

Scaring People “Out of Their Wits” over Pseudo-Pandemics: Swine Flu, Avian Flu, SARS, Ebola and Now Zika...

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Why Aren't Public Health Organizations Like CIDRAP Warning Pregnant Women to Abstain from Aluminum or Mercury-containing Vaccines?

A few days ago, I emailed out what I consider overwhelming evidence that debunks the Zika Virus/Microcephaly thesis (that is fast becoming “conventional wisdom”) that we have all been bombarded with over the past month. The email was in the form of an open letter, with documentation, primarily addressed to one of the leading thought leaders in epidemiology in America over the past generation, Dr Michael Osterholm.

Dr Osterholm has been a consultant to the World Health Organization (WHO), the National Institutes of Health (NIH), the Food and Drug Administration (FDA), the Department of Defense (DOD), and the Centers for Disease Control and Prevention (CDC). He has undoubtedly done valuable work in the epidemiology of infectious diseases over the years.

In my open letter, I asked Dr Osterholm, and the readers, “Why Aren't Public Health Organizations Like CIDRAP Warning Pregnant Women to Abstain from Aluminum or Mercury-containing Vaccines?” I could have also asked Dr Osterholm, given the fact that lead and mercury have lethal synergistic effects on brain tissue, why aren't public health organizations not warning lead-intoxicated children in Flint, Michigan to not be given mercury-containing flu shots? (CIDRAP is the Center for Infectious Disease Research and Policy, a non-profit public health information group that Dr Osterholm founded and now directs. For more information on CIDRAP, go to <http://www.cidrap.umn.edu>.)

In the process of trying to understand CIDRAP's mission, I watched its promotional video, which was designed to attract donors.

In the very first minute of the video, a breathless narrator says:

One sneeze and the world implodes. Infection takes flight and the next pandemic is born; and our fears become a historical fact.

The narrator quotes Osterholm as saying (totally contrary to the scary tone of the video),

Our job is not to scare people out of their wits, it is to scare them into their wits. We are the super-planners, the “worst case scenario” strategists.

The video address is <http://www.cidrap.umn.edu/donate-now>.

For the better part of the last month, I have been doing extensive research into what might be behind the panicky reporting that the media has been doing about what I call “The Zika Virus Freak-out”.

Something’s Rotten in Denmark

As the readers of my Duty to Warn columns that discuss America’s over-diagnosed, over-vaccinated and over-drugged population have come to understand, there is “something rotten in Denmark” when it comes to public health policies. (The phrase, “something’s rotten in Denmark” is a comment that I frequently heard from my German-influenced mother when something didn’t add up).

On Day One of the Zika Scare reporting, I very easily discovered that Brazil had, early in 2015, (when women were getting pregnant, ready to deliver in less than 9 months), mandated that henceforth, all pregnant women were to be inoculated with the aluminum-adjuvanted vaccine, an injected combination of foreign substances that contained antigens for diphtheria, tetanus and pertussis (whooping cough). The generic name for the trivalent vaccine was DTaP (or TDaP). The product literature that comes with every batch of the vaccine says:

Sanofi Pasteur [PENTACEL DTaP IPV and HIB Combo Vaccine](#)

Data from Clinical Studies, Serious Adverse Events: [Encephalopathy](#)

GlaxoSmithKline [INFANRIX \(DTaP\) Pertussis Vaccine](#)

Postmarketing Experience: [Encephalopathy](#)

Encephalopathy is literally a “disease of the brain” which can be caused by many agents, including the neurotoxic, blood-brain barrier-toxic, mitochondrial-toxic substances aluminum, mercury and lead, which, in a sane, non-corporate-dominated universe would be contraindicated for pregnant women, fetuses and even babies whose immune systems, brains, bodies, blood-brain barriers, livers and intestines are immature, easily poisoned and very leaky.

Drug-induced poisonings of fetuses can easily occur at the earliest stages of brain and body development. One of the most infamous outbreaks of iatrogenic (medical-industry-caused) congenital anomalies produced the congenital anomaly called phocomelia, which is the term for shortened or absent limbs in babies born because their mothers had been prescribed the sedative Thalidomide in the late 1950s. What is happening in Brazil today is microcephaly which is a spectrum disorder that could present with a totally absent brain (anencephaly), an underdeveloped brain (microcephaly) or just neurological signs and symptoms that could be mis-diagnosed later in life as Autism Spectrum Disorder, ADHD, Oppositional Defiant Disorder, Learning Disorder, etc (all supposedly “of no known cause”).

The apparent motivation for Brazilian public health officials for instituting such a drastic measure as injecting known fetal toxins into pregnant women was the statistical increase in whooping cough cases over the preceding decade from less than one case per 100,000 population to 4 cases per 100,000, an pseudo-alarming increase of 500%!

Looking at the statistics rather than the human reality on the ground (ie fewer than 99,995 Brazilians out of every 100,000 got whooping cough in any given year, and knowing that

90% – 95% of the Brazilian population were already fully vaccinated, the public health officials innovatively (and very unscientifically) decided to inoculate pregnant women – and their very vulnerable fetuses – with a vaccine containing the well-known neurotoxic metal aluminum. For background data, see: Gary G. Kohls, [The Zika Virus, the Brazilian Microcephaly Outbreak. Covering-up Another Iatrogenic Disorder](#), Global Research, February 7, 2016)

Concerned – and frustrated – that there seemed to be a lot of ignorance in the media about what they were reporting, I decided to present my concerns to Dr Osterholm.

My goal was to get his take on some of the facts surrounding the microcephaly outbreak. It was obvious to me that:

the most likely cause of the Brazilian outbreak of the usually rare fetal anomaly microcephaly was far less likely to be a mosquito virus, but rather the aluminum adjuvant in the DTaP shot. Aluminum is a neurotoxic metal that is toxic in parts per billion concentrations and could be predicted to be a cause of serious brain anomalies. Neuroscientists should be aware of the fact that there is no known safe level of either aluminum or mercury (or lead, for that matter) in the living tissues of any animal, especially immature fetuses. These metals, as are many other synthetic chemicals that can cross the placental and blood-brain barriers are all mitochondrial toxins and fetuses should not be exposed to them.

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

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