



Flu Season - To Vaccinate or Not

By Wendy Marks
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People ask me every year whether or not they should get the flu vaccine. I always feel that this is a very complicated question and try to tailor my response to the person and their particular needs. I, personally, do not get a flu shot. I'm healthy, and if I do get the flu, I can usually manage it by using herbal supplements, drinking lots of liquids, and getting adequate rest. I prefer to take the chance that I won't get it, confident that if I do I will be able to manage it without a great deal of stress, and with herbal or homeopathic assistance.

To the best of my knowledge, the flu vaccines given over the last few years did not even match the types of influenza virus that ended up being the most prevalent. How does that happen? There are different mutations and strains of virus that occur each year. Just like any bug mutates, so do flu bugs. Well, in order to get vaccines out in time for flu season, pharmaceutical manufacturers make a guess about the type of flu that will end up circulating during any given season. They are estimating things like insect vectors, (or the patterns of insects and their migration), and weather patterns in order to come up with their best idea of how flu will have evolved and mutated to become the virus that we contract. Sounds complicated? Well it is. I do believe that the intention is good. And each year I am never sure if the vaccine that arrives is going to work to really prevent whatever flu virus is active.

When I am trying to decide what to tell somebody, I also take into account that they may have a reaction to the vaccine itself. In order to work, a vaccine has to carry a small amount of living flu virus in it. Will this person have a bad reaction to that flu, or perhaps even an allergy to the shot's carrier liquid? Some people get pretty sick just from the vaccine itself. On the other hand, if someone is severely immunocompromised, has an autoimmune disease, is elderly, or has respiratory compromise, the risk of getting the wrong flu vaccine is often outweighed by the risk of this person ending up hospitalized or severely ill during the winter. For people in these situations, I usually think the flu vaccine is worth a shot. Pun intended.

A recent Johns Hopkins report by Peter Doshi in the British Medical Journal reveals that flu vaccines are often less effective at preventing illness, as well as have more side effects, than what is reported by the Centers for Disease Control.

He notes that, even given the apparent risks, drug companies and public officials press for widespread vaccination each fall, offering vaccinations in drugstores and supermarkets. He states that remarkably, only 20 years ago, 32 million doses of influenza vaccine were available in the United States on an annual basis. Today, the total is 135 million doses.

“The vaccine may be less beneficial and less safe than has been claimed, and the threat of influenza seems to be overstated,” Doshi says. Mandatory vaccination policies have been enacted, often in healthcare facilities, forcing some people to take the vaccine. Even when the vaccine matches to the type of influenza that’s prevalent, trials of healthy adults found that vaccination may only slightly reduce influenza risks. “In addition”, says Doshi, “no evidence exists to show any reduced risk of serious complications from influenza, such as hospitalizations or deaths, among seniors.”

There's another question that has been raised by both Doshi and Dr. Russell Blaylock, a neurosurgeon and author of “The Blaylock Wellness Report”, who has deep concerns over the safety and efficacy of the flu vaccine. They ask if the carrier materials for the vaccines might not have mercury or other chemicals in them that might harm populations that are more vulnerable and outweigh the possible benefit of not getting the flu.

Not only is the vaccine not safe, states Dr. Blaylock, it doesn’t even work. “The vaccine is completely worthless, and the government knows it,” he says. “There are three reasons the government tells the elderly why they should get flu shots: secondary pneumonia, hospitalization, and death. Yet a study by the Cochrane group studied hundreds of thousands of people and found it offered zero protection for those three things in the general community. It offered people in nursing homes some immunity against the flu – at best one-third – but that was only if they picked the right vaccine.”

Well, I think that we are hearing from Doshi, Blalock, and the CDC very polarized views of the vaccine and its efficacy and risk. In my experience, I have not seen extreme illness occur from people taking the vaccine, nor have I seen terrific benefit. I think it's worth reviewing this issue and thinking about it carefully before deciding whether or not to vaccinate yourself and your family members. I hope this will provide some talking points for you to discuss this issue in your house and with your doctor. Stay healthy!

Namaste, Wendy