

vScience Bites
Radio with Robert Scott Bell
small bites you can remember
to bite them in the behind

Date: October 17, 2019
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GARDASIL
(go to www.VaccineU.com → Teen Vaccines → Gardasil Course)

1. The Illness

More than 200 papillomaviruses have been identified and completely sequenced. Of those, more than 150 are Human papilloma viruses. Nearly 40 types can be sexually transmitted and 15 types are considered to be oncogenic. The association between HPV and cervical infection has been extensively, starting in the 1970s.

Cervical HPV infections are extremely common over a life time. More than 90% of infections are asymptomatic and resolve spontaneously within two years. In fact, HPVs can be isolated from skin swabs and plucked hairs from normal individuals in the general population. Therefore, researchers admitted that, **“There are almost no truly uninfected women.”**

When a woman gets a pap test, the results come back listed as a staging. Stage 0, carcinoma in situ, CIN1 and cervical dysplasia are all synonyms for mildly abnormal cells growing on the surface of the cervix.

Human papilloma virus infection is necessary for the development of CIN and progression of CIN to CIN 2 and 3, BUT most of these infections clear spontaneously, without progression. In fact, progression to invasive cancer occurs in approximately 1% of CIN1 infections, about 5% in CIN2 and at least 12% of CIN3 infections.

Neoplasia is simply a word for abnormal cells. It is NOT a word that means cancer.

A **neoplasm** is a clump of abnormal cells that have coalesced into a tumor. The tumor MAY OR MAY NOT be cancer.

Therefore, this reinforces that Cervical Intra-epithelial NEOPLASIA is **a risk classification for abnormal cells** – it does not define the STAGE of a cancer.

2. The history of “HPV causes Cancer” myth

- Virtually all cervical cancers have been ASSOCIATED with human papilloma viruses, especially HPV 16.
- However, the majority of HPV-infected women with HPV **DO NOT** develop cervical cancer.
- Women *become susceptible* to developing cervical cancer following HPV infection WHEN the infection doesn't resolve on its own.
- **KEY: Environmental factors** are required for the infected cells to progress to cancer.

– **Most important:** smoking, BCP, multiple partners, POOR NUTRITION

REFERENCE: World Cancer Research Fund.

<https://www.wcrf.org/dietandcancer/cancer-trends/cervical-cancer-statistics>

Normally, I would talk here a bit about ingredients, side effects and risk factors. It's just too much to cover in 30 minutes. So, if you really want a thorough coverage of this topic, please go to VaccineU.com -> Gardasil. This is a 2-part module, more than 1 hour of information and at least 19 studies in your doc box.

>March 14, 2018 – Multiple Sclerosis Journal - “Two Cases of Pediatric Multiple Sclerosis after Human Papillomavirus Vaccination” - not an article.

This information was presented as a poster at the Americas Committee for Treatment and Research in Multiple Sclerosis (ACTRIMS) conference in 2018. When you go to this link, search the page for “Gardasil” to find the info.

<https://journals.sagepub.com/doi/full/10.1177/1352458517750967>

14-year-old male presented with left retro-orbital pain and blurry vision in the left eye, diagnosed with left optic neuritis. ...

17-year-old female presented with blurry vision in the right eye, diagnosed with right optic neuritis. MRI brain showed right frontal enhancing lesion.

The first dose of Gardasil was given two weeks prior to presentation. ... These 2 cases and the others that have been previously reported **suggest a temporal association between HPV vaccination and the onset of MS.** Although live, attenuated vaccines are generally not

recommended in MS patients, Gardasil is an inactivated and recombinant vaccine, and does not contain any viral DNA [which is NOT true].

>January 1, 2019 – British Medical Journal (BMJ) – “Ongoing inadequacy of quadrivalent HPV vaccine safety studies.” Full text
<https://ebm.bmj.com/content/early/2019/03/08/bmjebm-2018-111122.full>

FAULTY RESEARCH – This study slams the Cochrane Review, stating that the meta-analysis of Gardasil Data shows the vaccines is safe. It’s really worth reading. Here are a few excerpts:

“...Girls sero-negative and PCR negative to types 6, 11, 16 and 18 **at baseline** record the **highest** incidence of systemic adverse events, the **highest** proportion of ‘moderate to severe’ systemic adverse events and the **highest** incidence of headache compared with women who evidenced prior exposure to vaccine HPV types at baseline.

“....The studies referred to as Future I,⁴ Future II⁵ and Villa⁶ published trials. QHPV licensing failed to identify the additional presence of polysorbate 80 within their controls.... Injected polysorbate 80 is known to cause similar ovarian damage⁸... **The threshold dose for ovarian effects is not known.**

There are 19 vaccines that have polysorbate 80 or polysorbate 20:

<https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/b/excipient-table-2.pdf>

>July 2018 – Journal of Obstetrics and Gynecology – “Risk of Spontaneous Abortion After Inadvertent Human Papillomavirus Vaccination in Pregnancy.” FULL TEXT

https://journals.lww.com/greenjournal/Fulltext/2018/07000/Risk_of_Spontaneous_Abortion_After_Inadvertent.8.aspx

We reviewed records of women 12 to 27 years of age with a pregnancy between 2008 and 2014, compared risks for spontaneous abortion after Gardasil 4 in three exposure windows.

- 1) Distant: 16 to 22 wks before LMP – **4 to 5 months BEFORE getting pregnant**
- 2) Peri-pregnancy: within 6 wks before LMP- **4 to 6 wks BEFORE getting pregnant**
- 3) During pregnancy: **through 19 weeks of gestation.**

Findings:

- Distant exposure, **96 of 919 (10.4%)** experienced **spontaneous abortion.**
- Peri-pregnancy exposure, **110 of 986 (11.2%)** experienced **spontaneous abortion**
- During pregnancy, **77 of 895 (8.6%)** exper. **spontaneous abortion**
- (total of 283 babies...)

CONCLUSION: “In this observational cohort study, we found no association between Gardasil 4 exposure during or peripregnancy and risk of spontaneous abortion. {nothing mentioned about distant exposure}

This study supports current clinical practice, in which pregnancy testing is not routinely performed before vaccination.

In February 2015, the Gardasil 9 was released and recommended by ACIP to replace the Gardasil 4 vaccine. Therefore, in future work, **we will evaluate spontaneous abortion risk after inadvertent exposures with this new vaccine.**

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Reminder: GARDASIL

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Vaxxter.com – new feature – Monthly Book Review – today, HPV on Trial