

# 1<sup>st</sup> September 2019 Presentation Guidelines

## Areas to consider?

### Abuse of position

A health minister / director of public health is responsible for implementing policies to improve the health of the people. With deaths and harms reported in 55 Countries to date, the HPV vaccine is officially the most harmful to date, yet, ministers and public health officials continue to expand the rollout.

### Criminal coercion

Enforced consent has been obtained by bullying schoolchildren and reporting parents to social services. In addition, the use of 'Gillick Competence' has been abused by government overreach to encourage vaccinees to give consent without first consulting their parents.

### Fraud

Corvelva, in Italy have undertaken extensive laboratory analysis of, HPV vaccine Gardasil 9. Due to findings of toxic materials, as well as some unidentifiable contaminants, they have reported their evidence to Treviso, Italy, police. Discussions are underway with the regulatory authorities due to the fraudulent contents and mislabelling of Gardasil 9 (both are criminal offences).

### Failing to accept the position of an individual

Fully informed choice has been enshrined since the Magna Carta. Failure to provide the appropriate information is a denial of individual sovereignty. Extreme pressure has been applied to individuals, while the Patient Information Leaflet (PIL, supplied with the HPV vaccine) is rarely, if ever, shown to the individual prior to their vaccination.

### Refusal to comply with common law

The duty of a health service is to cause no harm, loss, nor injury. With over 500 officially reported deaths, and many hundreds of thousands injuries, the HPV vaccine is causing harm on a scale never seen before (more harms and injury than the flu vaccine - the most compensated vaccine to date).

### Refusal to comply with statutory legislation

There are numerous EU acts for regulatory bodies to protect individuals, from physical and mental medical injury. Stemming the days of Hippocrates, they build on the medical mantra of: 'first do no

harm'. Statutes, acts and codes are broken daily, as verified by the £ multi-billion vaccine compensation schemes in both the US and EU.

### **Refusal to comply with the UN Human Rights Charter 1948**

The rights of the individual to physical and mental integrity, are sacrosanct, to prevent wide scale government over-reach. These rights are based on: dignity, liberty, equality, and brotherhood – they especially cover 'healthcare' provisions. However, the UN Human Rights Charter is currently broken with impunity by governments and individuals in the medical sectors. There is a daily refusal to offer fully informed choice to individuals, by extensive use of health sector bias, and coercion.

### **Refusal to comply with Nuremberg Code**

The Nuremberg Code was enacted in 1947. This followed extensive and inhuman medical experimentation in Germany, in previous decades, on unsuspecting and involuntary human subjects, resulting in 'medical' cruelty on an unimaginable scale.

**Code 1:** The voluntary consent of the human subject is absolutely essential.

**Code 2:** The 'experiment' should be such as to yield fruitful results for the good of society, unprocurable by other methods or means of study, and not random and unnecessary in nature.

**Code 4:** The 'experiment' should be conducted in a manner that avoid all unnecessary physical and mental suffering and injury.

**Code 5:** No 'experiment' should be conducted where there is a prior reason to believe that death or disabling injury will occur.

**Code 10:** During the course of the experiment the scientist in charge must be prepared to terminate the experiment at any stage, if he has probable cause to believe in the exercise of good faith, superior skill and careful judgement required of him, that a continuation of the experiment is likely to result in injury, disability, or death to the experimental subject.

Governmental vaccine policies have undertaken no in-depth analysis, they simply repeat mantras from others. Rather like "trust my big brother, he's always right". It is not known if these policies are deliberate acts of collusion, by Governments, unsupported by any science.

**Affidavits** from globally credible scientists, pathologists, researchers, investigative journalists, patient advocates, compensated parents: for officially accepted 'death by Gardasil' HPV vaccine.

### **Books:**

The HPV Vaccine on Trial, A Generation Betrayed (461 pages) by Mary Holland J.D., Kim Mack Rosenberg J.D., and Eileen Iorio (forward by Dr Luc Montagnier, Nobel Prize Winner for the Discovery of HIV).

Gardasil: Faith and Propaganda Versus Hard Evidence (208 pages), by Dr Nicole and Dr Gérard Delépine.

Gardasil, Fast-Tracked and Flawed (138 pages), by Helen Lobato.

Shattered Dreams, The HPV Vaccine Exposed (693 pages) by Christina England

Journeys from Trust to Tragedy (287 pages), by Norma Erickson.

### **Accumulated toxins?**

No one has ever researched the cumulative effect of the increasing vaccine schedule. In other words, since the 1980's vaccines have been 1. Given earlier, 2. Used in increasing numbers, and 3. Bundled together.

### **Films:**

Sacrificial Virgins 1: <https://vimeo.com/232798303>

Sacrificial Virgins 2: <https://vimeo.com/225963316>

Sacrificial Virgins 3: <https://vimeo.com/225963316>

The next Thalidomide:

<https://pressdispensary.co.uk/releases/c994231/Is-the-next-Thalidomide-style-scandal-about-to-break-Sacrificial-Virgins.html>

Injecting Aluminium:

<https://www.youtube.com/watch?v=vfS38ErqVxY>

Dr Chris Exley has undertaken autopsies of autistic brains found to contain high levels of vaccine adjuvant aluminium.

Our Girls Are Not Rumours, Dublin April 2018:

<https://www.youtube.com/watch?v=vW9YhjhLvME#action=share>

Don't quiet the Melinda Messenger, on TV:

<https://www.youtube.com/watch?v=xXjsn9L-SGI>

Doctor Dr Bob Zajac, board Certified Paediatrician "a former vaccine bully" saw autism regression at first hand - he reads one hour / day on vaccines

<https://www.youtube.com/watch?v=UiJRudY9I3E>

The Nurse who changed her (pro) vaccine mind:

<https://www.youtube.com/watch?v=4PwCYMdFtEo>

Primary Care Doctor and HPV vaccines: <https://www.youtube.com/watch?v=rJR2zoouMH0>

A Pharmacist who studied HPV vaccines [https://www.youtube.com/watch?v=H-c3PBV\\_y9w](https://www.youtube.com/watch?v=H-c3PBV_y9w)

A Biologist and HPV vaccination sceptic: <https://www.youtube.com/watch?v=Pf37G3mry6M>

Dr Sing Hang Lee, Pathologist speaking on combined HPV viral DNA binding with aluminium caused by the HPV vaccine:

[https://www.youtube.com/watch?v=y7hjuXODy\\_8](https://www.youtube.com/watch?v=y7hjuXODy_8)

Vaccine Nurse, "I gave the shot (the Gardasil HPV vaccine) that killed my daughter":

[https://www.youtube.com/watch?v=xH\\_d9qcZeIq](https://www.youtube.com/watch?v=xH_d9qcZeIq)

HPV vaccines Uninformed Consent: 348 Deaths: (This now 200 deaths short at 1<sup>st</sup> Sept 2019).

<https://www.youtube.com/watch?v=aHf17TSgYww>

**Unvaccinated versus vaccinated** study was undertaken by Dr Anthony Mawson, 'The Mawson Study (published in Journal of Translational Science) 666 children 6 - 12 years old, Volume 3, 2017:

<https://www.youtube.com/watch?v=sbFfDQYdjzM>

Findings: The vaccinated, compared with unvaccinated have: 2.4x chronic illness, 2.9x eczema, 3.7x neuro development disorders, 4.2x autism, 4.2x ADHD, 5.2x learning disabilities, 30x allergic rhinitis.

**Robert F Kennedy Jr:** (vaccine manufacturers had agreed with US Health and Human Services to prove vaccine safety every two years but that has never been done, for 32 years):

<https://www.facebook.com/WorldMercuryProject/videos/2130709710509772/>

Dr. Romain Gerard "Note that aluminum hydroxide became available in 1927. The same compound that is used in 2016! It hasn't changed at all." "...I studied all of the literature...All of what was known, or thought to be known, on aluminum adjuvants. It's all wrong. Totally wrong. Everything is wrong, because it is fragmentary and incomplete." "So this is the study that worldwide vaccinology takes as its reference. Two rabbits, whose organs were lost, and who were studied for 28 days. The study simply has to be done all over again, properly!" "The guiltiest act is that once it has been pointed out that the aluminum persists for much longer than a month, that it remains in the immune system for many years, no watchdog agency sat up and said, "Stop. Back to the laboratory, guys." "But a small minority will be totally unable to secrete the enzyme, and the toxin will remain. If 10, 20, or 25 vaccines are administered, regardless of genes, everyone will be overcome by the toxic burden. The cause of the system breakdown will be the toxicity itself. In the US, infants receive 16 shots containing aluminum by age 18 months....They say, "This is safe," and by itself, it is. They never evaluate it combined with a half-dozen or a dozen other vaccines, also administered." "If vaccine safety is evaluated only in terms of one injection, instead of in terms of the whole series, there will be many catastrophes before we track down the problem".

Dr Diane Harper, lead Gardasil trialist on HPV vaccines, to quote: "you know if you had got your PAP smears you would never have been a cancer death. The concept that our daughters are cancer deaths waiting to happen is just not accurate. Our death rate from cervical cancer is three per 100,000. They have a much higher change of being a motor vehicle accident death than they do of being a cervical cancer death": [https://www.youtube.com/watch?v=Qm\\_ic8KI1yU](https://www.youtube.com/watch?v=Qm_ic8KI1yU)

Dr Diane Harper, rare, very slow, multi decade, progression of cancer:  
<https://www.youtube.com/watch?v=sSdCxgF0blc>

Manx TV call for public debate:  
<https://www.youtube.com/watch?v=3pT8gELuycY&feature=youtu.be>

**Patient Groups:** AHVID (Association of Vaccine Injured Daughters), Time for Action UK, AAVP (Spain). R.E.G.R.E.T. (Reactions and Effects of Gardasil Resulting in Extreme Trauma):  
<http://www.regret.ie>

**Press On:**

**BMJ (British Medical Journal)** HPV Vaccine safety, Cochrane launches urgent investigation into review after criticisms:  
<https://www.bmj.com/content/362/bmj.k3472>

Nordic Cochrane wrote to the EMA on 26<sup>th</sup> May 2016, stating maladministration by the EMA, regarding HPV vaccine harms. These harms have not been adequately investigated, nor resolved. The Cochrane HPV Vaccine review was incomplete and ignored important evidence of bias (BMJ, 2018. Lars Jørgensen Peter Gøtzsche PC, Tom Jefferson).

Dr Mahin Khatami, Safety Concerns and hidden agenda behind HPV Vaccines, another generation of drug dependent society (published in Clinical and Translational Medicine, 2016):  
<https://link.springer.com/article/10.1186/s40169-016-0126-1>

Dr Yehuda Shoenfeld, World leading autoimmune expert. Autoimmune diseases triggered by vaccine adjuvants:  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5256113/>

Autoimmunity, autonomic neuropathy, and the HPV vaccination: A vulnerable subpopulation, Jill R Schofield MD, and Jeanne E Hendrickson, MD - published in Clinical Paediatrics Sept 2017.  
<https://journals.sagepub.com/doi/abs/10.1177/0009922817728701>

Irish Independent, HPV adverse reactions, 6<sup>th</sup> December 2015:  
<https://www.independent.ie/irish-news/health/revealed-trauma-of-131-girls-after-hpv-nightmare-34262481.html>

The MHRA has repeatedly failed to police major medical harms of: PiP breast implants, the Essure contraceptive device, and transvaginal mesh(es) - all were medically approved devices.

Informed choice, The WHO (World Health Organisation) states clearly: any parent who does not wish their child to receive the HPV vaccine, should keep their child off school on vaccination day. Subsequently, the physical presence of the child, or adolescent, with or without an accompanying parent at the vaccination session, is considered to imply consent. How is that in any way an 'informed' choice process as confirmed under UN charter on Human Rights and Nuremberg Code?

Efficacy has never been proven in a clinical trial. An assumed, surrogate end point of CIN lesion 'reduction' is assumed to be proof of cancer elimination. Any claims of cancer prevention are false.

A regular review has never been undertaken. (In the US, Health & Human Services directorate was mandated to undertake a biennial review, but has not done so, on 15 occasions since 1987).

Simply by 'chance' was a mantra used by the lobbyists for: lead in paint, tobacco harms, deaths due to Vioxx and Prozac; while HIV blood tainting is currently going through UK courts after 30 years.

Detailed safety reviews have never investigated harms from the (unpublicised) Yellow Card system. Less than 1 in 100 harms are reported (Refer to the Harvard Pilgrim study) viewed by some as an inconvenience. Safety is claimed despite Indian trial deaths, and a later review by Professor Allyson Pollock. Trial harms were substantially masked by use of an aluminium adjuvant comparator, not an inert placebo. No saline control comparison, but a poison compared with a poison to (criminally) mask the harms. A vaccine compared with another vaccine of toxin.

'Not found any evidence' ignores: the MHRA's Yellow Card system, AHVID (Association of HPV Vaccine Injured Daughters) and Time For Action: which expose harms unparalleled in any vaccine.

POTS (Postural Orthostatic Tachycardia Syndrome), and CRPS (Complex Regional Pain Syndrome) are highly HPV vaccine correlated. Japan has ongoing, 'common symptom', Court cases.

To link aluminium to autism: see the film: Injecting Aluminium by Prof Chris Exley (presented on Isle of Man 3<sup>rd</sup> December 2018) he didn't want to believe the link either - but now does, after 20 years of research.

Vaccine ingredients: include HPV strains 16 and 18 for 'cancer' but 2014 research by Dr Vanessa Hearnden found that only 2.2% were 16 or 18 'strain' matched in oral strain analysis for 702 students.

Increased rate of autism: The US, CDC (Centres for Disease Control) confirm autism up from 1 in 10,000 in 1985 rising 1 in 36 in 2018. Not better monitoring but: earlier, closer, and more, vaccines.

Cervical cancers diagnosed: ignores causes. The last thing the NHS ever targets... causes. High risks: 1) smoking, 2) 11 or more oral sexual partners or, 3) six or more vaginal, or anal sex, partners.

Rare disease Around 850 deaths: every death is a personal tragedy. While in context, cervical cancer is the 20<sup>th</sup> least likely female cancer, and vaccine harms are 2,300 / 100,000, while deaths are 3 / 100,000.

PAP screening, safe and effective. 99.8% preventable while HPV vaccination is key: Cervical cancers have reduced 90%, due to PAP screening. So, with no clinical evidence of the HPV vaccine preventing cancer, this is a 40 year bet.

Infertility, caused by treatment: Of greater concern are HPV vaccine ingredients of borax and polysorbate 80 (Tween 80) the former a patented cockroach killer, the latter patented for infertility. See Dr Deidre Little (Australia) and Dr Gayle DeLong (US).

DHSC denial 'that HPV vaccine is doing more harm than good' ignores evidence in 55 Countries from lawyers, medics, and concerned parents who just seek answers for the harms to their children. See AHVID, The Association of Vaccine Injured Daughters (Freda Birrell). SaneVax Norma Erickson.

Part of the consent process to girls: real world discussion with girls is that they do not know what they are signing up for, being "disease mongered" to a very rare cancer, to quote a Manx GP.

Full information at the time of the vaccine: there is never full discussion of relative risks versus benefits. The instilling of fear predominates: supported by Pharma advertising, and NHS promotion.

Truth Tellers: (1) Brandy Vaughn, a former Merck sales rep, Merck from 2009, of doctors' names and intended to "neutralize," or "discredit" them for speaking out against Vioxx. (2) Jorge Araujo is a chemist who worked in the pharmaceutical industry for 16 years. He was a supervisor in Merck's vaccine sterile quality control division from 1997 to 2004. Like most people, Scott Cooper (3) grew up believing in vaccines. While he was a sales representative for Merck, he stumbled upon a negative vaccine report that made him skeptical. He then began his private investigative research on vaccines. In 1991, when his wife became pregnant, Cooper convinced her not to vaccinate by encouraging her to do her own research. Jon Rappoport, interviewed a retired vaccine developer (4) who refused to disclose his real name, what vaccines he had helped develop, and where he had worked to "protect his privacy and his pension." He added how he knew a vaccine researcher who was continually harassed by his former employer for disclosing information that could threaten vaccine sales. This scientist confided to Rappoport that at the beginning of his career, he was gung-ho about vaccines, firmly believing the propaganda that vaccines safely conferred immunity. When Rappoport asked, "What turned you around?" the retired insider explained that a close friend's child had died immediately after a vaccination.

**Pathology:** Research by US based Pathologist, Dr Sin Hang Lee. He is concerned at HPV viral like particle DNA which, when combined with aluminium adjuvants, leads to brain injuries. Dr Lee's findings have been supported by French Organic Chemist, Dr Laurent Bélec. I believe HPV vaccine harms will be one of the largest and most tragic medical scandals of all times, based on: fraudulent science, toxic ingredients, with harms covered-up by supervisory bodies. Sacrificial Virgins 1, 7 mins.

Dr Sin Hang Lee rebuttal of HPV virus causes cancer:

<https://blog.hereshow.ie/wp-content/uploads/2018/06/Dr-Lee-response-to-Brenda-Corcoran.pdf>

A similar lesson from history comes from thalidomide, a fully licenced drug (one sold 'over the counter') in Europe in the 1950's. Initially, those harms too, were said to be merely 'anecdotal' and 'coincidental' - but finally, real world evidence prevailed. HPV vaccine harms will be no different, for those willing to fully listen to the ever increasing number of 'patient' voices. See <https://sanevax.org>

The first case proving death due to Gardasil, of Christina Tarsell, has been determined in the US Vaccine Injuries Court. This followed an eight-year legal battle, with further cases before the Tokyo Courts and now progressing in the UK, Ireland, USA, Demark, Spain, France, Columbia and Chile.

The slow release of HPV vaccine ingredients IS leading to severe harms: heavy and irregular periods, brain damage, infertility, appendicitis, constant joint pain, extreme tiredness (despite 15 hours of sleep), seizures, and heart beat dysfunction. Despite a tortuous process, The US National Vaccine Injury Compensation Program has (so far) paid out compensation to 49 Girls due to HPV vaccination.

Petition of Doleance. A petition can be submitted by any Manx citizen, Manx National Day, 5<sup>th</sup> July. But, though very peaceful, I was arrested (for 'potential breach of the peace') but I was released three hours later - without any charges. Coincidentally, four days later, on 9<sup>th</sup> July 2019 the Island health authorities announced HPV vaccination for boys from today, Sunday 1<sup>st</sup> September 2019. Now my 'arrest' made sense.

Henrietta Ewart's reply dated 15th Dec 2017: Following my invitation to attend public debate on HPV vaccine safety. 'Dear Courtenay, I am afraid neither I nor anyone from my team will be available for this'. Dr Henrietta Ewart, Director of Public Health, Isle of Man

**CDC** doesn't recognise vaccine harms (while the FDA does): encephalitis, seizures, stroke, spinal cord paralysis, limb paralysis, blood clots in limbs, optic nerve inflammation, facial nerve paralysis.

**Merck insider court cases** - they have demanded a Jury Trial, under the False Claims Act, Virologists Stephen Krahling and Joan Wlochowski witnessed at first hand the scientific fraud. The case concerns the decade long efforts to financially defraud the United States regarding the efficacy of the mumps vaccine. Their claim is that since 1999, Merck used falsified test data, and improper testing techniques, to falsely maintain FDA (Food and Drug Administration) approval and a market exclusive licence to sell the vaccine.

**Trials** Some 49% of trialists has a new disease diagnosis within 7 months. The 'trials' were deeply flawed: often used only one dose, selected only **healthy** volunteers, were 'light' on fully informed

consent, and dismissed the 49% of trialists with 'new medical conditions...' There was no test for carcinogenicity (ability to cause cancers).

**Vaccines** 'approval' in 4 just minutes: [https://www.youtube.com/watch?v=L\\_JJMpe00mM](https://www.youtube.com/watch?v=L_JJMpe00mM)

**Ingredients** (officially listed from Centres for Disease Control). If you put any of the following vaccine ingredients in food, you would be jailed - aborted foetal tissue, heart, lungs, kidneys, skin, tongue, mouse DNA, calf serum, gelatine (from pigs), monkey cells (red or green)...

**Dissolving Illusions, by Dr Suzanne Humphries.** Age appropriate immunity, naturally acquired is vital. The point made by the two charts is that there was never a vaccine for scarlet fever and the vaccine for measles wasn't introduced until the mortality rates for both childhood scourges had already dropped to near zero! Similar charts exist for mumps and chickenpox. It is important to note that only actual clinical infections (and NOT vaccinations) involving the so-called "vaccine-preventable" childhood illnesses will give life-long immunity whereas vaccines only offer, at the very most, short-lived partial non-cellular immunity that needs frequent toxic booster doses to raise the antibody levels (in MOST children but not ALL children) to a theoretically protective level.

"Analysis of the data shows the often-repeated mantra that vaccines were key in the decline of infectious disease deaths is a fallacy. Deaths had decreased by massive amounts before vaccinations. In the case of scarlet fever and other infectious diseases, deaths declined to near zero without any widespread vaccination."

**Causing cervical cancer**, in 80% vaccination rate Countries: UK, Australia, Sweden, Norway, Drs Delepine. France the control country with low vaccination rates and still falling cervical cancer rates. The more vaccines are given the more a targeted disease mutates. (Think antibiotic resistance, as Nature filled a vacuum, with super mutating superbugs).

**In 1985** vaccine harms legal cases would have bankrupted the industry. Industry lobbying provided the vaccines with liability free status, the only US product to have such a legal get out clause. In the late 1980's the 'official US vaccine schedule increase commenced, with other countries copying the most over vaccinated generation of kids, ever. With autoimmune disease unseen previously: peanut allergy, eczemas, ADHD, and childhood cancers.

**In 1986** President Reagan signed the Vaccine Compensation Act, which has since paid out \$4 billion in compensation. Harms, private Courts. Unmentioned by press, unknown to Doctors. Escalating vaccine schedule for the sickest generation ever of autoimmune and inflammatory sickness. Tragic:

mood, muscle, mind evidence. Infertility, in last decade, coincidentally, if anyone will look. Well, someone has, Dr Gayle DeLong: 60% pregnancy rate for those not HPV vaccinated versus v 35% for those who have had at least one dose of a HPV vaccine. Period dysregulation is the initial clue. Vaccine Injury Compensation Program, or VICP, is a no-fault compensation system housed within the U.S. Court of Claims and funded by a 75-cent tax on each vaccine dose administered across the country. Yet the vaccine 'court' uses gagging clauses, Special Masters, no right of discovery and sealed decisions.

But the US vaccine compensation fund is not working, Stanford Law Professor, Norma Freeman Engstrom:

<https://news.stanford.edu/2015/07/06/vaccine-court-engstrom-070615/>

Governments wiping inconvenient vaccine harms data from web

<https://sharylattkisson.com/2015/12/govt-wipes-recent-vaccine-injury-data-from-website/>

### **Manx GP Doctors:**

**Dr Helen Freer: 7<sup>th</sup> Jan 2019:** I have read the book HPV Vaccines on Trial and have just started to read 'Fast tracked and Flawed'. I am truly shocked by what I have read and fear that we could be sitting on a time bomb so I agree that this audit work is urgently needed on the island.

**8<sup>th</sup> Jan 2019:** I am particularly interested in menstrual irregularities as there have been reports of teenage pregnancy rates plunging following the HPV vaccine. If this is the case then this might be the most concrete and indisputable evidence that there is something amiss. **24<sup>th</sup> March 2019:** There

would appear to be a clear association between HPV vaccination and reduced fertility in this study which is very worrying. **28<sup>th</sup> March 2019:** I agree, informed consent appeared to be absent in the

Gardasil trial, from what I have read, which in itself is criminal. **11<sup>th</sup> April 2019:** I started thinking about all of this after attending your event at the Manx Museum (on 3<sup>rd</sup> December 2018) so THANK

YOU! I believe the way to get people to look at this seriously is to present undisputable public health statistics - I am currently looking the cervical cancer incident rates on the Cancer UK website which

does seem to show an upward trend in the 20-24 age range since the vaccine was introduced in 2008. **30<sup>th</sup> April 2019:** An RCT on the HPV vaccine would be ethical as there is at present an

alternative solution (cervical screening) so very little risk involved. I would suggest that this is what is petitioned for. **1<sup>st</sup> May 2019:** I agree entirely with Align for Life comments. The controversy won't

die until there are large scale prospective placebo controlled trials. **28<sup>th</sup> August 2019:** Having done more research on the subject I wish to retract my previous concerns expressed to you. The

information you sent me to read is powerful and compelling at first glance, however, it does not stand up to scrutiny.

**Dr Tim Anglin: 30<sup>th</sup> March 2019:** I was at a meeting with primary care directorate last week and some comment was made about their plans for HPV roll out, I just hope that they are at least considering the concerns raised. **5<sup>th</sup> March 2019:** If 1 invasive cervical cancer is prevented per 15,500 vaccinated years, is this prevention? See Finnish Study: Luostarinen T, Apter D, Dillner J, et al Luostarinen T, Apter D, Dillner J, et al (published 15<sup>th</sup> May 2018). From the information given by MSD, from a published study that has evidence of actual (not surrogate markers, not speculated NNTs from models) difference between vaccinated and non-vaccinated cancer rates, this is the best published, 11 years after the HPV vaccine was launched, 'fact' that I have found. Projecting this across to the Isle of Man, if 1,000 schoolchildren are vaccinated, then in the next 15.5 years, one invasive cervical cancer will be avoided. Also on **5<sup>th</sup> March 2019:** MSD (Merck Sharp Dohm) in their BNF indication 'prevention of cervical cancer' have now stated that this statement was an assumption based on a surrogate marker, being CIN3. Is this misrepresentation, as defined by the law? **20<sup>th</sup> Feb 2019:** It is not up to us to disprove it, hence my letter to MSD. They are on the back foot on the issue of cervical cancer proof. Also on **20<sup>th</sup> Feb 2019:** I also think that this is why the Japanese stopped the vaccine, as a culture they are completely OCD, in the sense that they assiduously keep on iteratively working until they have perfected an outcome. (Further on **20<sup>th</sup> Feb 2019:** If I had had a serious adverse event to the vaccine, frankly I would be pissed off that I had only been protected, in reality, against a strain of HPV that, compared to other HPV strains, has low oncogenicity (cancer causing ability). More on **20<sup>th</sup> Feb 2019:** There is clearly a sophisticated public relations machine, I have noticed anecdotal newspaper articles that are positive for the vaccine. Pharma pr budgets are very large. I haven't quite got to NNT for CIN3 in my thinking. The reason being that not all CIN3 are equal, I have a nasty feeling that the CIN3 that is being reduced by the vaccine is not the CIN3 that leads to cervical cancer. **17<sup>th</sup> Feb 2019:** So currently the indication for the licensing of the HPV vaccine is 'HPV strain specific reduction in CIN3 lesions' NOT as stated reduction in cervical cancer. The efficacy in these strains being maybe 100 percent reduction in strain specific CIN3. I am speculating that the HPV vaccines do reduce the CIN3 associated with their vaccine strain, however this vaccine strain is not one which clearly progresses to cervical cancer. **28<sup>th</sup> August 2019:** Currently Isle of Man rules and has done for millennia.

Dr Dierdre Little, premature menopause in girls <https://www.youtube.com/watch?v=TBs6BD-Ec44>

India withdrew HPV vaccine, due to harms and lack of informed consent.

Dr Marcia Angell: ...Similar conflicts of interest and biases exist in virtually every field of medicine, particularly those that rely heavily on drugs or devices. It is simply no longer possible to believe much of the clinical research that is published, or to rely on the judgment of trusted physicians or

authoritative medical guidelines. I take no pleasure in this conclusion, which I reached slowly and reluctantly over my two decades as an editor of The New England Journal of Medicine.

VAERS, Yellow Card, Harvard Pilgrim, only 1% of vaccine harms is reported to VAERS. It is regularly altered with harms underplayed.

**HPV vaccine harms videos by Country** (there are hundreds of thousands of similar stories).

**Japan, in 2013 suspended HPV recommendation:**

<https://www.youtube.com/watch?v=xyyfHSB8g-s>

**India, trial deaths, and lack of informed consent:**

<https://www.youtube.com/watch?v=GbfylZKT3fA>

**Australia:** Dr Deirdre Little: <https://www.youtube.com/watch?v=TBs6BD-Ec44>

**US:** <https://www.youtube.com/watch?v=SXSsLcYG0IQ>

**UK:** [https://www.youtube.com/watch?v=CpaP8\\_7wRs0](https://www.youtube.com/watch?v=CpaP8_7wRs0)

**Colombia:** <https://www.youtube.com/watch?v=RS72EeILlqY>

**Spain:** HPV Vaccine harms seen since 2009: <http://sanevax.org/hpv-vaccine-death-spain/>

**Ireland:** R.E.G.R.E.T. Gardasil group: <https://www.youtube.com/watch?v=Uzgn0z8R2zQ>

**Denmark:** (first 3 minutes are blank) <https://www.youtube.com/watch?v=14CZFtsykq0>

**Denmark:** <https://www.youtube.com/watch?v=ojL1tBWVrT8> (revenge for speaking out?)

**Holland:** <https://www.youtube.com/watch?v=A2TK7e07Fs8>

**Mexico:** Dr Martinez Lavin: <https://www.youtube.com/watch?v=nk8HGQjPqL4> fibromyalgia links

**Gardasil 9 is a Black Triangle Warning Product**, officially requiring 'additional monitoring'. Harms listed on the Patient information leaflet (PIL) include: swollen glands (neck, armpit, or groin); muscle weakness, abnormal sensations, tingling in arms, legs & upper body, (Guillain-Barré Syndrome, Acute disseminated encephalomyelitis); vomiting, joint pain, aching muscles, unusual tiredness or weakness, chills, generally feeling unwell, bleeding or bruising more easily than normal and skin infection at the injection site.

Preventing cervical cancer, Donald W Light, published 2017. HPV vaccine achieves a record price for a vaccine... Gardasil manufacturing costs, **\$2.05-\$3.07** / dose, (Cervarix **\$6.16 - \$9.39** / dose). Sells for **\$120 - \$190** / dose.

Cost of Business - Bad Pharma: Fines to date total \$38.6 billion, for criminal activity and mass deaths / harms (Vioxx, Avandia, Zyprexa). That's around 0.13% of their 30 year \$29 trillion turnover.

**US doctors receive \$400 / patient (0 to 2 years) who is fully vaccinated, fully compliant, to the vaccine schedule. They only receive the \$400 per patients, if at least 63% of their patients are 'fully' vaccinated. Hence the hard sell.**