



Japan and the HPV Vaccine Controversy

By Norma Erickson

The SaneVax Team would like to share a series of events in Japan which culminated in a decision which was nothing short of miraculous. This decision and the events leading up to it offer hope to millions of families whose lives have been adversely impacted by the use of Gardasil and Cervarix.

Due to massive efforts by HPV vaccine victims and their families, independent medical and scientific professionals willing to speak about their concerns, traditional media outlets with the integrity to investigate and report accurately, input and assistance from the SaneVax team, and political representatives who actually did the job they were elected to perform – THERE WILL BE NO GOVERNMENT RECOMMENDED HPV VACCINATION PROGRAM IN JAPAN FOR AT LEAST A YEAR.

Because all of the groups just mentioned worked together to preserve the health of Japanese girls, multiple members of the House of Councilors, the ruling Liberal Democratic Party intervened making it impossible for Japan's Ministry of Health, Labor and Welfare to call for the re-instatement of Japan's official recommendation for HPV vaccines (both Gardasil and Cervarix) for 2014.

Basically, the HPV vaccine debate in Japan came down to one side claiming psychosomatics versus the other side presenting science. Science won!

Timeline of Events Recorded by SaneVax:

- **29 March 2013** – Japan decided to add both HPV vaccines, a pneumococcal vaccine and a vaccine for Japanese Encephalitis to their government recommended vaccination schedule. Although HPV vaccines had been approved for several years, they had not been widely used. The new law was to take effect April 1st. SaneVax received questions from a Tokyo newspaper journalist concerned about the safety of HPV vaccines the same day. This was quickly followed by inquiries from other journalists, both newspaper and television, as well as Japanese victims' advocates.
- **14 June 2013** – Japan suspended their recommendation for both HPV vaccines after discovering the adverse events reported after Gardasil and Cervarix were between 1.7 and 3.6 times higher than the other two vaccines which had just been added to the recommended schedule. The government wanted time to obtain a more complete picture of HPV vaccine side effects. This meant that medical consumers in Japan could still obtain HPV vaccines should they so desire, but prior to administration the provider had to inform the patient that the vaccine was NOT recommended by the government.
- **18 June 2013** – Newspapers in Japan reported the government task force assigned to analyze reports of HPV vaccine injuries had examined 2,000 cases and found 357 of them to be serious. The Health Ministry decided there was no way to determine whether the vaccines were responsible for contributing to the new medical conditions at that time, so decided to conduct further studies and make a determination as to whether to reinstate its recommendation of HPV vaccines in about six months (a tentative deadline of mid-December).

- **28 Sept 2013** – The Secretary General of the Nationwide Liaison Association of Cervical Cancer Vaccine Victims and Parents and a journalist from Kyoto News informed the SaneVax team that a delegation from the Ministry of Health was making plans to visit health officials in London and Washington DC as a part of a fact finding mission.
- **3 Oct 2013** – The meetings scheduled with the United States health officials were postponed at the request of the U.S. government.
- **7 Oct 2013** – As a result of intense negotiations between the Secretary General, a journalist from Kyoto News (who had agreed to act as an interpreter, and the SaneVax team, the Japanese Ministry of Health representative along with three esteemed Japanese medical professionals attended a meeting in London to gather evidence from Dr. Sin Hang Lee, MD, Pathologist, Milford Hospital, Director, Milford Medical Laboratory Inc., and former associate professor of pathology at Yale University; Professor Francois Jerome Authier, MD, PhD, Reference Center for Neuromuscular Disorders, Henri Mondor Hospital, Paris and Dr. Damien Downing, MB BS, MIBiol from London who is a pioneer of Ecological Medicine, Mrs. Freda Birrell, Secretary of SaneVax Inc. and her husband David Birrell, VAERS Research Analyst for SaneVax Inc. (Note: Conditions for this meeting were that all information presented be kept in strictest confidence until Mr. Miyamoto, Japan's Ministry of Health, had time to return home and make his formal recommendations.)
- **16 Oct 2013** – An article appeared in *The Japan Times News* – indicating the beginning of a full-scale investigation into the side effects from HPV vaccine use.
- **28 Oct 2013** – Japan's advisory committee on immunization policies met to decide whether to restart the HPV immunization program – the chief of the advisory board said the panel will put forward its final advice to the health ministry in December.
- **30 Nov 2013** - It was revealed that the meeting with the same Japanese delegation originally scheduled to take place in the United States had occurred in secret between November 20 and 22 with no input from any experts independent of pharmaceutical industry influence. Rumors were circulating in Japan that the health authorities intended to announce a recommendation to re-start HPV vaccination programs on December 22 with an official announcement coming out on December 25. At this time, the advisory committee was believed to be split 70% for and 30% against making such a recommendation.
- **16 Dec 2013** – Senator Yamatani had obtained the scientific evidence provided to Mr. Miyamoto in London and pulled together top medical professionals from Japan to analyze the data and explain it to her. Once explained, in addition to being concerned about the lack of need and unproven efficacy of HPV vaccines, she was seriously concerned about their safety.
- **The December 25th deadline passed with no official word from the Japanese Health Ministry.** This left the Ministry of Health in an awkward position. The fiscal year for Japan's government began on April 1st. If no determination was made prior to that date – there would be no government recommended HPV vaccination program.

- **20 Jan 2014** - The Japanese government's advisory council released an official report in which they dismissed all of the symptoms that have shown up in the vaccinated girls as the consequences of psychogenetic psychosomatic reactions. According to Kyoto News Reporter, Mutsuo Fukushima, the key proponent of this theory of psychosomatic reaction is Dr. Yutaka Ohno of Keio University, who stated publicly:

"It is impossible to find physical causes for the alleged and presumed adverse reactions at those vaccinated girls, so we cannot help, concluding that their so-called adverse reactions are the mere consequences of psychosomatic reactions. The government should provide counselling to the girls so that they may be freed from their psychosomatic reactions."

- **24 Jan 2014** – Due to the tireless efforts of all concerned, Senator Yamatani and Senator Nakagawa agreed to help facilitate an open debate on the benefits versus risks of HPV vaccines. The HPV vaccine proponents would represent one side of the debate and have the opportunity to choose which experts would represent them. Those concerned about the use of HPV were asked to gather experts from around the globe to testify as to the potential dangerous consequences and lack of need for mass HPV vaccination programs, and be available to answer questions from the audience. A tentative goal of mid-February was set for the debate to give each side time to secure experts.
- **January to mid-February** – Due to massive efforts behind the scenes, by the time the debate was scheduled the calendar of events also included a public Symposium on the Adverse Reactions experienced by girls after HPV vaccination, two televised press conferences, a debate on HPV vaccine risks versus benefits (open to the public and televised) and a briefing on HPV matters to influential lawmakers of the ruling Liberal Democratic Party.
- **25 Feb 2014** – International Symposium on the Adverse Reactions experienced by girls who have been vaccinated with Human Papillomavirus Vaccines followed by Press Conference.
- **26 Feb 2014** – Government Sponsored Public Hearing (debate) of the Health Ministry's Advisory Council for the Deliberations on the Reported Adverse Events of HPV Vaccines, the advisory panel consisting of 15 scientists – February 26th, 10:00 to 11:30 a.m. (Evidence to be presented by scientists and medical professionals from the United States, Canada, France and Japan regarding potential mechanisms of action between HPV vaccines and serious adverse events.) Briefing on HPV Matters to Influential Lawmakers followed by a press conference. (Note: A synopsis of the scientific information presented is at the end of this article.)
- **27 Feb 2014** – Word from Japan was that all events were well attended and well received. Major television broadcasters covered all of the public events. Newspaper articles for the most part portrayed accurate accounts of the proceedings. Doctors from all over Japan started writing letters stating that in their opinion it was outrageous for government health officials to try and explain away the girls' new medical conditions as psychosomatic. Government officials began to sign on to a resolution supporting a complete ban on HPV vaccinations.

- **26 March 2014** – The Ministry of Health, Labor and Welfare met to decide whether to make a recommendation to reinstitute the previously suspended government recommendation for HPV vaccines.
- **The final deadline of April first passed with no official word from the Ministry of Health – leaving the government recommendation for HPV vaccines suspended for 2014.**

This silence on the part of the Ministry of Health, Labor and Welfare speaks volumes. It means the voices of victims and their families has been heard. They will no longer have to worry about being told their symptoms are all in their head, coincidental, or just plain accidental.

For the next year (at least) women in Japan can get either Gardasil or Cervarix at no cost, should they so desire. The difference now is that it will be their decision to make – not one that is government mandated. If they decide they want to take these vaccines, their healthcare provider must inform them prior to administration that the vaccine is NOT recommended by the Japanese government.

This is a huge victory for every family around the globe who has suffered after participating in a global health experiment conducted in the name of cervical cancer prevention – HPV vaccination programs.

These events did not happen by accident. Japan's decision was the culmination of a lot of hard work combined with valid scientific research, and these three factors:

1. The families of those who experienced adverse events after HPV vaccination did not surrender. In spite of their pain, they organized, spoke out and demanded action from their government health officials and political representatives.
2. Despite the intense pressure exerted on medical professionals to claim adverse events that occur after HPV vaccinations are the result of coincidence, mass hysteria, conversion disorder, psychogenic illness, fabricated illness, or genetic disorders, numerous medical professionals in Japan actually listened to their patients, investigated, and came to their own independent conclusions. Not only that, they had the courage to speak out for those who were suffering and demand investigations.
3. Japanese politicians had the integrity to listen to both sides of the HPV vaccine debate in public as well as privately.

Society can no longer justify sacrificing our children's health and perhaps their very lives in the name of public health. The 'greater good' is no excuse – every single individual life is valuable – public health agencies need to start acting like it.

The time has come for physicians to establish diagnostic criteria for vaccine injuries. Scientists need to determine who is most likely to suffer an adverse reaction after vaccination and why. Most importantly, successful treatment protocols must be developed for the vaccine injured.

Above all – every country in the world needs to encourage open and honest scientific debate regarding HPV vaccines. Just think about it, If HPV vaccines are half as good as they claim to be – public debate should be no problem.

Medical and Scientific Evidence Submitted in Japan:

Dr. Authier (data presented at the public hearing, at the meeting with the Senators and at news conferences)

- 1) Aluminum salts used as adjuvants in HPV vaccines can cause myalgia, chronic fatigue syndrome, cognitive impairment, overt autoimmune disease, multiple sclerosis, DM, thyroiditis...)
- 2) Macrophagic myofasciitis, biopsy proven, is significantly associated with above conditions.
- 3) Alum particles can be transported by monocyte-lineage cells to lymph nodes, blood and spleen, and penetrate the blood brain barrier with potential damages to nerve tissues.
- 4) Aluminum salts are poorly biodegradable as adjuvant in HPV vaccines.

Dr. Hajjar (data presented at the meeting with the Senators and at news conferences, and admitted to public hearing through Dr. Sin Hang Lee)

- 1) Dr. Hajjar reported the case of a 16-year-old girl who suffered an acute-onset and permanent bilateral visual loss and a transient left hemiparesis following Gardasil vaccination.
- 2) Tumefactive demyelinating lesions and chiasmal neuritis as part of a presentation of acute demyelinating encephalomyelitis were documented by MRI imaging studies.
- 3) A brain biopsy was performed on this case to confirm that there was a perivascular infiltration of lymphocytes and macrophages with focal demyelination in the brain tissue, characteristic of the histopathological changes in acute demyelinating (or disseminated) encephalomyelitis as complication of vaccination.

Dr. Tomljenovich (data presented at the meeting with the Senators and news conferences)

- 1) Post-mortem brain tissue specimens from two young women who suffered from cerebral vasculitis-type symptoms following vaccination with the HPV vaccine Gardasil were analyzed by IHC for various immuno-inflammatory markers.
- 2) Gardasil-vaccinated cases showed positive immuno-reactivity for HPV-16L1 antigen in cells within cerebral vessels, with some HPV-16L1 - positive cells adhering to the walls of these vessels and some infiltrating the brain parenchyma. No such pattern of staining was observed with the anti-HPV-18L1 anti-HPV-11L1 antibody in any of the Gardasil-vaccinated cases. Control cases were negative.
- 3) Conclusions: The presence of foreign antigenic material in the central nervous system can trigger adverse inflammatory and immune-mediated manifestations. Normally, vaccine antigens are not expected to cross the blood-brain barrier. The finding of HPV-16L1 intra and perivascular immuno-

positive cells in the brains of these two cases suffering unexpected and sudden death following Gardasil vaccination is thus of concern.

Dr. Lee (data presented at the public hearing, at the meeting with the Senators and at news conferences)

- 1) Gardasil contains residual HPV L1 gene rDNA fragments, firmly bound to the AAHS adjuvant by ligand exchange through the phosphate backbone of the DNA molecule in non-B conformation - a new chemical inadvertently created in the vaccine manufacturing process.
- 2) It is well known that aluminum nanoparticles can transfect foreign, bacterial or viral DNA into human cells, especially macrophages, and macrophages can cross the blood brain barrier.
- 3) It is well known that activated macrophages, highly immune-stimulated by free bacterial or viral DNA, can produce and release a variety of cytokines, including tumor necrosis factor which is a myocardial depressant and can cause acute inflammation. Human macrophages recognize HPV DNA as a viral DNA (foreign invader), not the DNA from the human host's own body, and react in a high alert state- a highly augmented reaction which may be very harmful in certain genetically predisposed young girls. We cannot predict which girls will react violently in their heart and in their brain as a result of these activated macrophage activities.
- 4) HPV 16 L1 gene DNA in non-B conformation was found in the post-mortem blood and spleen tissue obtained at autopsy of such a sudden unexpected death without obvious cause of death 6 months after Gardasil vaccination. No scientists at the public hearing believe that psychosomatic reactions can cause such death and inflammation of the brain in these HPV-vaccinated girls. Therefore, more research must be performed on the potential toxicity of this vaccine.