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Japan's Greatest Lesson: Compulsory Flu Vaccine Reveals No Benefit and Deadly Side Effects

By Melissa Gordon

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At the two day Medical conference entitled "Should vaccinations be compulsory or free choice?" Doctors from various areas of the world were invited to present the situation in their country and also to highlight problems surrounding some of the vaccines. A pediatrician presents a copy of the points made in Dr. Yamamoto's presentation entitled "Why Japanese Government had to cease compulsory vaccinations." (The English translation is reasonably clear.)

Influenza in Japan

Mass influenza vaccination programs for school aged children had been started in 1960, and about 3 million children were vaccinated. In 1976, the compulsory vaccination system had been introduced and 17 million children from primary to high school had to be vaccinated twice annually. This was a unique vaccination program in the world, which the government believed would avoid the social influenza epidemics. This was a wrong hypothesis which was not verified for a long time.

Since the 80s the vaccination uptake was constant at about 60% every year but the incidence rate per 100,000 changed from 5 to 60 without concern to the vaccination rate. Since 1989 the vaccination uptake decreased rapidly to 20%, but the incidence rate did not increase.

Influenza incidence rate between non-vaccinated city and neighboring vaccinated cities

City A had 25,000 school children, City B had 21,000 school children. Statistically, they were the same.

The results in 1984:

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City A ceased compulsory Influenza vaccination in 1980 and less than 1% of the city took the Influenza vaccine.

The Influenza incidence was 43%.

Cities B,C and D continued compulsory vaccinations.

–City B– 90% of the city took the Influenza vaccine.

The Influenza incidence was 40%.

–City C– 77% of the city took the Influenza vaccine.

The Influenza incidence was 43%.

–City D – 76% of the city took the Influenza Vaccine.

The Influenza incidence was 52%.

A similar study was documented in 1985 with similar results. It was an important epidemiologic study that led to the end of the compulsory influenza vaccination program.

Adverse Reactions to the Influenza Vaccine

A mass study of adverse reactions against the influenza vaccine was conducted in 1987 involving about 400,000 children. The total adverse reaction rate was 254.3 per million. (10 per million children had complained of neurological symptoms.) This study was revealing, since from 1971 the government of Japan had changed the flu vaccine from a whole body type to a split particle type announcing that adverse reactions were almost nothing with the new one. The previous type, used in the 1960s had resulted in between 5–9 deaths occurring every year.

In 1987 the government changed the vaccine from compulsory to free choice. From 1972 to 1979, a total number of 142 children and families sued the government for damages. The total number of deaths were 50, severe developmental retardation were 65, and intractable epilepsy were 35. In 1992, the government lost the case in the court after about 20 years of legal proceedings.

Dr. Yamamoto, Compulsory Vaccination Conference in Naples | October 21 2004

What's a Fujian Flu?

By Dr Tim Ong

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Introduction

There is a flu outbreak every year and there is a new flu vaccine being introduced every year. The reason is this – the flu virus changes or mutates a little every year, making it impossible to create a vaccine that is permanently effective year after year. Instead, each year a new flu vaccine needs to be introduced that is effective for that particular year.

According to data from Center for Disease Control, Atlanta, USA, this year's flu outbreak that is happening in USA is mainly due to flu virus of the Fujian variant (79%) and the Panama variant (21%).

So, is flu vaccine effective?

No vaccine is 100% effective. For the flu vaccine to be effective for this outbreak, ideally the vaccine needs to contain both the Fujian and Panama variants. Unfortunately, the present available flu vaccine isn't.

However, that is not to say that the vaccine is totally useless. It would still afford a certain degree of protection as there is cross-immunity. In other words, the immunity that you get from one particular variant provides you with partial protection against other variants. Some protection is better than no protection, particularly for the immuno-compromised, such as:

- those above 65 years old
- children below 2
- people undergoing treatment for terminal illness
- those travelling to affected areas in USA

Some Common Sense Approaches

As in all outbreaks, the flu vaccine is currently difficult to come by as demands outstripped supply. Thus, if you think you are likely to be affected, try to get the vaccine as soon as you can. It takes two weeks after the injection for the antibodies to be produced and for you to be protected. So, if you're going to USA in two weeks time, go for your shot now!

Besides the vaccine, there are some simple preventive measures you can take.

1. Wash your hands every time you touch something that others have touched. Flu is air-borne and droplets containing the virus can deposit on any thing you touched. Carry wipes with you, for that purpose, when away from home.
2. Boost up your immunity by eating a proper and balanced diet, containing lots of vegetables and fruits. Go for your daily walks or exercise, even if it's only for 10-15 minutes. Drink plenty of water.

Take vitamins and mineral supplements if you think you're deficient in those.

3. Avoid crowded places. Being in a crowded place increases your risk of being exposed to someone with the flu.
4. If you're having the flu, stop it from spreading by staying at home or covering your nose and mouth when you sneeze.

Dr Tim Ong is a medical doctor with more than 13 years of clinical experience in family medicine. He is also the webmaster of KlinikOng.com (<http://www.klinikong.com>), The Self Improvement Site (<http://www.theseffimprovementsite.com>) and Caring for the Terminally Ill (<http://www.caring-terminally-ill.com>).

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