



Written by [Rebecca Terrell](#) on February 2, 2015

Blaming Anti-vax Parents for Mickey Mouse Measles

California's measles outbreak has climbed to 91 [confirmed cases](#), prompting a vicious attack from [USA Today](#) contributor Alex Berezow against "anti-vaxxers." He blames them for the epidemic that [CDC officials](#) say was introduced at the Disneyland theme park by a person infected with measles overseas. Berezow's knee-jerk reaction is to declare, "Parents who do not vaccinate their children should go to jail." He erroneously maintains that measles could not spread in a fully vaccinated society and discredits as "ludicrous" concerns regarding the safety and effectiveness of vaccines. Claiming there is a "mountain of data" proving otherwise, his one and only citation links to a page on the federal government's vaccination-promoting website, [Vaccines.gov](#). It offers a short, unsubstantiated article that begins with the flippant pitch, "Vaccines work really well," and displays a single graph illustrating the decline in U.S. measles cases since the inoculation was introduced in 1962.



Berezow also illogically condemns religious objections as a violation of civil rights. "Your right to be sick ends where my right to be healthy begins," he quips. (But won't your inoculation protect your right to be healthy, Mr. Berezow?) He compares unvaccinated persons to drunk drivers who "pose an imminent danger to others" and says jail time for parents who turn "their children into little walking time bombs" is the only way to send a sufficiently strong message about the "deadly consequences of failing to vaccinate children."

The illegality of Berezow's proposal isn't its only problem, but it is easily the most troublesome, considering our current regulatory environment. Writing for [The New American](#) during last summer's Ebola scare, Alex Newman outlined state and federal measures already in place to strip personal liberties in the name of protecting public health. Roughly 80 percent of states across the nation have, since 2002, implemented in varying degrees the [Model State Emergency Health Powers Act](#), developed by a collaboration of government entities including the U.S. Centers for Disease Control and Prevention (CDC) and the UN World Health Organization. The act grants tremendous powers to states at the expense of personal privacy and individual freedom, allowing forced involuntary quarantines and government-mandated vaccinations during officially declared "emergencies."

On the federal level, the Public Health Service Act ([PHSA](#)), along with executive orders signed by Presidents George W. [Bush](#) and Barack [Obama](#), established broad federal quarantine authority. In the



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event of public resistance to such draconian measures, Obama is prepared to [deploy the military](#) to enforce these unconstitutional policies. Newman explained the dangers involved:

In other words, a bureaucrat could deprive a U.S. citizen of his unalienable rights — for as long as said bureaucrat considers necessary — on the mere suspicion that the person being detained has been in contact with some disease. Contrast the purported federal authorities under the [PHSA] with the plain language in the U.S. Constitution’s Fifth Amendment, which outright prohibits the deprivation of liberty without due process of law — a timeless and essential principle enshrined in the Magna Carta almost 800 years ago. State constitutions across America recognize those fundamental rights as well.

But desperate times call for desperate measures, right? Shouldn’t we be willing to part with personal liberties in the interest of public health? Aren’t diseases such as measles far worse than the prospect of forfeiting the Fifth Amendment?

Before answering “yes” to any of these questions, let’s consider a few points about vaccinations in general and measles in particular, notwithstanding Berezow’s facetious warning of the “deadly consequences of failing to vaccinate children.” First, measles is very rarely fatal, and most people [recover](#) completely. In an analysis of CDC data at [VaxTruth.org](#), Dawn Papple notes that prior to the introduction of the measles vaccine in the 1960s, only 0.015 percent of measles cases resulted in death, and the percentage of people who die globally from measles today is very low at 0.00328 percent. These numbers are not meant to downplay the tragedy of individual deaths but to illustrate that we are not talking about a killer such as [smallpox](#), so lethal that it has been used as a biological weapon of war since ancient times.

Moreover, between the early 1900s and the 1960s, numbers of both measles cases and deaths were already in steep decline because doctors discovered the efficacy of cod-liver oil, which is rich in vitamin A. [The New England Journal of Medicine](#) confirmed in 1990 that vitamin A is essential in measles treatment and declared that “*all* children with severe measles should be given vitamin A supplements, whether or not they are thought to have a nutritional deficiency.” (Emphasis added.) And while vitamin A proves itself an effective therapy, the measles vaccine cannot promise the same.

Quoting [VaxTruth.org](#): “It is worth noting that in the 2011 measles outbreak in New York, when 88 people contracted measles, the ‘ground zero’ patient was a fully-vaccinated ... 22 year-old woman.”

Which brings us to the question of vaccine safety and effectiveness in general. Researchers may call a vaccine “effective” simply because it causes the injected person to develop antibodies. However, “it is important to understand that *effective* and *protective* in vaccine research are not synonyms,” explains Dr. [Sherri Tenpenny](#), a medical doctor and outspoken critic of vaccines. (Emphasis in original.) She cites the package insert of the HiBTiter® flu vaccine, which states that “the contribution [antibodies make] to clinical protection is unknown,” and CDC literature about the pertussis vaccine, which admits, “The findings of efficacy studies have not demonstrated a direct correlation between antibody response and protection against pertussis disease.” This effective-vs.-protective distinction explains how outbreaks can occur in fully immunized populations, such as the 1985 measles epidemic in a [school](#) in Corpus Christi, Texas. Similarly, a number of cases in the current California outbreak involve previously immunized patients.

[Tenpenny](#) recalls that she was drawn into the debate years ago when she realized that “tens of thousands have been injured and have died as a result of vaccinations.” Among associated health problems are autism, sudden infant death syndrome, allergies, juvenile diabetes, and childhood



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arthritis. Yet Vaccines.gov claims, “Vaccines are some of the safest medical products available.” If this is the case, “why does our federal government protect vaccine manufacturers from product liability lawsuits?” MaryJo Perry, co-director of Mississippi Parents for Vaccine Rights, asks this question in [USA Today](#). She notes that taxpayers have been funding the U.S. Health and Human Services Administration’s Vaccine Injury Compensation Program since 1989 to the tune of \$3 billion paid to victims of these “safest” of medical products. “When citizens can’t hold corporations accountable in court for the safety and effectiveness of vaccines, it is very important to protect our legal right to vaccine exemptions,” Perry states.

Barbara Loe Fisher of the [National Vaccine Information Center](#) agrees. “From now on — unless we stand up and draw the line on vaccine mandates — the government can legally use police powers to force every American to get hundreds of vaccinations or be punished,” she writes, “while those who are hurt by vaccination can be more easily swept under the rug and left to fend for themselves.”



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