

Stephen Hoffman

3146

From: Rachel Kent <rachelakent@gmail.com>
Sent: Thursday, May 05, 2016 10:25 PM
To: IRRC
Subject: IRRC #3146 & 3147, Proposed changes to Immunization regulation

417 Meadowbrook Drive
Huntingdon Valley, PA
19006

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To whom it may concern,

On behalf of my husband myself, I am writing to submit our heartfelt comments regarding the proposed immunization regulations for 28 PA Code Ch. 23:

#3147 from the PA Department of Health

#3146 from the PA Department of Education

As parents, these issues are extremely close to our hearts. We value the opportunity to be an active voice on behalf of our precious children, and for ourselves as members of a country unique in the world for its enshrined defense of individual conscience and religious conviction.

There are a couple of general responses to the proposed amendments that we'd like to bring to your attention:

Firstly, we write to ask for real reconsideration regarding the Department of Health's proposal to shorten the provisional period to only 5 days. We agree that the current period is long, but the brevity of 5 days is quite binding upon the real, lived, day-to-day life of families. Moreover, if children are in any way ill or immunocompromised, 5 days would be *irresponsible* time to demand the administration of multiple vaccines. Many of the most severe vaccine reactions and permanent damages occur when multiple vaccines are given in a short period of time. A more reasonable

period could be 60-70 days. We are writing to ask that that this period be appropriately lengthened to provide for families with our great thanks and appreciate.

Secondly, we ask that *parents* and *legal guardians* continue to be permitted to verify chicken pox. Bringing a child in the throes of chicken pox to a doctor's office or medical center can be both painful and risky experience.

It offers exposure to other patients in the waiting room, and creates a substantial burden upon the ill child and his or her parents. Moreover, each trip to a medical center places financial burden upon families with little spare cash to hand. We hope that a system of trust can continue to exist between school districts and parents.

Thirdly, there has been a proposal to mandate both a new pertussis vaccine before entry to kindergarten. In addition, there has been the proposal again, despite a bill to the same effect being stalled by your own legislature, for a mandated meningitis vaccine as prerequisite for twelfth grade.

While we truly recognize the desire to protect all children, the current outbreak of pertussis among fully vaccine-up-to-date children suggests real challenges ahead for vaccine manufacturers, particularly as regards any efficacy and vaccines containing pertussis bacteria. Its inefficacy merits a full cessation of in any new regulation, and respect for parents who wish to, for instance, preemptively condition their child for pertussis immunity by homeoprophylaxis, or homeopathic "vaccination," as studied and directed by Dr. Isaac Golden, Ph.D.(MA), D.Hom., N.D., B.Ec(Hon) of Australia.

As regards the meningitis requirement, we find it disappointing and indeed troubling that the Department of Health would seek to circumvent the decision of democratically elected legislature's review process and rejection of this proposal. To mandate what the PA legislative process deemed unnecessary after proper review seems both unethical at best, and at worst, motivated by something other than care for these precious young people on the brink of their adult futures. Billions of dollars are at stake as vaccine manufacturers push health departments to adopt their newly developed vaccines mandated. We beg you to reject this pressure.

The package insert of the hastily-tested, mercury-heavy B-strain meningitis vaccines, Trumenba and Bexsero, states openly that 2 percent of those receiving these vaccines will experience "serious adverse events." The CDC's pink book states that with the older Menactra and Menveo vaccines, 1% will experience such events, and 0.3% of these will die. With the mercury-heavy Menomune, 1.3% will experience these "serious adverse events." These are sobering numbers indeed,

particularly for vaccines designed to protect against a disease that resulted in only 390 cases in the last U.S. year. A close look at the numbers will reveal that by the CDC's own numbers, the vaccines are likely to cause more illness and death than they claim or hope to defend. It is hard to believe other than that this can only be a game of profit for vaccine manufacturers and those who accept their money in government and health departments.

At the end of the day, the Institute of Medicine's 25 year vaccine safety research project concludes that there exists individual susceptibility to vaccine reactions based on the varying combinations of genetics and biological and environmental factors. You can find more information about this at this link which brings you directly to that specific chapter in the IOM's report: <http://www.nap.edu/read/13164/chapter/5#82>.

In essence, the researchers concluded that we cannot as yet determine who will be harmed and who will safely tolerate the admission of these bacteria, dead viruses, weakened viruses, aluminum salts, and preservatives.

Because of this, parents' and legal guardians' right to philosophical and religious exemption remain an absolutely imperative of both health and civil liberty.

Fourthly, we ask that the **current practice of listing bacterial and viral antigens separately be sustained**, in contrast to the proposition of replacing current practice with combination shot listings. Retaining each antigen's individuality will smooth the road for future alterations in combinations. Additionally, it will provide space for the record of single vaccines which are still in use.

Fifthly, we request that uniform language for communication with parents regarding provisional periods, vaccine requirements, and reporting be created for use among PA school districts.

As you may know, at the present time, each district constructs its own terminology, making for a rather non-uniform and potentially chaotic situations. Parents and legal guardians have enough burden attempting to understand the requirements of school districts. Streamlining language would facilitate moves within the States and transparency regarding legal requirements. Most importantly for us, we ask that the legal text of 28 PA CODE CH.23 be included clearly, outlining the precious legal exemptions for students of PA residents.

Sixthly, we would ask that language describing herd immunity be struck from this bill. As researchers have pointed out, the claims for herd immunity rests upon studies of individuals **who had contracted the wild diseases, and not within populations of vaccinated individuals**. Furthermore, as we have seen so clearly among our own school districts, diseases outbreaks of pertussis and mumps are occurring in fully-up-to-date, vaccinated individuals. The widespread recent outbreak of mumps among Harvard University students in full compliance with MMR vaccination requirements reveals the myth of herd immunity in a situation and culture of legally immunity for pharmaceutical corporations. We ask that this language of herd immunity be responsibly omitted as a scientific basis for increasing vaccination schedules.

In conclusion, much of our concern rests with the presence of life-destroying aluminum salts, preservatives, and fetal human cells in vaccines. The safety of aluminum in humans rests upon a study wherein *healthy adults* (not infants nor preschoolers) were given a miniscule amount of aluminum **intravenously**. As most medical professionals can testify, intravenous intake is vastly different in kind and effect from intramuscular injection.

It is this single study which provides tenuous footing for the claim that the aluminum or aluminum salts in vaccines is safe and unobtrusive. In fact, Dr. Thomas Jefferson's 2004 study in the *Lancet* Journal (Volume 4, No. 2, p84–90, February 2004) **confirms the sad reality that as we have no safe alternative antigen yet prepared for market**.

The exact wording from the Lancet article's on the safety or risk of aluminum or aluminum salts in vaccines is thus: "Despite a lack of good-quality evidence we do not recommend that any further research on this topic is undertaken." In a word, because we do not currently have a safe alternative tested and ready for market, we should not look too closely at the problem.

Sadly, studies examining aluminum intramuscular injection into human children and in rabbits confirmed that the aluminum did **not** in fact exit the body, but went directly to the organs, and from there to bone mass. We as parents await an alternative antigen--both effective AND safe.

As things stand, it is unconscionable to bind parents against their will to an verifiably corrosive and neurologically damaging antigen. This is just a sample of peer-reviewed articles exploring the damage of aluminum and aluminum hydroxide:

"Long-term persistence of vaccine-derived aluminum hydroxide is associated with chronic cognitive dysfunction." (2009)

"Aluminum hydroxide injections lead to motor deficits and motor neuron degeneration." (2009)

"Aluminum-induced defective mitochondrial metabolism perturbs cytoskeletal dynamics in human astrocytoma cells."(2009)

"Role of metal ions in the abeta oligomerization in Alzheimer's disease and in other neurological disorders." (2008)

“Aluminum adjuvant linked to Gulf War illness induces motor neuron death in mice.” (2007)

“Neurological adverse events of immunization: experience with an aluminum adjuvanted meningococcal B outer membrane vesicle vaccine.” (2007)

“Mechanisms of aluminum-induced neurodegeneration in animals: Implications for Alzheimer’s disease.” (2007)

“Inflammation, neurodegenerative diseases, and environmental exposures.” (2004)

“Chronic exposure to aluminum in drinking water increases inflammatory parameters selectively in the brain.” (2004)

“Neurotoxic effects of aluminum among foundry workers and Alzheimer’s disease.” (2004)

“Neurological adverse events associated with vaccination.” (2002)

“The potential role of aluminum in Alzheimer’s disease.” (2002)

“Trace elements in scalp hair samples from patients with relapsing-remitting multiple sclerosis.” (2015)

“Correlation of aluminum and manganese concentration in scalp hair samples of patients having neurological disorders.” (2015)

“Aluminum-induced entropy in biological systems: implications for neurological disease.” (2014)

“Are there negative CNS impacts of aluminum adjuvants used in vaccines and immunotherapy?” (2014)

“A sudden onset of a pseudo-neurological syndrome after HPV-16/18 AS04-adjuvated vaccine: might it be an autoimmune/inflammatory syndrome induced by adjuvants (ASIA) presenting as a somatoform disorder?” (2014)

“Elevated brain aluminum and early onset Alzheimer’s disease in an individual occupationally exposed to aluminum: a case report.” (2014)

“Prolonged exposure to low levels of aluminum leads to changes associated with brain aging and neurodegeneration.” (2014)

“Administration of aluminum to neonatal mice in vaccine-relevant amounts is associated with adverse long term neurological outcomes.” (2013)

“Aluminum in the central nervous system (CNS): toxicity in humans and animals, vaccine adjuvants, and autoimmunity.” (2013)

“Autoimmune/autoinflammatory syndrome induced by adjuvants (ASIA syndrome) in commercial sheep.” (2013)

“How aluminum, an intracellular ROS generator promotes hepatic and neurological diseases: the metabolic tale.” (2013)

“Aluminum toxicity and astrocyte dysfunction: a metabolic link to neurological disorders.” (2011)

“Aluminum vaccine adjuvants: are they safe?” (2011)

“Metal ions affecting the neurological system.” (2011)

We eagerly await a safety-proven, aluminum-free, preservative-free vaccine that offers no damage to the body's T2 immune system. We now claim the ongoing and untouchable freedom of religious conscience, along with the freedom for parents to assume the financial and time burden of homeschooling without medical interference from the government.

Indeed, like a woman's protected right to chose life or death for her child while inside the womb, the right of parents for informed consent, privacy, and choice for themselves and their children must never be seized or denied.

Thank you again for your time. We're grateful for your willingness to serve and for your kind consideration in this matter.

For freedom,

Rachel A. Kent

Christopher John Lawton

Piper Hope Kent-Lawton

Huntingdon Valley, PA

19006

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Rachel Kent, Ph.D. *University of Glasgow, 2011*

mobile: (215) 859-2176

email: rachelakent@gmail.com

The Late Medieval Origins of the Modern Novel, 2015:

<http://www.palgrave.com/page/detail/The-Late-Medieval-Origins-of-the-Modern-Novel/?sf1=barcode&st1=9781137541338>