

Swine flu vaccination - an expert writes

Sunday 22 November 2009, by [CANTALOUPE Frank](#), [PROUHET Frank](#) (Date first published: 23 September 2009).

"At least I hope he's an expert. The piece below by Frank Cantaloupe is translated from the NPA site and questions the French government's decision to spend one billion Euros on its vaccination programme.

There's no truck with homeopathy, herbal tea, astrology or any of that nonsense on this site. So, even though in my experience doctors only say "you've got two months to live" or "it's a virus there's nothing I can do for you", that does not stop me getting flu vaccinations. The one for swine flu yesterday knocked the stuffing out of me but seems a lot better than the disease and prompted a bit of research. A French lefty organisation seemed the obvious place to look, not least because Irish people should be grateful to France for preventing an orgy of football related marketing next year."

Liam Mac Uaid

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ESSF Note: a much longer version of this article is available in French: [NPArguments - Questions sur la grippe A](#)

While the health budget has suffered from austerity, the government has found one billion euros, half of which has been paid by social security contributions - to buy, at four times the normal price, 90 million doses of vaccine. These are vaccines that had not yet authorised for release on the market and which have hardly been tested, despite the addition of additives and preservatives. While the labs swear there is no problem with their vaccine, they have fixed it so that in cases of complications they don't have to pay a Euro. That'll come from the medical compensation fund.

This is a one billion Euro scandal. The mortality rate of pandemic influenza is scarcely higher than that of the seasonal flu, though it is more contagious. In contrast to experts who are open to being influenced, the only medical journal which is independent from the laboratories, Prescrire, advises sticking to a "targeted vaccination for people at high risk of serious complications, those around them and caregivers. Different vaccines have been made available some of which use the whole virus and others which use part of it. Some have additives and preservatives and others don't.

Proponents of "vaccinate more to earn more" have faced a problem: their limited manufacturing capacity. So, to produce more with fewer antigens, they have put additives in their vaccine (Focetria, Pandemrix) that stimulate the immune system, but are also accused of promoting autoimmune diseases. They also added preservatives such as thimerosal, a mercury derivative whose presence is no longer recommended in vaccines since 1998, because of the neurotoxic potential. Cevalpan uses

whole inert viruses. Yet vaccination with this type of vaccine in the U.S. , was stopped in 1976 for causing one case of severe paralysis per 100 000 vaccinations

For the journal Prescrire, fragmented vaccines without additives and without Thimerosal such as Panenza have the best risk-benefit ratio, especially for infants and pregnant women when they are considered at risk. They come closest to the vaccine for seasonal influenza which is widely felt to reduce complications by 50% and mortality by 80% among the target populations.

Experts funded by the labs; vaccines which have not been thoroughly tested; a government which chooses mass vaccination as its first hope preventing people missing work despite unnecessary risks to the general population. No wonder there is a lot of scepticism.

Only 17% of the population wishes to be vaccinated and not always the ones who needs it!

P.S.

* From Liam Mac Uaid's blog:

<http://liammacuaid.wordpress.com/>