

If you are a physician in need of further information, including a recovery protocol, you may call Lloyd Phillips at 336-600-1055, or Email: [PPL@Mailbox7.net](mailto:PPL@Mailbox7.net)

## Four Year Analysis of Adverse Reactions to the Gardasil HPV Vaccine

by Lloyd W. Phillips

Copyright ©2013 Lloyd W. Phillips

### ABSTRACT

Prolonged inflammation initiated by powerful vaccine adjuvants such as Amorphous Aluminum Hydroxyphosphate Sulfate (AAHS), may be life-threatening and/or result in cognitive and motor skill disorders in those individuals with multiple genetic mutations which affect:

- 1) Transsulfuration (such as CBS 699t),
- 2) Glutathione production and utilization (such as GSTM1), and
- 3) Pathogen Load (such as HLA-DR15).

Although other mutations may contribute to the cascade of debilitating events, such as C282Y, which is associated with Hemochromatosis, the above three genetic conditions formed the core group in this study.

Concomitant (multiple) vaccinations may increase the severity of adverse reactions.

### **Physical Activity as a Risk Factor for an Adverse Vaccine Reaction**

We observed that children who appeared to be very healthy prior to receiving the Gardasil HPV vaccine, and were the most physically active following the vaccination (participated in sports, cheerleading, dancing, biking, skating, or other physical activity), suffered the most severe debilitating symptoms, possibly due to

the increased distribution of the vaccine throughout their body due to increased circulation from exercise.

## **Syncope / Fainting**

We observed that Syncope (fainting), following the Gardasil HPV vaccine, may be the result of Septicemia. Dr. L.C., received the Gardasil HPV vaccine in 2006 while attending medical school. She returned to class after receiving the HPV vaccine, and lost consciousness. Her vitals were taken, and it was documented that her blood pressure had plummeted to a life-threatening 50/32. We hypothesize this "fainting" was due to an acute allergy-related response to the yeast associated components in the vaccine, which resulted in a massive histamine release from eosinophils and mast cells. This elevated histamine quickly dilated blood vessels, and appears to be the cause for the drop in blood pressure. We suspect that these children may not have been properly screened for an allergy to mold and other members of the Fungal Kingdom. Fortunately she did not drive home after her vaccination and die in a car crash. Warnings were not issued until three years later (2009).

## **Head Pressure (acute)**

The majority of children who develop debilitating and/or life threatening conditions reported severe head pressure within one or two hours of receiving the HPV vaccine. Those who received concomitant vaccines appeared to have a quicker onset of new medical conditions after just one or two HPV vaccinations.

## **Vitamin D**

Vitamin D levels appear to plummet (25 Hydroxy Vitamin D) in this group following the administration of the Gardasil HPV vaccination.

## **Intracellular Magnesium**

Intracellular magnesium quickly becomes depleted following administration of the Gardasil HPV vaccine. However, serum magnesium typically remains on the low side of lab normal.

## **Magnesium and the "Fight or Flight" Response**

Our findings indicate that the immune system may not be capable of distinguishing between fear and the inflammation caused by aluminum adjuvants in modern vaccines. Both events were observed to trigger the "Fight or Flight" response, which forced the subject to excrete magnesium.

The human body uses magnesium in the production of about 300 different enzymes. When intracellular (within the cell) magnesium becomes depleted, it is virtually always missed by doctors who look at serum (blood) magnesium. Every cell in the body will contribute its last bit of magnesium to keep the heart pumping. We observed multiple symptoms of a magnesium deficiency: muscle jerks and spasms; pain; irritability; newly acquired panic disorders; heart arrhythmias; headache; and more. Low magnesium may result in personality changes and irritability. One mother described her daughter as the "she bitch from hell" since receiving the Gardasil HPV Vaccine.

Since many cycles fail (methylation, H3K4 Trimethylation, etc.), we observed that it was necessary to administer some vitamins in their active form to maintain proper serum levels. This was especially true of Vitamins B6 and B12.

## **Symptoms of Vitamin B1 Deficiency (Beriberi): Thiamine tetrahydrofurfuryl disulfide**

Although many of the subjects received Vitamin B1 supplements, we observed many symptoms of a Vitamin B1 (Thiamine) Deficiency. Thiamine is involved in a variety of glucose metabolism-related and neurological functions, including the making of myelin. Many symptoms of the B1 Deficiency decreased when ***Thiamine tetrahydrofurfuryl disulfide*** (TTFD) was administered. Allithiamine is one alternative name for TTFD, a fat-soluble form of Vitamin B1.

We acknowledge the observed genetic deficit(s) in the Transsulfuration Cycle due to the CBS gene, and confirm the findings of *DETH R et al, Thomson*, and others who documented that oxidative stress plays a critical role in the utilization of Thiamine in the human body.

## **Genetics and Pathogens**

The Human Leukocyte Antigen (HLA) Serotype was present in most who were tested. The HLA-DR15 mutation was found in those most seriously affected. Those with HLA-DR15 appeared acutely sensitive to mold, and exposure would cause a re-emergence of debilitating symptoms.

## **Genetics and Transsulfuration**

Many tested positive for the CBS Gene, and were not able to properly process sulfur. The Cystathionine Beta-Synthase gene, especially the CBS 699t genetic mutation, appeared to be causing a life-threatening cascade of events in these patients, and we observed the following sulfur-related symptoms:

- **Low Glutathione** - Sulfur is required for Glutathione synthesis. ALL who were tested had low glutathione levels.
- **Connective Tissue Disorders** - Sulfur is responsible for Collagen Synthesis, and lack of sulfur leads to poor tissue (skin) structure and strength.
- **Inflammation** - low sulfur can lead to the progression of inflammation and degenerative disorders

Note: Medical Practitioners should be aware that an infant or toddler who screams for prolonged periods, or any child who bangs their head, may actually be signaling that they are experiencing a breakdown in the TRANSSULFURATION Pathway (CBS Gene). When sulfur is not properly metabolized, EXCRUCIATING HEAD PRESSURE may result when sulfites enter the brain and produce acute pain. You should always be on guard that a migraine may be a warning sign of a CBS Gene mutation, especially CBS 699t.

Sulfur-related sustained inflammation, especially involving inflamed glial cells in the brain, may affect nearby Oligodendrocytes, which may then inhibit myelin production, and result in demyelinating disorders, such as Multiple Sclerosis.

## Interstitial Cystitis

A significant number of female subjects developed Interstitial Cystitis, including many months after they appeared to be feeling better. We suspect, but cannot confirm, that the failure of the transsulfuration cycle may have contributed to this condition.

## Histamine Intolerance and Sustained Inflammation

We have observed that the majority of subjects developed a Histamine Intolerance, which resulted in self-sustained inflammation. This Histamine Intolerance was not present prior to the Gardasil HPV vaccine, nor was any indication of Mastocytosis.

We took note of the extensive research done by *Husheng Li et al.*, at the University of Tennessee, Knoxville, into how aluminum vaccine adjuvants activate caspase-1 and induce IL-1beta and IL-18 release. We hypothesize that the release of IL-1beta and Interleukin-18 (and possibly other pro-inflammatory cytokines), may have inflamed the gut and caused a breakdown of the mucosal lining. This appears to have allowed immune cells in the lining of the gut to come into contact with food proteins as they traveled through the gut. The immune cells appear to have made antibodies to some foods, and when these foods were again eaten at a later date, the immune system appeared to treat these food proteins as

allergens, and trigger mast cells to produce histamine. We observed that the majority of these children and adults felt lightheaded upon standing. We hypothesize that the elevated histamine, caused by this newly acquired histamine intolerance, dilated blood vessels, and significantly lowered blood pressure to the brain. We further hypothesize that this may be the cause, or a contributing factor to Postural Orthostatic Tachycardia Syndrome (POTS).

We observed that this newly formed histamine intolerance and resulting self-sustaining inflammation did not subside until foods containing moderate to high amounts of histamine were removed from the diet. We observed that Low Dose Naltrexone was beneficial for this condition, and it also helped relieve insomnia.

## **Insomnia**

Insomnia was present in the majority of the subjects. We attribute this to the pineal gland possibly being inhibited by cortisol as a result of inflammation, including inflammation associated with the newly acquired histamine intolerance.

## **Pathogens and Body Burden**

### **(a) Enteroviruses**

The most common enterovirus we observed was Epstein Barr Virus (EBV). EBV can act as an incubator for other pathogens and infect fast-growing cytokines when inflammation is present. A previous history of Mononucleosis (Glandular Fever) was virtually a 100% predictor of a life-threatening adverse reaction to the Gardasil HPV vaccine, and similar results were observed among families of autistic children.

Only one out of approximately 100 families observed or interviewed was eventually diagnosed with Chronic Active Epstein Barr (CAEBV)

### **(b) Parasites**

Vector borne pathogens such as Bartonella, Borrelia Burgdorferi (Lyme Disease), Mycoplasma Pneumoniae, Babesia, and FL1953 (Protomyxzoa Rheumatica), were the most commonly observed pathogens. Several of these Bunyaviruses would typically be found together in the children who were tested. Bartonella was never found alone without the presence of other Bunyaviruses.

Note: NK-CD57 counts typically ranged between 8 and 51, with the majority falling at or below 22.

### **(c) Bacteria**

A history of Mycoplasma/Mycoplasma Pneumoniae, Acne Vulgaris (which can turn Interleukin-10 into Viral Interleukin-10 (vIL10)), and eczema were identified as risk factors for an adverse event. Interleukin-10 is associated with controlling inflammation.

## **Pregnancy**

Several girls became pregnant during this four year study, and in each case their symptoms subsided for the length of the pregnancy. We hypothesize that elevated levels of Interleukin-10, released during pregnancy, attenuates inflammation, which is key to this syndrome.

## **Summation**

1. Insult to immune system, typically a vaccination, may cause inflammation
2. Inflammation triggers the Fight or Flight response
3. The Fight or Flight response causes magnesium to be excreted
4. Inhibition of ~300 magnesium-dependant cycles
5. Failure of transsulfuration cycle results in inhibited sulfur-dependant cycles such as those responsible for glutathione, collagen and connective tissue, control of inflammation, etc.
6. When gene mutations are present, low cycle output may result in a cascade of debilitating or life-threatening events
7. Dormant pathogens may become virulent