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for every body



Swine Flu Statement

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The Chief Medical Officer has advised the public and doctors and the media have made us all aware of the 'pandemic' of Swine Flu.

This flu outbreak in humans that is propagated by and known as "Swine flu" is not solely due to a swine influenza virus. It is due to a new strain of influenza A virus subtype H1N1 that derives from one strain of human influenza virus, one strain of avian influenza virus, and two separate strains of swine influenza virus. The origins of this new strain are unknown, and the World Organization for Animal Health (OIE) reports that this strain has not been isolated in swine. (1)

It passes with apparent ease from human to human, an ability attributed to an as-yet unidentified mutation but the strain in most cases causes only mild symptoms and the infected person makes a full recovery without requiring medical attention and without the use of antiviral medicines. (2)

The number of cases notified per week was estimated to have peaked in the UK in late July around 110,000 notifications per week. It had dropped through August to less than 30,000 per week.

More people will lose their life in the UK in one winter than have died worldwide and only a few have died in the UK directly because of the virus. Most of the 100 or so who have died in the UK have had an underlying illness already. Outside of Mexico and those working in the swine industry the vast majority were already ill and died from secondary issues.

Flu can be very serious but for the vast majority it is a few days in bed - if that

The media would have us believe that this is an extremely dangerous type of flu but predominantly it isn't unless you are already ill. **Any baby under 6 months of age, any adolescent or an elderly person with a weakened immune system might benefit from some protection and swift referral to a doctor is recommended** but remember The World Health Organization has stated that Swine flu symptoms may be less severe than any seasonal flu symptoms. (3)

There has been some medical advice and media attention about risks of flu in **pregnancy**. Most women are remarkably healthy through pregnancy due to the beneficial effects of high hormone levels but the suggestion is that the body naturally reduces it's immune response to avoid rejecting the baby – a foreign body after all. Combine this with the general probability of poor nutrition in many of the population and there may be a slight increased risk.

However in the well fed, happy and healthy pregnancy the risk of this or any other type of flu is not high statistically. The theoretical risks associated with the vaccination (see below) especially the thiomercal mercury content and the immune stimulant Squalene need to be considered. Also be aware that the vaccine has not been broadly tested on pregnant women.

Anti-viral drugs, Tamiflu and Relenza, are not specific for Swine Flu but general for influenza-like viruses. It is not effective in prevention and should, therefore, only be used as a treatment. Doctors are being advised to prescribe it when patients have a temperature of over 38 degrees Centigrade and flu symptoms are present.

On 10th August, after broad prescribing especially to children who have a had a case diagnosed at their school, The British Medical Journal published that the use of Tamiflu in children is overall ineffective and may be harmful (there have been reported cases of the drug inducing suicide). Regardless “The Department of Health said a "safety-first approach" of offering anti-virals to everyone remains a sensible and responsible way forward, but promised to keep the policy under review”. (4)

Putting aside the ineffectiveness and health dangers from side effects a major risk of this treatment being prescribed injudiciously is that of **resistant strains** developing leaving us ill-prepared to help those who really need an effective drug. It is a similar situation to what has happened to create MRSA – the resistant staphylococcal bacteria. Broad use of such a drug has the potential to create resistant strains rendering the drug potentially useless which will cause far more deaths than keeping the treatment in reserve for those who need it.

People are obtaining this drug from the Internet and we have no idea whether these sources are providing effective drugs and possibly even providing dangerous compounds. I strongly advise against such action. There is enough Tamiflu within the United Kingdom's reserves to provide doses for the entire population should the need arise.

Swine Flu vaccine is now available and these will mainly be given to those interpreted to be at high risk. These include:

- I. individuals aged six months and up to 65 years in the current seasonal flu vaccine clinical at-risk groups (those with underlying health issues)
- II. all pregnant women, subject to licensing conditions on trimesters
- III. household contacts of immunocompromised individuals
- IV. people aged 65 and over in the current seasonal flu vaccine clinical at-risk groups
- V. frontline health workers (1 out of 3 nurses in the UK say they will not be taking the vaccine (8). They have fears over the safety of the vaccine. New York nurses are also worried about the potential side effects and are refusing to take it (9).

There is no mention in the official document from the Department of Health (7) of those that you might think it sensible to vaccinate such as workers in the pig breeding business.

The vaccine has not undergone safety tests that are usually required in the public domain and has certainly not been tested on children – who seem to be amongst the first in line to get it. The argument is that the H1N1 component is being added to the same substrate as the regular flu vaccine that has been ‘side-effect’ safe for the last decade or so. In 1976 the Swine flu vaccine is reported to have killed more people than the virus itself following mass vaccination in the USA (5). This is, of course, denied by other sources (7).

Mercury in a compound known variously as Thimerosal or Thiomersal, a vaccine preservative, was withdrawn from childhood jabs 3 or so years ago after evidence linked it to brain damage, although the WHO denies this and the authorities claimed it was being withdrawn not because of proven danger but because of public concern. This is used in the pandemic vaccine due to be rolled out across the world within weeks.

The vaccine also contains a ‘natural’ chemical called squalene, used to stimulate the immune system to respond to the vaccine. Some scientists believe squalene is linked to autoimmune illnesses including multiple sclerosis, rheumatoid arthritis and lupus. Squalene was included in the anthrax jab given to British and US soldiers during the 1991 Gulf War. Many claim it caused them permanent neurological damage, known as “Gulf War syndrome (6)

You currently may choose whether to take such a vaccine. There is a strong possibility that it will be made mandatory to have the vaccination and concerns of health and safety have blossomed into some worrying if not frightening conspiracy theories around the reasons why the vaccine is passing safety requirements at the speed it is. New York State, for example, is forcing it upon their nurses. Vaccinate or lose your jobs.

What can be done now?

Based on the facts above one could (still at the time of writing) argue ‘Do nothing’ but if you want to be proactive or you have health issues that you or your Health Care Professional think make you ‘at risk’ by catching this virus then there are some things you can do.

1. Use tissues not handkerchiefs and throw away any used ones
2. Wash your hands if you cough or sneeze but do not use anti-bacterial soaps – creates a risk of resistant skin bacteria and skin bacteria may protect against viruses.
3. The advantages of maintaining high immunity is the best protection, so eat well avoid refined or too much sugar.
4. Stop worrying as fear lowers the immune system
5. If you are an at risk person avoid crowded places
6. Those who wish to review the activity and status of their immune system could consider the TDC Immucheck Profile.
7. Certain vitamins and minerals inhibit viral spread from cell to cell - zinc and beta carotene. Vitamin C inhibits viral activity. A good multi Antioxidant is a potential preventative supplement.



8. Homoeopathic chemists will offer suitable homoeopathic remedies Virotox is a homeopathic mix that can be used 10 drops 3 x daily
9. Beta Glucan, a plant based immune stimulant, can be taken as a preventative supplement.

The Diagnostic Clinic has a protocol which can be taken as an anti-viral preventative and potential treatment.

Probiotics are proven to reduce the frequency and longevity of viral infections.
TDC's preferred brand is: PROBIOTIC ECO 500 taken as tsp in warm water nightly

In addition you can choose to use all of some of the following:

1. Vitamin C 1 tab twice daily
2. Zinc 1 tab nightly
3. Antioxidants with Co Q 10 1 daily
4. Beta glucans 2 am

If you know or think you have contracted the Flu add in Virotox 10 drops 3 – 4 x daily (Homeopathic remedy) and increase Beta glucans to 2 caps three x daily

Please call The Diagnostic Clinic at +44 (0) 207 009 4650 for more information.

References

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