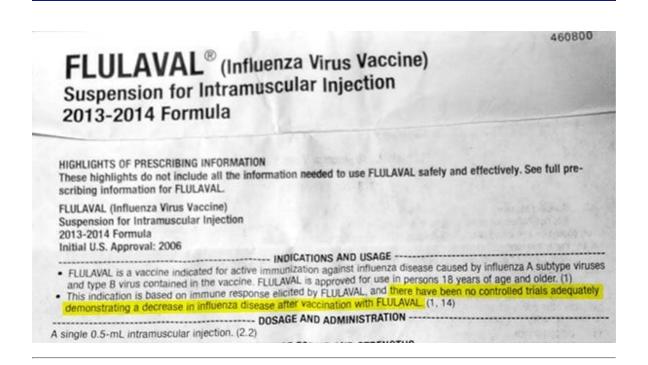
# Las 21 preguntas curiosas que nunca permiten sobre las vacunas

El Ciudadano · 2 de febrero de 2015



El signo más seguro de una dictadura médica es un bloqueo agresivamente forzada contra preguntas inteligentes. Preguntas inteligentes, después de todo, pueden destruir un estado policial médica porque exponen el fraude de la misma.

Preguntas inteligentes – que la industria de las vacunas caracteriza como "peligroso" – son la mayor amenaza para los delirios de vacunas aún se está reproduciendo a cabo en todo el mundo de hoy, que es precisamente por eso que no se permiten este tipo de preguntas que se le pregunte. Aquellos que se atreven a

hacer tales preguntas están siendo amenazados con arrestos masivos y encarcelamiento — que es la vulnerabilidad de la industria de las vacunas fraudulenta se ha convertido. Puede ser derribado por meras palabras si sólo se permiten esas palabras que se distribuirá.

¿Qué tipo de preguntas no se nos permite preguntar? Aquí están 21 preguntas censuradas, los principales medios de comunicación pharma controlado obedientes nunca se atrevió a preguntar:

Pregunta # 1) Si las vacunas contra el sarampión confieren inmunidad contra el sarampión, los niños, entonces por qué no vacunados ya-tienen nada que temer de un brote de sarampión?

Pregunta # 2) Si las vacunas funcionan tan bien, entonces ¿por qué los virólogos Merck archivo de Falsos Reclamos actuar con el gobierno de Estados Unidos , que describe el fraude científico asombroso de cómo Merck falsificó sus resultados de vacunas para engañar a la FDA?

Pregunta # 3) Si las vacunas no tienen ningún vínculo con el autismo, entonces ¿por qué un científico superior CDC confesar abiertamente al CDC cometer fraude científico al omitir selectivamente los datos de ensayos clínicos después de los hechos con el fin de ocultar un vínculo existente entre las vacunas y el autismo?

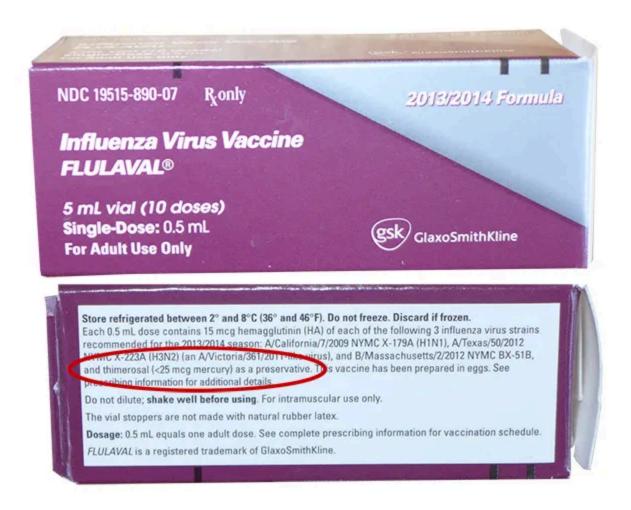
Su declaración exacta, publicado en la página web de su abogado:

Mi nombre es William Thompson. Soy un científico senior con los Centros para el Control y Prevención de Enfermedades, donde he trabajado desde 1998. Lamento que mis coautores y yo omiten información estadísticamente significativa en nuestro artículo de 2004 publicado en la revista Pediatrics. Los datos omitidos sugirieron que los hombres afroamericanos que recibieron la vacuna triple viral antes de 36 meses de edad estaban en mayor riesgo de autismo. Se tomaron

decisiones respecto a qué conclusiones para informar después se recogieron los datos, y creo que el protocolo del estudio final no fue seguido.

Pregunta # 4) Si es un producto químico neurotóxico (que lo es), entonces ¿por qué se sigue inyectando mercurio en niños y mujeres embarazadas a través de las vacunas? ¿Por qué se niega la industria de las vacunas para eliminar todo el mercurio de las vacunas en el interés de proteger a los niños de mercurio?

El gobierno de Estados Unidos nos dice que el plomo en el agua es mala, pero el mercurio en las vacunas es bueno!



Pregunta # 5) Si las vacunas son tan increíblemente seguro, entonces ¿por qué necesita la industria de las vacunas de inmunidad legal absoluta de todo daño

causado por sus productos?

Pregunta # 6) Si las vacunas funcionan tan bien para prevenir la enfermedad, entonces ¿por qué algunas vacunas (como la vacuna contra la varicela) admiten abiertamente que pueden causar la propagación de la varicela?

Clinical Data in Children

One-Dose Regimen in Children

Although no placebo-controlled trial was carried out with VARIVAX using the current vaccine, a placebo-controlled trial was conducted using a formulation containing 17,000 PFU per dose {2,14}. In this trial, a single dose of VARIVAX protected 96 to 100% of children against varicella over a two-year period. The study enrolled healthy individuals 1 to 14 years of age (n=491 vaccine, n=465 placebo). In the first year, 8.5% of placebo recipients contracted varicella, while no vaccine recipient did, for a calculated protection rate of 100% during the first varicella season. In the second year, when only a subset of individuals agreed to remain in the blinded study (n=163 vaccine, n=161 placebo), 96% protective efficacy was calculated for the vaccine group as compared to placebo.

recommendations on the use of varicella vaccine in HIV-infected individuals.

# 5.4 Risk of Vaccine Virus Transmission

Post-marketing experience suggests that transmission of vaccine virus may occur rarely between healthy vaccinees who develop a varicella-like rash and healthy susceptible contacts. Transmission of vaccine virus from a mother who did not develop a varicella-like rash to her newborn infant has been reported.

Due to the concern for transmission of vaccine virus, vaccine recipients should attempt to avoid whenever possible close association with susceptible high-risk individuals for up to six weeks following vaccination with VARIVAX. Susceptible high-risk individuals include:

- · Immunocompromised individuals;
- Pregnant women without documented history of varicella or laboratory evidence of prior infection;
- Newborn infants of mothers without documented history of varicella or laboratory evidence of prior infection and all newborn infants born at <28 weeks gestation regardless of maternal varicella immunity.

#### 5.5 Immune Globulins and Transfusions

Immunoglobulins should not be given concomitantly with VARIVAX. Vaccination should be deferred for at least 5 months following blood or plasma transfusions, or administration of immune globulin(s) {1}.

Following administration of VARIVAX, immune globulin(s) should not be given for 2 months thereafter unless its use outweighs the benefits of vaccination {1}. [See Drug Interactions (7.2).]

# 5.6 Salicylate Therapy

Avoid use of salicylates (aspirin) or salicylate-containing products in children and adolescents 12 months through 17 years of age for six weeks following vaccination with VARIVAX because of the association of Reye syndrome with aspirin therapy and wild-type varicella infection. [See Drug Interactions (7.1).]

What should you or your child avoid when getting VARIVAX?

Do not take aspirin or aspirincentaining products for 6 weeks after getting VARIVAX.

EAR HERE (Healthcare

It is rare, but possible, that once you have the vaccine, you could spread the chickenpox virus to others. Whenever possible, try to avoid contact with certain groups of people for up to six weeks after receiving the vaccine. This is because the disease for these groups may be quite serious. These groups include:

- people who have a weakened immune system.
- pregnant women who have never had chickenpox.
- newborn babies whose mothers have never had chickenpox.

# newborn babies born at less than 28 weeks of pregnancy.

Pregunta # 7) Si las vacunas son tan grandes para la salud pública, entonces ¿por qué estos gráficos históricos salud pública muestran casi todos los descensos en las enfermedades infecciosas que tienen lugar ANTES vacunas llegaron a la escena?

Lea más en GetHolisticHealth.com:

http://www.getholistichealth.com/39215/vacci...

Y ver este que hay que ver la entrevista con el Dr. Suzanne Humphries quien revela la verdad sobre las vacunas:

http://vaccineliberationarmy.com/2014/03/20/...

Pregunta # 8) Si las vacunas son perfectamente seguros, entonces ¿por qué al menos 13 personas mueren en Italia recientemente después de ser vacunado ?

Pregunta # 9) Si las vacunas son tan dignos de confianza, entonces ¿por qué un grupo pro-vacuna en África recientemente descubrir – a su conmoción y horror – que las vacunas que se les da a las mujeres jóvenes africanas fueron secretamente mezclada con productos químicos de aborto ?

Pregunta # 10) Si las vacunas están respaldados por la ciencia sólida, entonces ¿por qué algunas inserciones de vacunas admiten abiertamente que están respaldados por ningún ensayo clínico?

... No ha habido ensayos controlados que demuestren adecuadamente una disminución de la enfermedad de la gripe tras la vacunación con FluLaval.

Pregunta # 11) Si las vacunas son tan seguras, entonces ¿por qué no admitir este inserto vacuna que la vacuna Gardasil causa "enfermedad respiratoria aguda" en los bebés que consumen la leche materna de madres que han sido vacunadas?

respectively (representing 4.6% and 2.4% of the total number of women who were breast-feeding during the period in which they received GARDASIL or AAHS control, respectively), experienced a serious adverse reaction.

In a post-hoc analysis of clinical studies, a higher number of breast-feeding infants (n=7) whose mothers received GARDASIL had acute respiratory illnesses within 30 days post vaccination of the mother as compared to infants (n=2) whose mothers received AAHS control.

#### 8.4 Pediatric Use

Safety and effectiveness have not been established in pediatric patients below 9 years of age.

#### 8.5 Geriatric Use

The safety and effectiveness of GARDASIL have not been evaluated in a geriatric population, defined as individuals aged 65 years and over.

### 8.6 Immunocompromised Individuals

The immunologic response to GARDASIL may be diminished in immunocompromised individuals [see Drug Interactions (7.4)].

Pregunta # 12) Si las vacunas son tan seguras, entonces ¿por qué no esta Gardasil insertar hoja de admitir que las causas de la vacuna "convulsiva actividad, dolor de

cabeza, fiebre, náuseas y mareos", e incluso puede causar los inyectados con la vacuna a perder el conocimiento y la caída, resultando en lesiones?

component, or area a firmon a good or or mortoir face hearthfrom [11]"]

#### 5 WARNINGS AND PRECAUTIONS

#### 5.1 Syncope

Because vaccinees may develop syncope, sometimes resulting in falling with injury, observation for 15 minutes after administration is recommended. Syncope, sometimes associated with tonic-clonic movements and other seizure-like activity, has been reported following vaccination with GARDASIL. When syncope is associated with tonic-clonic movements, the activity is usually transient and typically responds to restoring cerebral perfusion by maintaining a supine or Trendelenburg position.

# 5.2 Managing Allergic Reactions

Appropriate medical treatment and supervision must be readily available in case of anaphylactic reactions following the administration of GARDASIL.

#### 6 ADVERSE REACTIONS

Overall Summary of Adverse Reactions

Headache, fever, nausea, and dizziness; and local injection site reactions (pain, swelling, erythema, pruritus, and bruising) occurred after administration with GARDASIL.

Syncope, sometimes associated with tonic-clonic movements and other seizure-like activity, has been reported following vaccination with GARDASIL and may result in falling with injury; observation for 15 minutes after administration is recommended. [See Warnings and Precautions (5.1).]

Anaphylaxis has been reported following vaccination with GARDASIL.

#### 6.1 Clinical Trials Experience

GARDASIL has not been demonstrated to provide protection against disease from vaccine and non-vaccine HPV types to which a person has

previously been exposed through sexual activity.

Since syncope has been reported following vaccination sometimes resulting in falling with injury, observation for 15 minutes after administration is recommended.

Vaccine information is required to be given with each vaccination to the

patient, parent, or guardian.

- Information regarding benefits and risks associated with vaccination.
- GARDASIL is not recommended for use in pregnant women.
- Importance of completing the immunization series unless contraindicated.
- Report any adverse reactions to their health care provider.

Fainting can happen after getting GARDASIL. Sometimes people who faint can fall and hurt themselves. For this reason, your health care provider may ask you to sit or lie down for 15 minutes after you get GARDASIL. Some people who faint might shake or become stiff. This may require evaluation or treatment by your health care provider.

Make sure that you get all 3 doses on time so that you get the best protection. If you miss a dose, talk to your health care provider.

Can other vaccines and medications b

TEAR HERE (Patient Information ealthcare Professional Information

What are the possible side effects of GARDASIL?

The most common side effects with GARDASIL are:

• pain, swelling, itching, bruising, and redness at the injection site

• headache

• fever

• nausea

• dizziness

• vomiting

• fainting

There was no increase in side effects with GARDASIL are:

Healthcare Professional Information FAR HERE Patient Information

Other side effects have been reported. Some of them were serious. These include bruising more easily than normal; red or purple, flat, pinhead spots under the skin; severe paleness; difficulty walking; severe skin disorders; skin infection; and chickenpox. Rarely, swelling of the brain, stroke, inflammation of the lungs (known as pneumonia or pneumonitis), and seizures with or without a fever have been reported. It is not known if these rare side effects are related to the vaccine.

Your doctor has a more complete list of side effects for VARIVAX.

Tell your doctor or healthcare professional if you or your child have any new or unusual symptoms after getting VARIVAX.

Pregunta # 13) Si las vacunas son totalmente seguros, entonces ¿por qué hojas de inserción vacuna de manifiesto una larga lista de efectos secundarios espantosos y extraños asociados con sus vacunas?

comparable to the profile seen in girls and women 9 through 26 years or age.

#### 6.2 Postmarketing Experience

The following adverse events have been spontaneously reported during post-approval use of GARDASIL. Because these events were reported voluntarily from a population of uncertain size, it is not possible to reliably estimate their frequency or to establish a causal relationship to vaccine exposure.

Blood and lymphatic system disorders: Autoimmune hemolytic anemia, idiopathic thrombocytopenic purpura, lymphadenopathy.

Respiratory, thoracic and mediastinal disorders: Pulmonary embolus.

Gastrointestinal disorders: Nausea, pancreatitis, vomiting,

General disorders and administration site conditions: Asthenia, chills, death, fatigue, malaise.

Immune system disorders: Autoimmune diseases, hypersensitivity reactions including anaphylactic/anaphylactoid reactions, bronchospasm, and urticaria.

Musculoskeletal and connective tissue disorders: Arthralgia, myalgia.

Nervous system disorders: Acute disseminated encephalomyelitis, dizziness, Guillain-Barré syndrome, headache, motor neuron disease, paralysis, seizures, syncope (including syncope associated with tonic-clonic movements and other seizure-like activity) sometimes resulting in falling with injury, transverse myelitis.

Infections and infestations: cellulitis.

Vascular disorders: Deep venous thrombosis.

DOUG INTERACTIONS

In addition, adverse events reported at a rate of ≥1% are listed in decreasing order of frequency: upper respiratory illness, headache, fatigue, cough, myalgia, disturbed sleep, nausea, malaise, diarrhea, stiff neck, irritability/nervousness, lymphadenopathy, chills, eye complaints, abdominal pain, loss of appetite, arthralgia, otitis, itching, vomiting, other rashes, constipation, lower respiratory illness, allergic reactions (including allergic rash, hives), contact rash, cold/canker sore.

# 6.2 Post-Marketing Experience

Broad use of VARIVAX could reveal adverse events not observed in clinical trials.

The following additional adverse events, regardless of causality, have been reported during post-marketing use of VARIVAX:

Body as a Whole

Anaphylaxis (including anaphylactic shock) and related phenomena such as angioneurotic edema, facial edema, and peripheral edema.

Hemic and Lymphatic System

Aplastic anemia; thrombocytopenia (including idiopathic thrombocytopenic purpura (ITP)).

Infections and Infestations

Varicella (vaccine strain).

Nervous/Psychiatric

Encephalitis; cerebrovascular accident; transverse myelitis; Guillain-Barré syndrome; Bell's palsy; ataxia; non-febrile seizures; aseptic meningitis; dizziness; paresthesia.

Respiratory

Pharyngitis; pneumonia/pneumonitis.

Skin

Stevens-Johnson syndrome; erythema multiforme; Henoch-Schönlein purpura; secondary bacterial infections of skin and soft tissue, including impetigo and cellulitis; herpes zoster.

Sólo algunos de los efectos adversos experimentados después de la gripe vacunas tomadas incluyen:

- Dolor en los ojos y dolor en el pecho
- Artritis

- Mareos, temblores y pérdida de consciencia (síncope)
- Las convulsiones y convulsiones
- Síndrome de Guillain-Barré
- parálisis del nervio craneal o parálisis de las extremidades
- Inflamación del cerebro
- parálisis facial parcial
- ... Y mucho más. Vea el mismo texto:

Postmarketing Experience

In addition to reports in clinical trials, the following adverse events have been identified during postapproval use of FLULAVAL. Because these events are reported voluntarily from a population of uncertain size, it is not always possible to reliably estimate their incidence rate or establish a causal relationship to the vaccine. Adverse events described here are included because: a) they represent reactions which are known to occur following immunizations generally or influenza immunizations specifically; b) they are potentially serious; or c) the frequency of reporting.

Blood and Lymphatic System Disorders: Lymphadenopathy.

Eye Disorders: Eye pain, photophobia.

Gastrointestinal Disorders: Dysphagia, vomiting.

General Disorders and Administration Site Conditions: Chest pain, injection site inflammation, asthenia, injection site rash, influenza-like symptoms, abnormal gait, injection site bruising, injection site sterile abscess.

Immune System Disorders; Allergic edema of the mouth, anaphylaxis, allergic edema of the throat.

Infections and Infestations; Rhinitis, laryngitis, cellulitis.

Musculoskeletal and Connective Tissue Disorders: Muscle weakness, arthritis.

Nervous System Disorders: Dizziness, paresthesia, hypoesthesia, hypokinesia, tremor, somnolence, syncope, Guillain-Barré syndrome, convulsions/seizures, facial or cranial nerve paralysis, encephalopathy, limb paralysis.

Respiratory, Thoracic, and Mediastinal Disorders: Dyspnea, dysphonia, bronchospasm, throat tightness. Skin and Subcutaneous Tissue Disorders; Urticaria, localized or generalized rash, pruritus, sweating. Vascular Disorders: Flushing, pallor.
Adverse Events Associated With Influenza Vaccines

Anaphylaxis has been reported after administration of FLULAVAL. Although FLULAVAL contains only a limited quantity of egg protein, this protein can induce immediate hypersensitivity reactions among persons who have severe egg allergy. Allergic reactions include hives, angioedema, allergic asthma, and systemic anaphylaxis [see Contraindications (4)]. Neurological disorders temporally associated with influenza vaccination such as encephalopathy, optic neuri-

tis/neuropathy, partial facial paralysis, and brachial plexus neuropathy have been reported.

Microscopic polyangitis (vasculitis) has been reported temporally associated with influenza vaccination.

#### DRUG INTERACTIONS

Concomitant Administration With Other Vaccines 7.1

FLULAVAL should not be mixed with any other vaccine in the same syringe or vial. There are insufficient data to assess the concomitant administration of FLULAVAL with other vaccines. When concomitant administration of other vaccines is required, the vaccines should be administered at different injection sites.

Immunosuppressive therapies, including irradiation, antimetabolites, alkylating agents, cytotoxic drugs, and cortico-Immunosuppressive Therapies steroids (used in greater than physiologic doses), may reduce the immune response to FLULAVAL.

## USE IN SPECIFIC POPULATIONS

Pregnancy 8.1

A reproductive and developmental toxicity study has been performed in female rats at a dose approximately 56 times the

human dose (on a mg/kg basis) and revealed no evidence of impaired female fertility or harm to the fetus due to FLULAVAL. There are, however, no adequate and well-controlled studies in pregnant women. Because animal reproduction studies are not always predictive of human response, FLULAVAL should be given to a pregnant woman only if clearly needed.

In a reproductive and developmental toxicity study, the effect of FLULAVAL on embryo-fetal and pre-weaning development was evaluated in pregnant rats. Animals were administered FLULAVAL by intramuscular injection once prior to opment was evaluated in pregnant rats. Animals were administered PCDEVAL by initial indectation face prior to gestation, and during the period of organogenesis (gestation days 6, 8, 11, and 15), 0.1 mL/rat/occasion (approximately 56-fold excess relative to the projected human dose on a body weight basis). No adverse effects on mating, female fertility, pregnant parameters, and embryo-fetal or pre-weaning development were observed. There were no pregnant visitation, lactation parameters, and embryo-fetal or pre-weaning development were observed. vaccine-related fetal malformations or other evidence of teratogenesis.

Pregnancy Registry: GlaxoSmithKline maintains a surveillance registry to collect data on pregnancy outcomes and newborn health status outcomes following vaccination with FLULAVAL during pregnancy. Women who receive FLULAVAL during pregnancy should be encouraged to contact GlaxoSmithKline directly or their healthcare provider should contact GlaxoSmithKline by calling 1-888-452-9622.

Pregunta # 14) Si las vacunas están respaldados por tanto "la ciencia", entonces ¿por qué con frecuencia admiten que realmente no son ningún estudio de la vacuna para los mismos grupos de personas que a menudo son inyectados con él?



Reproduction studies have been performed in female rats at doses equivalent to the recommended human dose and have revealed no evidence of impaired female fertility or harm to the fetus due to GARDASIL. There are, however, no adequate and well-controlled studies in pregnant women. Because animal reproduction studies are not always predictive of human responses, GARDASIL should be used during pregnancy only if clearly needed.

Pregunta # 15) Si las vacunas son tan seguras para dar a las mujeres embarazadas, entonces ¿por qué las hojas de inserción vacuna admiten abiertamente la mayoría de ellos nunca se han probado para la seguridad en las mujeres embarazadas? De hecho, esta vacuna admite que "los efectos de la vacuna en el desarrollo fetal son desconocidos."

Pregnancy: Do not administer VARIVAX to females who are pregnant; the possible effects of the vaccine on fetal development are unknown. Pregnancy should be avoided for 3 months following vaccination with VARIVAX. (4.4, 8.1, 17)

Report vaccine exposure during pregnancy by calling 1-800-986-8999.

Reproduction studies have been performed in female rats at doses equivalent to the recommended human dose and have revealed no evidence of impaired female fertility or harm to the fetus due to GARDASIL. There are, however, no adequate and well-controlled studies in pregnant women. Because animal reproduction studies are not always predictive of human responses, GARDASIL should be used during pregnancy only if clearly needed.

Pregunta # 16) Si las vacunas son tan seguros para ser inyectado en los cuerpos de los niños y las mujeres embarazadas, entonces ¿por qué sus propias hojas de inserción admitir fácilmente que se fabrican con un cóctel de ingredientes químicos tóxicos, incluyendo "suero fetal bovino?" (El suero de la sangre de terneros abortados.)

minimum of 1350 plaque-forming unto IPFU of Ota Merck varicula ways when reconstituted and stored at room temperature for a maximum of 30 minutes. Each 0.5-mL dose also contains approximately 25 mg of sucrose 12.5 mg hydrolyzed gelatin, 3.2 mg of sodium chloride, 0.5 mg of monosodium L-glutamate, 0.45 mg of sodium phosphate dibasic, 0.08 mg of potassium phosphate monobasic, and 0.08 mg of potassium chloride. The product also contains residual components of MRC-5 cells including DNA and protein and trace quantities of sodium phosphate monobasic, EDTA, neomycin and fetal bovine serum. The product contains no preservative.

#### 12 CLINICAL PHARMACOLOGY

about VARIVAX?

Inactive Ingredients: sucrose, hydrolyzed gelatin, sodium chloride, monosodium L-glutamate, sodium phosphate dibasic, potassium phosphate monobasic, potassium chloride, residual components of MRC-5 cells including DNA and protein, sodium phosphate monobasic, EDTA, neomycin, fetal bovine serum.

Pregunta # 17) Si las vacunas lograr inmunidad absoluta, entonces ¿por qué son tantos como el 97 por ciento de los niños golpeado por las enfermedades infecciosas ya vacunado contra esa enfermedad ?

Pregunta # 18) Si las vacunas son totalmente seguros y eficaces, entonces ¿por qué esta de cinco años de edad, niña murió recientemente, desde el tipo de gripe que sólo estaba vacunado contra ?

Pregunta # 19) Si los medios de comunicación pretende informar, información imparcial honesto acerca de las vacunas, entonces ¿por qué hubo un apagón total nacional en el noticiero de la denunciante CDC admitir vacunas están vinculados con el autismo?

Esta fue una de las historias de las noticias médicas más censuradas de 2014 , y el penal de encubrimiento de los CDC se remonta más de 12 años ...

Pregunta # 20) ¿Por qué la CDC falsamente afirman todas las vacunas son totalmente seguros y efectivos cuando su propio sitio web todavía se enumeran los ingredientes químicos tóxicos utilizados en las vacunas?

La CDC admite abiertamente que el mercurio, formaldehído, MSG, aluminio, antibióticos y otros químicos **todavía** se **utilizan en las vacunas.** Aquí hay una captura de pantalla de la página aditivos de vacunas de la página web de los CDC que lo confirma:



- Aluminum gels or salts of aluminum which are added as adjuvants to help the vaccine stimulate a better response. Adjuvants help promote an earlier, more potent response, and more persistent immune response to the vaccine.

  See also: "Aluminum in Vaccines: What you should know ☐ [2 pages] ☐ Also available in Spanish ☐ [2 pages] ☐
- Antibiotics which are added to some vaccines to prevent the growth of germs (bacteria) during production and storage of the vaccine. No vaccine produced in the United States contains penicillin.
- Egg protein is found in influenza and yellow fever vaccines, which are prepared using chicken eggs. Ordinarily, persons who are able to eat eggs or egg products safely can receive these vaccines.
- Formaldehyde is used to inactivate bacterial products for toxoid vaccines, (these are vaccines
  that use an inactive bacterial toxin to produce immunity.) It is also used to kill unwanted
  viruses and bacteria that might contaminate the vaccine during production. Most formaldehyde
  is removed from the vaccine before it is packaged.
- Monosodium glutamate (MSG) and 2-phenoxy-ethanol which are used as stabilizers in a few vaccines to help the vaccine remain unchanged when the vaccine is exposed to heat, light, acidity, or humidity.
- Thimerosal is a mercury-containing preservative that is added to vials of vaccine that contain more than one dose to prevent contamination and growth of potentially harmful bacteria.

For children with a prior history of allergic reactions to any of these substances in vaccines, parents should consult their child's healthcare provider before vaccination.

SOURCE: http://www.cdc.gov/vaccines/vac-gen/additives.htm

Haga clic aquí para leer una lista más completa de los ingredientes de vacunas tóxicas y metales pesados que aún se utilizan en las vacunas administradas a los niños de hoy.

Pregunta # 21) Si la industria de las vacunas se preocupa tanto por los niños, entonces ¿por qué piden el arresto de los padres y la ruptura de las familias de los niños no vacunados , rogando por el estado para apoderarse de la custodia de los hijos a punta de pistola y encarcela a los padres en la cárcel?

via **Quitar el velo** 

Fuente: El Ciudadano