

THE TRUTH ABOUT FLU

Pandemics, Influenzas and Vaccines:
What's really happening, why and what you
can do about it

by Dr. Sherri Tenpenny with Roni Ambrister



How did we get here—enforced vaccinations; pandemic flu scares; threats of mass inoculation? If you look at history, you'll see we were set up. In 1903, our government passed the first mandatory vaccination law. Since that time, a relentless pro-vaccination campaign has been waged against the public by the trilogy of the United States government, local school systems and the western allopathic medical industry.

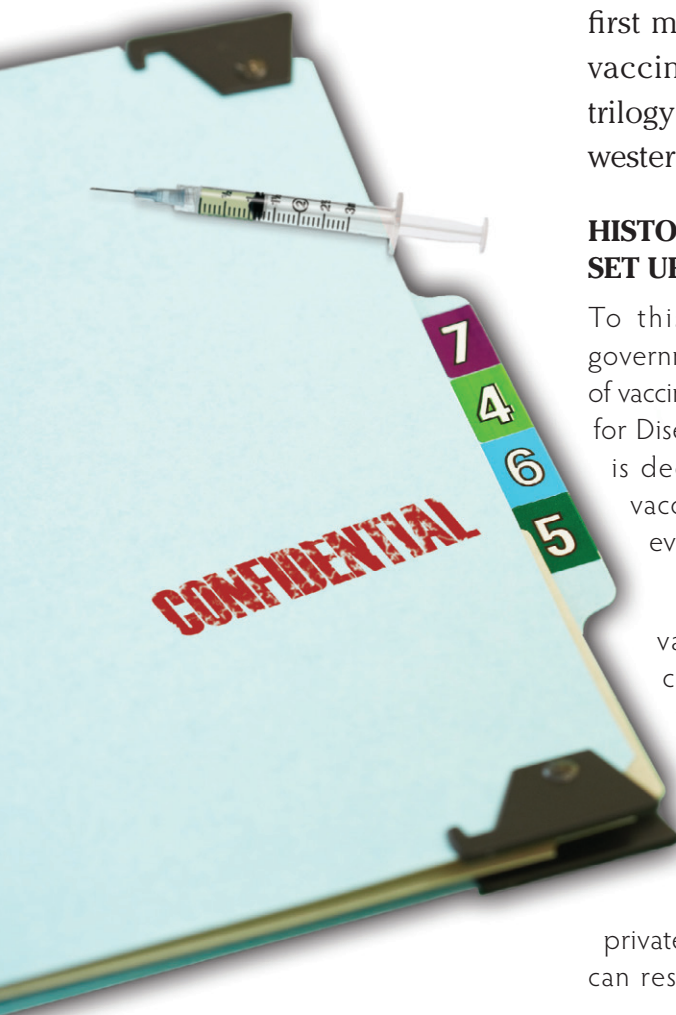
HISTORY REVEALS THE SET UP

To this day, the United States government is the largest purchaser of vaccines. Nearly 30% of the Centers for Disease Control's annual budget is dedicated to the purchase of vaccines with the assurance that every child is inoculated.

Each state has school vaccination laws that require children of appropriate age to be vaccinated for several communicable diseases. These laws mandate that children must be vaccinated prior to being allowed to attend public or private schools. Failure to vaccinate can result in a child being denied

admittance to a school. Civil fines and criminal penalties can be levied against parents who don't comply. What schools *don't* tell parents is that in every state an exemption exists allowing parents to legally refuse vaccines and allowing children to attend school.

Protection under the law favors the manufacturer, not the individual. Laws have been passed to protect vaccine manufacturers from liability while at the same time, state laws require parents to inject their children with up to 100 vaccination antigens prior to entering school. If a vaccine injury—or death—occurs after a vaccine, parents cannot sue the doctor, the drug company or the government. Instead they are required to petition the Vaccine Court



for damages, which often takes years and is frequently denied.

The medical industry advocates vaccines, often demanding that parents vaccinate their children or be dismissed from the medical practice. A sizable portion of a pediatrician's income is derived from insurance reimbursement for vaccinations. The ever-expanding vaccination schedule includes increasingly more expensive vaccines that are a source of increased revenue for doctors.

Unfortunately, many doctors don't read the package insert that comes with the vaccines. They're not aware of the full range of chemicals a particular vaccine contains or the potential side effects. In theory, parents have the right to know these facts and make a choice if their child will be vaccinated or not. But if the doctor doesn't know the facts, neither will the parents. Nor do most parents have the time to spend hundreds of hours researching the medical literature about problems associated with vaccines. So they allow their children to be vaccinated based on trust and belief that it's not harmful and they're obeying the law.



“By 1853, Parliament began passing laws to make the untested vaccine compulsory throughout the British Empire. Other countries of Europe followed suit. Once the economic implications of compulsory vaccinations were realized, few dared to disagree. Then, as now, the media were controlled by the vaccine manufacturers and the government, who stood to make huge money from the sale of these spurious vaccines.”

~Dr. Tim O'Shea, “The Sanctity of Human Blood: Vaccination Is Not Immunization”

As a result, we have a general population that is uniformed, coerced to comply with government, school systems and the medical profession leaving their family with little or no legal recourse, should something go wrong. It's the perfect set up for mass inoculations when the threat, real or imagined, of a worldwide flu epidemic is announced.

THERE'S A BIG PUSH FOR MANDATORY VACCINATION

“Step back and think for a minute before rushing and panicking” is the message coming from Texas Congressman Ron Paul who has warned that the swine flu scare will once again be used as a precedent for big government intrusion.

“It makes me think back to 1976, the first year I served in the Congress,” Paul said in a video update. “We had a vote on the swine flu. Back then there was panic; they said it was going to sweep the nation and they rapidly came up with some flu shots and the government was going to inoculate everybody and save the world from this disaster.”

“It turned out that our instincts were correct,” the Congressman, also a medical physician, commented. “Not only did we think that the government should be involved in making medical decisions... but the flu came, the flu

went and one person died, except for those individuals that died from getting the flu vaccine.”

Unfortunately, it looks as if history is about to repeat itself. On June 11, 2009, the World Health Organization (WHO) announced that it had declared “Level 6” pandemic emergency with regard to the “swine flu.” Shortly thereafter, on cue, the Centers for Disease Control and Prevention announced that we should expect mass vaccination in this country to begin as early as September 2009.

Dr. Tenpenny reports, “We've been covering the development of the global pandemic preparedness machinery since June 1998. It's my belief that this machine has been in motion since March 28, 2009 and will not be stopped; that the global influenza pandemic the CDC and WHO have been predicting (planning) for at least a decade will be declared—whether people are sick and dying or not—and the global mass vaccination campaign for which they have been preparing since the 1970s swine flu fiasco will commence—soon.

A new report from a WHO advisory group predicts that global production of vaccine for the novel H1N1 influenza virus could be as much as 4.9 billion doses a year, far higher than



previous estimates. The report states that vaccine makers are expected to produce about 780 million doses of seasonal flu vaccine for the northern hemisphere's 2009-2010 flu season for the U.S.

MASS VACCINATION OF EVERYONE IS MORE POSSIBLE NOW THAN EVER

In 1946, the United States Public Health Service was established. An Executive Order was signed, listing the communicable diseases that could be corralled using quarantines. Between 1946 and 2003, cholera, diphtheria, tuberculosis, typhoid, smallpox, yellow fever and viral hemorrhagic fevers were added. In April 2003, SARS was added. In April 2005, the order was amended to include "Influenza caused by novel or re-emergent influenza viruses that are causing, or have the potential to cause a pandemic."

The power to quarantine was delegated by the President to the Secretary of Health and Human Services to be determined at his or her discretion. The Secretary of HHS was given the power to arrange for the "apprehension and examination of persons reasonably thought to be infected." A cough or a fever could put a person at risk of being quarantined for an extended period of time and without legal recourse.

By December 2006, Division E of the Public Readiness and Emergency Preparedness Act was added as an addendum to the Defense Appropriations Bill HR 2863 at 11:20 pm on Saturday night, long after House Committee members had signed off on the bill and gone home for the holidays.

Section (b)(1) states, "The Secretary of HHS can make a determination that a 'disease, health condition or threat' constitutes a public health emergency. He or she may then recommend 'the manufacture, testing, development, administration, or use of one or more covered counter measures..' A covered countermeasure, defined in Division E, is a 'pandemic product, vaccine or drug.' It provides complete liability protection for all drugs, vaccines or biological products deemed to be a 'covered countermeasure' for an outbreak of any kind." Protection has been given to the drug companies for any product administered for *any* public health emergency declared by the Secretary of HHS.

Who stands to profit? Big Pharma is now protected from all accountability, unless criminal intent to harm can be proven by the injured party. Drug companies are protected from lawsuits, even if they know the drug will be harmful. Criminal intent would be nearly impossible to prove.

WHAT CAN WE DO TO PROTECT OUR COMMUNITIES AND OURSELVES?

"With the steady and consistent erosion of your health freedoms it is absolutely crucial that you share the following information with your friends, family and both elected and appointed bureaucrats within your community," Dr. Tenpenny warns.

Some effective ways to take action are:

- Contact local first responders (EMTs, paramedics, firemen, doctors and nurses) and let them know what is in the shots since "they" will be the first ones to get them.
- Contact your county commissioners, sheriff and local police to discuss your concerns about the looming threat of mandatory vaccination, quarantine and confiscation of private property for either quarantine or drug/vaccine dispensing clinics. Discuss the cause of liberty and our fundamental right to exempt ourselves from forced medical experimentation.
- Contact local city council members about our constitutional right to refuse a pandemic vaccine that has the potential to kill or maim without the recipient having any legal recourse.
- Write a small article or letter to the editor for local, community newspapers.
- Have at least a month's supply of food and water in your home

and be prepared to voluntarily self-quarantine if given no other options.

- Stock up on Vitamin D3 (3,000 IU per person), Vitamin A, Vitamin C, colloidal silver and homeopathics for both preventing and treating the flu.
- Check out Oath-Keepers.org or CampaignForLiberty.com—those who support Second Amendment issues, environmental and “real” food safety issues, animal rights and health freedom issues. Work together to spread the word about their liberty issues while you encourage their involvement with the mandatory vaccine resistance movement.

Remember, every compulsory vaccination campaign in history has been a public health disaster. To allow organized medicine to continue compelling mass vaccination can only occur as a result of collective ignorance and cultural complacency. Now you know the truth. Now you can do something about it. **HK**

Dr. Sherri Tenpenny is an osteopathic physician and director of *OsteoMed II* and *New Medical Awareness Seminars*. She is the author of “*Fowl! Bird Flu—It’s Not What You Think*” and “*Saying No to Vaccines—A Resource Guide for All Ages*.” She is a popular and well-known speaker, writer and radio guest. For more information, go to SayingNoToVaccines.com.

10 BASIC FACTS YOU SHOULD KNOW ABOUT VACCINATIONS

1. Vaccines are toxic.

Vaccines contain poisonous substances such as mercury, formaldehyde, and aluminum.

2. Immunization depresses and disables brain and immune function.

Unbiased scientific investigation has shown vaccinations to be a causative factor in many illnesses including:

- Sudden Infant Death Syndrome (aka SIDS, crib or cot death)
- Developmental disorders (autism, seizures, mental retardation, hyperactivity, dyslexia, etc.)
- Immune deficiency (i.e. AIDS, Epstein Barre Syndrome, etc.)
- Degenerative disease (i.e. muscular dystrophy, multiple sclerosis, arthritis, cancer, leukemia, lupus, fibromyalgia, etc.)

3. The high rate of adverse vaccine reactions is being ignored and denied by conventional medicine.

Prior to 1990, doctors were not legally required to report adverse reactions to the Center for Disease Control (CDC). Adverse reactions are considered “normal,” and are ignored or diagnosed as other diseases. Even with this poor system, reported damage is substantial.

4. Mass Vaccination Programs systematically and recklessly endanger the public while disregarding our rights.

- Since vaccination breaks the skin, it is technically a surgery. All surgeries by law require informed consent. Informed consent is rarely attained before vaccines are administered.
- Doctors vaccinate the unwitting and uninformed.
- The vaccine manufacturers’ package inserts contain biased industry claims.

5. There is no proof that vaccinations are safe or effective.

- There are no control group studies.
- Authorities consider that “to not vaccinate” is unethical and have refused to study unvaccinated volunteers.
- Authorities who compile and report disease statistics work closely with and have a vested interest in companies that produce the vaccines.

6. Laws allow drug companies to violate the public trust.

- In private vaccine damage suits, information is revealed condemning vaccines as deadly.
- Vaccine manufacturers use “gag orders” as a leverage tool in vaccine damage legal settlements to restrict the plaintiff from disclosing to the public the truth about the dangerous nature of vaccines.

7. The National Childhood Vaccine Injury Act of 1987 is a pacifier.

- This compensation program pretends to acknowledge the existence of vaccine damage by making “right” the wrongs done. Nothing in this Act attempts to avert these adverse events from happening in the future.
- This Act is the result of vaccine producers pressuring the government to “immunize” them from private lawsuits.

8. Private insurance companies, which do the best liability studies, have abandoned coverage for damage to life and property due to:

- Acts of God
- Nuclear war and nuclear power plant accidents
- Vaccination

9. Vaccination is not emergency medicine.

- It is claimed that vaccines avert a possible future risk and yet people are pressured to decide on the spot.
- A doctor’s use of fear and intimidation to force compliance is not ethical.
- Vaccines are drugs with potential serious adverse reactions. Time and forethought should be given before a decision is made.

10. There is no law enforcing vaccination for babies or anyone else.

- Vaccination is linked with school attendance but is not compulsory. Exemptions from vaccinations, although restricted and monitored, are part of every state public health law and can be expanded by public pressure.
- Departments of Health, Education and the American Medical Association personnel profit from the sale of vaccines. They keep the existence of and details about exemptions relatively unknown.