

A SHOT IN

**What does a mother do when vaccination time comes round?
Do what doctor says? Or give it some careful thought...**

by Annette Taylor

I took my daughter, Jessica, for her first visit to the doctor when she was 7 weeks old. She'd been born at home and I felt sure the doctor would smile and goo over her, reinforcing my feelings that here was truly a healthy, fit baby.

When I emerged from the surgery, 15 minutes later, I was upset, the day ruined for me. Apart from the doctor's disapproval of a home birth, she was mortified that I didn't allow her to vaccinate Jessica for diphtheria, whooping cough and tetanus.

I said I wanted time to think it over and she reluctantly let me, adding there was a whooping cough epidemic in New Zealand at that time and "I wouldn't want to be responsible the death of my baby".

The visit got me thinking. Should Jessica receive all her vaccinations, at the time recommended, or could they pose a threat to her?

I had heard of a group in Auckland who were opposed to immunisation. What were their reasons?

As it turns out, the facts are far from clear. The Health Department is criticised for cooking statistics, and accused of having tunnel vision, while the anti-immunisation lobby is regarded by some as a bunch of emotional and

scientifically illiterate flat-earthers. One doctor who has a reputation in the Waikato for questioning mainstream medicine is Te Awamatu general practitioner Janion Heywood, who agrees the issue is anything but simple.

"We're dealing with muddied water. I say to my patients I'm uncertain about the effects of vaccination, and I can't promise that their child will be protected from the disease or that it won't be harmed from the vaccination process," she says.

Dr Heywood is concerned about what vaccination is doing to the immune system. "Our knowledge is incredibly humble, it is still a developing science. It might be a case of swapping 1 set of ills for another. There might be an increase in disorders such as otitis media (middle ear infection).

"We're never going to eradicate everything, something else will always bubble up. We're just one species on the planet – we don't have mastery. Doctors like to think they can prevent and cure things, but I believe there might be a spin-off, a price you pay for more and more immunisations."

Dr Heywood feels people do not get the whole story from the Health Department and advises anyone who is uncertain to get both the official

Health Department literature and information from the Auckland-based Immunisation Awareness Society Inc.

"People who don't vaccinate because of a New Age philosophy or alternative life-styles, thinking it's not natural so they won't do it – I don't agree with that. It has to be a positive, informed decision, rather than a negative one, in the same way that the decision to vaccinate has to be a positive one."

But, as with Humpty Dumpty in *Alice In Wonderland*, words seem to mean only what people want them to. With immunisation, the advice and information you get depends on who you speak to.

For Waiora Waikato (Health Board) Medical Officer Harry Nicholls there is no issue. The only, and best, decision, is to vaccinate against all diseases, he says.

He believes we're becoming complacent about some of these diseases – whooping cough, diphtheria, polio – because they just aren't around as much as they used to be. On his desk, he keeps a 15-minute video which "would change many people's minds into getting their kids vaccinated".

Diphtheria is a case in point. In 30 years in the medical profession, Dr



*Anti-immunisation
campaigner Hilary
Butler (above)
claims the Health
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into vaccinating.*

child with measles suffers more misery than the sum of all the children he's immunised. "And with whooping cough, while it's not that fatal for older babies, the disease goes on and on and on, causing distress to both the child and the family. We've got to weight these things up. It's not the parents who get to suffer, it's the kids."

Sue Dick is a committee member of the Immunisation Awareness Society. All 4 of her children had measles when I phoned her. She says the illness was no problem, the disease just ran its natural course.

"They just slept it off. We kept them quiet in a dark room, and the important thing is, they'll never get it again. Their 15-year-old cousin – who was immunised – got it at the same time.

"I want to know, why immunise, if there's a risk of side effects, and if it doesn't protect you?"

The Immunisation Awareness Soc-

ety, formed in 1988, has some serious doubts about the current urge to vaccinate for measles.

The society, which has about 350 members, did not believe the Health Department could be trusted in the 1991 measles epidemic because it misled people during the previous one, which occurred in 1985.

Writing in the society's newsletter, its leader, Hilary Butler – who is an active campaigner against immunisation – pointed out that the 2 children who died from measles in 1985 had pre-existing medical conditions which would have weakened them (non-Hodgkins lymphoma and mucopolidosis). And that one child had been immunised against measles.

She claims the Health Department does not deal straight, but tampers with statistics, and tries to terrorise people into vaccinating.

The information about the 2 deaths did not appear in the *New Zealand Medical Journal* until May 13, 1987, i.e. 2 years later. In the meantime, she says, the deaths were enlisted in a bid to bolster the campaign in the Australian press.

However, there are many ways to twist statistics.

In the same article, Hilary Butler quotes US figures showing that in spite of a 95% nationwide vaccination coverage rate in the last 2 years, there have been 45,000 cases of measles, the majority being vaccinated.

While these figures sound enormous to us in a population of 3 million, what it equates to in the US is actually only one case in every 10 thousand of the population.

To show how muddied the waters have become in the immunisation debate, there is considerable disagreement as to what really happened during a vaccination programme at an Auckland school.

No-one can dispute that there was an outbreak of meningococcal meningitis – a serious disease which affects the brain.

The Auckland Area Health Board decided on a vaccination campaign. While a group of children waited for their shots, it was discovered that the fridge had inadvertently been turned off, making the vaccinations unsafe to use. These doses were discarded and

SHE SAID NO

GLENISE PARTON (37) has worked on the measles and rubella vaccine for the World Health Organisation in the United Kingdom. She has 2 children, Keegan (3) and Gemma (1), neither of whom have been vaccinated.

Glenise began to doubt the process of vaccination when she was working for the WHO. Ten years later, when pregnant with her first child, she chose a home birth, which made her question standard medical procedures.

"Things are done to us that we just accept. I was looking beyond his birth, looking at other options – like should he receive an injection for hepatitis B at birth. It just didn't seem wise to challenge such a young immune system."

At his 6-week check up, Glenise refused the triple vaccine – "such a multitude of vaccines, we don't really know the effect of what we're doing on a long-term basis."

She says information she has read since confirms her earlier suspicions as to the some of the risks of vaccines.

"We have an increase in immune related illnesses, such as asthma, hayfever and the like. I wonder if there is any connection."

Both her children have recently had whooping cough. The illness was "fairly straightforward" and Glenise monitored their condition constantly.

"It comes down to a convenient diagnosis, more often than not. I wonder what would have been diagnosed if the children had been vaccinated for whooping cough?"

She nursed the children, and took them out of the "stress lane", and says she would do it again: "I believe in letting things run their own course."

The thing that upsets Glenise is uninformed parents who resent her child mixing with theirs.

"It's our children who are at risk, not theirs, theirs are supposed to be protected by vaccination so they should have nothing to fear."

SHE WISHES SHE'D SAID YES

TRISH FINLAY-ELLIS, mother of 2, lives in Papamoa. She refused vaccinations for her first child, Laurel.

"I said no because I believe that a 6-week-old baby is far too young and the immune system is not developed enough to cope with vaccines. I also lead a very quiet life at home and stay away from most public places."

Trish treated Laurel's early colds and a bout of gastroenteritis with natural remedies.

"In her first year, my Plunket nurse asked about her vaccinations and I said no, not until she is 12 months old. At 14 months, I cried as the needle went in and she was vaccinated for tetanus and diphtheria. And she had a polio sip. Still, I felt she was old enough and strong enough to cope. And she was."

When the measles epidemic came along, Trish still didn't vaccinate because she had read about rare but serious complications associated with the vaccine.

Laurel caught measles at 2½. She incubated the virus for 12 days and had a streaming nose, then a fever which stayed around 39.8°C for 3 days. "She just lay around, refusing food and having small sips of juice and water," remembers Trisha. "Her breath became foul and she vomited and had diarrhoea. On the 4th day of her fever, her spots had begun to appear and I thought, great! It's the last stage.

But that was the beginning of a very frightening time. The rash seemed to grow on her and she was completely covered. I had 3 nights sleeping with her as she moaned and cried with discomfort.

"She lost weight, her lips cracked and her eyes seemed to look haunted and slightly sunken." Trish tried baking soda, oil, baths and ointment to take the itch out of the rash. "Nothing worked. At one stage, she was delirious and hallucinating. She simply wasn't with us, didn't even know who I was. It was real torture for her."

Trish's husband took time off from work because they also had a 4-month-old baby boy to care for. "It took Laurel about 8 weeks to come completely right and happy within herself. It was a very hard time for her and she didn't understand why she was so sick."

Two vaccinated children with whom Laurel came into contact during the incubation time caught it, but had only mild symptoms.

"The questions I ask myself are, what if my little boy had caught it? What if it had been hepatitis?" says Trish. Now, Laurel will be vaccinated against hepatitis and rubella. "So will my baby. There's plenty of stresses in life without having to cope with nasty diseases. As for English measles, it's horrible!"

the children waited for new vaccines. After their shots, however, the children began to react adversely – with vomiting and other symptoms.

"In an effort to reassure people that the vaccine was okay, the Auckland health board said it was just a nervous reaction, which went down like a lead balloon," says Dr Nicholls.

After much turmoil, the board decided it would be best to investigate exactly what happened, and a specialist was called in from overseas.

"He declared there were no serious side effects that could be attributed to the vaccine, certainly nothing lasting," Dr Nicholls says.

The Immunisation Awareness Society tells a different story. It claims the accusation of "mass hysteria" was a quick lie invented to excuse the fact that a parent had seen a whole school reacting violently to the vaccine.

"The power of the lie is phenomenal," says committee member Wendy Lydall. "The specialist who investigated the allegations of side effects pruned down the figures as much as he could but he still couldn't get away from the fact that there were

more bad reactions to the vaccine than to the disease. He also discounted the theory that it was mass hysteria."

She talks about a boy who cannot walk properly after this incident, not included in the statistics, who is now being urged to take the hepatitis B vaccination available at school.

In addition to spreading awareness about vaccination risks, the society supports families whose children have been damaged by the process, which often is a source of frustration for them, as Sue Dick explains: "Many of these children are not recognised by the medical profession as being damaged by the vaccination process. They write it off as something else, like developmental problems."

She told me about a 2-year-old girl who is clinically regarded as having the mind of a pre-newborn baby due to vaccination damage.

"I sat her on my knee but she can't even track with her eyes, it's tragic," Sue says. (In this case the damage has been linked to vaccination officially.)

Even more worrying to Wendy Lydall are the milder illnesses that are creeping into society without fanfare.

"I believe we have accepted a low level of health in children nationwide.

"They are constantly suffering from problems such as asthma, allergies, ear infections and colds. They're sick from one end of winter to the other, and many parents think nothing of putting them on courses of antibiotics, or of their children using asthma inhalers.

"We're living in a drug-oriented world. I'm bringing my children up to take responsibility for their own bodies, so they can say, 'It's my body, and I have to look after it.'"

So does she give any credit to vaccination? "Really, I don't think so. Improved sanitation, housing and drainage have probably got as much to do with declining disease as anything."

She points out that bubonic plague disappeared by itself, no vaccine was needed to eradicate it.

"These things have a natural life-cycle, one goes and another one comes. I wouldn't want my children to have to go through any severe illness, but I believe that mumps, measles and whooping cough, they can get through," she says.

But Dr Revell has listened to the

