# The adverse effects of vaccination - critical days

by Désirée L. Röver © 2009

The agencies and institutes promoting vaccinations usually are monitoring far too briefly the results of the poisons they have been administering. Additionally they are keeping the mortality rates unrealistically low: by minimising the vaccination/adverse effect interval, and also by categorically denying the causal link between vaccinations and immune suppression. Next to the causative factor of the disease(s) that one wishes to avoid (...!) vaccines contain a whole range of highly noxious substances: formaldehyde, anti-freeze, mercury and/or aluminium compounds, and unknown quantities of foreign proteins of animal and human origin, as well as human and animal DNA and RNA. Injected straight into the human organism these substances create unprecedented havoc: autoimmune disorders, diabetes, brain damage, cancer.

In 1937 the Hungarian researcher Hans Selye MD discovered that when a human or a mammal ingests (or gets injected with) a noxious substance, the body tries to undo the damage of this insult by responding in a typical pattern of phases: the *non-specific stress syndrome*.

### The non-specific stress syndrome

Phase I -- alarm hours 4; 13; 48

The body is acutely affected:

all defence mechanisms are being mobilized;

sharp increase in corticoid activity;

Phase II -- resistance days 5, 6 or 7; 10 or 11.

The body is at maximum capacity of resistance to the insult;

Phase III -- exhaustion days 14-16; 21-24; 28; 4: All defences have been exhausted (point of crisis).

The body will either succumb or recover.

In her study of the breathing

patterns of babies the Australian retired principal research scientist Viera Scheibner PhD made use of a true breathing monitor (CotWatch). In its computer read-outs she recognized the dynamics of Selye's non-specific stress syndrome. While she discovered that invariably it was vaccination which set off the sudden series of alarms in these babies, the computer print outs enabled her to finetune Selye's patterns by identifying the specific critical moments within these recorded dynamics. And that is how around 1990 dr. Scheibner (accidentally!) discovered the causal link between vaccination and cot death (SIDS). In comparing these critical moments with the documented moments of death in vaccinated SIDS-babies, she additionally found that the younger the child was, the quicker it had succumbed to the toxic assault of the vaccines.

Since then dr. Scheibner has assisted numerous parents from all over the world in the court cases in which they have been accused of harming their babies by *Shaken Baby Syndrome* (SBS). This 'diagnosis' is an emotional phenomenon not only obscuring the causal link between vaccination and its serious adverse events, but also shifting the blame from the vaccinators to the parents. Checking the levels of vitamine C and histamine in the child's blood and serum is the easiest way to determine the difference between child abuse and vaccine damage. These simple tests are never done...

Filling out the form on the next page will show parents on which days after vaccination they should be extra vigilant.

Every completed form is an informational gold mine for doctors and researchers who are truly interested in the real effects of vaccination.

<sup>•</sup>Viera Scheibner PhD, Vaccination, a Medical Assault on the Immune System, ISBN 0.646.15124.X.

<sup>·</sup>Viera Scheibner, PHD, Behavioural Problems in Childhood, the Link to Vaccination, ISBN 0.9578007.0.3.

<sup>•</sup>Scheibner V, Dynamics of critical days as part of the dynamics of non-specific stress syndrome discovered during monitoring with Cotwatch breathing monitor, J ACNEM 2004; December, 23(3):1-5.

<sup>•</sup>Scheibner V, Shaken baby syndrome diagnosis on shaky ground, J ACNEM; August 2001;20(2):5-8 &15.

#### **VACCINATION ~ CRITICAL DAYS ~ ACTUAL DATES ~ ADVERSE EVENTS**

Name: Date of birth: Address: Telephone:

Audiess.		relephone.
vax date	critical days	reaction(s)
	actual dates	(fever, crying, rash, vomoting, restless, not eating/ drinking, seizures, convulsions, syncope, flaccid, respiratory failure, paralysis (Guillain-Barré), death)
PHASE I	Alarm	alle defence mechanisms are being mobilized
hour 4		
hour 13		
hour 48		
PHASE II	Resistance	maximum capacity of resistance to the insult
day 5,		
6, or 7		
day 10		
or 11		
PHASE III	Exhaustion	all defences have been exhausted (point of crisis)
day 14		
day 15		
day 16		
day 21		
day 22		
day 23		
day 24		
day 28		
day 47		
•		is form or an omail to: rovercenv@cs.com

Send this form or an email to: <a href="mailto:rovercopy@cs.com">rovercopy@cs.com</a>

### http://www.valyou.org/PhysicianForm.pdf

## **Physician's Warranty of Vaccine Safety**

I (Physician's name, degree)	, am a physician
licensed to practice medicine in the State of	<del>.</del>
My State license number is	
My medical specialty is	
I have a thorough understanding of the risks and prescribe for or administer to my patients. In the	e case of (Patient's name)
I find that certain risk factors exist that justify the	e recommended vaccinations. The
following is a list of said risk factors and the vac	cinations that will protect against them:
Risk Factor	
Vaccination	
Risk Factor	
Vaccination	
Risk Factor	
Vaccination	
Risk Factor	
Vaccination	
Risk Factor	
Vaccination	
Risk Factor	
Vaccination	
I am aware that vaccines typically contain many	of the following fillers:

- \* aluminum hydroxide
- \* aluminum phosphate
- \* ammonium sulfate
- \* amphotericin B
- \* animal tissues:
  - \* pig blood, horse blood, rabbit brain,
  - \* dog kidney, monkey kidney,
  - \* chick embryo, chicken egg, duck egg
  - \* calf (bovine) serum
- \* betapropiolactone
- \* fetal bovine serum
- \* formaldehyde
- \* formalin
- \* gelatin
- \* glycerol
- \* human diploid cells (originating from human aborted fetal tissue)
- \* hydrolized gelatin
- \* mercury thimerosol (thimerosal, Merthiolate(r))
- \* monosodium glutamate (MSG)
- \* neomycin
- \* neomycin sulfate
- \* phenol red indicator
- \* phenoxyethanol (antifreeze)

- \* potassium diphosphate
- \* potassium monophosphate
- \* polymyxin B
- \* polysorbate 20
- \* polysorbate 80
- \* porcine (pig) pancreatic hydrolysate of casein
- \* residual MRC5 proteins
- \* sorbitol
- \* tri(n)butylphosphate,
- \* VERO cells, a continuous line of monkey kidney cells, and
- \* washed sheep red blood

and, hereby, warrant that these ingredients are safe for injection into the body of my patient. I have researched reports to the contrary, such as reports that mercury thimerosol causes severe neurological and immunological damage, and find that they are not credible.

I am aware that some vaccines have been found to have been contaminated with Simian Virus 40 (SV 40) and that SV 40 is causally linked by some researchers to non-Hodgkin's lymphoma and mesotheliomas in humans as well as in experimental animals. I hereby warrant that the vaccines I employ in my practice do not contain SV 40 or any other live viruses. (Alternately, I hereby warrant that said SV-40 virus or other viruses pose no substantive risk to my patient.)

I hereby warrant that the vaccines I am recommending for the care of (Patient's name) do not contain any tissue from aborte	
human babies (also known as "fetuses").	
In order to protect my patient's well being, I have taken the following steps to guarantee that the vaccines I will use will contain no damaging contaminants.	Э
STEPS TAKEN:	

I have personally investigated the reports made to the VAERS (Vaccine Adverse Event Reporting System) and state that it is my professional opinion that the vaccines I am recommending are safe for administration to a child under the age of 5 years.

The bases for my opinion are itemized on Exhibit A, attached hereto, -- "Physician's Bases for Professional Opinion of Vaccine Safety." (Please itemize each recommended vaccine separately along with the bases for arriving at the conclusion that the vaccine is safe for administration to a child under the age of 5 years.)

The professional journal articles I have relied upon in the issuance of this Physician's Warranty of Vaccine Safety are itemized on Exhibit B, attached hereto, -- "Scientific Articles in Support of Physician's Warranty of Vaccine Safety."

The professional journal articles that I have read which contain opinions adverse to my opinion are itemized on Exhibit C, attached hereto, -- "Scientific Articles Contrary to Physician's Opinion of Vaccine Safety"

The reasons for my determining that the articles in Exhibit C were invalid are delineated in Attachment D, attached hereto, -- "Physician's Reasons for Determining the Invalidity of Adverse Scientific Opinions."

### **Hepatitis B**

I understand that 60 percent of patients who are vaccinated for Hepatitis B will lose detectable antibodies to Hepatitis B within 12 years. I understand that in 1996 only 54 cases of Hepatitis B were reported to the CDC in the 0-1 year age group. I understand that in the VAERS, there were 1,080 total reports of adverse reactions from Hepatitis B vaccine in 1996 in the 0-1 year age group, with 47 deaths reported.

I understand that 50 percent of patients who contract Hepatitis B develop no symptoms after exposure. I understand that 30 percent will develop only flu-like symptoms and will have lifetime immunity. I understand that 20 percent will develop the symptoms of the disease, but that 95 percent will fully recover and have lifetime immunity.

chronic carriers of the disease. I unders with an asymptomatic infection and that chronic liver disease or liver cancer, 10-	nts who are exposed to Hepatitis B will become stand that 75 percent of the chronic carriers will live to only 25 percent of the chronic carriers will develop 30 years after the acute infection. The following to demonstrate the safety of the Hepatitis B ears.
In addition to the recommended vaccina	ations as protections against the above cited risk
	-vaccine measures to protect the health of my
patient and have enumerated said non-	vaccine measures on Exhibit D , attached hereto,
"Non-vaccine Measures to Protect Agai	nst Risk Factors" I am issuing this Physician's
	ssional capacity as the attending physician to
,	Regardless of the legal entity
	ie, I am issuing this statement in both my business
	aive any statutory, Common Law, Constitutional,
•	r legal immunities from liability lawsuits in the
	y own free will after consultation with competent
<del>-</del>	, an attorney admitted to
the Bar in the State of	 (Name of Attending Physician)
	(Name of Attending Physician) L.S. (Signature of Attending Physician)
Signed on this day of	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `
Witness:	Date:

Notary Public:

Date: