A Special Interview with Barbara Loe Fisher
By Dr. Mercola

BF: Barbara Loe Fisher
DM: Dr. Joseph Mercola, DO

INTRODUCTION:

DM: Welcome everyone. This is Dr. Mercola and today I'm here with Barbara Loe Fisher, who is the founder of the National Vaccine Information Center (NVIC).

That is http://www.nvic.org/ for their website, which I encourage you to visit to learn more about any specific vaccine, or if you want to learn about vaccine safety. They clearly are the leading resource on the Internet that provides impartial, objective, unbiased information that you will need to inform yourself to make an intelligent decision about whether or not you want to administer a specific vaccine for you or your family member.

So today we're going to talk about a common childhood vaccine that's used to treat and prevent diarrheal infection and illness from an infection called rotavirus. Now, for those of you who are not familiar with it, rotavirus is the leading cause of diarrhea in infants not only in the United States but in the developing world.

There have been a number of trials that have shown that this vaccine has actually been useful in reducing the death rate from rotaviral infection in the developing world, and that's the key.

In the United States, prior to the administration of the vaccine, there were about 50,000 infants every year who were required to visit the hospital as a result of this infection. But in the United States, where we have an advanced healthcare system, this infection is rarely fatal.

In fact, prior to the administration of the vaccine, there were only 50-60 infants every year that died from this infection. This is because it's diagnosed early on, the appropriate medical care is given and intervention – usually with the administration of intravenous fluids to rehydrate the child – is implemented.

Now interestingly, since the introduction of the vaccine, the death rate from rotavirus infection in infants has not decreased at all; in fact it's gone up slightly.

So, the major argument in the United States is, is this (vaccine) going to decrease hospitalizations and at what cost?

That's what we're here to elaborate on because an interesting development in the rotavirus vaccine, which you need to know about and has tremendous implications for all the other vaccines, questions the very integrity and safety of the entire vaccine system.

Hopefully, we'll convince and compel you to take action and force the primary manufacturer of this vaccine to take it off the market because of the implications and danger, in spite of what the FDA's recent ruling has been.

So we are just delighted to have Barbara here today to help expand on some of the specific details. Welcome, Barbara.

BF: Well on May 7th, the FDA called a special meeting of the Vaccines and Related Biological Products Advisory Committee to discuss the fact that a porcine circovirus, a pig viral DNA was found in Glaxo SmithKline's rotavirus vaccine. On March 22nd, the FDA has announced that they were recommending the suspension of the use of Rotarix vaccine because of this PCV1 porcine circovirus they found DNA from that virus that they found in the vaccine.

Now, PCV1 is a pig virus that does not cause or appear to cause any clinical disease in pigs or in humans. There is another virus called porcine circovirus 2 (PCV2) which is a lethal pig virus that causes very severe disease in infant pigs. They waste away. They fail to thrive. There is immune suppression involved. They have respiratory problems, kidney problems. It can involve the brain and cause reproductive problems and a lot of them died.

It was found in Merck's RotaTeq vaccine.

Two days before the May 7th meeting, it was announced that Merck's RotaTeq vaccine, the live rotavirus vaccine given to babies at two, four, and six months in this country and around the world, did have PCV2, DNA from this lethal pig virus in it.

Now, Merck did not show up at the FDA meeting to talk to the committee and answer their questions.

Glaxo SmithKline did show up and they pledged to take PCV1 out of their vaccine and reformulate the vaccine because it apparently had been in there since it was made, manufactured. So it was licensed basically with this PCV1 virus in it. But again, that's non-lethal virus.

Here we have now Merck's RotaTeq vaccine that contains DNA from a lethal pig virus and that was not able to be fully discussed at the May 7th meeting because Merck wasn't there.

The committee was scheduled to talk about this less problematic PCV1 virus even though you don't want any kind of DNA from any kind of animal viruses in your vaccines.

Still, the problem we have is that babies are swallowing basically parts of a lethal pig virus and that's why we believe that Merck should voluntarily take RotaTeq vaccine that is contaminated with part of this lethal pig virus off the market until they can clean the vaccine up and put a vaccine on the market that is not contaminated.

DM: Yes, indeed and in fact, this entire process as illustrated above the real challenge that the FDA has in really having any definitive insights as to what the reality of the situation is.

Because the commissioner of the FDA who is Dr. Margaret Hamburg, and we've done pieces on

her before for her massive conflict of interest with the removal of -- or at least the notification of mercury in dental amalgam and her ties with Henry Schein.

But in March when the issue of the PCV1 contamination with the Glaxo rotavirus vaccine was first announced, she said that as a precaution, not to use the Glaxo vaccine, but to instead, use the Merck vaccine.

And it turns out the Merck vaccine not only had the PCV1 but had the more potentially toxic and damaging DNA fragments of the PCV2 virus.

So the head of the FDA give the absolute wrong recommendation as little as two months ago.

BF: Well, you know, it's really shocking that these vaccines are not guaranteed to be free from contamination with DNA from animal viruses or any other kind of virus. The technology that is being used, it's my understanding, could have screened for this pig viral DNA.

The independent lab that actually caught this was a lab that's funded by NIH -- and when they used what they say is more sophisticated technology -- they were able to identify the DNA fragments from PCV1 in Glaxo SmithKline's vaccine, although it took the FDA asking Merck to double check their vaccine after the Glaxo contamination was found. To ask Merck, double check for PCV1 and PCV2 DNA.

That's when Merck said, two days before this meeting; yes we found not only PCV1 but also PCV 2 DNA fragments in our vaccine.

Now, what's so important about this, these DNA fragments?

Why could this be important?

It could be important because, at the May 7th meeting, it was discussed that they didn't know whether this DNA was infectious or not.

When you have DNA that contaminates vaccines from animal viruses or other insect viruses -- they're trying to make vaccines now using insect cells -- you can a problem with it being infectious. You can have a problem with it becoming part of our own DNA or recombining and creating hybrid viruses.

For example, the H1N1 virus that we've all been told to be so afraid off in 2009. The pandemic H1N1 swine flu was a hybrid virus, a human-pig-bird hybrid virus. It is possible for animal viruses to recombine with human viruses and create new viruses that could be quite lethal.

So, we're giving our babies a vaccine, a live virus rotavirus vaccine that is squirted into the mouths of these babies, these little infants at two, four, and six months of age. And they're basically -- if they're getting RotaTeq vaccine -- they are swallowing parts of a lethal pig virus. A pig virus that causes wasting disease in infant pigs.

How do we know that this could not down the road cause immune suppression in susceptible

babies?

Could cause the same kind of wasting disease?

We don't know that. And that's why the precautionary principle must prevail.

When in doubt, you take it out. You have to have high standards at the FDA for proof of safety and efficacy of these vaccines.

At public comment time on May 7th, my organization called for the FDA to raise its standards for screening these vaccines and making the companies -- legally requiring the companies to take these adventitious agents, this contamination out of their vaccine.

If you they're going to use cell substrates that could possibly be infected with viruses and to label the vaccines. If they're going to allow DNA contamination in these vaccines, then at least they have to let the people know how much of it is in the vaccines.

I mean, it's a problem because there are many, many vaccines that are going to be created in the future using animal cell substrates, insect cell substrates potentially, even cancer cell substrates. And if they're going to do that, the public needs to know. We need to have informed consent. We need to understand what we're putting into our bodies or the bodies of our children.

DM: Sometimes that just simply isn't possible because of the technology. What we made really clear last year when we exposed the massive fraud of the swine flu pandemic and we interviewed many experts on this very topic that these vaccines are not pure products and that's the conception that most individuals and consumers have. That it is some purified extract that's going to improve your immune response.

And nothing could be further from the truth as this recent finding indicates that they are frequently grown in culture media that can be massively contaminated not only with viral particles but other proteins. And these proteins, once they're injected in the case of the rotavirus, it's swallowed so it's not a significant issue but if you were to inject it, it could have much more profound significant complications.

So the central issue here is the technology. This really was only found out because of new techniques that were developed. Let me emphasize a point that you have made, that may have slipped by many of our listeners is that this contamination was found by a group that was not the vaccine companies themselves. It was an independent objective third party that was funded by the most prestigious government authority, the National Institutes of Health. So it's very objective, very reliable and they were absolutely shocked to find this. They were not expecting it. So this is new technology.

Now, technology is going to continue to advance. You mentioned we need to implement the precautionary principle because we just don't know it's in these vaccines. We're not even looking. And when they do start to look and they have the technology, they find this. These are our concerns. Once we identify them, we need to act on it as you mentioned.

BF: Absolutely. I mean, you have to remember the first contamination issue really goes back to the polio vaccines.

The early polio vaccines in the late 50's, early 60's were contaminated with a simian virus, a monkey virus, SV40 because kidney tissue cells from monkeys were used. The technology at the time when these vaccines came out they did not screen for these monkey viruses. A researcher that was working for the government, Bernice Eddy, found this SV40 and when she tested it in hamsters; she found it caused cancer in hamsters. It took awhile for people to recognize that that could potentially cause cancer in humans.

Now, the government denies that the SV40 contaminated vaccine; the polio vaccines did cause cancer in humans. And yet, we have a number of people in the last few decades that have had brain, bone, and lung cancers. And when they went in, they found SV40 DNA. They found the footprints of the SV40 virus.

There are a lot of researchers who do believe that the SV40 contaminated polio vaccines have caused cancer in humans.

So it is a precautionary tale at our peril.

Do we continue to assume safety?

I heard a lot of the committee members at the FDA say, "Well, we don't believe that this porcine circoviruses can cause human disease."

"Believe" is not good enough. It is just not good enough. We have to pay attention to this.

We must require the companies, legally require them not recommend like the FDA does right now. Legally require the companies to make sure that their vaccines are not contaminated with viral DNA that could potentially cause catastrophic human disease down the road. I think this is one of the most important vaccine issues on the table right now.

DM: Absolutely. Let me point out an interesting side point to this. The Merck vaccine, the Merck rotavirus vaccine which is contaminated, the one that we want recalled immediately and we're going to tell you how to engage and help us in the process to get this off the market as soon as possible.

But this vaccine is the one that was developed by Paul Offit. And Offit is the premier leading advocate for vaccine. This is the man that said it was safe and there would be no complications or problems to give an innocent child, an infant, and a hundred thousand vaccines in one day. Just complete insane nonsense. This is the same person who said that.

And it's his vaccine that's contaminated. I'm not sure of the details on this and you would know Barbara, but I believe when the vaccine was initially approved and recommended to be included on the recommended vaccine schedule that he was actually serving on the vaccine advisory panel that was responsible for making that recommendation.

BF: He was a member of the ACIP (Advisory Committee on Immunization Practices) committee, the CDC committee that recommends the use of vaccines in this country. I believe it as the original RotaShield vaccine, the original rotavirus vaccine that he voted should be made part of the routine schedule. I don't think he was on the committee when his vaccine, the Merck vaccine, came out.

DM: Well, it certainly set the stage especially when that vaccine was removed from the market for

his being introduced and him making actually millions from having a patent on this vaccine.

BF: Yes. Dr. Offit did create the RotaTeq vaccine. It was created at Children's Hospital of Pennsylvania where he works. And then Merck took -- because it's a reassorted viral vaccine. It's a human-cow virus reassortment vaccine and then he created it and then a couple of other researchers created it and then it was taken by Merck and produced by Merck.

I have not heard yet whether or not the PCV2 contaminated the original seed stocks of RotaTeq. I don't think we know that yet. But, what we need is we need to have Merck be a good corporation and adhere to the precautionary principle. Like other corporations whose products have been found to be contaminated for one reason or another. Or corporations that manufacture foods when their food are contaminated. They voluntarily withdraw the product from the market. This should be the case with a vaccine that is contaminated with DNA from a lethal pig virus. When we don't know what that could mean down the road.

DM: Yes, indeed. Many people listening to this interview know that www.Mercola.com actually produces certain supplements. Not a lot but produce some. And I can guarantee you that if our company produces something or literally any other vitamin manufacturers produce some that was contaminated, it would be off the market in a heartbeat.

BF: That's right.

DM: But yet this vaccine that's clearly shown to be contaminated by an NIH funded group is still on the market.

BF: Merck used to pledge that when they put it back on the market, that it is going to be free from contamination. I mean that should be the commitment of every vaccine manufacturer. And if they can't make a vaccine that is free from contamination using the process that they are using currently, then they need to find a different way to make vaccines that are not contaminated.

Because we do not know when we are putting DNA from a lethal pig virus in babies; having them swallow it when they are newborns. We cannot guarantee that that could not cause harm to those babies in the future.

DM: Let me also remind the listeners that Merck is the very company that manufactured the non-steroidal anti-inflammatory called Vioxx which was removed the market after it had killed 60,000. That's 60 thousand. That's as many people that have died in the Vietnam War from the U.S.; people from strokes or heart attacks.

Interestingly, I was the person in the year 2000 actually a year before it was introduced and released into the market to warn people that this (inaudible 20:01) causes various complications. I forgot how many million or tens of millions, or billions of dollars that they settled that for. But they voluntarily removed Vioxx from the market. They weren't forced to do it. They voluntarily removed it because they knew the liability was so huge.

And we're hoping that with some pressure from you and your family and your friends that we can motivate them to do that for this. I think we're going to need a strong push and shove because they didn't have a shove back then when they removed Vioxx but they're going to need one now

because the FDA has given it sort of hidden blessing and not really warned or expressed significant concern that this is a serious issue.

BF: That's right in fact, the FDA on May 14th I believe basically said they were withdrawing the suspension; the recommendation that Rotarix is contaminated with PCV1 that the use be suspended. They took that away. And they never said anything about RotaTeq which has DNA from both PCV1 and PCV2 in it. They never said anything about the use of that vaccine. I think that they should have asked for the suspension of the use of RotaTeq.

Right now, Rotavirus vaccine is not a mandated vaccine.

It's a vaccine that parents can choose to use. I don't think a lot of parents understand that it's a choice vaccine.

I don't think that doctors or parents are aware that the Glaxo vaccine has PCV1 which does not cause this lethal wasting disease in pigs and is not known to infect humans but RotaTeq does contain this DNA from a lethal pig virus.

So I think the American Academy of Pediatrics and pediatricians should be informing parents who bring their babies to be vaccinated -- and rotavirus is usually given with a whole host of other vaccines at the same time -- they should be informing them. Look, this is the situation. We've got one vaccine that is contaminated with a DNA from a pig virus that's not lethal but we have this other vaccine RotaTeq that's contaminated with DNA from a pig virus that is lethal. I just don't think most people understand this.

DM: Well you know, the FDA isn't consistently making these types of mistakes but they certainly erred here. As I mentioned earlier, Dr. Hamburg the commissioner of the FDA, in retrospect, just awful statement to switch to RotaTeq vaccine which was actually far more severely contaminated than the one she was advising people to avoid.

So clearly they've buried their heads in the sand.

That advice was given by the head of the FDA so you can imagine what the people below her are saying. They really just don't understand it. I am convinced that if we worked together with other organizations, yourself, your friends, and your family and mount a response to increase public awareness of this issue that we can motivate Merck to action.

BF: Well, you know, what we do now to draw the line in the sand on contamination in vaccines is going to have profound effect on the future. We have to make it clear to the government health agencies, to the corporations that are producing these vaccines, and to the doctors who are giving them, and to the legislators that often pass laws to require them that we do not want these vaccines contaminated. We want them clean. We want the manufacturers to clean them up.

We want the government to require the manufacturers to clean them up. We want doctors to tell us what the information is. We want them to be truthful with us about the vaccines they are giving to our children. And ultimately as we always say, Dr. Mercola, you and I, we must have voluntary informed consent to the use of vaccines.

DM: Yes. The last we want to do is mandatory vaccinations because it really prevents the

end-user, the consumer, you listening to this and your family members, the opportunity to voluntarily opt out when these types of situations are exposed. When the government officials and the public health authorities are not really telling you all the specific details and telling you the truth. In fact they tried to pull the wall over your eyes what they did with the swine flu epidemic.

We need the ability of freedom of choice.

BF: We absolutely do. And if people will go on to www.Mercola.com and www.NVIC.org, we have information up on both of our websites that will help them understand this issue more fully and will help them take action.

DM: Okay now with respect to taking action -- thank you for listening this far -- we have some really important take home steps that you can do that can really and truly make a difference. Now remember, let me remind you, we made a difference last year. More than 70%, seven out of ten people refused to take the H1N1 vaccine despite massive campaigns to encourage everyone to take it.

So we can defeat this but we're going to need your help to do it. So I don't ask for your assistance frequently on this is but this is one where I'm going to ask you to take an action because not only as Barb mentioned will have an impact on this vaccine but it can have an impact on all vaccines in the future because its going to set a precedent and set policy.

BF: That's right. Well, what it's about is raising awareness. We need to raise awareness about the contamination issue with vaccines particularly in media. And you could certainly get involved by contacting your local media and making them aware. Take some of the information that we have on www.Mercola.com and www.NVIC.org and make your local media aware that you care about this issue in your community and you want them to investigate it.

The doctors who give these vaccines have got to become aware that we care about vaccines being contaminated. You could raise awareness in the medical community and at the American Academy of Pediatrics who advice pediatricians in this country. You can also make your legislators, the people who you elect to public office, aware that you don't want vaccines contaminated.

If the government wants us to use vaccines it would be smart for them to require these companies to produce clean vaccines. Ultimately, yes, it's our choice. Always, it must be our choice because there is no leverage that we can place as people on corporations to produce products that we want to use; vaccines that are safe and effective or if we want to use another way to stay healthy that should be our choice too. But if we want to use these vaccines, then we have to make sure that they are safe as possible.

So we need to raise awareness in those three arenas and you could do that by going on to www.Mercola.com and www.NVIC.org and get the information tools that you need to make those three entities aware.

DM: Great and we'll have some very specific steps on this page if you're on my site at www.Mercola.com. If you're not you can just type in 'RotaTeq vaccine' in our search engine and you could find it at www.Mercola.com. There are specific actions steps that you can take that really highlight what Barbara is saying. And really, you can start to make a difference before this very important process of not only this specific vaccine but as I mentioned, really more importantly, all

the future vaccines.

BF: That's right because, you know; you mentioned about the H1N1 influenza vaccine that the majority of the people in America and actually in Europe and other developed countries rejected. Why did they reject it? It was because we gave them information, accurate information about swine flu and about the vaccine and how the vaccine had not been studied very thoroughly.

And the people based on the information that they got, made their own informed decision that the swine flu virus was not the lethal type influenza that everyone, the government and the companies had said was going to be a terrible pandemic.

They took the information, the accurate information that they were given and they saw that it was not a lethal pandemic. They also looked at the vaccine, the information about the vaccine and realized the vaccine had not been thoroughly tested.

So it's about providing people with information that then they can evaluate and make up their own minds as to whether or not they want to use the vaccine or not use the vaccine. So, it's all about information. And that's what we try to do as provide accurate reliable information that people can make their own decisions about.

DM: Yes. Our effort is to counteract the incredible amazing professional arrogance of these companies and the government who choose to take the position that they know better than you do. That they're going to take the information even though there maybe massive conflict of interest from this multibillion dollar, multinational corporations as influencing their decisions. That they know better. That they can make a recommendation for you and your family to mandate it.

But what our continuous effort and desire and intention are to give you the solid truth, the facts. So that you not some government official or public health official can make a decision for you and your family because ultimately, you are responsible for your family's health not the government.

BF: That is so true, so very true. It's not up to me. It's not up to you to tell people what to do. What our job is is to give them the information like you say, so they can make their own decisions for themselves and their family. Because yes, we're not going to have to live with that decision, the individual and their family is going to have to live with that decision whatever happens.

And you know, if these products are safe and effective and people want to use them, then they will use them. If they look at the information and don't believe that the information that they're getting from the government or from these companies or from their doctors is good enough or is truthful and accurate, they're not going to use them. And the people should have that right. The people should have the right ultimately to make the decision. Not be forced into a corner and force to use vaccines that for example in this case, are contaminated.

DM: And, in the United States at least, have very, very limited benefit. You know it's all about taking the fact, taking information and evaluating it for your specific circumstances.

Now, if you live in a Third World, maybe another situation. But if you live in the United States or developed world, there really is a very, very low benefit. I mean, everything is a risk-benefit. When you fly in a plane and you go somewhere, you're betting that the risk of you dying in a plane crash is far lower than the convenience of arriving there quickly and safely. But its still a risk-benefit

analysis and that the same type of analysis you have to make in that situation.

Is the risk of taking a known contaminated vaccine higher than 50,000 people a year suffering a non-fatal, consequence of having to go to a hospital and get an I.V.? So you make the choice. It's your choice. You got the facts and your responsibility is to discern what you want to do with you and your family.

BF: That's right.

DM: So that's what we're here as Barb said is that we want to give you information; the truthful information, unbiased, no conflict of interest so that you can be empowered and you can exercise your freedom of choice.

BF: I think you said it.

DM: Alright. Well thank you so much Barb. We'll definitely work with you and keep the listeners informed about future updates and any other actions that may be beneficial to achieve the end goal.

BF: Thank you.