protecting us from, but their lobbyists have secured immunity from prosecution IN ADVANCE of either any pandemic or the beginning of a vaccination program. This is a highly suspicious and cynical move and should be ringing alarm bells the World over. Remember, both the totally un-natural virus and the vaccines were PATENTED in advance of the emergence of this "new" flu-strain in early 2009. If this is not a clear indication of criminal conspiracy then nothing is.
The eugenicists at the WHO have already stated their objectives very clearly - to massively reduce the human population and to establish a single World-Government (with them at its head, of course). They are unelected and answerable to no-one except themselves.

What happens next?

That depends on YOU. What you do will have an enormous effect on your family and what we do collectively will decide whether this conspiracy is allowed to go ahead or not. It simply CANNOT happen if enough of us stand up against the tyranny that masquerades as Government around the World. There are too many of us to "vaccinate" forcibly unless the masses somehow volunteer for their poison.

Most likely the media will begin to hype up the "problem" again as the flu season approaches. As the first "vaccines" are released, there will be a HUGE increase in cases of the "flu", invariably caused by the vaccines themselves. This will be used to pressure EVERYONE to get themselves vaccinated voluntarily. Once the majority have done so, they will be manipulated to treat anyone who has not been vaccinated with suspicion and to "inform" on them whenever possible.

After that, those who refuse will be "invited" to reconsider, before being either forcibly "vaccinated" or taken to one of the many "quarantine" facilities (i.e. prisons) that have been specially constructed around the World (but especially in the USA). There is masses of information, including video of this available from a simple Google search.

Only WE THE PEOPLE can stop this.

What should you do?

1. Inform yourself. Do not take my word for it. Follow the links and check out the references. Do your own research and come to your own conclusions - the evidence is there for those with eyes to see.

2. Spread the word. This document is free and can be copied without restriction - send it to your friends, upload it to websites, file sharing communities etc. (I will be creating torrent files etc and hosting them at Natural Health Information Centre). The more people that are informed, the fewer will become victims of this criminal insanity.
3. Prepare your immune system as recommended by Dr Mercola in our "prevention" section above and encourage others to do the same. YOU are the only person responsible for your health. Use that responsibility wisely.

4. Refuse to cooperate with ANY vaccination "campaign". Peaceful resistance and if necessary rebellion is not only our right, it is our responsibility when Government ceases to operate for the benefit of the people. Note that I said PEACEFUL resistance - violence is not the answer and will only encourage the martial law that has been carefully prepared for us in recent years.

5. Continue to educate yourself, get informed about the REAL issues facing us and STOP watching the mindless junk that is pumped into your mind via the media, and in particular TV (that includes the "NEWS", which is nothing less than propaganda issued by the PR departments of the various organisations involved in this whole charade.
About the author
Brian of the Adamson family©

Brian is an independent writer and avid reader of many subjects from the esoteric to the forgotten knowledge of ancient history.

Initially trained in the diagnostic discipline of neurophysiology (diagnosing brain and nerve disease) within the British National Health Service (NHS), he achieved the highest possible distinction of winning the national prize in his professional qualifications.

Thereafter, he went to work in the UK pharmaceutical industry, where he performed a number of roles, including sales, marketing, business development and clinical research, before moving on to medical education and publishing, where he oversaw and helped write and produce medical training materials and professional medical journals. In all, his “orthodox” medical career spanned over 16 years from 1985 to 2001.

It was about this time that Brian was introduced by a friend to the concepts and theories behind natural health, which he then began to pursue and investigate. Finding much more truth and humanity in these principles, he began to write about his findings, launching Natural Health Information Centre in 2002 as a vehicle to communicate this to the World.

Since then, he has further broadened his interest to related subjects such as reiki (in which he is a trained practitioner), the spiritual aspects of health and the scientific background to natural health principles, such as quantum physics and the nature of reality and, in particular, spirituality.

He is also intensely interested in and driven by human rights and in particular the abuse of such rights by modern Corporate “Government”. As a consequence of this, he has officially removed himself from such controls, having established his status as a “freeman on the land”, superior to and outside of such corporate dictates.

This explains the way in which he identifies himself, which may seem unusual, but is necessary in maintaining his separation from the corporate name “BRIAN ADAMSON™”. For further information, please see Veronica Chapman’s wonderful website www.fmotl.com and her informative book “Freedom is more than a 7-letter word”.

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Author's appeal
I have produced this booklet for the good of humanity, that we might prevent the carnage planned by global health “authorities” in the guise of this (and most, if not all other) pandemic(s).

In order to maximise the reach of the message, this publication was made available for free. If you found it useful (which I sincerely hope you have), please consider making a donation, however small, to help fund the continuation of my work, which is otherwise entirely voluntary and unpaid.

You can donate securely with PayPal from the NHIC Website
My sincere thanks and gratitude to all of you who found this information worthy of a small contribution.

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Whilst this booklet has been produced entirely at my own effort and in my own time, I am eternally indebted to the visionaries whose fearless and ceaseless work has helped me to the position of understanding that I now occupy.

Although the list is not exhaustive. This includes:
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Lynne McTaggart
Samuel S Epstein
Deepak Chopra
Neal Donald Walsch
Katrina Patrick
Veronica Chapman
And other authors of conscience too numerous to mention.

Disclaimer....sort of!

The medical “regulatory” authorities of virtually all countries are now so completely under the control of the pharmaceutical industry that they try to suppress, ridicule and eventually criminalise ANYONE who has the gall to suggest that there is ANY other way of preventing or treating disease (this is the actual official policy, for example, of the FDA in the USA).

As a consequence, I am required, by those bodies to include a statement supporting their immoral monopoly and refuting the effectiveness of any other means of prophylaxis (prevention) or treatment.

I steadfastly refuse to do this and strongly suggest that anyone concerned about these matters look into the organisation, membership and control of these quasi-Governmental “agencies”, which exist for the sole purpose of delivering to BIG pharma gargantuan profits on an ever-increasing scale.

For more independent health information please see www.natural-health-information-centre.com