Dr Jefferson, further to my previous correspondence re HPV vaccination, (email dated 12 October 2016).

In a review paper published in 2010, Ian Frazer states:

"HPV immunization induces peak geometric mean antibody titers that are 80- to 100-fold higher than those observed following natural infection [19]. Furthermore, after 18 months, mean vaccine-induced antibody titers remain 10- to 16-fold higher than those recorded with natural infection [19], and these levels appear to be preserved over time, suggesting that immunization may provide long-term protection against infection..." (My emphasis.) (See page S9.)

HPV ‘immunization’ inducing antibody titres that are 80- to 100-fold higher than those observed following natural infection seems to be a very unnatural response.

Is this a good thing? Does anybody know?

Frazer's review paper is titled Measuring serum antibody to human papillomavirus following infection or vaccination, published in Gynecologic Oncology 118 (2010) S8-S11, and funded by Merck & Co. Inc. (see attached). His reference for his high antibody titre comment is a paper by 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, published in The Lancet, Vol 364 November 13, 2004, and funded and co-ordinated by GlaxoSmithKline Biologicals, (see attached).

In their paper Harper et al state:

"Geometric mean titres for vaccine-induced antibodies to HPV antibodies were over 80 and 100 times greater than those seen in natural infections with HPV-18 and HPV-16, respectively. Vaccine-induced titres remained substantially raised at 18 months, and were still 10-16 times higher than those seen in women with natural HPV-16 or HPV-18 infections, respectively." (My emphasis.) (See page 1763.)

And on page 1764:

"We have shown that the HPV-16/18 virus-like particle vaccine adjuvanted with AS04 induces a level of antibody production against HPV-16/18 that is much higher than that induced by natural infection. Previous work has shown that combinations of the adjuvants MPL and aluminium salts induce an enhanced immune response compared with antigen alone or adjuvanted with only aluminium, at both the humoral and cellular level. These findings suggest that the immune responses induced in vaccinated women may provide a longer duration of protection than the protective effects induced by natural HPV infection; however, a protective antibody level has not been established nor is there sufficient data currently available to estimate the duration of vaccine-induced protection." (My emphasis.)

Dr Jefferson, should we be concerned that HPV vaccines produce antibodies over 80 and 100 times greater than those seen in natural infections with HPV-18 and HPV-16 respectively, and which remain substantially raised months after vaccination?

I would appreciate your response on this matter.

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

2 attachments

Measuring serum antibody to human papillomavirus following infection or vaccination.pdf