Email to Cochrane & Co re HPV vaccination promotion in Nature / unnaturally high antibody titres induced by HPV vaccination

Elizabeth Hart <eliz.hart25@gmail.com>  
Mon, Jan 22, 2018 at 9:33 PM

To: Fiona Godlee <fgodlee@bmj.com>
Cc: Peter Doshi <pdoshi@bmj.com>, RICHARD LEHMAN <edgar.lehman@btopenworld.com>, Juliet Dobson <jdobson@bmj.com>, Sharon Davies <sdavies@bmj.com>

Dr Godlee, FYI, see below my recent email to Cochrane Nordic and associates.

It is now over a year since I brought to your attention the lack of evidence supporting multiple doses of HPV vaccines, the unnaturally high antibody titres induced by HPV vaccination, and other matters - see my correspondence on this webpage: https://over-vaccination.net/cochrane-collaboration/

Dr Godlee, in your email to me dated 15 February 2017 you advised you were "listening and acting" and that "the BMJ's associate editor Peter Doshi is actively investigating this issue and he and others will write about it as soon as he had completed his enquiries."

I have waited in good faith for The BMJ to act on this matter, and nearly a year after your email, nothing has transpired as far as I'm aware. Meanwhile girls and boys and their parents continue to be ill-informed about HPV vaccination.

Dr Godlee, you took it upon yourself not to publish most of the detailed comments I forwarded to The BMJ in response to Richard Lehman's blog article promoting HPV vaccination: https://elizabethhart.files.wordpress.com/2013/02/e-hart-unpublished-comments-re-hpv-vax-on-richard-lehmans-bmj-blog1.pdf

The comment you did publish was edited and published long after readers might have accessed the article by Richard Lehman, i.e. the delay in publishing the comment severely reduced the opportunity for it to be seen.

It is appalling that the community continues to be provided with misleading information about the effectiveness of the HPV vaccines, and not informed about the many uncertainties about these novel aluminium-adjuvanted vaccine products, e.g. the lack of evidence for multiple doses and the unnaturally high antibody titres induced by HPV vaccination.

I am stunned that there has been little or no apparent action on this matter, the community continues to be kept in the dark.

It seems to me there is a cover-up underway to protect the aluminium-adjuvanted HPV vaccine products, and this includes the failure to address Tom Jefferson et al's scientifically unsound review of aluminium and vaccine safety (2004) that I first raised with Tom Jefferson in March 2013, and subsequently with Peter Gotzsche and others: https://over-vaccination.net/aluminium-and-vaccine-safety/

The lack of action in regards to dealing with the fallout from this scientifically unsound review has also had consequences for the proliferation of other aluminium-adjuvanted vaccine products, e.g. the increasing number of doses of the failing acellular pertussis containing vaccines being added to vaccination schedules, and the questionable promotion of the Bexsero meningococcal B vaccine for a very rare disease.

Dr Godlee, you and Peter Doshi and others were copied on much of my correspondence regarding this review prepared by then members of the Cochrane Vaccines Field.

Please note that informed citizens such as myself, who are demanding transparency and accountability for vaccination policy and practice, are fed up with being exploited by the vaccine industry, and patronised and treated with disdain by the vaccine industry's acolytes, i.e. government, NGOs, academia, the media and the journal industry.

Dr Godlee, I request you provide me with an update of The BMJ investigation into HPV vaccination in regards to the matters I first raised with you in December 2016.

FYI, see below my recent email thread to Cochrane and associates below.

Sincerely
Elizabeth Hart
https://over-vaccination.net/
FYI, please see below my recent email to a self-appointed 'HPV vaccination expert', Dr Heidi Larson of the Vaccine Confidence Project, who I suggest pontificates on HPV vaccination without any idea of the workings of these products.

(Other 'doctors' who use their status to promote these products without genuine authority on the subject include Sense about Science John Maddox Prize winners Dr Riko Muranaka and Dr David Robert Grimes. Another example is Dr Michael Head, an academic funded by the Bill & Melinda Gates Foundation. See my comments on David Healy's recent article 'Outsourcing Fascism' for more background: https://davidhealy.org/outsourcing-fascism/)

This example of gross HPV vaccination promotion is relevant to Cochrane's pending HPV vaccination review, and Cochrane Nordic's complaint to the EMA re maladministration at the EMA in regards to the safety of HPV vaccines.

It is notable that all my emails to Cochrane Nordic raising concerns about the unnaturally high antibody titres after HPV vaccination, and lack of evidence for multiple HPV vaccine doses, etc, have been ignored: https://over-vaccination.net/cochrane-collaboration/

Similarly my request for retraction of Tom Jefferson et al's scientifically unsound review of aluminium and vaccine safety (2004) continues to be ignored: https://over-vaccination.net/aluminium-and-vaccine-safety/

I continue my quest for accountability for globally fast-tracked aluminium-adjuvanted HPV vaccination, a matter on which the international academic community continues to fail the best interests of citizens.

See below my email to Heidi Larson.

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

For the attention of:
Dr Heidi J. Larson, Anthropologist
Director of The Vaccine Confidence Project

Dr Larson, in your article about HPV vaccination published in Nature in December 2015, you say "The world must accept that the HPV vaccine is safe": https://www.nature.com/news/the-world-must-accept-that-the-hpv-vaccine-is-safe-1.18918#

You discount concerns about the safety of the HPV vaccines that are emerging from around the world, e.g. Denmark, Japan and India.

You unambiguously insist "that the HPV vaccine is safe". However, as far as I'm aware, there is as yet no independent and objective systematic review of HPV vaccination safety and effectiveness, i.e. untainted by industry bias or other vested interests.

I suggest the safety and effectiveness of the HPV vaccine products Cervarix and Gardasil is being over-hyped. As admitted in The Lancet in 2011, it will be decades before we know the outcome of globally fast-tracked still
Dr Larson, on your article in Nature you failed to disclose your competing interests. I suggest you should have disclosed that the Vaccine Confidence Project is funded by the Bill & Melinda Gates Foundation, an organisation which is heavily involved in HPV vaccine promotion, see for example this Summary of Bill & Melinda Gates Foundation-supported HPV vaccine Partner Activities: http://www.who.int/immunization/sage/HPV_partner_info_gates.pdf Reference to funding of the Vaccine Confidence Project by the World Health Organisation, and partnerships with a range of vaccine promoting organisations, should also have been disclosed.

I suggest you should also have disclosed that the Vaccine Confidence Project has associations with industry. According to The State of Vaccine Confidence 2015 report, Professor Sir Roy Anderson is on The Vaccine Confidence Project International Advisory Board. Professor Sir Roy Anderson is also an 'Independent Non-executive Director' of GSK, i.e. GlaxoSmithKline[2], a fact which is not disclosed in The State of Vaccine Confidence 2015 report.

Dr Larson, your bio notes your research "focuses on the analysis of social and political factors that can affect uptake of health interventions and influence policies". Your particular interest is "risk and rumour management from clinical trials to delivery - and building public trust".[3]

It seems that your area could be more succinctly described as vaccine promotion.

What specific expertise do you have in regards to the novel, globally fast-tracked aluminium-adjuvanted HPV vaccine products to back your enthusiastic promotion of these products?

Are you qualified to answer questions about the unnaturally high antibody titres induced by HPV vaccination, i.e. is there any possible downside here?

In a review paper published in 2010[4], Ian Frazer, a co-inventor of the technology enabling the HPV vaccines, states:

"HPV immunization induces peak geometric mean antibody titres 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..." (See page 29.)

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? Do you know?

Given your influence in promoting and defending HPV vaccination Dr Larson, courtesy of the obliging Nature journal and funding from the Bill & Melinda Gates Foundation, I would appreciate your response on this matter.

PS: I'm not an 'expert in HPV vaccination'. I'm a citizen asking questions about this novel medical intervention that has been fast-tracked around the world and aggressively pushed upon the international community, with the over-enthusiastic support of people like you.

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

References:
3. Dr Heidi Larson. MA PhD. London School of Hygiene & Tropical Medicine: https://www.lshtm.ac.uk/aboutus/people/larson.heidi
4. Ian 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. 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. (Forwarded email amended to include bracketed no. 3 in the text to indicate reference.)