



Elizabeth Hart <eliz.hart25@gmail.com>

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## Over-vaccination, 'legally valid consent', and conflicts of interest in vaccination policy - email to the Chair of the Medical Board of Australia

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Elizabeth Hart <eliz.hart25@gmail.com>

Mon, Sep 18, 2017 at 4:13 PM

To: kate.durie@ahpra.gov.au

Cc: Emily Mittrione <Emily.Mittrione@ahpra.gov.au>

### For the attention of:

Dr Joanna Flynn

Chair of the Medical Board of Australia

Dear Dr Flynn

### Re: Over-vaccination, 'legally valid consent', and conflicts of interest in vaccination policy

Recent media reports about Dr John Piesse raise important questions about doctors' responsibility to their patients, and the medical profession's duty to work in the best interests of the community.

Dr Flynn, writing in the *MJA* on the competency of doctors, you have said: ***"The opportunity now is for the medical profession to take responsibility, individually and collectively, for the future standards of medical practice in Australia. The board is seeking to work with the profession and the community to ensure that the high levels of trust and confidence that the Australian public has in doctors is based on an appropriate framework for ensuring the continuing competency of all those in practice."***

I suggest matters such as 'informed consent' before medical interventions, e.g. vaccination; and the proper acknowledgement and reporting of adverse events after vaccination are important ethical responsibilities for doctors. The medical profession as a whole should also consider the burgeoning number of vaccine products and revaccinations on the taxpayer-funded schedule - over-vaccination can also be added to the problems of over-diagnosis, over-prescribing, over-treatment and over-servicing by the medical profession. The medical profession must wake up to conflicts of interest in vaccination policy and practice; the questionable reliability and objectivity of information on vaccine safety; the pharmaceutical industry's influence over governments and the medical profession; and the influence of biased media and coercive vaccination lobby groups on vaccination policy.

There are now at least 46 doses of vaccines on the ever-expanding national vaccination schedule for children, including via combination vaccines and revaccinations. This does not include the dubious flu vaccinations we are all being pressured to have every year. These vaccine products are added to the schedule without any consultation with the community. Gross over-vaccination is occurring with this plethora of vaccine products. **The spotlight should be shone on the doctors' groups which have ill-served the community with their failure to question the burgeoning number of vaccine products and revaccinations being added to the taxpayer-funded schedule, and the conflicts of interest that undermine the legitimacy of the bloated schedule.**

**With the Australian Federal government's coercive No Jab, No Pay law there is a direct conflict with doctors' obligation to obtain legally valid consent before vaccination**, as outlined in *The Australian Immunisation Handbook*, e.g. for consent to be legally valid it must be given voluntarily in the absence of undue pressure, coercion or manipulation. The coercive No Jab, No Pay law also conflicts with advice on informed consent in *Good Medical Practice: A Code of Conduct for Doctors in Australia*. It is doctors' duty to serve their patients, but they now appear to have been co-opted as a police force to coerce parents into government-mandated medical interventions for their children, i.e. vaccination. **Is this ethical? What is AHPRA's stance on these anomalies in regards to legally valid consent? Has this been clarified for doctors and their clients?**

Vaccines are up on a pedestal as magic bullets to prevent disease, and these lucrative products are receiving what appears to be free advertising across the media. **But cracks in vaccination practice are starting to emerge, e.g. the failing pertussis/whooping cough vaccine and annual flu vaccines, and the emerging international scandal about the globally fast-tracked HPV vaccine products, a story which is being suppressed in Australia.** There is much misinformation being relayed to the public about the effectiveness of various vaccine products. **We should also be worried that the over-use of vaccine products could lead to similar problems as the over-use of antibiotics.** Unfortunately we do not appear to have much in the way of independent infectious diseases experts to objectively consider this matter.

**This also has to be viewed in regards to the 'big picture', i.e. the intrusion of the 'medical industrial complex' into our lives. As well as the over-vaccination epidemic and the antibiotic epidemic, also consider the opioid epidemic, the anti-depressant epidemic, the proton pump inhibitor epidemic etc, etc. Over-diagnosis, over-prescribing, over-treatment and over-servicing are serious problems in the medical industry.** Pharmaceutical companies seek to expand their markets for lucrative drugs and vaccines, and this is now becoming particularly sinister with the onset of government-mandated medical interventions, i.e. numerous vaccinations and the destruction of 'informed consent' before these interventions. The No Jab, No Pay law appears to have been obligingly established by the Australian government to make the community compliant to all the vaccine products in the vaccine industry's pipeline.

**The general public is unaware there are serious conflicts of interest in the Australian government's vaccination bureaucracy, with the group that 'recommends' vaccine products for the taxpayer-funded schedule, the Australian Technical Advisory Group on Immunisation, being heavily stacked with academics who have associations with the vaccine industry, e.g. via their participation in vaccine clinical trials, and funding to participate in vaccine conferences etc. There has been a reluctance to disclose these conflicts of interest.**

**Similarly the government 'regulator' of vaccine products, the Therapeutic Goods Administration, is conflicted. The TGA receives funding from industry to assess medical products, and appears to simply rubber-stamp industry data. Academics associated with industry are also influential at the TGA, e.g. on the TGA's Australian Influenza Vaccine Committee. The TGA's adverse events database appears to be mere window dressing, with little in the way of sincere follow-up of cases. The TGA acknowledges that adverse events are under-reported around the world, with estimates that 90-95% of adverse events are not reported to regulators.**

**With the onset of government-mandated vaccination, and in light of the conflicts of interest in vaccination policy, it's time for an urgent review of the taxpayer-funded vaccination schedule, and a moratorium on the addition of any new products or revaccinations.** An investigation should also be undertaken into relationships between governments, political parties and the pharmaceutical industry. An article by journalist Adele Ferguson, published in *The Sydney Morning Herald* in February 2010, illustrates the pharmaceutical industry's influence over government, and includes reference to the questionable implementation of Gardasil vaccination; the exploitation of the Pharmaceutical Benefits Scheme; and drug companies taking advantage of **"the revolving door between politics and other branches of the federal government and the industry"**. See Adele Ferguson's article: [The other drug war - the politics of big business, SMH, 27 Feb. 2010.](#)

**In recent years the Australian media appears to have given the pharmaceutical industry free rein, and has allowed the industry to hijack vaccination policy with no scrutiny.** It's astonishing that the Australian government's aggressive No Jab, No Pay vaccination policy has received little or no critical analysis by the medical profession, academia or the mainstream media, including the taxpayer-funded ABC and SBS. Instead, discussion on vaccination policy and practice has been dichotomised into vicious 'pro' and 'anti' arguments. This polarisation and marginalisation of citizens' valid concerns about vaccination policy and practice is exactly what the vaccine manufacturers want, facilitated by the supportive activities of the coercive vaccination lobby groups SAVN and Friends of Science in Medicine, the Murdoch media, the government and research-sector funded *The Conversation* website, and doctors' websites such as *MJA Insight* and *Medical Observer*. These groups should be brought to account for their deliberate hindrance and outright censorship of citizens' legitimate concerns about vaccination policy. **We urgently require more sophisticated and civilised discussion on vaccine hesitancy, and the impact of the bloated vaccination schedule on vaccine confidence in the community.**

**Dr Flynn, I request your response as to AHPRA's stance in regards to legally valid consent before vaccination and the conflict with the Australian government's coercive No Jab, No Pay law; and the medical profession's lack of scrutiny of the burgeoning and conflict-ridden national vaccination schedule.**

I have also forwarded a similar email to Mr Michael Gorton, Chair of the AHPRA Agency Management Committee.

**It is important these matters are considered from a legal and medical ethics perspective. The medical profession has so far failed to critically analyse conflicted vaccination policy and practice, and independent citizens such as myself and others have been left to investigate these matters. The failure to question the burgeoning vaccination schedule is a very poor reflection on the reliability and competency of the medical profession.**

For your information, please see attached two recent documents that provide more background, i.e.

- [Government-mandated over-vaccination in Australia - Time for citizens to demand transparency and accountability](#)
- [HPV vaccination - an emerging international scandal. An email to Irish Minister of State For Disability Issues, Finian McGrath](#)

My website [Over-vaccination.net](http://Over-vaccination.net) provides more information and links to correspondence re over-vaccination, see for example [my emails to Australia's Chief Medical Officer](#).

Please note this email will be circulated to other parties, this is a matter of public interest.

**I look forward to your response to this email, I would appreciate your careful consideration of the matters raised.**

Sincerely  
Elizabeth Hart  
[Over-vaccination.net](http://Over-vaccination.net)

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## 2 attachments



**Government-mandated over-vaccination in Australia.pdf**  
346K



**HPV Vaccination Scandal - email to Irish Minister Finian McGrath.pdf**  
139K