

## **Vaccines, Encephalitis, and the Brain**

Myelination is a developmental process by which the brain insulates neuro-pathways with a fatty substance called myelin. This insulation will keep neuro-chemical synapses from leaking into other pathways causing developmental challenges and cortical spillage. Myelination begins in the lower levels of the brain, as in the brain stem, and then moves upward to the areas of the brain such as the prefrontal lobe and cortex. This insulating process spreads through the nervous system in predictable developmental stages. This myelination process will continue past the teenage years and into the early twenties before completion.

The last areas to myellinate are the prefrontal portions of the cerebrum. This starts to happen in the teenage years. The prefrontal areas of the cerebrum have a profound influence on human behavior. Specific areas have been identified and labeled to include areas that influence behaviors such as tact and critical decision making areas. Injuries in the tact can area bring vocalized rudeness and inappropriate behaviors in public in the affected individual. Likewise, injuries in the critical decision making area can produce a lifetime of consequences in bad choice results.

Vaccines contain adjuvants: (substances that enhance the immune response to an antigen), such as mercury and aluminum compounds. Vaccines also contain biological organisms and foreign proteins (many of these proteins and organisms come from other species of animals in which the vaccines are grown), If an individual, and especially an infant or young child, is injected with vaccines, unprotected nerves are impacted and aberrations of neurological development occur which in turn influences subsequent behavior and learning patterns. Some of these developmental aberrations include the medical diagnosis from autism to ADD/ADHD to Tourette's Syndrome and others.

It was in 1947 that Isaac Karlin suggested that stuttering was caused by "delay in the myelinization of the cortical areas in the brain concerned with speech." In 1988, research by Dietrich and others using MRI imaging of the brains of infants and children from four days old to 36 months of age have found that those that were developmentally delayed had immature and disrupted patterns of myelination.

Propitiously, it has been found that impairment of these developmental processes in myellination also alters neural communications without necessarily causing severe neural damage and while not presenting a medically diagnosed problem. These facts have been

adequately proven by science, but ignored and suppressed by mainstream medical establishment.

### **Vaccines: neuro-allergenic reactions**

In 1922, the smallpox vaccination program caused an outbreak of encephalitis, with a secondary result of Guillain-Barre Syndrome (an ascending paralysis ending in death). Consequentially, a search began in the 1920's for some organism that might cause the problem of encephalitis. The fact that the vaccinations were directly connected to the outbreak was hidden from the public until 1942.

In 1953 it was realized that some of the epidemic children's diseases, measles in particular, were demonstrating an increased propensity to attack the central nervous system. The consensus of the experts led the public to believe that childhood diseases were the culprits and that the medical community was doing the right thing in waging war against the killers. Undisclosed to the public were the facts behind a growing allergic reaction to the vaccinations for the diseases.

Then came along a "childhood" disease called polio, or poliomyelitis (a condition I have personally experienced) which involves a breakdown of the myelin sheath. Polio injuries of demyelination occur along with damage done to the anterior horn motor neurons in the spinal cord which cause paralysis. In 1956 the polio vaccine was first introduced to the United States. This same vaccine (that was highly touted as a miracle vaccine) was not introduced into Europe until 1958. If the vaccine campaign was a success, the two year difference in the time of introduction should have left an appreciable difference in the occurrence of polio between Europe and America. *It left no difference in the decline of polio between the two continents!* However, there was an appreciable difference in the rise of certain unexplained neurological injuries in the two years difference. This anomaly was caused by a condition involving an allergic reaction in encephalitis.

The role of the allergic reaction in encephalitis was first revealed in 1935, with the discovery by the researcher Thomas Rivers of the phenomenon known as "experimental allergic encephalomyelitis". Until this discovery, it was generally assumed that encephalitis was caused by viral or bacterial infection of the nervous system. In his experiments, Thomas Rivers was able to consistently produce brain inflammation in laboratory monkeys by injecting them with extracts of sterile rabbit brain and spinal cord material (adjuvants used in vaccines). This experiment made it quite apparent that encephalitis is an allergic reaction. No consistent form of encephalitis was ever produced with bacteria.

In 1978, British researcher Roger Bannister observed that the demyelinating diseases were getting even more serious "because of some abnormal process of sensitization of the nervous system". (*Remember that encephalitis, whether caused through disease or as a result of vaccination, can cause demyelination of the nerves.*) This discovery of increased "sensitivity" has in actuality been a normal progression in view of the cumulative introduction of adjuvants into the human body with vaccines. By 1978 this should have been obvious with the research conclusions. Vaccination programs have exacerbated this "sensitization" of the population to allergenic encephalitis since the introduction of vaccines. It is a matter of record that vaccinations have produced encephalitis since 1922!

At this point it is reasonable to conclude an association between post-encephalitic syndrome and either demyelination or an incomplete myelination of the brain caused by vaccine adjuvants. Unfortunately, the responsibility for a vaccine injured child lies at the feet of the parents and not the medical system. If the parent had full disclosure of the risks of vaccines, and assumed all of the rightful responsibility to the life and well-being of the child, the only sane conclusion will be one of very careful deliberation and self-research before the jab is made. The academic authorities back vaccines wholesale and with impunity even in the face of tantamount evidence against the success of vaccine programs! The medical system conveniently ducks responsibility in the waiver signed by the parent which exonerates the administrator of the vaccine from liability of injury to the child.