

Nano Particles used in Untested H1N1 Swine Flu Vaccines

Part III: 'It's the vaccines, Stupid!

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Vaccines which have been approved by the responsible government authorities for vaccination against the alleged H1N1 Influenza A Swine Flu have been found to contain nano particles. Vaccine makers have been experimenting with nanoparticles as a way to “turbo charge” vaccines for several years. Now it has come out that the vaccines approved for use in Germany and other European countries contain nanoparticles in a form that reportedly attacks healthy cells and can be deadly.

In 2007 researchers at the Ecole Polytechnique Fédérale de Lausanne (EPFL) announced in an article in the journal, *Nature Biotechnology*, that they had developed a “nanoparticle that can deliver vaccines more effectively, with fewer side effects, and at a fraction of the cost of current vaccine technologies.” The article went on to describe the effects of their breakthrough: “At a mere 25 nanometers, these particles are so tiny that once injected, they flow through the skin’s extracellular matrix, making a beeline to the lymph nodes. Within minutes, they’ve reached a concentration of DCs thousands of times greater than in the skin. The immune response can then be extremely strong and effective.” 1

There is only one small problem with vaccines containing nanoparticles—they can be deadly and at the least cause severe irreparable health damage.

Nanoparticles, promoted in the mass media as the new wonder revolution of science, are particles that have been produced vastly smaller than deadly asbestos particles which caused severe lung damage and death before being outlawed. Particles at a nano size, (nm = 0,00000001 Meter) fuse together with the membranes of our body cell membranes and, according to recent studies in China and Japan, continuously destroy cells once introduced into the body. Once they interact with the body’s cellular structure, they cannot be removed. Modern medicine euphemistically terms the phenomenon, a continuing infectious reaction.

Since the asbestos scandal, it has been established that particles in size a millionth of a meter, because of their enormous attractive force, penetrate all cells, destroying all those they come into contact with. Nanoparticles are far

smaller than asbestos fibers.

Beijing Tests confirm deadly effects on humans

The fact that WHO, the European Medicines Evaluation Agency, the German Robert Koch Institute and other health bodies today would permit the population to be injected with largely untested novel vaccines containing nanoparticles says more about the powerful pharma lobby in European politics than it does about the sanity or moral integrity of the civil servants responsible for health of the general public.

The September 2009 issue of the respected *European Respiratory Journal*, made public on 19 August, and available since 21 August online, contains a peer-reviewed article with the title, “*Exposure to nanoparticles is related to pleural effusion, pulmonary fibrosis and granuloma.*”

The article describes tests carried out in 2008 at the elite Beijing Chaoyang Hospital on seven young women. All seven, ages 18-47 had been exposed to nanoparticles for 5-13 months in their common workplace. All were admitted to the hospital with shortness of breath and pleural effusions, or excessive fluids surrounding the lungs, inhibiting breathing. None of the seven had ever smoked and none were in any special risk group. Doctors carefully tested for every possibility and confirmed that the lung problems had a common origin—regular inhalation of nanoparticles in their factory. They had been exposed to Polyacrylat nanoparticles.

The tests confirmed the nanoparticles had set off a “super-meltdown” reaction in the patients. Despite all heroic efforts of doctors, two of the seven died from the lung complications. 2

In their report, the scientists concluded something so alarming it is necessary to quote at length:

“Immunological tests, examinations of bacteriology, virology and tumour markers, bronchoscopy, internal thoracoscopy and video-assisted thoracic surgery were performed. Surveys of the workplace, clinical observations and examinations of the patients were conducted. Polyacrylate, consisting of nanoparticles, was confirmed in the workplace. Pathological examinations of patients’ lung tissue displayed nonspecific pulmonary inflammation, pulmonary fibrosis and foreign-body granulomas of pleura. Using transmission electron microscopy, nanoparticles were observed to lodge in the cytoplasm and caryoplasm of pulmonary epithelial and mesothelial cells, but are also located in the chest fluid. These cases arouse concern that long-term exposure to some nanoparticles without protective measures may be related to serious damage to human lungs.”**3**

To date Animal studies and in vitro experiments show that nanoparticles can result in lung damage and other toxicity in animals, but no reports on the clinical toxicity in humans due to nanoparticles prior to the Beijing study had been made.

The Beijing Chaoyang Hospital study has now conclusively confirmed that

nanoparticles cause lung damage and other toxicity in humans as well. At this point in time, when two of the approved vaccines planned to be mass distributed in Germany and elsewhere contain nanoparticles, failure of the relevant responsible public health and epidemiology officials to order an immediate emergency freeze on distribution of any vaccine containing nanoparticles can only be considered tantamount to criminal negligence. Hopefully the responsible authorities will react in time to avert a possible human health catastrophe orders of magnitude worse than the worst case of Swine Flu reported to date.

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Notes:

1 EPFL, Bioengineering researchers from the EPFL in Lausanne, Switzerland, have developed and patented a nanoparticle that can deliver vaccines more effectively, with fewer side effects, and at a fraction of the cost of current vaccine technologies, accessed in www.azonano.com/nanotechnology%20news.asp?catid=13.

2 Song Y, Li X, Du X, *Exposure to nanoparticles is related to pleural effusion, pulmonary fibrosis and granuloma*, European Respiratory Journal, 9/2009, 34(3): 559-567.

3 Ibid.

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