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No evidence for three doses of HPV vaccines

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Dr Jefferson and Professor Gøtzsche, further to my recent emails re high antibody titres after HPV vaccination (9 December 2016 and 29 November 2016).

I suggest this correspondence is relevant to your complaint to the European Medicines Agency (EMA) over maladministration at the EMA related to the safety of the HPV vaccines.

In my recent emails I expressed concern about the unnaturally high titres induced by the novel VLP HPV vaccines Gardasil and Cervarix.

Children around the world are being given three doses of these vaccine products.

In regards to the three dose HPV vaccine regimen, I recently contacted Professor Diane Harper, an author of the study re the bivalent HPV vaccine (i.e. Cervarix), published in The Lancet in 2004[1], to ask her if titres were measured after individual doses or after all three doses in that study.

I was surprised when Professor Harper responded that "The titers were measured one month after the third dose."[2]

Professor Harper's response indicates that titres were not measured after each individual dose.

So it appears it was not proven that three doses of Cervarix HPV vaccine were required.

In her email response to me, Professor Harper said: "The need for long-term protection drove the fear that three doses would be needed. As we learned one dose of cervarix provides high titers as well and has proven efficacy. It is unfortunate that the WHO would not recommend one dose of cervarix worldwide."

In regards to Professor Harper's statement "As we learned one dose of cervarix provides high titers...", another study re Cervarix, published in 2013[3] states: "Antibody levels following one-dose remained stable from month 6 through month 48. Results raise the possibility that even a single dose of HPV VLPs will induce long-term protection." This study was followed up with further analysis in 2015[4] which also indicates there is no evidence to support the three dose Cervarix HPV vaccine regimen.

It is shocking to discover there was no evidence to support the three dose HPV vaccine regimen.

In regards to unnaturally high titres after HPV vaccination, what are the possibly deleterious effects of revaccinating with multiple doses of novel, turbo-charged aluminium-adjuvanted VLP HPV vaccines, i.e. do repeat shots increase the risk of an adverse reaction? Is there any reliable data, including post-marketing surveillance, to check on this?

HPV vaccination has been fast-tracked around the world. Children are being given three doses of novel, turbocharged aluminium-adjuvanted VLP HPV vaccines which produce unnaturally high titres. Scientists such as Professor Harper admit "the mechanism of immunogenicity from a scientific perspective is poorly understood".[5] Children are being used as guinea pigs in a massive international experiment - is this ethical? What are the implications here in regards to informed consent?

While the studies I have referred to are about the Cervarix HPV vaccine, this leads to questions about the Gardasil HPV vaccine - what is the evidence supporting vaccination with three doses of the Gardasil HPV vaccine product?

Were three doses of HPV vaccines suggested to justify the cost of these vaccine products?

As for Professor Harper's suggestion that Cervarix "has proven efficacy", as far as I am aware, there is as yet no independent and objective systematic review of the efficacy of HPV vaccination in preventing cervical cancer, i.e. untainted by pharma influence or bias.

I suggest the public is being misled about the promoted 'efficacy' of globally fast-tracked HPV vaccination. At this time we have no idea of the long-term effects of this very questionable medical intervention, particularly if the risks will outweigh the touted benefits.

In my opinion the benefits of HPV vaccination are being over-hyped, and children and their parents are being grossly misinformed about HPV vaccination. At this time there is no independent and objective analysis validating HPV vaccination, and no scientific basis for the three dose regimen.

This is a massive international scandal.

Sincerely Elizabeth Hart https://over-vaccination.net/

References:

- 1. Diane M Harper et al. Efficacy of a bivalent L1 virus-like particle vaccine in prevention of infection with human papillomavirus types 16 and 18 in young women: a randomised controlled trial. Lancet. Vol. 364. November 13 2004. 2. Email response from Diane Harper, 11 December 2016.
- 3. Mahboobeh Safaeian et al. Durable Antibody Responses Following One Dose of the Bivalent Human Papillomavirus L1 Virus-Like Particle Vaccine in the Costa Rica Vaccine Trial. Cancer Prev Res; 6(11) November 2013.
- 4. Aimee R Kriemer et al. Efficacy of fewer than three doses of an HPV-16/18 AS04-adjuvanted vaccine: combined analysis of data from the Costa Rica Vaccine and PATRICIA trials. The Lancet Oncology Vol 16, July 2015.
- 5. Diane M Harper. Prophylactic human papillomavirus vaccines to prevent cervical cancer: review of the Phase II and III trials. Therapy (2008) 5(3), 313-324.