Vaccine Research Strategy: Comment for the IACC meeting on Feb 4, 2009.

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A working hypothesis and plan for vaccine research is needed. I propose:

Working hypothesis – vaccine injury may be similar to that caused by bilirubin.

Plan – (a) Review existing evidence on brain injury from toxic substances [1-14].

(b) Design experiments with mice, rats, and monkeys

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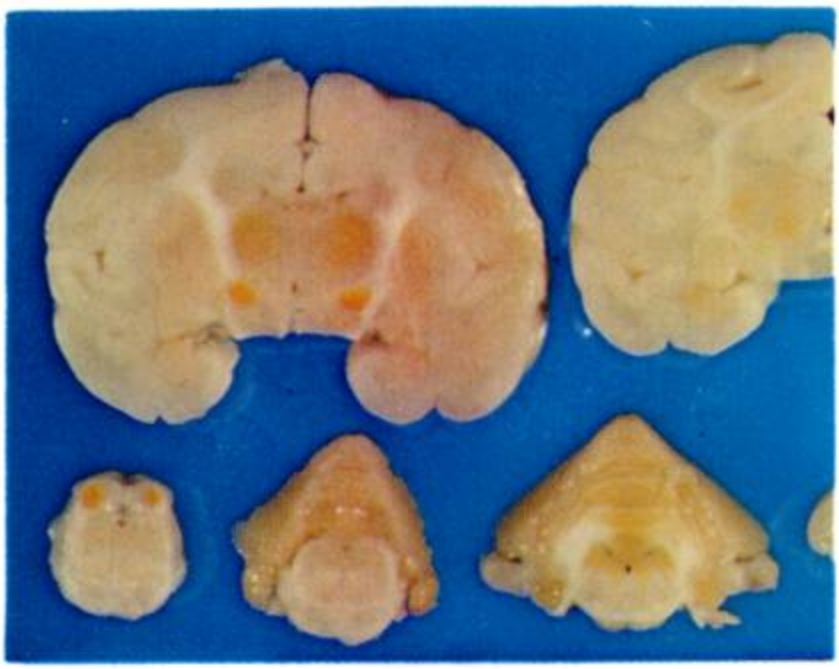
Bilirubin staining is not uniform throughout the brain.

Vaccine components are likely also more toxic to subcortical areas of high metabolic rate:



From: Lucey JF et al. Kernicterus in asphyxiated newborn monkeys. Exp Neurol 1964 Jan; 9(1):43-58.

Note: Bilirubin staining occurred only in subcortical nuclei of high metabolism and blood flow - like the inferior colliculi of the midbrain auditory pathway (lower left).

Not all children are injured by vaccinations, because injury likely results from two factors:

Note, not all children are injured by high bilirubin levels [15-17].

Bilirubin enters neurons following disruption of the blood-brain barrier [18-21].

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The blood-brain barrier is disrupted by ischemic anoxia [22, 23].

A baby slow to breathe at birth may suffer anoxic disruption of the blood-brain barrier.

The blood-brain barrier can also be disrupted by synthetic vitamin K, or antibiotics [24-27].

A baby treated with antibiotics may suffer toxic disruption of the blood-brain barrier.

References

Existing evidence on brain injury from toxic substances [1-14]

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Not all children are injured by high bilirubin levels [15-17]

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Bilirubin enters neurons following disruption of the blood-brain barrier [18-21]

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The blood-brain barrier is disrupted by ischemic anoxia [22, 23].

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The blood-brain barrier can also be disrupted by synthetic vitamin K, or antibiotics [24-29]

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