

# vScience Bites Radio

*small bites you can remember  
to bite them in the behind*

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## Influenza and Influenza Vaccines – PART 1 (full course on INFLUENZA available at [www.VaccineU.com](http://www.VaccineU.com) )

### 1. The Illness

I think most people are familiar with the symptoms of flu:

- Sudden onset of chills, headache, weakness, aches and pains, sore throat, swollen glands, painful eye movements, and loss of appetite. The fever can be high.
- When the acute symptoms begin to resolve over 3-5 days, a dry hacking and protracted cough may remain for weeks.

There are two things that are important: 1) the primary difference between a sinus infection or cold and influenza is that influenza is usually in the lungs, and has deep body aches where a cold or sinus infection – or allergies – are primarily in your head – and #2 – INFLUENZA IS CAUSED BY INFLUENZA VIRUSES....and it is a **respiratory illness**. If you have vomiting, diarrhea or other gastrointestinal complaints, you may call this “the flu” – but it is not. And flu shots would not prevent this...which we will go into more detail in a few minutes.

### 2. The history of the vaccine

Influenza viruses were first isolated in the late 1920s. Scientists were working tirelessly to find a preventive vaccine for influenza, after experiencing the Great Influenza Epidemic of the 1915-1918.

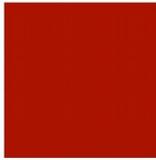
If you read my book, FOWL, you know that I attributed to the massive number of deaths to chemical warfare combined with “garden variety influenza viruses” – it took me months to find the references that connected the dots, but hence, I digress!

The first live virus influenza vaccine was tested on ferrets in 1936...and it wasn't long after that when influenza viruses began to be grown in embryonated eggs....which continues to this very day.

Selecting the three – now four - viruses that go into each year's flu shot among the hundreds of strains and substrains is nothing more than an educated guess. And THEN that virus must grow well in eggs....or it is mixed with an influenza virus

strain that DOES grow well in eggs. The resultant virus...., well, it's man-made. How much it matches influenza viruses in circulation is a completely guess!

**How prevalent is the flu? This is critically important! (I'll explain...)**



**Over 19 years, *only 15%* of all influenza-like illness was caused by influenza viruses.**

YEAR	Total Specimens Tested	Total Influenza Viruses Isolated	% swabs that were influenza	19 year average
1997-98	99,072	12,929	13.05	
1998-99	102,105	14,512	14.21	
1999-00	106,768	14,681	13.75	
2000-01	99,497	10,506	10.56	
2001-02	109,139	16,402	15.03	
2002-03	96,871	9,841	10.16	
2003-04	130,577	24,649	18.90	
2004-05	157,759	23,549	14.92	
2005-06	179,772	11,145	11.91	
2006-07	179,268	23,753	13.20	
2007-08	225,329	39,827	17.67	
2008-09	173,397	24,793	14.29	
2009-10	468,218	91,152	19.46	
2010-11	246,128	54,226	22.03	
2011-12	169,453	22,417	13.22	
2012-13	311,333	73,130	23.49	
2013-14	308,741	53,470	17.31	
2014-15	691,952	125,462	18.13	
2015-16	639,456	64,921	10.15	

**Source:**  
 CDC: Weekly Flu Activity & Surveillance Reports Oct.(wk 40) to May (wk 20) each year.  
<https://www.cdc.gov/flu/weekly> and MMWR summary reports for each year

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**15.34%**

Does all this mixing and matching do any good? Well a recent article says this:

**June 26, 2019 – Journal: Influenza (full text)**

<https://onlinelibrary.wiley.com/doi/full/10.1111/irv.12668>

“Co-circulation of different influenza types, subtypes, and strains has allowed for [rare] coincidental infection with more than one type or subtype of influenza. In addition, consecutive infection with influenza A and B viruses within a single season has been demonstrated....This case report suggests that an influenza virus can evade the immune response [antibodies] **vaccinated child** who was recently infected with a similar virus.”

**So, not only can you get sick with influenza viruses more than once, even if you’ve been vaccinated, but you have an 85% chance of having an ILI – even if you’re vaccinated. So, what good is a flu shot?**

**3. Problematic Ingredients**

Here is a SHORT LIST of some of the ingredients that can be found in various flu shots. In 2018, there were only SIX different brands left on the market – GSK is cannibalizing its competitors.

We talked about problematic ingredients before, in July's vScienceBites – so you can look at these details in the archives –**OR better!** – go to [www. VaccineU.com](http://www.VaccineU.com) and purchase the 7-part course on vaccine problematic ingredients. If you buy the bundle, you can save a significant amount of money!

- **Triton X100** – a detergent that breaks down into ethylene oxide, a KNOWN carcinogen
- **Polysorbate 80** – known to cause infertility in female mice
- **Formaldehyde** - known carcinogen by every govt agency that monitors chemicals
- **Gelatin – Fluzone**- known to cause allergic reactions
- **Latex** – in the stopper of many of the flu shots still have latex → allergies!
- **Thimerosal** – multidose flu shots still have mercury

Let's take a dive into TWO MORE studies that show the problems with vaccines – OF NOTE: The TenpennyResearchLibrary.com has >300 articles like this – on INFLUENZA alone. It is by far the largest single section in the library – and it grows all the time.

### **May 11, 2016 - Vaccine (abstract) “Analysis of VAERS July 1, 2013–May 31, 2015**

<http://www.sciencedirect.com/science/article/pii/S0264410X16300317>

Flu shots have always had three viruses. Beginning in 2013, they started adding a second serotype B virus to all flu shots, beginning with shots given to babies six months of age.

In this VAERS review of 1,828 reports in persons 6 months to 17 years of age, 1,265 reports **(69%) were considered to be severe**. There were large number of “typical” reports – fever, injection site swelling and extremity pain. However, there **were 12 deaths, six in children and six in adults**, but researchers wrote these off as a “non-cluster” and nothing to be concerned about. There were 19 reports of anaphylaxis and six were serious. There were 14 cases of GBS; 13 of those cases were considered to be serious.

And what was the Conclusion of the article? **Influenza vaccination is the best way to protect against influenza disease and its complications. The Quadrivalent vaccines provide protection. In our review of VAERS, we did not identify any safety concerns for IIV4 vaccination.**

**October 26, 2016 – Vaccine (full text) “Passive immunization for influenza through antibody therapies, a review of the pipeline, challenges and potential applications”**

<http://www.sciencedirect.com/science/article/pii/S0264410X16307447>

This article points out that all clinical trials to determine the safety of vaccines are conducted on “healthy” adults. They conclude the following:

**“While trials in healthy humans can provide evidence of efficacy, trials should also be conducted on at risk-populations, such as pregnant women, the elderly, children or persons with underlying chronic conditions especially the immunocompromised. Because pharmaceutical drugs are more likely to be taken by those in these groups, demonstrating efficacy and safety in these populations is important as **they may not respond the same as healthy adults.**”**

But what groups have flu shots most pushed on them to take?

Pregnant women, children, the elderly and those who are immunocompromised.