

# HERD IMMUNITY

Do You Protect Others by Getting Yourself Vaccinated?

OREGONIANS  
for  
MEDICAL  
FREEDOM

For a vaccine to be able to create and sustain herd immunity, it must be able to: (1) **prevent the symptoms** of the disease, (2) **prevent transmission** of the disease, and (3) provide **protection that does not wane**.

## Can current vaccine products create and sustain herd immunity?

### Flu? No.

The vaccine cannot prevent mucosal (such as in the nose) infection, and studies show it does not prevent transmission in household settings.<sup>1, 2, 3</sup>

### Whooping Cough (pertussis)? No.

The vaccine cannot prevent colonization and transmission; it can only sometimes reduce symptoms for a limited time (about 18 months). During that time, vaccinated people, if exposed to whooping cough, can become *silent carriers*, infecting people without knowing it. Outbreaks are happening in and between fully vaccinated people.<sup>4</sup>

### Tetanus? No.

Tetanus is not a communicable disease.<sup>5</sup>

### Polio? No.

Polio is spread via stool, and the vaccine used in the U.S. does not prevent gut colonization or excretion of polio virus in the stool.<sup>6, 7</sup>

### Mumps? No.

The vaccine suffers from primary failure (many people never develop protection) and secondary failure (protection fades rapidly). The vaccine is in the trivalent MMR, and Merck is on trial in federal court, accused by two of its own scientists of lying about the vaccine's effectiveness.<sup>8, 9, 10</sup>

### Measles? No.

Prior to the introduction of the measles vaccine, virtually everyone over the age of 15 in the U.S. was immune, and complications and fatalities were low. Healthy children with adequate nutrition and supplies of vitamins A & D handle measles well and gain not only lifetime immunity, but other benefits, such as lower risk of some cancers. By the early 1960's, because living conditions in the U.S. were good for the majority of the population, annual measles fatalities were around 400-500. That's about the same as lightning strike fatalities.

The vaccine came along and prevented infection in a narrow range of the childhood population, and so at first it looked like it worked great (remember, everyone in the entire nation over 15 had lifetime immunity). But it was soon discovered that about 2-10% of vaccine recipients experience *primary failure* - they never develop immunity and about 10% more lose protection within a decade. It's predicted that by *twenty years out*, 33% lose protection. Studies have shown a *third vaccine dose does not extend protection*. That means after sixty years of mass vaccination campaigns, as the number who have natural lifetime immunity shrinks, *we are moving into an era of far more people susceptible to measles than there were prior to the vaccine being introduced*. Which is likely why **the CDC and other public health agencies around the world are panicking. Not because of vaccine refusal, but because of vaccine failure.**<sup>11, 12, 13</sup>

*"Vaccination does not account for the impressive decline in mortality seen in the first half of the century... Once again, nearly 90% of the decline in infectious disease mortality among US children occurred before 1940, when few antibiotics or vaccines were available."*<sup>14</sup>

1. <https://onlinelibrary.wiley.com/doi/full/10.1111/j.0300-9475.2004.01382.x>

2. <http://europepmc.org/articles/PMC3693492>

3. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3404712/>

4. <https://www.ncbi.nlm.nih.gov/pubmed/24277828>

5. <https://www.cdc.gov/tetanus/about/index.html>

6. <https://www.ncbi.nlm.nih.gov/pubmed/22532797>

7. <https://www.nejm.org/doi/full/10.1056/NEJMoa054960>

8. <https://www.nejm.org/doi/full/10.1056/NEJMoa1703309>

9. <https://www.ncbi.nlm.nih.gov/pubmed/23442590>

10. <https://ahrp.org/former-merck-scientists-sue-merck-alleging-mmr-vaccine-efficacy-fraud/>

11. <https://www.ncbi.nlm.nih.gov/pubmed/9850133>

12. <https://academic.oup.com/aje/article-abstract/120/1/39/98627?redirectedFrom=fulltext>

13. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3905323/>

14. <https://pediatrics.aappublications.org/content/106/6/1307>