



Key Points

- During 1960s, paralytic polio cases were caused by the vaccine itself
- Experts say most vaccines are contaminated with other organisms
- Natural immunity is strongly dependent on good nutrition
- Flu vaccine doesn't reduce mortality, hospitalizations, or serious complications in children
- Vaccinating pregnant women is a prescription for disaster
- Special plant extracts can boost immunity and fight off influenza

ASK DR. BLAYLOCK

- Can supplements lower your heart rate?
- What do you take for statin damage?

Vaccines: Understand the Dangers and Make Better Decisions

As we enter November, we are now at the height of the so-called flu season, which began back in October. Once the season begins, signs, posters, and fliers advertising the newest vaccines seem to proliferate like rabbits in springtime. Advertising has even expanded beyond simply promoting the vaccine. The latest ploy is to offer a free meal for anyone who gets his or her flu shot.

I've even noticed some supermarkets and pharmacies advertising flu shots all summer long. It has reached the point of insanity.

Of course, the purveyors of flu shots assure the public that the vaccine is perfectly safe and highly effective — a claim backed by the Centers for Disease Control and Prevention (CDC), various medical societies, public health departments, and most likely your own doctor.

But is that claim true?

In this month's issue of The Blaylock Wellness Report, I'll review some of the things you need to know about the flu vaccine and about vaccines in general. Even though state and federal laws require some vaccinations before a child can enter public school, whether or not you or your children should be vaccinated is a personal decision. And I'm a firm believer in informed consent — something the government and health agencies are increasingly opposed to.

True History About Vaccines

It may surprise you to know that most physicians know very little about vaccines. They don't really know what's in them or understand how they work, the complications associated with their use, their efficacy (do vaccines actually work?) or most importantly, their effects on the nervous system.

When I was in medical school, we were not taught about these aspects of vaccines. Rather, like most of our professors we just assumed they worked, that they were safe, and that they were necessary. We were also taught that vaccines played the primary role in combating infectious diseases and preventing death from common infections.

Most medical professionals and virtually all of the lay public assume

that smallpox and polio were eradicated by vaccines. In fact, that theory forms the basis of most people's faith in vaccines.

But a number of studies have shown that the occurrence of major infectious diseases was dropping drastically before vaccines were being administered. For example, both the incidence and death rates from measles, mumps, smallpox, and polio fell 80 percent to 90 percent even before vaccines were developed.¹

In fact, death from measles fell continuously from 1912 until 1960, and didn't fall significantly further when the vaccine was introduced. Today, death from measles in the United States is extremely rare.

What the fearmongers do is cite measles death rates in impoverished Third World countries to frighten parents in developed countries into getting their children vaccinated.

Two primary factors accounted for the decreased incidence and death rates from diseases: drastic improvement in public health measures (better nutrition, sanitation, and healthcare); and increased immunity (over time) as people contracted the diseases and produced antibodies. The result was that the diseases gradually and naturally subsided.

The proof behind that process is demonstrated by looking at various infectious diseases — such as yellow fever, cholera, tuberculosis, and plague — that killed millions of people in premodern societies. Vaccines had nothing to do with conquering these diseases. The

most important factor was improvement in public health, mainly sanitation.

It was only later that vaccine proponents took credit for conquering infectious diseases — that is, after the infections had already been controlled.

Trouble With Polio Vaccines

Likewise, most people assume polio was conquered by the vaccines developed by Jonas Salk and Albert Sabin. But careful studies have shown that the rates of paralysis caused by the polio virus fell drastically in areas where very few took the vaccine — even more than in countries where the vaccine was widely used.

These days, most people assume that everyone who became infected with the polio virus suffered from paralysis. The truth is that very few did.

I remember in the early 1950s, before the polio vaccine was developed, fear of the disease gripped our community. Yet in my school, only one person developed paralysis. Studies have shown that for most, the polio virus caused only a mild summer cold.

Then something changed that made the virus more virulent. Evidence points to widespread use of the pesticide DDT, which at that time was sprayed virtually everywhere. It has been proposed that DDT suppressed critical immune system components, or possibly weakened neurons in the brain stem and spinal cord.

During the 1960s, most cases of paralytic polio were caused by the vaccine itself. The Salk vaccine was

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discontinued because it was shown to contain live viruses, even though it was supposed to contain only inactivated viruses.

Even the later Sabin oral vaccine spread the polio infection because it was a live virus vaccine. Studies demonstrated that people who took the vaccine shed the virus in their stool for months afterward. They would have contaminated everyone they came into contact with.

In Africa today, every case of paralytic polio has been caused by the vaccine; several mothers have even been left paralyzed by their vaccinated children. The World Health Organization (WHO) — which along with Bill Gates led the way in instituting these vaccination programs — named this new paralytic disease vaccine-associated paralytic polio (VAAP).

Basically, poor people were being given a polio vaccine that had been outlawed in the United States because it caused paralysis in those who took it.

To make matters worse, the vaccines contained a cancer-causing virus called SV40, which came from the monkey kidney cells used to grow the virus.² It's estimated that more than 100 million people were infected by that cancer-causing virus, and that it is now being passed down to their offspring.

The SV40 virus has been linked to several cancers, including mesothelioma, brain tumors (medulloblastoma, choroid plexus papilloma, and ependymoma), and bone tumors.

Dangers From Contaminated Vaccines

If you think vaccines are now free of contaminants, think again. Experts on vaccine manufacturing admit that most of today's vaccines are contaminated with bacteria, mycoplasma, and viruses, as well as infectious DNA fragments from such organisms. A conference on vaccine contaminants found that the MMR (measles, mumps, rubella) vaccine contained retroviruses such as avian leukosis virus (ALV).

Flu vaccines are also contaminated with bacteria and viruses. One expert warned that all vaccines grown in birds' eggs — as many are — were heavily contaminated.

Other cells used for growing vaccine-directed viruses include monkey tissues, fibroblasts, cloned human cells, cells from aborted babies, and mashed bird embryos — all of which are known to contain numerous

Scaring the Public

As noted, every flu season signs pop up like dandelions telling people why they "need" to get their flu shots — especially in and around pharmacies and grocery stores. This stuff is all Madison Avenue hype.

For example, in 2004 the National Immunization Program devised a plan to promote vaccinations by spreading fear. They recommended a campaign that included:

Step 1: Planting seeds — seeds of fear — in people's minds early in the season by displaying posters, fliers and media campaign material.

Step 2: Pronouncements that the "new" flu strain "will be associated with severe illness and serious outcomes." Every year, we are told the myth of the "36,000 who die every year of the flu."

Step 3: Use of local and national "medical experts and public health authorities" to emphasize alarm and impart statewide concern.

Step 4: Release of reports through the media of alarm and fear that this season's flu will be especially severe and that many people will be susceptible.

Step 5: Most importantly, continued emphasis of the importance of vaccines.

contaminant viruses, bacteria, and mycoplasma.

The presence of DNA fragments from contaminant viruses is a real concern. Yet when asked if DNA fragments in vaccines could pose a risk to human health, one virologist answered, "I don't think so."

I don't know about you, but "I don't think so" is not a good enough answer for me.

The truth is that these DNA fragments can become incorporated in other viruses, creating new disease-causing organisms. They can even merge with human DNA.³

This is a special danger with live virus vaccines like the MMR vaccine. Scientists are also worried that these vaccines may contain prions (mad cow disease) and oncogenes — DNA fragments that can trigger cancers.

Despite what the CDC, the FDA, and vaccine manufacturers tell you, no vaccine is pure.

One of the best ways to detect hidden viruses is the polymerase chain reaction (PCR) test. But even that test can fail.

For example, one such test indicated a batch of

vaccine components was free of viruses. It was later found that the vaccine contained 106 viral particles that were missed by the PCR test.

Also keep in mind that when a vaccine manufacturer tests for viruses, the test includes only a limited number of organisms. Scientists know that there are thousands of viruses that have not yet been classified. Hence, they cannot be tested for.

Importance of Informed Consent

One of the most important principles in the patient-doctor relationship is informed consent. That means a doctor is supposed to fully inform his or her patient about any medical procedure, prescription, or vaccine. That includes how the treatment is supposed to work, any potential reactions or complications, and specific dangers, especially with regard to drugs and vaccines.

Unfortunately, such fully informed consent rarely occurs. In the case of drug prescriptions and vaccines, the obstacle to informed consent is often that doctors are not sufficiently familiar with the drug or vaccines. In addition, doctors are exposed to a great deal of deceptive and even fraudulent medical literature published by people with financial ties to pharmaceutical companies.

For instance, most doctors assume they understand vaccines. But careful questioning discloses that they know virtually nothing about how vaccines are manufactured, what they contain (including contaminants), and the effects a vaccine may have on various organs and tissues in the body.

Despite manufacturers' promises to remove mercury from vaccines, at least one form of the flu vaccine still contains thimerosal, a preservative that contains ethyl mercury — the most toxic form of mercury for the brain. Anything over 200 ppb (parts per billion) is considered toxic in adults, yet these vaccines contain 25,000 ppb.

That much mercury is bad enough for an adult. Now consider that 6-month-old babies are being given these vaccines. Because of their small body weights and the immaturity of their brains, it is infinitely more neurotoxic for children of that age.

Even the so-called thimerosal-free flu vaccine can contain up to 300 ppb of ethyl mercury.

More recently, studies have shown that many vaccines are contaminated with the herbicide

glyphosate (the main ingredient in Roundup), which can cause a number of nervous system disorders and has been linked to cancer.⁴

In addition, there is evidence linking glyphosate to autism spectrum disorders.

Dr. Stephanie Seneff, a research scientist at the Massachusetts Institute of Technology (MIT), who is an expert in glyphosate toxicity, was not shocked by this finding because glyphosate is linked to neurodevelopmental diseases — such as autism.

A recent analysis of several vaccines found significant levels of glyphosate in vaccines for MMR, DTaP (diphtheria, tetanus, pertussis), influenza, and hepatitis B, as well as pneumococcal vaccine (which is supposed to protect against pneumonia, meningitis, and sepsis). The concentration of glyphosate in the MMR II vaccine was 25 times higher than the other vaccines.

There is considerable evidence that glyphosate may alter the development of a child's brain.

Vaccines contain a number of other harmful chemicals, such as polysorbate 80, that can damage the blood-brain barrier and gut barrier. These barriers both protect the brain.

Advantages of Natural Immunity

In most cases, flu infections last from a few days to a week or two, depending on the health of a person's immune system. We know that immune system health is strongly dependent on nutrition, especially adequate intake of

- B vitamins
- Carotenoids (especially astaxanthins)
- Vitamin D3
- Vitamin C
- Flavonoids (from vegetables and some fruits)

Studies have shown that a single nutrient deficiency

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— such as vitamin B1 (thiamine) — can cause significant immune dysfunction.

Minerals — especially zinc, selenium, iron, and magnesium — also play an important role in immunity. These minerals are especially important for cellular immunity, which is also referred to as innate immunity.

Innate immunity — white blood cells — is the body's first line of defense. It is a general principle that if an infection can be prevented from entering the body, sickness is unlikely.

The lining of the respiratory passages (nasal passages, trachea, bronchi, and lungs) and the lining of the GI tract (from esophagus to anus) present major barriers to invading organisms.

There are special antibodies (IgA antibodies) on the mucus membranes of the respiratory passages and GI tract, along with an assortment of innate immune cells, particularly macrophages and monocytes. Those are the foot soldiers that prevent an attack. If they are kept strong with proper nutrition, they can potentially keep a person from ever getting sick.

But if infectious organisms breach those barriers and enter the bloodstream, then other innate immune cells kick in to fight them off.^{5,6} If that is successful, an illness will be mild and short-lived.

Antibodies (the body's adaptive immune branch) come relatively late to the fight against infection, assisting the innate immune system in killing off the invaders. But importantly, the antibodies provide a record of the infection, mainly by classifying the invading organism for later identification (immune memory).

If the same organism enters the body again, these memory cells can launch a rapid attack and prevent infection.

Vaccines only address the adaptive system, and have been shown to inhibit immune memory. That's why vaccination needs to be repeated while natural immunity is usually permanent.

Vaccine-induced immunity lasts 10 years at best. Natural infections usually provide a person with lifelong immunity against a particular infectious organism.

One of the main problems with vaccines is that immune-enhancing compounds are added to prolong and intensify the immune reaction that they cause. These compounds are called immune adjuvants.

The most commonly used immune adjuvants are

aluminum compounds such as aluminum hydroxide and aluminum phosphate.

Recently, a special fat called squalene has also been used. Squalene has been linked to Gulf War syndrome, which crippled and killed thousands of soldiers.

Other oils are frequently added to vaccines and some have been strongly linked to food allergies, such as peanut allergies.

Unlike natural immunity, vaccines activate the immune system to switch to what is called TH2 immunity, which ironically increases the risk of infection as well as the risk of developing an autoimmune disease such as asthma, arthritis, or Type 1 diabetes. Once the vaccine schedule was expanded, we began to see a dramatic increase in autoimmune diseases, especially among children.

This also explains the increased risk of infection for the first few weeks after a vaccination, such as we see with the HiB vaccine. In fact, the CDC warns that children vaccinated for HiB face greater risk of the very disease the vaccine was given to prevent — haemophilus influenzae meningitis — during the first few weeks after “inoculation.”

More recently, it was discovered that the combination of components in the MMR vaccine actually increases the risk of children developing a measles infection. (The measles component of MMR vaccine is more virulent than a natural infection.)

It was also disclosed during the phony H1N1 (swine flu) “pandemic” that the vaccine against the virus actually worsened the risk of contracting an H1N1 infection — and made the infection deadlier.^{7,8}

That phenomenon was then repeated in the laboratory.⁹

It's not natural for a person to be exposed to two or more serious communicable diseases at the same time. Yet children are exposed to as many as 11 vaccine doses in a single office visit, up to a total of 26 doses by age 18 months.

By age 18, a person who follows the recommendations of CDC and public health departments is exposed to some 69 doses of vaccine adjuvants and antigens. That's comparable to enduring a chronic infection for their entire childhoods.

With natural infections, we see a balanced interaction between the innate and adaptive immune systems. But with vaccines, we see a lopsided immune

reaction, and as a result we see suppression of the innate immune system. That puts a person at risk for not only worse infections, but cancer as well.

The Grand Deception

Influenza viruses frequently mutate — a process called antigenic drift. That's why each year vaccine makers have to develop new flu vaccines. Unfortunately, in some years they pick the wrong strain of the virus.

When that occurs, the vaccine is completely worthless against infection — but still carries all the complication risks of any other vaccine.

This year, the CDC is not recommending the nasal flu vaccine. Their excuse is that it is less effective, which is true.

But it has also been connected with a number of deaths of children, and has been linked to inflammation of the respiratory passages and asthma.

Such a live virus should never be sprayed into the nose because it will be carried by the olfactory nerves directly to the brain (specifically the hippocampus, amygdala, and prefrontal cortex), causing damage to brain cells.

The CDC recommends either the trivalent or quadrivalent flu vaccines for this season. The trivalent form covers three strains of the flu virus — H1N1, H3N2 and a type B flu virus. The quadrivalent has two strains of type A and two of type B flu viruses.

It's important to understand that the CDC and public health departments do not perform widespread testing of viral strains. In fact, during the majority of flu seasons, more than 90 percent of infections are caused by viruses other than the vaccination strain. This is a grand deception by the CDC and public health.

It is also perpetrated, mostly unknowingly, by the medical profession.

If you read the material on the CDC site, you will see that they call these infections “influenza-like”

illnesses — meaning they include every kind of viral infection and not just flu viruses.

Is the Flu Vaccine Effective?

For the last several flu seasons, the CDC and public health departments have been recommending vaccines for all children as old as 6 months. In my estimation, that is practically criminal.

In an extensive review of vaccine studies, researchers found that the flu vaccine offered no benefit for children younger than age 2.¹⁰ It did not reduce mortality, hospitalizations, or serious complications in vaccinated children, and it did not reduce spread of the virus.

Those are the exact justifications doctors and the media use for mass vaccination of children.

Worse yet, the vaccine actually increased children's risk of contracting a viral respiratory infection.

The Cochrane Organization — a group of researchers who examine medical research and have no connection to the vaccine industry — reviewed 51 studies involving 260,000 children vaccinated with the flu vaccine. They found that for children younger than 2, the vaccine was no more effective than a placebo.¹¹

In older children, vaccination was 33 percent effective with the live virus vaccine, and 36 percent effective with the inactivated virus vaccine (the vaccine recommended today). But that means 64 percent of vaccinated children got no protection while being exposed to the possible complications of being vaccinated.

Other studies have confirmed these findings.^{12,13}

In addition, research has shown that children who are vaccinated with the currently recommended flu vaccine were significantly more likely to be hospitalized.¹⁴

The human brain undergoes extensive development in the first two years of life. By age 6, 80 percent of the

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brain is formed. But that means it still has 20 percent more development to complete.

Compelling research now shows that stimulating the immune system with the types of adjuvants and other materials used in vaccines (including aluminum, squalene, and mercury) can severely alter the development of the brain, resulting in speech, learning, and behavioral defects.¹⁵⁻¹⁷

I have published several papers on the mechanisms involved in vaccine-induced abnormal brain development.¹⁸⁻²²

Defenders of vaccinating young children argue that the flu vaccine is an effective way to prevent seasonal flu infections. But as noted, for those below age 2, the vaccine has no effectiveness, and it is mostly ineffective for older children.

The problem is that unlike natural infections, vaccines can deposit immunoexcitotoxic amounts of aluminum in the brain that stay there for a long time. In addition, vaccines cause prolonged immune activation in the brain (up to two years after vaccination). And other toxic components of vaccines — including viral and DNA fragments — endanger the brain for a lifetime.

Only a small percentage of children would contract the flu without vaccination. A far greater number will be affected by immune stimulation, depending on how many are vaccinated.

Despite all this evidence, the CDC and American Academy of Pediatrics are calling for 100 percent of children to be vaccinated each season, starting at age 6 months.

Vaccinating Pregnant Women: Prescription for Disaster

There is extensive evidence that stimulating a woman's immune system cytokine production during pregnancy results in abnormal development of the baby's brain, and increases the likelihood of neurological disorders — including depression, anxiety, and other behavioral disorders — later in life.¹⁵⁻¹⁸

Stimulating the mother's immune system during pregnancy also dramatically increases the risk of the child developing autism or schizophrenia early in life.

But it's important to understand that it's not the infectious organism (the virus) causing these problems. It's the mother's own immune system.

A recently published CDC-funded study reported in the medical journal "Vaccine" found that women who followed the CDC's advice to have a flu vaccine with each pregnancy had a 400 percent increase in the rate of spontaneous miscarriage compared to unvaccinated women.²³

It has also been shown that the flu vaccine causes significant inflammation in a pregnant woman, leading to brain inflammation in the baby — which leads to immunoexcitotoxicity and abnormal development of the baby's brain.

For all of these reasons, until quite recently it was accepted that a pregnant woman should never be vaccinated. Yet today, there is a campaign to vaccinate 100 percent of pregnant women.

The thinking behind this campaign is that reducing flu infections during pregnancy lowers the risk of a child developing autism or schizophrenia later in life. The problem with this idea is that flu infections in pregnant women are quite rare.

In fact, each flu season the number of people actually infected with the virus is quite small — 5 percent to 10 percent of adults. Most winter infections involve viruses not affected by the flu vaccine. That means the number of women at risk from the flu during pregnancy is probably less than 1 percent. And the vaccine itself has been shown to be no more than 30 percent to 40 percent effective in adults — at best.

But if you vaccinate 100 percent of pregnant women, you will dramatically stimulate immune cytokines in all of them. Only time will tell if there will be a dramatic increase in schizophrenia and autism because of this insane policy.

It has also been shown that children's first exposure to the flu virus through a natural infection improves their immune defense against subsequent flu infections, and aids the development of their immune systems.

On the other hand, it has been shown that giving the flu vaccine to a child each year significantly increases the child's — or later, the adult's — risk of contracting a flu infection and having a more severe infection. The reason is that the flu vaccine suppresses protective immunity and interferes with immune memory.

Studies: Flu Vaccines Don't Benefit Adults

Most doctors get their vaccine information from the CDC, which they assume is a reliable, highly scientific,

independent agency that has the best interests of the public in mind.

Nothing could be further from the truth.

The CDC is one of the most corrupt arms of the federal government. It owns more than 20 patents on vaccines and according to activist and author Robert F. Kennedy Jr., the CDC makes \$4.6 billion in profits from vaccine sales per year.

Pharmaceutical companies virtually own the CDC.

This corruption also extends to medical insurance companies. For example, Blue Cross Blue Shield financially punishes pediatricians who do not fully vaccinate their patients.

Dr. Paul Thomas has explained that his medical practice is rated by his insurance company for vaccine compliance, and that pediatricians are given substantial rewards for each child fully vaccinated on the CDC schedule. Conversely, the doctors are punished if they do not follow the schedule.

Pediatricians are paid \$12 to \$14 per shot. That becomes a large part of the doctor's income. This explains why they get angry when mothers refuse to follow their vaccine recommendations.

Dr. Thomas estimated that by not following the CDC recommendations, he has lost more than \$1 million dollars in payments.

One of the most impressive academic reviews on vaccines was reported in the "Archives of Internal Medicine." It looked at studies covering 33 flu seasons over 20 years involving people in multiple communities.²⁴

In 1980, only about 15 percent of elderly people received the flu vaccine. By 2001, about 65 percent got the vaccine.

You would have expected to see fewer deaths from the flu, as well as hospitalization, incidences of pneumonia, and loss work. But the review found no benefit from the vaccine in any of these areas. Other studies have confirmed and extended these findings.²⁵

Another study, reported in the "New England Journal of Medicine," was designed to see if vaccinating school children would reduce the spread of flu throughout the community. What the researchers found surprised them.²⁶

In the schools where the children were vaccinated, they saw significantly more hospitalizations from flu infections in both children and adults living in the

same households. The unvaccinated children and adults did much better.

Overall, for elderly people living at home, the vaccine provides zero protection against getting the flu or developing pneumonia, the major cause of flu-related hospitalization and death.

It has also been shown that people who never get the flu vaccine are better protected against the flu when they are older than those who get yearly flu vaccines.

One study even found that people who receive the trivalent flu vaccine are four to five times more likely to contract non-flu infections than those who do not get vaccinated.

I recently wrote a paper in which I demonstrated the link between excessive vaccination and behavioral problems and neurodegeneration in adults. It is now accepted that inflammation of the brain plays a major role in behavioral disorders associated with aging, such as:

- Depression
- Anxiety
- Panic attacks
- Confusion
- Obsessive-compulsive disorder
- Suicidal tendencies

Excitotoxicity is linked to inflammation (immunoexcitotoxicity) and is also a major player in these behavioral disorders. As more adult vaccines are added to the schedule, I predict that more elderly people will suffer from these disorders.

And what about the claim by the CDC that 36,000 (sometimes said to be as high as 49,000) people die each year from the flu? Those numbers were created out of thin air — mainly to scare the public into getting the vaccine.

The actual reported number of influenza deaths per year varies from a few hundred to as high as 2,000, and in most of those cases the person suffered from a chronic illness or other immune-suppressing condition.

A person who eats a healthy diet, exercises regularly, gets enough sleep, and takes a few immune-strengthening natural supplements is extremely unlikely to develop any complication or die from the flu. Even the chronically ill can be protected in most cases by nutrition and immune-strengthening compounds.

Important Books and a Video on Vaccines

The Vaccine Safety Manuel for Concerned Families and Health Practitioners by Neil Z. Miller. This is an extensive review of all the major vaccines along with analysis of numerous studies. I wrote the foreword to the book.

Miller's Review of Critical Vaccine Studies by Neil Z. Miller. This book contains all the major studies concerning vaccine safety and effectiveness. Each of the studies is analyzed for the major findings.

Saying No to Vaccines: A Resource Guide for All Ages by Sherri Tenpenny, D.O. Sherri is one of the leading experts on vaccine safety and has written an excellent

guide and analysis on vaccine safety.

Vaccine Whistleblower: Exposing Autism Research Fraud at the CDC by Kevin Barry, Esq. This book exposes how the CDC purposefully covered up data that proved a link between certain vaccines and autism.

A Shot in the Dark by Harris L. Coulter and Barbara Loe Fisher. This is the book that started the investigation into vaccine safety. It mainly discusses the danger of the pertussis vaccine, but also demonstrates how scientific fraud works.

Thimerosal: Let the Science Speak by Robert F. Kennedy, Jr.

This book discusses all the major information, based on the best science, concerning the harmful effect of thimerosal, the mercury-containing additive in vaccines.

Dissolving Illusions: Disease, Vaccines, and the Forgotten History by Suzanne Humphries, M.D., and Roman Bystianyk. This book is a treasury of information and history of infectious diseases and vaccines by a recognized expert in the field.

The Truth About Vaccines. In this seven-episode set of DVDs, prominent experts of vaccine safety are interviewed. Comes with a written transcript. It is excellent. It is hosted by Ty Bollinger.

Better Ways to Prevent and Treat the Flu

Virtually everyone agrees that a healthy immune system is the key to preventing infectious diseases. We all know people who never seem to get sick, no matter how often they are exposed to sickness.

Of course, some people are just born with powerful, well-balanced immune systems. But unfortunately, we've seen a massive increase in immune disorders over the course of the last 30 years — mainly because of the dramatic increase in vaccinations, especially given early in life.

The incidence in autoimmune diseases, such as asthma, lupus, MS, Type 1 diabetes, and rheumatoid arthritis has skyrocketed. Developmental disorders involving the brain have similarly increased, especially among younger people.

It is now recognized that people with a personal or family history of autoimmune disorders are at a higher risk of developing an autoimmune disease following vaccinations — especially combined, repeated, closely spaced vaccines.

In most studies, vaccines do not protect these people anyway. A healthy diet, regular exercise, adequate sleep, and use of immune modulating natural compounds will offer not only protection against infections, but also help control autoimmune diseases.

And it's critically important for a person to maintain good colon health with fiber, flavonoids, and probiotics, because 80 percent of the immune system resides in the intestines.

One way to prevent influenza and other infections is to take special plant extracts that selectively stimulate the innate immune system (cellular immunity).

The one I use most often is beta 1,3/1,6 glucan, which is extracted from the cell wall of yeast and highly purified. But be aware that cheap, poorly manufactured brands should not be used.

If I am around someone with a viral infection, I usually take 500 mg of beta-glucan on an empty stomach and repeat it for two more days. If I get an infection, I take the same dose, and never take anything that might lower my fever.

Instead, I do what was always done when I was growing up: bundle up in a sweatshirt and blankets and sweat it out. This is the fastest, most effective way to overcome a viral infection.

If your temperature rises above 104 degrees, use a cool, wet cloth to lower it to around 100 to 102.

One of the worst things you can do is take a fever-lowering medication like ibuprofen or acetaminophen, which actually impair immunity and increase your risk of severe complications, even death.

For example, one study found that measles infections in African children led to 7 percent mortality if no fever-reducers were administered. But the mortality rose to an astounding 35 percent in children given fever-reducers. That's a fivefold increase.

Viruses are sensitive to heat. It helps kill them. Acetaminophen (Tylenol) is a liver toxin that drastically lowers levels of glutathione — one of the body's major protective molecules. That drug should never be given to children or babies.

Multivitamin/mineral supplements are necessary to keep nutrient levels up. Even a single deficiency of vitamins and/or minerals can result in immune problems.

Vitamin C has potent antiviral effects and prevents dangerous cytokine storms that are responsible for death in some people infected with flu viruses.

Vitamin D3 is a powerful immune modulator. If the immune system is underactive, it boosts function; and if overactive, it calms function down. In addition, it contains special bacteria- and virus-killing substances called antibacterial peptides.

Subclinical deficiencies of vitamin D3 are very common, especially in dark-skinned people. It is a good idea to have a blood test done. Levels should be between 65 ng/mL and 100 ng/mL. A dose of 2,000 IU of vitamin D3 each day can raise blood levels. I take 5,000 IU a day. Selenium, zinc, and magnesium are also essential for immune health.

Several plant flavonoids have demonstrated antiviral effectiveness, as well as enhancing the ability of the immune system to combat viruses and bacteria. EGCG, a compound found in white and green tea, has been shown to inhibit flu virus replication. The highest concentration of EGCG (94 percent) is found in a product call Teavago. In rare instances, EGCG had been associated with reversible liver failure.

Grapeseed extract has been shown to activate Th1 immunity, which is the most effective type of immunity against viruses and bacteria.²⁷ Astaxanthin has been shown to restore immunity in elderly people. It also improved immune cell function.²⁸

Another interesting compound is olive leaf extract, which has anti-inflammatory, antioxidant, anticancer, antimicrobial, and antiviral benefits.²⁹ It also has powerful effects against a number of common viruses, including:

- Herpes
- Hepatitis
- Rotavirus
- Bovine rhinovirus
- Feline leukemia
- Parainfluenza

Hesperidin and hawthorn both modulate immunity, reduce inflammation, and have antiviral activity.

Curcumin and quercetin both reduce inflammation and improve resistance to infectious diseases of various kinds. Quercetin was also shown to significantly reduce upper respiratory infections after intense exercise.³⁰

Resveratrol has potent antiviral activity against several human viruses, including influenza, hepatitis C, varicella zoster (shingles), Epstein-Barr, herpes simplex, rhinovirus (cold virus), and HIV.^{31,32}

Silymarin also has antiviral activity.

N-acetyl-L cysteine (NAC) boosts cellular glutathione levels, as will curcumin and many other flavonoids.

Naringenin, a flavonoid from grapefruits, reduces acetaminophen toxicity.

A recent study found that hand washing and other common sense hygiene methods were more effective against spreading flu viruses than taking the flu vaccine.³³ Careful attention to hand washing and covering your mouth when coughing is important. Frequently touched surfaces can be sterilized using safe disinfectants. ■

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Ask Dr. Blaylock

Attention Readers:

Dr. Blaylock welcomes any questions or comments you would like to share.

Each month, he will select a few to be published and answered in the newsletter.

Please remember that he cannot answer every question.

When submitting a question or comment, please include full name, city, and state.

Please e-mail the doctor at: askblaylock@newsmax.com.

Can Supplements Lower Heart Rate?

Q: I corrected Type 2 diabetes by improving my diet, exercising, and taking berberine, quercetin, turmeric, R-lipoic acid, vitamins D3 and E, and taurine. Unfortunately, I have developed a low heart rate. Could those supplements contribute to a low heart rate?

— Ed R., Dana Point, Calif.

A: If you have no symptoms with your low heart rate, in most cases there is no problem. Some people just have a low heart rate.

Dizziness upon standing or weakness on exertion may signify problems. Exercise can help and in some cases elastic support hose solves the problem. Extreme salt-free diets can cause this problem and should be avoided.

What Will Keep Herpes at Bay?

Q: Can the herpes simplex virus wreak havoc on the body without signs of lesions? What can I take on the plant side to keep this at bay?

— Kris K., San Diego, Calif.

A: Any virus can become latent and hidden. Most such viruses can be suppressed by keeping the immune system strong.

Supplementing with beta-glucan, olive leaf extract, and other immune-stimulant extracts can keep these viruses in latency.

L-lysine in a dose of 500 mg three times a day taken on an empty stomach can also accomplish the same thing. Together they are even more effective.

A number of flavonoids, as I have described in this issue of The Blaylock Wellness Report, also have antiviral activity.

Which Derma Cream Should I Use?

Q: Which Derma E cream do you mix with 800 mg of silymarin powder to make your silymarin cream? Can this cream be used daily as a sunscreen SPF cream for face and body? What are potential side effects for using this cream topically?

— Martha T., Washington, D.C.

A: I use the Derma E Vitamin E Intensive Therapy Body Lotion and mix 800 mg of silymarin with jojoba oil. Mix well and then combine with the Derma E lotion.

The only side effect would be an allergic skin reaction, so it might be helpful to apply to a small area on the forearm first to see if you react. Reactions are rare.

Can I Take Iron With Parkinson's?

Q: I am 75 and have been diagnosed with essential tremor and/or the beginnings of Parkinson's. In January, I was diagnosed with extreme anemia. I have been on an iron supplement since. You have written to avoid iron supplement with Parkinson's. What do you suggest?

— Lisa L., Sacramento, Calif.

A: I have written that Parkinson's patients should only avoid iron supplements if they have normal or elevated iron levels.

If you have documented iron deficiency like extreme anemia, you need to take iron. However, your doctor should monitor it closely to make sure you do not accumulate an excess amount.

Very low iron levels can worsen your problem by causing high levels of free radicals to be generated and suppresses immunity.

Is the New Meningitis Vaccine Good?

Q: I took my grandson to the doctor and they were pushing for the latest meningitis vaccine. He is 16 years old and has Asperger syndrome. Will you tell me more about the “new” vaccine?

— Debra S., Rocky River, Ohio

A: Because those with autism spectrum disorders (like Asperger syndrome) have persistent brain inflammation, vaccination could significantly worsen neurological problems.

Meningitis is only a problem in those with weakened immune systems and those who are engaged in behaviors that weaken immunity.

Periodic use of olive leaf extract or beta-glucan (taken once every two weeks) and paying close attention to your overall nutrition is the best protection against meningitis.

What Do You Take for Statin Damage?

Q: There’s a ton of warnings about statins, but

nothing on what to do if you’ve been harmed by them. A friend of mine who used to be very strong, is now almost a weakling because of them. Do you have any suggestions?

— Per S., Fairfield, Iowa

A: Statins can cause degeneration of muscle fibers and cause permanent weakness.

It is thought that the problem is that statins block the formation of CoQ10 in the body and this results in severe weakness of muscles and eventual degeneration of muscle.

High dose CoQ10 (in an oil base or mixed with extra virgin olive oil), somewhere around 600 mg three times a day may help.

In addition, PQQ, curcumin, B vitamins, buffered vitamin C, vitamins K1 and K2, riboflavin-5-phosphate (50 mg three times a day) and niacinamide (500 mg twice a day), will increase muscle mitochondrial energy generation.

Acetyl-L carnitine in a dose of 500 mg three times a day also increases energy production. ■

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About Dr. Blaylock

Dr. Russell Blaylock is a nationally recognized, board-certified neurosurgeon, health practitioner, author, and lecturer. He attended the Louisiana State University School of Medicine in New Orleans and completed his internship and neurosurgical residency at the Medical University of South Carolina in Charleston, S.C. For 25 years, he has practiced neurosurgery in addition to having a nutritional practice. He recently retired from his neurosurgical duties to devote his full attention to nutritional studies and research. Dr. Blaylock has authored multiple books on nutrition and wellness, including “Excitotoxins: The Taste That Kills,” “Health and Nutrition Secrets That Can Save Your Life,” “Natural Strategies for Cancer Patients,” “Cellular and Molecular Biology of Autism Spectrum Disorders,” edited by Anna Strunecka, and his most recent work, “Dr. Blaylock’s Prescriptions for Natural Health.” An in-demand guest for radio and television programs, he lectures extensively to both lay and professional medical audiences on a variety of nutrition related subjects.

He is the 2004 recipient of the Integrity in Science Award granted by the Weston A. Price Foundation. He serves as an assistant editor-in-chief for the journal “Surgical Neurology International.” He was also a lecturer for the Foundation on Anti-Aging and Regenerative Medicine. At present, he is a reviewer for the journal “Food & Chemical Toxicology” and other journals.

Dr. Blaylock previously served as clinical assistant professor of neurosurgery at the University of Mississippi Medical Center in Jackson, Miss.

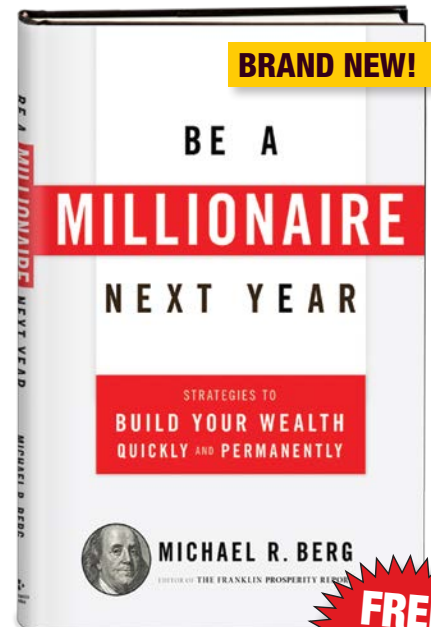
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