

## More on the Zika Virus-Microcephaly Freak-out

And Why We (and President Obama) Need to Stop Trusting the CDC

By [Dr. Gary G. Kohls](#)

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Region: [Latin America & Caribbean](#)

Theme: [Science and Medicine](#)

*"...[O]ur current results are consistent with the existing evidence on the toxicology and pharmacokinetics of aluminum adjuvants which altogether strongly implicate these compounds as contributors to the rising prevalence of neurobehavioral disorders in children. Given that autism has devastating consequences in a life of a child, and that currently in the developed world over 1% of children suffer from some form of ASD, it would seem wise to make efforts towards reducing infant exposure to aluminum from vaccines." — CA Shaw, PhD*

*"There is a serious problem with vaccine safety. Vaccine aluminum adjuvants have adverse neurological effects, at dosages that are recommended by the US CDC. Vaccine critics are supported by the science. Parents refusing to vaccinate according to the recommended CDC schedule are supported by the science. Use aluminum-containing vaccines with great caution, or not at all." — CA Shaw, PhD <http://vaccinepapers.org/category/aluminum/>*

*The CDC's recommendation that doctors give every pregnant woman a Tdap vaccination during every pregnancy—regardless of whether a woman has already received one dose of Tdap—is an off-label use of the vaccine." — Carol Adl*

*"Yielding to the pressure from Big Pharma and with a mis-placed confidence in the Big Pharma-dominated CDC, FDA and his Big Medicine health advisors, President Obama has recommended that Congress spend \$1,800,000,000 for defending America against a non-disease and for the fast track development of a Zika virus vaccine. Most of the money will go to corporations." - GG Kohls*

Last week's **Duty to Warn** column on the Zika virus/microcephaly "freak-out" (published by Global Research) has been widely circulated around the planetary blogosphere, but not, apparently (and not unsurprisingly), among the gatekeepers of information in Big Government, Big Medicine, Big Pharma, Big Media and the CDC despite many of those organizations being duly informed about the "unspeakable" reality of yet another vaccine-induced, iatrogenic (medical industry-caused) disease.

For those organizations and industries, it must be preferable to blame iatrogenic illnesses on innocent mosquitos, viruses and people (for not spraying enough neurotoxic insecticides or neurotoxic repellants on themselves). For guilty medical industries, it must be preferable to blame anything other than the true culprits rather than risk losing public confidence in drugs or the over-vaccination programs that are constantly being forced on our ever-sickening children. For more understanding on the issue, check out last week's Duty to Warn column at:

[http://duluthreader.com/articles/2016/02/04/6685\\_the\\_zika\\_virus\\_outbreak\\_covering\\_up\\_ano](http://duluthreader.com/articles/2016/02/04/6685_the_zika_virus_outbreak_covering_up_ano)

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Alternative websites, alternative talk shows and assorted, non-brain-washed critical thinkers around the world (that have not been co-opted by Big Business) have expressed profound interest in the information contained in the handful of exposes from various whistle-blowers

(check out [www.nomorefakenews.org](http://www.nomorefakenews.org);

<http://yournewswire.com/video-the-zika-false-flag-fraud-fizzles/>;

and [www.youtube.com/watch?v=i6O0Cnv9UJ4](http://www.youtube.com/watch?v=i6O0Cnv9UJ4)),

that have correctly asserted that **the most likely causative factor in the epidemic of microcephaly is NOT Zika virus**. Rather, it is **Brazil's desperate act of mandating that every pregnant women in Brazil - starting in early 2015 - be inoculated with GlaxoSmithKline's Tdap vaccine (a neurotoxic aluminum-containing vaccine that is supposed to prevent whooping cough)**.

Pregnant women, trusting the wisdom of the public health agencies and also their physicians, took the shot (some right along with their mercury-containing flu shot!) and before the year was out, those deceived women began delivering an increased number of microcephalic babies with shrunken, underdeveloped brains and therefore shrunken skulls.

### **Aluminum Toxicity in Sao Paulo and Lead Toxicity in Flint**

What could possibly go wrong when neurotoxic heavy metals like aluminum or mercury (thimerosal) or lead get into the developing brains of fetuses, whose blood-brain barriers are at their most immature?

Brazilian public health authorities didn't check into aluminum neurotoxicity before they issued the mandate last year. The victims had no choice.

Speaking of no choice, it is instructive to ponder some of the similarities between what happened to the aluminum-poisoned pregnant women and fetuses in Sao Paulo and what is likely to happen to some of the lead-poisoned pregnant women in Flint, Michigan. Don't expect the public health officials to do the right thing in either city.

Of course, it remains to be seen what other neurological, hormonal, endocrine, mental, behavioral, sexual, physical or spiritual abnormalities will develop over the next decades in the Brazilian babies that were lucky enough to not be born with gross anomalies like microcephaly. Vaccine-induced (or other) toxic microcephalies are, after all, spectrum disorders, with stillborn anencephalics at one end of the spectrum and grossly normal-appearing babies, that have only invisible synaptic- and/or cellular-level brain defects at the other end.

Guilty or embarrassed public health officials, threatened with humiliating exposes, lawsuits and/or criminal indictments (financially supported by Big Pharma's powerful corporate forces) can be expected to fail to do a thorough, unbiased, scientific investigation into the emerging catastrophe - after trying to stonewall it initially.

What every mainstream media outlet in America failed to report when the public health authorities released the Brazilian data (after finally getting their stories straight) was the

fact that there were no unusual numbers of Brazilian microcephalics born in the summer and fall of 2015, whereas there were reportedly 1200 in November, another 1200 in December and by the end of January 2016 there was a total of 4000. Nobody seems to know the exact details. Crimes and their ever-present cover-ups work that way.

It is important to recognize that none of the other risk factors for brain toxicity, brain cell death and therefore brain atrophy in Brazil changed since 2015 – except for the dramatic injections of the toxic aluminum adjuvant into developing fetuses.

**Let's list some of those factors.**

### **A Short List of Risk Factors for Fetal Brain Atrophy**

Brazil is a world leader in poverty in the developed world, but it is not alone in desperately trying to maximize its position as a world leader in agriculture. Because of that desperation, Brazil has succumbed to the temptation from Big Agribusiness to raise heavily drugged (with antibiotics), very sickened livestock (that eat GMO grains that haven't been tested adequately for long-term safety).

Brazil has also succumbed to Big Agrichemical's siren song to use more and more toxic chemicals on its crops. Thus it is genetically-altering its livestock feeding program, which requires a lot of Round-up in order to force its increasingly micronutrient-depleted soil to grow more malnourishing grains and food. The poor in Brazil and, of course, their fetuses may be among the most seriously malnourished in the developed world. Poor maternal and prenatal nutrition can't grow healthy fetal brains and bodies.

Before 2015, Brazil was (and still is) a world leader in the heavy use of Monsanto's mitochondrial and cellular toxin, Round-up (which contains glyphosate, a carcinogenic herbicide [according to WHO]).

What could possibly go wrong when fetal brains are exposed to mitochondrial toxins that are sprayed (both before and after harvesting) on any number of Round-up Ready GMO foodstuffs that seem to be in every non-organic grocery store and restaurant?

Before 2015, Brazil was (and still is) a world leader in the heavy use of Syngenta's hormone-disrupting Atrazine (the synthetic herbicide that was behind Minnesota's infamous rural Atrazine-toxified farmland epidemic of hermaphroditic frogs that also exhibited a slew of physical defects, including extra or absent limbs [not to mention the near-extinction of the species]). Hermaphrodites, it should be noted, contain both sex organs, thanks to Syngenta, and cannot reproduce. Atrazine contaminates the drinking water of half of southern Minnesota.

What could possibly go wrong with the fetal development in pregnant Brazilian women when they are exposed to estrogen-mimicking chemicals like Atrazine?

Brazil has been, and is still a world leader in the use of insecticides that are designed to poison the nervous systems of insects.

### **DEET isn't as Safe as Public Health Agencies Want us to Believe**

What could possibly go wrong when insecticides or repellants are inhaled or are applied to

the highly absorbent skin of pregnant women?

Back in the 1980s there were a number of cases reported in the medical literature of childhood “toxic encephalopathy” that were caused by the popular insect repellent DEET (which is widely – and falsely – “generally regarded as safe” [GRAS]). The encephalopathy in those cases was characterized by agitation, weakness, disorientation, ataxia, seizures, coma and even death. One of the fatal cases that was autopsied showed necrotic lesions in the cerebellum and spinal cord plus an enlarged liver. According to other published toxicology reports, DEET is rapidly absorbed through the skin and is distributed to all organs including the brain and the fetus of pregnant women. The chemical is secreted in the breast milk of lactating women but is primarily excreted from the body through the urine. No long-term safety studies for DEET have been done on pregnant women or their exposed fetuses, but the public health authorities in Brazil are silent on the issue.

And even America’s Center for Disease Control and Prevention is silent on the known adverse fetal effects of DEET, neurotoxic insecticides, neurotoxic mercury in flu shots and the neurotoxic metal aluminum. The CDC gives the impression that some neurotoxins might be safe for pregnant women and fetuses at some level, while it simultaneously preaches total abstinence of even small amounts of alcohol in pregnancy, proclaiming that “there is no safe amount of alcohol for a woman during any stage of pregnancy” implying that there must be a safe amount for vaccine ingredients.

The CDC is the public health agency (unfortunately heavily influenced by Big Pharma) that the American public and most physicians look to for honest, unbiased, well-researched information about xenobiotics like drugs and vaccines and about events like pandemics and epidemics, and here it is blatantly failing to truthfully inform the public about all aspects of the Zika virus/microcephaly event.

How can we ever trust the CDC again (or WHO or the media) when they refuse to tell us the truth of the matter: that there “is no safe amount of aluminum, mercury or lead” for fetuses or infants?

That is the most important lesson to be learned in this whole sad Zika hoax. My hope is that readers of this column will demand truthfulness from the journalists and editors who are the gate-keepers of “all the news that’s fit to print”.

Yielding to the pressure from Big Pharma and with a mis-placed confidence in the Big Pharma-dominated CDC, FDA and his Big Medicine health advisors, President Obama has recommended that Congress spend \$1,800,000,000 for defending America against a non-disease and for the fast track development of a Zika virus vaccine. Most of the money will go to corporations.

I end this piece with some revealing information that I have excerpted from the internet that also needs wide attention:

### **Excerpts From the CDC’s “Toxicological Profile for Aluminum”**

<http://www.atsdr.cdc.gov/toxprofiles/tp22-c3.pdf>

“...neurofibrillary pathological changes have been associated with several neurodegenerative disorders, suggesting that the cause of aluminum-related

abnormal neuronal function may involve changes in cytoskeletal protein functions in affected cells.” ( p 118)

”Fetal exposure (to aluminum) may result in a higher distribution of aluminum to the brain, as compared to adults. In the fetuses of rats receiving a single subcutaneous injection of aluminum on gestation day 5, the amount of the radio-labelled aluminum in the brain was 30% higher than in the liver; in the dams, brain aluminum levels were only 1% of the levels found in the liver (Yumoto et al. 2000). Aluminum is distributed transplacentally, and elevated levels of aluminum have been measured in the fetus and placenta following oral, dermal, or parenteral exposure to aluminum (Anane et al. 1997; Cranmer et al. 1986; Yumoto et al. 2000).” (p 122)

*“Preterm infants may also be particularly sensitive to the toxicity of aluminum due to reduced renal capacity” (Tsou et al. 1991.” (p 127)*

### **Vaccine Company Package Inserts That List Encephalopathy as an Adverse Reaction**

**Merck** M-M-R® II (Measles, Mumps, and Rubella Virus Vaccine Live)

ADVERSE REACTIONS: **Encephalitis; encephalopathy**

**Merck** RECOMBIVAX HB® Hepatitis B Vaccine

ADVERSE REACTIONS: **Encephalitis**

**Merck** GARDASIL (Human Papillomavirus Quadrivalent)

ADVERSE REACTIONS (Postmarketing):**Acute disseminated encephalomyelitis**

**Merck** VARIVAX Varicella (Chickenpox ) Live Virus Vaccine

ADVERSE REACTIONS, (Post-marketing): **Encephalitis**

**Glaxo** INFANRIX (DTaP) Pertussis Vaccine

Postmarketing Experience: **Encephalopathy**

**Sanofi Pasteur** PENTACEL DTaP IPV and HIB Combo Vaccine

Data from Clinical Studies, Serious Adverse Events: **Encephalopathy**

**MedImmune** FLUMIST Vaccine (Influenza Vaccine Live, Intranasal Spray)

Postmarketing Experience: **Vaccine-associated encephalitis**

**Merck** AFLURIA Flu Vaccine

Postmarketing Experience: **Encephalopathy**

**Novartis Vaccines** AGRIFLU Flu Vaccine

Postmarketing Experience: **Encephalomyelitis and transverse myelitis**

**GlaxoSmithKline** FLUARIX Flu Vaccine

Postmarketing Experience: **Encephalomyelitis**

Note that the cases of vaccine-induced encephalomyelitis warned about above occurred in infants, children and adolescents. Think how much more common or serious such cases might be in immature fetuses!

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**The following extended excerpt was from Carol Adl's article**

**"Is Zika Virus Or The Tdap Vaccine Causing Birth Defects In Brazil?"**

It has been published at:  
<http://yournewswire.com/is-zika-virus-or-the-dtap-vaccine-causing-birth-defects-in-brazil/>

"FACT—Drug companies did not test the safety and effectiveness of giving Tdap vaccine to pregnant women before the vaccines were licensed in the U.S. and there is almost no data on inflammatory or other biological responses to this vaccine that could affect pregnancy and birth outcomes.

"FACT—According to the U.S. Food and Drug Administration (FDA) adequate testing has not been done in humans to demonstrate safety for pregnant women and it is not known whether the vaccines can cause fetal harm or affect reproduction capacity. The manufacturers of the Tdap vaccine state that human toxicity and fertility studies are inadequate and warn that Tdap should "be given to a pregnant woman only if clearly needed."

"FACT—There are ingredients in pertussis containing Tdap vaccine that have not been fully evaluated for potential genotoxic or other adverse effects on the human fetus developing in the womb that may negatively affect health after birth, including aluminum adjuvants, mercury containing (Thimerosal) preservatives and many more bioactive and potentially toxic ingredients.

"FACT—There are no published biological mechanism studies that assess pre-vaccination health status and measure changes in brain and immune function and chromosomal integrity after vaccination of pregnant women or their babies developing in the womb.

"FACT—Since licensure of Tdap vaccine in the U.S., there have been no well-designed prospective case-controlled studies comparing the health outcomes of large groups of women who get pertussis containing Tdap vaccine during pregnancy either separately or simultaneously compared to those who do not get the vaccines, and no similar health outcome comparisons of their newborns at birth or in the first year of life have been conducted. Safety and effectiveness evaluations that have been conducted are either small, retrospective, compare vaccinated women to vaccinated women or have been performed by drug company or government health officials using unpublished data.

"FACT—The FDA has licensed Tdap vaccines to be given once as a single dose pertussis booster shot to individuals over 10 or 11 years old. The CDC's recommendation that doctors give every pregnant woman a Tdap vaccination during every pregnancy—regardless of whether a woman has already received one dose of Tdap—**is an off-label use of the vaccine.**

"FACT—Injuries and deaths from pertussis-containing vaccines are the most compensated claims in the federal Vaccine Injury Compensation Program (VICP) and influenza vaccine injuries and deaths are the second most compensated claim.

"FACT—A 2013 published study evaluating reports of acute disseminated encephalomyelitis (ADEM) following vaccination in the U. S. Vaccine Adverse Events Reporting System (VAERS) and in a European vaccine reaction reporting system found that pertussis containing DTaP was among the vaccines most frequently associated with brain inflammation in children



between birth and age five.

“Tdap is manufactured by two pharmaceutical companies: Sanofi Pasteur of France and GlaxoSmithKline (GSK) of the United Kingdom.

“Unsurprisingly, the Brazilian government announced on January 15, 2016 it will direct funds to a biomedical research center (Sao Paulo-based Butantan Institute) to help develop a vaccine against Zika. Development of the vaccine is expected to take 3-5 years. Again, no consideration to the irony that you may be developing a vaccine to address a problem that may have been CAUSED by a vaccine, and that that new vaccine may COMPOUND the problem. No consideration to the possibility that the answer to the problem may not be to do MORE, but rather to do LESS (simply STOP giving Tdap to pregnant women).

“The number of cases of microcephaly in Brazil has grown to 3,530 babies, as of mid-January 2016. Fewer than 150 such cases were seen in all of 2014.”

*Dr Kohls is a retired physician from Duluth, MN, USA. He writes a weekly column for the Reader, Duluth's alternative newsweekly magazine. His columns mostly deal with the dangers of American fascism, corporatism, militarism, racism, malnutrition, psychiatric drugging, over-vaccination regimens, Big Pharma and other movements that threaten the environment or America's health, democracy, civility and longevity. Many of his columns are archived at [http://duluthreader.com/articles/categories/200\\_Duty\\_to\\_Warn](http://duluthreader.com/articles/categories/200_Duty_to_Warn)*

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