



Vaccination: Why the 'one size fits all' vaccination argument does not fit all!

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Imagine the next time you went to Walmart, Target or Sears that due to scientific research and government regulation your retailer only stocked on size of clothing – regardless of whether you are male or female, child or adult, and with no sensitivity to your cultural or ethnic background. Would you be happy? Would you accept it? Would you wear the clothes? The answer is clearly NO! What if the clothing manufacturer used a highly toxic dye in the clothing fabric and knew this dye could cause serious skin reactions in some people but they failed to declare this? Would that be acceptable to you? Yet that is exactly what the current approach to vaccines worldwide is – one size fits all and some “collateral damage” is acceptable for the sake of the alleged “greater good”.

In the case of vaccines, the good news is that even those in the scientific community who are strong proponents of vaccinations, are coming to question the scientific legitimacy of “one-size fits all” vaccination practices. ^[1]

For example, Gregory Poland MD, Editor in Chief of the journal *Vaccine* and co-author of “*The age-old struggle against the anti-vaccinationists*” ^[2] and colleagues rightly ask whether:

...with the advances coming from the new biology of the 21st Century. It is time to consider how might new genetic and molecular biology information inform vaccinology practices of the future? ^[1]

In light of this question Poland et al. conclude that **“one-size fits all” approach for all vaccines and all persons should be abandoned.**

According to Poland, **this conclusion applies to both vaccine efficacy, as well as safety.** ^[1]

Regarding the safety, **the widely held view that serious vaccine-related adverse reactions are rare needs revision, as current worldwide vaccination policies indeed operate on a “one-size fits all” assumption.**

This assumption persists despite the fact that historically, vaccine trials routinely exclude vulnerable individuals with a variety of pre-existing conditions (i.e., premature birth, personal or family history of developmental delay or neurologic disorders including epilepsy/seizures, hypersensitivity to vaccine constituents etc...). ^[3-7]

Because of such selection bias at the very base level of research, the occurrence of serious adverse reactions resulting from vaccinations is considerably underestimated.

Worse yet, such an outcome should be of concern to all who vaccinate in view of the documented scientific evidence describing cases of permanent neurodevelopmental disabilities and deaths following vaccination in children with underlying genetic/mitochondrial disorders and other susceptibilities, such as a family history of auto-immune diseases (i.e., asthma, diabetes, multiple sclerosis, etc...), allergies, or a compromised immune system. ^[8-10]

Poland’s along with the other scientists’ current data therefore have far broader implications for understanding vaccines, not only in terms of efficacy and the desired immune response, but also in terms of

safety for those susceptible to adverse health outcomes and excluded from clinical trials --- but not from receipt!

Vulnerable individuals, both male and female, will neither have the same antibody response nor the same level of tolerance to serious adverse reactions as non-vulnerable individuals. ^[1, 11]

Before one considers vaccinating their child according to the current 'one size fits all' vaccination program, one should think about the fact that we all have a different genetic history, personal health history, current health status, nutritional status and exposures to level of environmental toxins – all of which may impact how an individual, or their child will respond to a vaccine.

Given all this, supporting the 'one-size fits all' vaccination program is neither reasonable nor ethical.

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