

## **Meryl Dorey's Trouble with the Truth Part 1**

**How Meryl Dorey Lies, Obfuscates,  
Prevaricates, Exaggerates,  
Confabulates and Confuses  
in promoting her  
Anti-Vaccination Agenda.**

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# **MERYL DOREY'S TROUBLE WITH THE TRUTH- PART 1**

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Second Edition December 2010

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**Acknowledgements:** At this point every author acknowledges the contributions of others, from Lilliputian to Brobdingnagian. To my eternal shame, I did not do this in Edition 1. So to make amends until I can make proper amends over glasses of Bollinger.....

First and foremost, anyone reading the text can see the enormous contributions of Tom Sidwell and Tabitha-Ann Gooley; Tom's analyses of Meryl Dorey's supposed "scientific references, and Tabs' descriptions of immunisation schedules.

Others also contributed, from David Hawkes' mathematical breakdown of the AVN's claimed membership numbers as shown in their Annual Financial Statement, to Peter Bowditch's probing of Dorey's claims regarding pharmaceutical companies' advertising.

But it was the never-ending critiques written by members of the Facebook group "Stop the AVN" which filled my kitbag with material and built the frame on which this booklet is built. To you my thanks; you know who you are.

## MERYL DOREY'S TROUBLE WITH THE TRUTH – PART 1

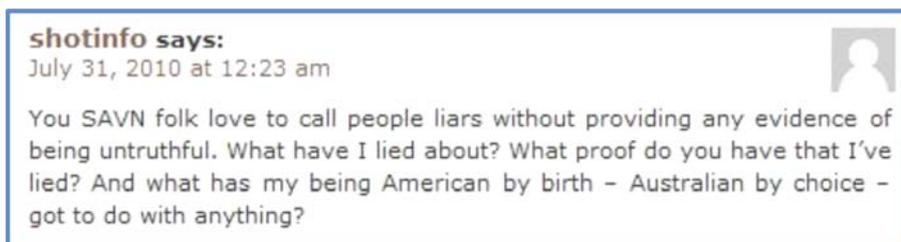
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### A LITTLE INTRODUCTION:

The Australian Vaccination Network (AVN) is a rabid group of antivaxxers based on the New South Wales north coast wedged between Australian's largest population of aging hippies and younger new-age alternative lifestylers. They are led by American citizen Meryl Dorey, and claims of membership numbers range from 300 to 2,500 depending on what day it is and the phase of the moon. For many years the AVN had a free ticket to disseminate their propaganda, thanks to a scientifically illiterate and lazy Australian media, who always turned to Dorey for a quote whenever vaccination or disease was mentioned.

Recently, a coterie of scientific, medical, and government people have begun to challenge Dorey when they detected her misrepresentations involving vaccination, and the media are beginning to seek interviews elsewhere.

Meryl Dorey, occasional President of the AVN and its persistent spokesperson, has responded to corrections made of her claims by doctors, nurses and scientists, with a certain degree of vitriol. She claims to be a truthful person, and one whose honesty can be relied on. On 31 July 2010 on her AVN website, Meryl Dorey said: *"You SAVN folk love to call people liars without providing any evidence of being untruthful. What have I lied about? What proof do you have that I've lied?"*

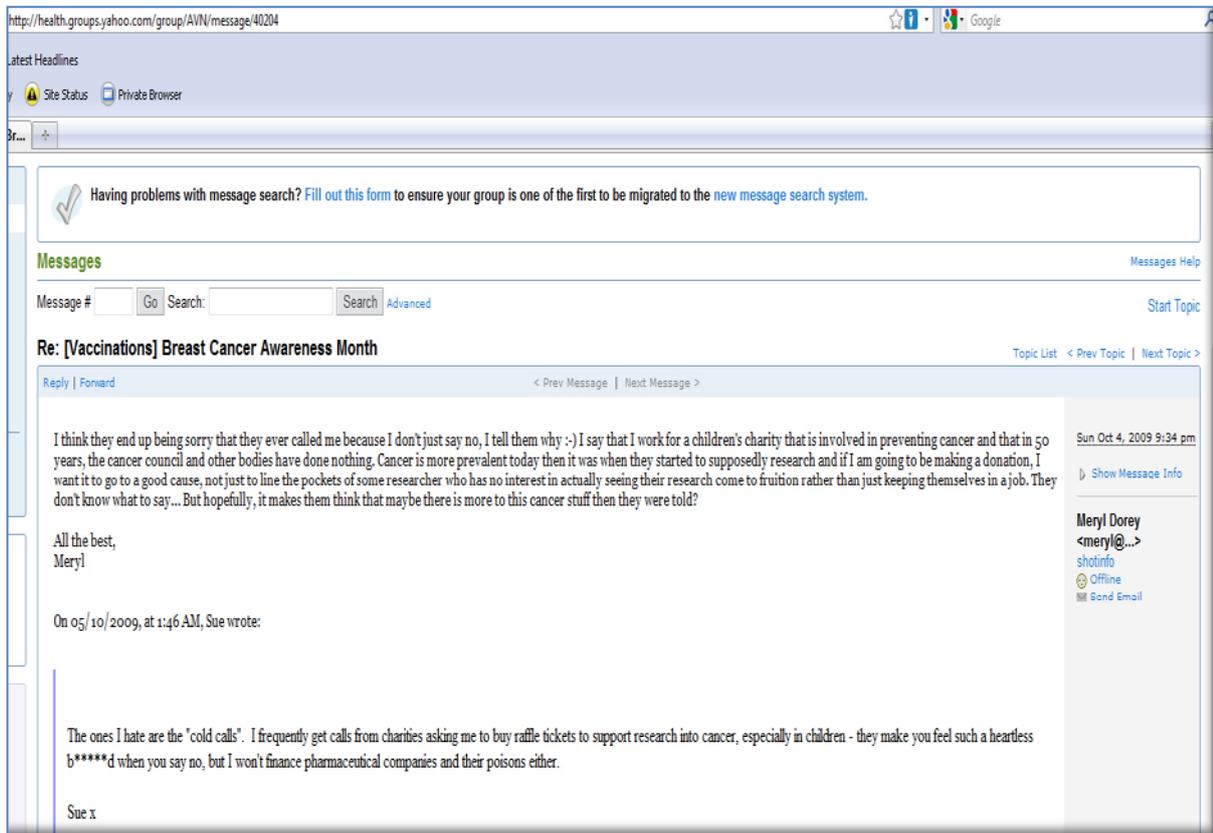


In response to that challenge, I have made a brief survey of her writings and media appearances, and come up with these. I have plenty more, but I think this is enough to convince any jury that Meryl Dorey is a serial liar and crank. This is not intended to be a complete encyclopaedia of her lies, there are just too many. It is enough to say that whenever I looked into her various publications, I found lies, and all of them denigrating vaccines.

<sup>1</sup> <http://avn.org.au/nocompulsoryvaccination/?p=776> Captured 1 August 2010.

I also show that when Dorey is presented with evidence that she lies, she prevaricates and obfuscates her way out of what to ordinary people would be a gross embarrassment, or she completely ignores the evidence altogether. I have never seen her admit an error, nor issue a correction.

**But Before We Begin, look at the following post of Dorey's:**



Here's an example of Meryl Dorey admitting to her fans and acolytes that she lies. It was posted during Breast Cancer Awareness Week 2009 during which some of the cancer-fighting charities telephone people to ask for donations. Instead of politely declining, Dorey, according to her bragging here on her Yahoo! Discussion page, launches into a farrago of taunts and lies. She says that she tells the caller "that I work for a children's charity that is involved in preventing cancer." That is a 100% lie, she does not.

The full text is:

*"Re: [vaccinations] Breast Cancer Awareness Month*

*"I think they end up being sorry that they ever called me because I don't just say no, I tell them why :) I say that I work for a children's charity that is involved in preventing cancer and that in 50 years, the cancer council and other bodies have done nothing. Cancer is more prevalent today then (sic) it was when they started to supposedly research and if I am going to make a donation, I want it to go to a good cause, not just to line the pockets of some researcher who has no interest in actually seeing their research come to fruition rather than*

*just keeping themselves in a job. They don't know what to say ...But hopefully, it makes them think that maybe there is more to this cancer stuff then (sic) they were told?*

*All the best, Meryl".<sup>2</sup>*

Words fail me. How can any rational person be so rude callous and deceitful? How can any rational person boast of being rude callous and deceitful? I don't understand that at all, so let us proceed into the murky world of Meryl Dorey's trouble with the truth.....

## **LIE 1. ASIC REGISTRATION**

On February 15 2010, in her email headed "*The Truth about the AVN Investigations*" Meryl Dorey said:

*"...we are no longer even registered with ASIC and haven't been for a couple of years."* (Attachment 1.4 page 103).

Now that is directly contradicted by documents signed and dated by Meryl Dorey herself and submitted to ASIC, the Australian Securities and Investment Commission.

See, for example, Attachment 2 (page 106), which is a document produced by ASIC to show that the AVN was registered with ASIC on 9<sup>th</sup> January 1997 with the ABN of 30 077 002 923.

See also Attachment 3.1, (page 107) a form submitted to ASIC, "*Notification of change to directors of registered body*" dated and signed by Meryl Dorey 9th September 2008.

See also Attachment 4.1, (page 111) another form submitted to ASIC "*Notification of change to directors of a registered body*" dated and signed by Meryl Dorey on 26<sup>th</sup> May 2009.

See also Attachment 5.2, (page 115), another form submitted to ASIC "*Notification of cessation, winding up or dissolution of a foreign company or registered Australian body,*" dated and signed by Meryl Dorey 1<sup>st</sup> April 2010.

ASIC confirmed by email on 25 August 2010 that the AVN "*has been deregistered as of 24/08/2010.*"

So, to make it really clear, Meryl Dorey's statement on February 15 2010 that:

*"...we are no longer even registered with ASIC and haven't been for a couple of years"*

is clearly and demonstrably a lie; she said this six weeks before submitting the deregistration documentation to ASIC and six months before ASIC completed the deregistration process.

<sup>2</sup> from <http://health.groups.yahoo.com/group/AVN/message/40204>

**LIE 2. "I DO NOT WORK IN HEALTH CARE, I DO NOT PROVIDE MEDICAL ADVICE."**

In her first response to the Health Care Complaints Commission dated 7 September 2009, Meryl Dorey said on the ninth page:

*"Neither the AVN nor myself provide any of the above services. We are not employed in community health, we do not teach or provide any other educational services nor do we work in the fields of alternative health or health care. We do not administer medications, diagnose, or provide medical advice."*

Neither the AVN nor myself provide any of the above services. We are not employed in community health, we do not teach or provide any other educational services nor do we work in the fields of alternative health or health care. We do not administer medications, diagnose, or provide medical advice.

And on the 25<sup>th</sup> page, Dorey again says:

*"Mr McLeod, claims that the AVN and myself, Meryl Dorey, are both health service providers and I am a health practitioner. We reject this claim completely. Neither the AVN nor myself provide such services. We do not work in community health, we do not teach or provide any other educational services nor do we work in the fields of alternative health or health care. We do not administer medications, diagnose, or provide medical advice."*

Mr McLeod, claims that the AVN and myself, Meryl Dorey, are both health service providers and I am a health practitioner. We reject this claim completely.

Neither the AVN nor myself provide such services. We do not work in community health, we do not teach or provide any other educational services nor do we work in the fields of alternative health or health care. We do not administer medications, diagnose, or provide medical advice.

Now compare this with her entry on the LIVEPERSON WORLD OF EXPERTS WEBSITE <sup>3</sup>, where Dorey offers her services as an "expert in Child & Adolescent Health". She states her "Experience & Qualifications" to be "20 years of research" and "I can give people good, referenced details on the side effects and effectiveness of both common childhood vaccines, adult vaccinations and travel vaccines". Her fees are "Online: \$1.00 per minute, Email: \$10 per message for short replies \$30 for long replies that give multiple..." (sic).

Note that she classifies herself in the "Health and Medicine" as an expert in "Child and Adolescent Health."

<sup>3</sup> <http://www.liveperson.com/expert/health-medicine/child-adolescent-health/shotinfo/?thid=16>

Home > Health & Medicine > Child & Adolescent Health > shotinfo



**shotinfo**  
 Expert in: [Child & Adolescent Health](#)  
 Rating: ★ NEW! ★  
 Languages: English

Spokesperson, Australian Vaccination Network - Editor, Living Wisdom magazine

💡 All sessions start FREE!

📧 Online: **\$1.00 per minute** [\(Convert currency\)](#)  
 📧 Email: **\$10 per message for short replies** [\(Convert currency\)](#)  
**\$30 for long replies that give multiple...**

[Send Email](#) Away

▶ [Notify me when available](#)  
 ▶ [See Similar Experts Online](#)

Does this matter? Well, yes, this matters very much. The NSW Health Care Complaints Commission, accepting Dorey’s submission here, agreed that they have no jurisdiction over her personally. The HCCC report said on its page 27:

*"There is also the difficulty of clearly legally establishing who Ms Dorey's client base is. The Act defines a client as 'a person who uses or receives a health service, and includes a patient. It seems unlikely that it could be established that a person who either seeks advice directly from Ms Dorey or reads information posted by her on the AVN website is her client.*

*"The context of this clause of the Code of Conduct is that it was largely to prevent unregistered practitioners potentially endangering the health or safety of their clients by advising them against conventional proven treatments by a registered medical practitioner. There is no evidence that Ms Dorey has done so and there is insufficient basis for the Commission to take action on this issue with respect to the Code of Conduct." (See page 79),*

So Dorey’s submission that she does not “work in the fields of alternative health or health care” and does not “diagnose, or provide medical advice” is a lie.

### **LIE 3. “136 OF 139 PHARMACEUTICAL AND VACCINE MANUFACTURING FACILITIES IN AUSTRALIA HAVE FAILED THEIR TGA AUDITS”**

She said this in a letter to “Southern Highland News” on 27 August 2010 and on the AVN website <sup>4</sup>

The source for this lie was an article in “The Australian” on July 19 2010, “Checks by the TGA reveal 98 per cent of drug labs have problems” by Natasha Bitá. The article begins:

<sup>4</sup> (<http://avn.org.au/nocompulsoryvaccination/?p=828> 29 August 2010.

*“Deficiencies have been uncovered at 98 per cent of the pharmaceutical laboratories audited by the drugs regulator in the past year.*

*“The federal government's Therapeutic Goods Administration yesterday revealed that only three of the 139 labs it audited last financial year were problem-free.*

*"Deficiencies were identified in 136 of the 139 sites manufacturing medicines, requiring corrective action by the manufacturer," a TGA spokeswoman told The Australian. "All identified deficiencies are corrected following audit, with some requiring follow-up audits to verify and confirm that implementation has been effective."*

Nowhere does the article say anywhere that any facility “failed.” Yes, deficiencies were found: that is what audits are supposed to do, to find deficiencies so that performance may be improved. If sufficient deficiencies are found to the extent that the facility is known to have failed to maintain a set standard, the auditors may declare that the facility had failed and manufacturing licences are cancelled or suspended. They did not do so in this case. All human activities of with the degree of complexity involved in manufacturing pharmaceuticals will have errors; that is to be expected, but to go from “deficiencies” to “fail” is just plain dishonest, or displaying a shocking ignorance of how manufacturers and government regulators work, or both.

The TGA say it much better than I can. In an email dated 31 August 2010, Michel Lok, Head of Office, Office of Manufacturing Quality, Therapeutic Goods Administration, says:

*“The information cited below (‘136 of 139 pharmaceutical and vaccine manufacturing facilities in Australia have failed their TGA audits’) is incorrect - there are very few sites found to have unsatisfactory compliance, and in these cases, licences are withheld or regulatory action is taken. The data actually refers to the number of medicinal manufacturing sites audited last year in Australia at which a deficiency against the Code of GMP<sup>5</sup> was reported. It is quite common for deficiencies to be observed and manufacturers are usually able to correct these promptly. More significant deficiencies are assessed by the TGA through risk assessment, with appropriate action is taken to protect consumer safety.”*

Dorey went on to say in the article that *“this hasn’t merited so much as a mention in the press. It seems that drug companies have a privileged position in our society....”*

That is not true either: The story was printed in “The Australian” on 19 July 2010, and on “The Australian” ’s website.<sup>6</sup>

<sup>5</sup> “Australian code of good manufacturing practice for medicinal products”

<sup>6</sup> <http://www.theaustralian.com.au/news/nation/checks-by-the-tga-reveal-98-per-cent-of-drug-labs-have-problems/story-e6frg6nf-1225893662606>

#### **LIE 4. COPYRIGHT BREACHES WERE "IGNORANCE RATHER THAN FRAUDULENCE"**

On September 1, 2010, the Sydney Morning Herald ran the story "*Copyright breaches land group in trouble*" by Kate Benson. It said:

*"An anti-vaccination group is under fire for allegedly breaching copyright laws by selling newspaper and medical journal articles online without permission from the authors.*

*"The Australian Vaccination Network, which was the subject of a public warning issued by the Health Care Complaints Commission last month, withdrew 11 information packs from its website yesterday after complaints from authors.*

*"The packs, which were selling for up to \$128, included home-made books filled with articles photocopied from journals around the world, information on drugs taken from MIMS, the medical guide used by doctors and nurses, and copies of brochures inserted in medication boxes by pharmaceutical companies. Under the Copyright Act, articles can be copied for personal research or for use by students but cannot be disseminated widely or sold.*

*"For most works, copyright lasts for 70 years after the death of the creator or 70 years after the work was first published but none of the authors contacted by the Herald knew their work was being sold."*

The story went on to list several authors whose work had been photocopied and sold by the AVN without permission from the copyright owners. The story went on to quote Meryl Dorey as saying:

*"she was unaware she had breached copyright but accepted there had been problems with her licence. We've made mistakes but they've been honest mistakes. They've been out of ignorance rather than fraudulence."*

What?? *"ignorance rather than fraudulence" ??*

It is hard to believe that anyone living in the 21<sup>st</sup> Century can be ignorant of copyright law. It is even more difficult for Meryl Dorey to claim that she was ignorant of copyright law when you consider these posts made by her to her members:

## Copyright on medical journal articles

Message List

Reply Message #44185 of 44565 < Prev < Prev | Next > Next >

Fri Jun 25, 2010 9:00 am

Show Message Option

Meryl Dorey <meryl@...>  
shotinfo  
Offline  
Send Email

Hi,  
Just a fishing expedition here :-) We are currently scanning in all of our hard copy medical journal articles and putting them onto the computer - it is wonderful! They are all text searchable and I just put in a word - and there are the articles - ahhhhh! LOL

Anyway, I would love to put lots of these up on our website for others to have access to - we have information going back to the turn of the 20th century and I think this should be in the public domain but I don't want to breach copyright. Does anyone have any information on how long copyright lasts on these sorts of things and whether - if we are not charging for access, we can post articles up claiming fair use?

Any help would be appreciated. I don't want to run into the same situation we had when we posted the package inserts up on the website and were told by Mims that they hold the copyright and we had to take them down.

Thanks,  
Meryl

## Scanned vaccination archives plus current information

Message List

Reply Message #44509 of 44531 < Prev | Next >

Mon Aug 23, 2010 12:19 pm

Show Message Option

Meryl Dorey <meryl@...>  
shotinfo  
Offline  
Send Email

Hi,

<http://www.evernote.com/pub/shotinfo/sharedvaccination>

I have been trying to work out how to share the information the AVN has collected over the years that we have been scanning for the last little while (only scanned about 10% of our info - this is a BIG job!) and I have started putting them into Evernote and have hopefully set up a shared folder so that everyone can access this. Please give it a go and see what you think. This is all indexed by word (though some of the older articles are a bit unclear so the indexing may not have worked too well for them) so a search should bring up anything you are looking for and I am updating this every single day (when I have 10 minutes spare, this is what I do - I know - get a life! LOL) so keep checking back.

Please let me know how it works for you and I hope this will be a really good resource for any parent who is looking to make an informed decision or for the healthcare practitioners who want to add to their libraries.

All the best,  
Meryl

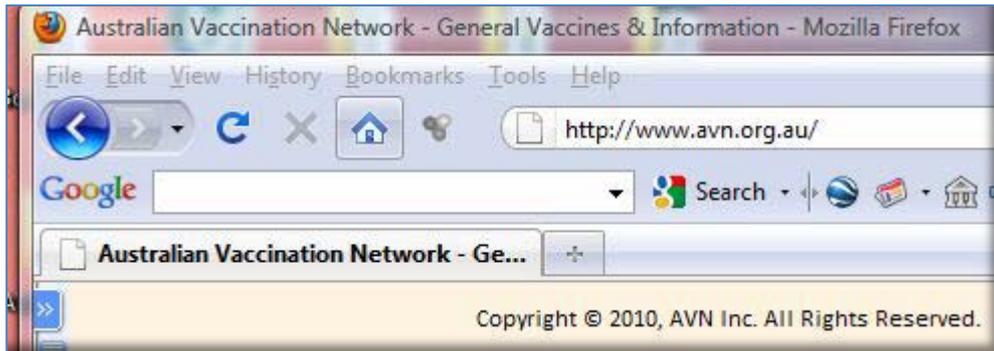
PS - I have not included the medical journal articles because of fear of copyright problems but we have thousands and thousands of articles. If anyone knows of a way to share this that won't step on any toes, please let me know. I have been given the name of an attorney in the US who I plan on contacting when I have 2 seconds free - but if anyone has the answer off the top of their heads, I would really appreciate that.

These posts were made 9 weeks and 1 week before speaking to Kate Benson. They show that Dorey was well aware of the risks of breaching copyright.

Meryl Dorey is editor of the AVN's "Living Wisdom" magazine. In Issue 2 2009, the editorial information on page 7 reads:

*"Permission to reproduce policy: .....it is expressly forbidden for anyone to reproduce any of this information for the purpose of profit..."*

Or go to the AVN website to find at the very top:



What's that about sauce for the goose?

To make matters worse, one of the AVN's Board members was Melissa Beg, a solicitor who claims on her website boasts that she has *"unique specialist expertise in intellectual property and technology law."*<sup>7</sup>

It's not as if Meryl Dorey is not familiar with the process of granting permission to reproduce copyright material; she has done that herself. See this website page, where chiropractors Ari Diskin and Travis Wild advertise their business with long articles on chiropractic care.<sup>8</sup>



At the very bottom of the page, we find:



But wait! There's more.... On 7 September, only one week after the Sydney Morning Herald exposed her many breaches of copyright law, Meryl Dorey was caught using the name and logo of Murdoch University, as in this screencap. A concerned citizen alerted the University,

<sup>7</sup> at [www.bangalaw.com.au](http://www.bangalaw.com.au)

<sup>8</sup> <http://www.wellnessmap.org/research-library/natural-health-practices/network-care.html>

who was not too pleased. The Office of Legal & Governance at Murdoch has said: "Please be assured we are taking steps to address this."<sup>9</sup>

View History Bookmarks Tools Help  
http://www.healthpetitions.com.au/coercive-mandatory-immunisation-nsw

Health Petitions Facebook (44) | Stop the Aust

**avn** Australian Vaccination Network  
**The AVN urges you to investigate before you vaccinate!**

**Join Us – Sign the AHFA Stop Mandatory Immunisation Petition Today!**  
(New South Wales residents only)

This petition is demanding the repealing and or amending of the laws past by the NSW Parliament, requiring health care workers to submit to mandatory vaccination as a requirement of their employment or placement (university student). This is a violation of our human rights. This petition can be sent by NSW residents only.

**Coercive and Mandatory Immunisation: how ethical is this policy?**

**Murdoch UNIVERSITY**

**Please click here:**  
[Statistical graphs and information on vaccination](#)  
[Vaccination - The Hidden Facts by Ian Sinclair](#)

This petition was sponsored by the Australian Vaccination Network (AVN)  
<http://avn.org.au>

Sign this petition by filling out the form below. We'll include your online signature in a petition report delivered to every Member of the New South Wales Parliament. As this is

**Stop the Immu**  
Help us re  
sent to th  
Signatures  
**Petitions**  
Dear Me  
I wish  
repeal  
mandat  
for hea  
is une  
consid  
literat  
potent  
Vaccin  
health  
individ  
weaken  
into th  
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Chronic  
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in lif

And there's more: This is a recent screen capture from the AVN website.

Similar to 'Package Inserts' these Data Sheets contain information provided by the vaccine manufacturer and list ,among other things, the vaccine's ingredients and possible side effects.

We here at the AVN had the up-to-date Australian vaccination information on our website for years. Unfortunately, a couple of years ago, we were ordered to remove these details due to supposed copyright issues though they are freely available across the Tasman as you can see.

<sup>9</sup> Email 17 September 2010.

So her excuse to the Sydney Morning Herald that she was “unaware she had breached copyright “..... “We've made mistakes but they've been honest mistakes. They've been out of ignorance rather than fraudulence....” has been disproved by;

- her two discussions on copyright law on her Yahoo! Discussion page;
- her approval for chiropractors Ari Diskin and Travis Wild to reproduce AVN articles;
- her publication, as editor of “Living Wisdom” magazine of that magazine’s restrictive copyright policy;
- her sitting next to a copyright lawyer in AVN executive and board meetings;
- her copyright claim at the top of the AVN website;
- her experience of being ordered to remove copyright material from her website “a couple of years ago.”

Dorey has shown, as an editor and publisher and through experience, that she understands copyright law. Her continuing to use the Murdoch University name and logo for at least seven weeks after being caught, is more a matter of stubborn wilfulness and complete disregard for the lawful rights of others. (The Murdoch Uni name and logo was still published by the AVN on the web when I last looked on 25 October 2010.)

So the claim that her extensive photocopying and selling of copyright material without permission was done through “ignorance rather than fraudulence” was a lie.

#### LIE 5. “NO VILIFICATION”.

In her email newsletter of 15 February, (Attachment 1.2), Dorey said “I never have and never will stoop to the level of personal attacks, vilification, and the underhanded lying tactics.....” Compare that clear statement with her submission to the NSW Health Care Complaints Commission dated 7 September 2009,<sup>10</sup> in which she says of me:

Please also be advised that Mr McLeod has made numerous direct communications to the AVN and myself via email communication over the last few years, and such communications have been very rude and aggressive in tone and intimidating in nature, particularly towards myself. I have found

and:

our response to him will just generate more hostility and aggression by him

and:

I can give no explanation for the ferocity with which he pursues both myself

<sup>10</sup> [http://avn.org.au/library/images/pdfs/hccc\\_reply.pdf](http://avn.org.au/library/images/pdfs/hccc_reply.pdf)

And:

other health issues. However, the threat that he poses and continues to pose to me and my family is very real. For these reasons, I and the AVN request

Well, if that's not vilification, what is? But wait! There's more! In her "Living Wisdom" newsletter dated 1 September 2009, she said of me:

In conjunction with the HCCC complaint, several anti-AVN websites have sprung into existence, some of them inciting violence against AVN activities and myself.

A recent seminar which the AVN hosted was an example of this effort with slanderous letters written by the author of the HCCC complaint and others associated with the Skeptics forcing us to change venues at the last minute. Due to these threats, for the first time in 16 years, we hired a security guard for my talk - something which was never necessary before.

As it was by then well known that I was the author of the HCCC complaint, she has directly alleged that I was associated with the inciting of violence and other threats, so that she "*hired a security guard*".

She then asked the HCCC not to provide me with a copy her response:

other health issues. However, the threat that he poses and continues to pose to me and my family is very real. For these reasons, I and the AVN request that the HCCC use the attached response for the purposes of assessing the complaint only, and not be provided to Mr McLeod or any group with which he is associated.

She then:

- posted it on her AVN website; and
- advertised it and linked to it in her "Living Wisdom" e-newsletter dated October 2009; and
- advertised it on her Yahoo! AVN discussion group, and
- posted it to the world on her Scribd webpage account.<sup>11</sup>

This ensured that her allegations were broadcast to the world, including me. That demonstrates her mendacity and hypocrisy in claiming that I am a threat and should not see it.

Also, in her "Living Wisdom" newsletter dated 15 February 2010, she said "*The people who are behind these attacks are, in my own personal opinion, totally without morals and ethics.*" (Attachment 1.2. page 101.) A little further down the page she says these groups "*...attack the messenger (Dorey) with a viciousness that almost belies their claim to humanity.*"

<sup>11</sup> <http://www.scribd.com/doc/34135104/Reply-to-initial-HCCC-Complaint> retrieved 19 November 2010.

So we have in documents written and signed by Meryl Dorey saying of me: “rude”, “aggressive”, “intimidating”, “hostility”, “aggression”, “ferocity”, “pursues”, “threat to me and my family is very real”, “inciting violence”, “slanderous”, and in response to my supposed threats she “hired a security guard”.

The reader should note that I have challenged Meryl Dorey to substantiate the above allegations against me in 3 emails, one registered letter, and two solicitor’s letters. Meryl Dorey has refused to respond, because her allegations are complete baseless, or in other words, lies.

Crikey! There’s more. Meryl Dorey, in her AVN Yahoo! group message #36449 dated 17 Dec 2008, said:

*“There will come a time – I pray to God that it will happen in my lifetime – when those who have pushed vaccines upon innocent, helpless babies – doctors, pharmaceutical companies, government officials – will be proven to have lied and cheated these instruments of death into our children’s bloodstream. When that occurs, the outcry will be heard around the world and there will not be enough hiding places on the globe for these murderers to hide or enough money to pay for compensation. Of course, it will be too late for the babies, like this poor child, to be saved. But we will be able to take satisfaction from the fact that never again will anyone have to be pushed to poison their child because for once and for all, it will be known as poison and we will all wonder how it was we fell for the vaccine lie for as long as we did.”<sup>12</sup>*

But it gets worse.

Meryl Dorey has complained to the NSW Police that she has been receiving death threats, that she blames me and my colleagues, and that the NSW Police are investigating her claims.<sup>13</sup> She told ABC North Coast Radio that she:

*“...has been receiving abusive calls almost daily in recent weeks.”* and

*“the trouble started after opponents of the group lodged complaints with the commission.”*

*“I have had threats of violence against myself, against other people in the organisation on an almost daily basis,”*

<sup>12</sup> Attachment 8 page 121

<sup>13</sup> ABC article “Lobby Group Under Siege.”  
<http://www.abc.net.au/news/stories/2010/09/01/2999794.htm?site=northcoast>

*"We don't answer the phone at night any more unless we know who is calling because we get so many angry and violent calls; I'd say under siege is an understatement."*

All of the above was broadcast without any substantiation whatever.

But it gets better. Many times Dorey claimed that she had received death threats and these were repeated in the media. She said on the AVN blog <sup>14</sup>:

thank her but once again I say, the rest of them should be absolutely and thoroughly ashamed. I have also, Ken, given the Ballina Police copies of many of these screen shots and they said that over the next couple of weeks, they will be contacting the perpetrators to discuss with them the advisability of becoming involved in internet stalking and cyber-bullying.

I was contacted by the NSW Police on 28 September 2010, in response to my letter of 5 September in which I offered my full co-operation. I was informed that Dorey has made a complaint about death threats and threats of violence, and presented several internet documents to them. The officer quoted *"die in a fire"* and *"she deserves a bullet in the head"* as examples, (none of which I had ever said).

However, these do not constitute "threats" as defined in law. To be a "threat" the statement must be directly aimed at the recipient, e.g. "I am going to shoot you" or "I am going to burn your house down."

So all Dorey had to show the police were 21st century versions of "go jump in the lake" or "drop dead" or "go fly a kite."

The police have said that they have not received evidence of a crime being committed and will not be conducting an investigation, and that they told Dorey that at the beginning. So all of that was a lie, and she knew it when she said that she had received threats of death and violence.

So, is it true that, as Meryl Dorey claims, she *"never have and never will stoop to the level of personal attacks, vilification...."*? Of course, not, it is a lie.

<sup>14</sup> <http://avn.org.au/nocompulsoryvaccination/?m=201008> dated 17 August 2010 under the article title "true colours."

## LIE 6. BOUNTY BAGS

“Bounty Bags” are a division of ACP Magazines; they give to mothers of new-born babies a gift pack which *“contains a variety of products and leaflets,” “products and information associated with reputable companies in the baby market, including many Government departments who choose the Bounty distribution for their health promotion campaigns.”*<sup>15</sup>

Bounty Bags claim that they are *“Exclusively distributed to over 90% of new mothers.”*

Meryl Dorey appealed for donations to pay for Bounty Bag inserts in many of the AVN publications, since as early as May 29, 2006,<sup>16</sup> saying that:

Meryl Dorey’s Yahoo! Group Message #29638 of 41210 dated Mon May 29, 2006 7:16

*“Hi All,*

*In the latest edition of Informed Voice, we put out a call for funds because we desperately want to be able to accomplish some very specific goals of reaching more people with our information and also hopefully, getting more members/readers - you name it. The goals were as follows: Need to raise approximately \$20,000 over the next 12 months to successfully lobby Federal Parliament for changes (sic) to legislation taking away the need for parents to see doctors in order to register as conscientious objectors to vaccination \$17,000 would allow us to advertise our services and our magazine in the Bounty bag. This information is currently given out to every woman who births in hospital in Australia - exactly the people who need our information the most!”* ***“your donation will go towards the ability to offer our services and our magazine in the Bounty Bag which is given to every woman who births in hospital.”***  
(My emphasis)

The Internet Archive shows that this appeal has appeared on the AVN’s website since 3 February 2007.<sup>17</sup> The same appeal appeared in Meryl Dorey’s emails, in the AVN magazine “Living Wisdom” and the AVN HPV brochure. This appeal remained on the AVN website until 17 July 2010, as the screen capture below shows.

<sup>15</sup> [http://www.acpmagazines.com.au/bounty\\_new\\_mother\\_bag.htm](http://www.acpmagazines.com.au/bounty_new_mother_bag.htm)

<sup>16</sup> See Attachment 6.1, (Page 117) Meryl Dorey’s Yahoo! Group Message #29638 of 41210 dated Mon May 29, 2006 7:16

<sup>17</sup> The Internet Archive is at <http://web.archive.org>. Search there for the AVN’s “Donations” page [www.avn.org.au/donation.html](http://www.avn.org.au/donation.html)



However, as the attached correspondence from Ms Megan Baker, Manger of Bounty,<sup>18</sup> shows, Bounty has:

*“no knowledge of the AVN magazine or the information contained on their website”,*  
and

*“Bounty would not consider promoting this kind of information,”* (i.e. AVN publications.)

Ms Baker goes on:

*“Bounty only carries products and information associated with reputable companies in the baby market...”*

Ms Baker confirmed that to the Sydney Morning Herald on 5 August 2010.<sup>19</sup>

<sup>18</sup> Attachments 7.1 and 7.2 (Pages 119 and 120).

<sup>19</sup> [“Vaccine opponent risks charity status” Kate Benson 5 August 5 2010](#)

So, Meryl Dorey has been appealing for donations to pay for AVN publications to go into Bounty Bags since at least May 29, 2006, when there was no such arrangement, and according to the Company, never could be.

This is what people call “dishonest” and “fraudulent.”

## LIE 7. AUSTRALIA’S LEADING EXPERT IN VACCINATION?

On a poster for the Woodford Folk Festival<sup>20</sup> Meryl Dorey described herself as:

*“Australia’s leading expert in vaccination.”* That poster is partially reproduced on the web and still has that accolade.<sup>21</sup> So all those other Australian experts, such as Sir Macfarlane Burnet, OM, AK, KBE, and Professor Peter Doherty AC, (both of whom won Nobel Prizes for their work in immunology that led to vaccines), and Professor Ian Frazer AMA Gold Medal, stand in the shade of Meryl Dorey, who said on television that her only medical qualifications are that she *“has studied this issue for 20 years”* and that she *“has a brain.”* She admits to having no formal medical qualifications, and that *“you don’t need an M D to have a brain.”*<sup>22</sup>

In her response to the HCCC on the 18th page<sup>23</sup> she refers to *Treponema pallidum* as a virus. In fact it is a bacterium. Dorey has added her name to a list of people who deny the “theory” that the Human Immunodeficiency Virus (HIV) causes AIDS.<sup>24</sup> On the Yahoo! AVN discussion group Dorey said:

*“nobody has ever ‘seen’ the HIV virus....”*<sup>25</sup>

This would come a surprise to the people who took these pictures. The first<sup>26</sup> is a Scanning Electron Micrograph of HIV-1 (in green) budding from a cultured lymphocyte. The second<sup>27</sup>

<sup>20</sup> The festival was held 27 December 2009 to 1 January 2010. In her “Living Wisdom” email newsletter dated 6 January 2010, Dorey says *“I’m just back from a wonderful week at the Woodford Folk Festival where I was lucky enough to be invited back for the third year in a row to present information on vaccination.”*

<sup>21</sup> Attachment 9 (page 122) obtained from [http://www.woodfordfolkfestival.com/main/muses/web\\_main\\_right.php?apply=name&find=Meryl%20Dorey](http://www.woodfordfolkfestival.com/main/muses/web_main_right.php?apply=name&find=Meryl%20Dorey)

<sup>22</sup> Channel 7 “Sunday Night” program;  
See Part 1 at <http://www.4shared.com/video/9Xyl0unj/sundaynight-vaccdebate-pt1.html>  
See Part 2 at <http://www.4shared.com/video/GqOS3O1j/sundaynight-vaccdebate-pt2.html> (Contains the “I have a brain” claim.

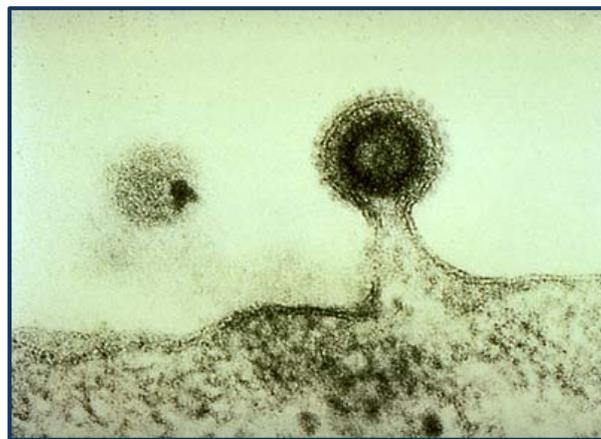
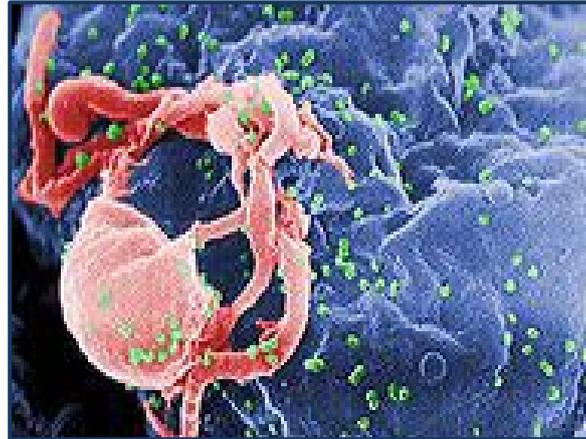
<sup>23</sup> Available at [http://avn.org.au/library/images/pdfs/hccc\\_reply.pdf](http://avn.org.au/library/images/pdfs/hccc_reply.pdf)

<sup>24</sup> <http://www.rethinkaids.info/quotes/rethinkers.htm>

<sup>25</sup> Message #41116 See Attachment 9.2 (page 123)

<sup>26</sup> <http://en.wikipedia.org/wiki/HIV>

is an electron micrograph of an HIV particle. They were not hard to find: type “photo of HIV” into Google and you will be offered 10,300,000 webpages of HIV photos.



We saw above that Dorey has added her name to a list of people who deny the “theory” that the Human Immunodeficiency Virus (HIV) causes AIDS. In the following rather rambling – statement, Dorey goes on to challenge the accepted science that many diseases are caused by “germs” and that some may be prevented with vaccination.

*“I have been thinking about this for many years and what I have decided is that vaccination and the germ theory are the basis of Western medicine – its foundation – the rock it’s been built on. Let the rock start to crumble and everything else comes tumbling down.”<sup>28</sup>*

All those scientists and Nobel Prize winners are wrong and Meryl Dorey is right?

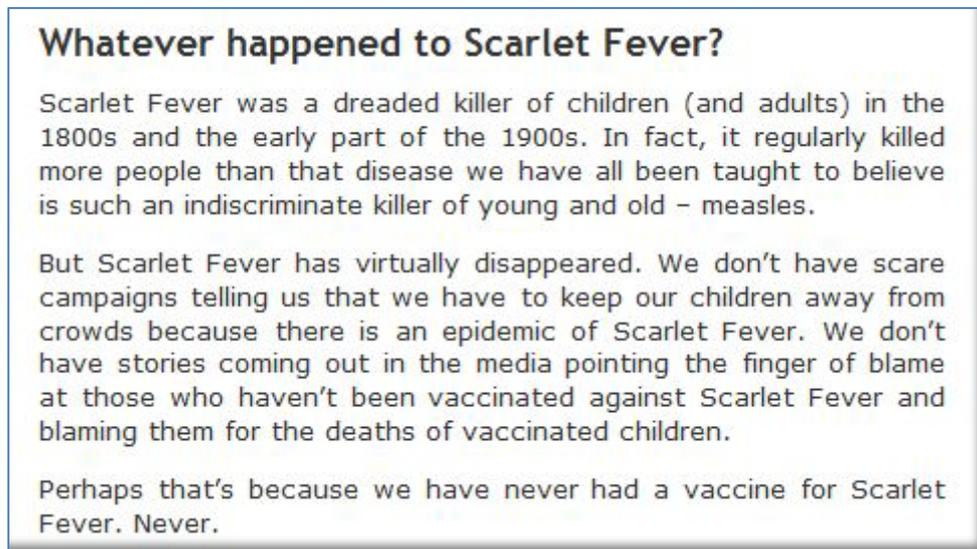
No, this section alone defeats Meryl Dorey’s claim that she is “*Australia’s leading expert in vaccination.*”

<sup>27</sup> <http://www.avert.org/aids-hiv-photos.htm>

<sup>28</sup> AVN Facebook, April 2010

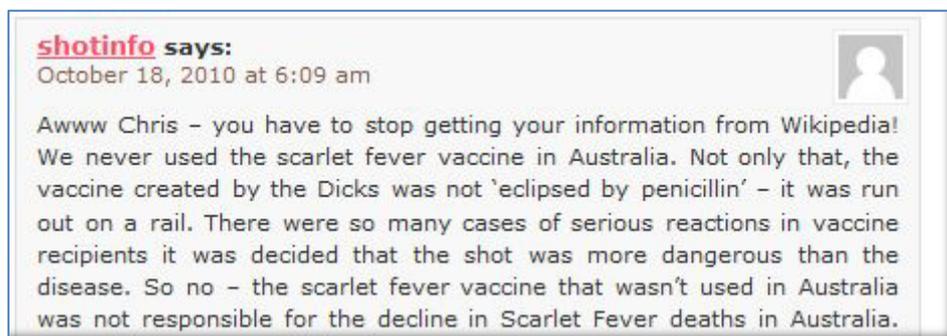
## LIE 8. WE HAVE NEVER HAD A SCARLET FEVER VACCINE.

On Monday, October 18th, 2010 at 3:49 am, Meryl Dorey posted this on her website blog<sup>29</sup>



Note that she says that “*we have never had a vaccine for Scarlet Fever. Never.*” She is being adamant. There's no caveats here. No vaccine. Never. No way. Nyet. Nada. Zip.

When people followed that post with the advice that yes indeed a vaccine had been invented in 1924, she follows with a smackdown:



She admits that there was a Scarlet Fever vaccine after all. It was just a great big lie, but tries to cover the lie with obfuscations about serious reactions. That is called “moving the goalposts.”

<sup>29</sup> <http://avn.org.au/nocompulsoryvaccination/?p=905>

## **LIE 9. HER MISREPRESENTATION OF THE SCIENCE (actually a whole bunch of lies)**

The NSW Health Care Complaints Commission (HCCC) and Mr Tom Sidwell have analysed Meryl Dorey's submission to the HCCC, paying particular emphasis to Dorey's use of so-called published scientific references. Mr Sidwell is an immunology/microbiology student/major, in a BSc. at Monash University.

The HCCC's Report is attached at Appendix 1, beginning page 51. The HCCC examined Ms Dorey's assertions, and found:

*"... there is evidence that the AVN misleads readers by using reliable and peer-reviewed research but quoting selectively from it, often in contradiction to the conclusions or findings of the studies themselves." And*

*"The AVN also provides information for which there are no references quoted and refers to cases where there are no tests of the reliability of data. The AVN gives this material the same prominence and authority as fully reviewed scientific literature." And:*

*"The Commission further found evidence that the AVN makes strong assertions such as in relation to the benefit of exposure to childhood illnesses, without supporting them with any research".<sup>30</sup> And:*

*"The AVN provides information that is misleading for the average reader by inaccurately representing information, selectively reporting information, and giving non-peer reviewed and anecdotal material the same authority as peer-reviewed literature. In all cases of misrepresentation, selective and inaccurate reporting and indiscriminate use of research material, the AVN and Ms Dorey were doing so to maintain an anti-vaccination position."<sup>31</sup>*

Mr Sidwell's analysis is attached at Appendix 2 beginning page 80, and have been summarised by him as follows:

- Meryl Dorey's sources are either unreliable or do not support her contentions,
- Meryl Dorey is happy to pass off as 'research' citations that she has simply copied from conspiracy websites,
- Meryl Dorey comments on the topic of vaccination as some kind of authority, despite showing that she is either wilfully and dishonestly mis-representing the available evidence, or dangerously ignorant of it, or possibly a combination thereof.

<sup>30</sup> HCCC report page 14, available in this document at page 66

<sup>31</sup> HCCC Report page 22, available here in this document at page 74

Mr Sidwell's analyses show in detail the unreliability of information provided by Ms Dorey on a subject which she professes to have researched for decades and to have a detailed understanding of, despite simultaneously demonstrating that she relies almost solely on 'information' from conspiracy websites on the very topic.

In her submission to the HCCC, Ms Dorey stated in response to the allegation (that her 'references' do not support her claims) that:

*"It is true that oftentimes, our information will contradict the conclusions or summaries of the studies. This is because, as opposed to most doctors and government officials, we actually read the studies and frequently, the summary and conclusion does not agree with the raw data itself. It is as if there were a disconnect between the findings of the study and the research itself. Many times, that disconnect can be explained by the financial links between the study's researchers and the companies whose products are being studied. So, whilst the AVN does frequently draw different conclusions to those printed at the end of these articles, it is because our analysis of the data shows that the printed conclusions do not correspond with the raw data. This is not selective reporting - it is accurate reporting."* <sup>32</sup>

So Meryl Dorey explains her misrepresentation of the published literature by saying that all those Nobel Prize- winning scientists were wrong and she was right; they don't read their raw data, and they have corrupt links with pharmaceutical companies.

It is clear, then, that Meryl Dorey deliberately misrepresents the science to produce "conclusions" that conform to her beliefs, or in other words, she lies.

## **LIE 10. THE "RAW DATA"**

In the quote above, Dorey explains her misrepresentation of published research papers by claiming that she reads the "raw data" to arrive at a different conclusion to that of the authors. Of course, this is a lie, and one that should have been bleedingly obvious to "Australia's leading vaccine researcher." The plain fact is that published research papers never contain any "raw data." The data in publications is anything BUT raw, and you can't just look at a publication and extrapolate back to the raw data. (This is yet another indication that Meryl has absolutely no idea how scientific literature comes about.)

So, Dorey admitted that she lied when she said research papers supported her position, but excused that by saying that she referred to the "raw data" in the papers, but the papers never included any "raw data", so she lied again, to cover up the first lie.

<sup>32</sup> " Health Freedom in Australia: A Critical Refutation of the Preliminary Findings of the HCCC's Investigation of the Australian Vaccination Network (AVN)" page 47, 10 July 2010.

Meryl Dorey is familiar with the case of ex-doctor Andrew Wakefield and the heavy penalties imposed on those who falsify data and produce fraudulent research. If she and the AVN had discovered that multiple papers in peer-reviewed scientific journals had come to conclusions that were directly contradicted by the data reported then they would have grounds to lodge a complaint with the relevant authorities and have the papers retracted by the journals in question. The fact that no such action has taken place, and that Dorey was unable to specifically mention which papers she was referring to indicate that this is just another of her lies.

### **LIE 11. "VACCINES CAUSE AUTISM"**

In Ms Dorey's first submission to the HCCC she states:

*"Dr Wakefield's study was only the first of many to indicate a very strong and, in some cases clinically verifiable connection between vaccination and the development of ASDs. Below, I will submit a selection of the many articles published in peer-reviewed journals since Wakefield's initial article hypothesising that there could be a connection between vaccination and the development of ASDs"*

She then lists ten citations in support of this statement.

There are several problems with this statement: the Wakefield paper found no connection between vaccination and the development of ASDs, and even states in the discussion regarding such a connection:

*"We did not prove an association between measles, mumps, and rubella vaccine and the syndrome described"*

So Dorey is lying about the findings of this study. Remember, "The Lancet" retracted Wakefield's paper in 2010. It no longer exists.

What of her ten other citations? Do any of those *"indicate a very strong and, in some cases clinically verifiable connection between vaccination and the development of ASDs"*?

As can be seen in the first document of Appendix 2, Tom Sidwell's analysis of these ten citations, (beginning page 80), none of the ten articles presents a case of vaccine-induced autism. In fact, a review of the relevant literature by the Cochrane Collaboration published in 2005, seven years after the Wakefield paper clearly states:

*"No credible evidence of an involvement of MMR with either autism or Crohn's disease was found."* <sup>33</sup>

So her comment remains both unsourced, and untrue.

<sup>33</sup> <http://www2.cochrane.org/reviews/en/ab004407.html>

But what of the “*selection of the many articles published in peer-reviewed journals since Wakefield’s initial article hypothesising that there could be a connection between vaccination and the development of ASDs*”?

As detailed in the aforementioned analysis of these citations:

*“Of the ten papers cited, only three hypothesise this. Two of them are in journals which are not mainstream, nor peer-reviewed, and are known for publishing absurd, fringe conspiracy theories. The third was a review article, with Wakefield as one of the authors.”*

So the sum total of her evidence for this claim is, frankly, not evidence, but rather ramblings of known conspiracy theorists, and the further work of Mr Andrew Wakefield, in which he presents no new evidence, and fails to mention his significant conflicts of interest.

In attempting to convince the reader of a discredited hypothesis Ms Dorey lies not only about the literature she cites, but the scientific literature as a whole, and, ironically, the findings of the Wakefield paper.

## **LIE 12. “VACCINES SUPPRESS THE IMMUNE SYSTEM”**

In Ms Dorey’s first submission to the HCCC she states:

*“Below are just a few of the hundreds of references to peer-reviewed studies which demonstrate [that] vaccines are indeed immune-suppressive”*

She then lists ten citations in support of this statement.

As can be seen in the second document of Appendix 2, Tom Sidwell’s analyses of these five citations, (beginning page 87) :

- Two of these “*peer-reviewed studies*” are letters. Letters are neither peer-reviewed, nor studies. Perhaps “*Australia’s leading expert in vaccination*” missed that point in her 20 years of ‘study’.
- Of the three actual peer-reviewed studies cited exactly zero suggest vaccines suppress the immune system, with even one of the authors of one of the papers directly contradicting Meryl when asked about her interpretation.

So Dorey is once again lying about the evidence to support her claims.

### **LIE 13. THE SOURCE OF HER 'INFORMATION'**

In Ms Dorey's first submission to the HCCC her summary of her document includes the claim that the information she and her organisation provides is "*Sourced from peer-reviewed medical journals*". However, as the third and fourth documents in Appendix 2 – analyses of Dorey's citations by Tom Sidwell – show, they appear to have been copied directly from conspiracy sites. They begin on page 91.

Sidwell details three citations of Dorey's that contain errors, which are found only on conspiracy sites which list these articles. Had Dorey actually read these articles and transcribed the details herself from the full-text versions then they would not contain such errors of attribution as the wrong journal, author and page numbers, and in one case referring to an article with nothing to do with vaccines. All of these erroneous citations are found on five conspiracy sites, with the most likely contender being the 'whale.to' website – famous for bizarre conspiracy theories, such as claiming that "deadly orgone radiation" is emitted by cellphone towers, but this can be neutralised with "organite", a mixture of metal shavings and fibreglass resin – which she has repeatedly directly cited online, and in her final response to the HCCC.

Further evidence that her information is not sourced from peer-reviewed medical journals lies in the fact that of all the journal articles Meryl cites, none actually support her contentions, with the exception of one review co-authored by disgraced ex-doctor Andrew Wakefield.

So Dorey's information is not sourced from peer-reviewed journals, and her citations are included only to dishonestly give the illusion of research.

### **LIE 14. "THE AMA IS FUNDED BY VACCINE MANUFACTURERS"**

In her "Doing the Rounds" newsletter of, August 2007 Meryl Dorey said of the AMA that it is "*an industry lobby group which receives massive amounts of funding from vaccine manufacturers,*" Naturally, the AMA was not pleased with this and Meryl Dorey had to retract and apologise:

*"It has been brought to the attention of the Australian Vaccination Network that the comments published not only contained a number of factual errors but were felt to be offensive and embarrassing (sic) to AMA (NSW), its officers and employees.*

*In particular it has been brought to the attention of the Australian Vaccination Network, the Australian Vaccination Network accepts, that:*

*1- AMA (NSW) does not obtain any of its funding from pharmaceutical companies;*

2- AMA (NSW) has not published any advertisement or advertorial for a pharmaceutical company in the NSW Doctor for a periods of at least four years, and at no time has the advertising in NSW Doctor been almost exclusively that of pharmaceutical companies;

3- AMA (NSW) does not actively censor information made available to its members.

*The Australian Vaccination Network unreservedly apologises for any offence or embarrassment the publication may have caused AMA (NSW), its officers and employees”.*

So Dorey’s claim that the AMA is “an industry lobby group which receives massive amounts of funding from vaccine manufacturers” was a lie.

### **LIE 15. AVN MEMBERSHIP NUMBERS**

In the AVN “Living Wisdom” email newsletter dated 29 March 2010, Ms Dorey gave a link to an online proxy voting form<sup>34</sup> relating to a change to the AVN constitution. The preamble to the form said: “According to the Department of Fair Trading’s rules, amendments to an association’s constitution require the approval of three-quarters of the members. Therefore, we need at least 1,400 of you to vote...” Simple maths therefore gives the membership total to be around 1,866.

Yet in her “Living Wisdom” email newsletter issued 15 February 2010 she said of her membership numbers: “Those 218 pledges leave about 2,300 members who have not pledged (out of approximately 2,500 AVN members).”<sup>35</sup>

That is a big difference: “approximately 2,500 members” vs 1,866.

But when we look at page 27 of the 2009 Annual Financial Statement<sup>36</sup> submitted by the AVN to the NSW Office of Fair Trading, we find that membership fees for the year totalled \$4,223.

\$4223 in membership fees divided by \$50 membership fee (the lowest I could find) indicates that approximately 85 people paid the minimum subscription to be financial members of the AVN. This may be an underestimation as they appear to separate magazine sales and membership in their accounts. However as they charge \$6 for each edition of the magazine and there are 6 issues per year (assuming no discount for members) this means that of the \$50 approximately \$14 is for the annual subscription.

<sup>34</sup> Attachment 10.1, page 124 linked to in the AVN “living Wisdom” email newsletter dated 29 March 2010.

<sup>35</sup> Attachment 10.1. page 124, “Living Wisdom” email newsletter 15 February 2010.

<sup>36</sup> <http://www.scribd.com/doc/39772086/AVN-Financial-Statement-2009>

So \$4223 in membership divided by \$14 minimum per person means that AVN has approximately 302 financial members in year 2009.

So the numbers are variously shown as “approximately 2,500,” 1,866, 85, and 302. The truth is out there somewhere, but it is awfully hard to find. Clearly, tho, the 2,500 figure is a lie.

## LIE 16. THE PHARMACEUTICAL INDUSTRY & ADVERSE REPORTING.

On June 18 2010, Meryl Dorey made the following post on the Facebook “Australian Vaccination Network” webpage.



Look at the last sentence “*This is what happens when you let drug companies self-regulate.*” Drug companies are self-regulated? As lies go, this one would have to register a 10 on the Richter scale of lies. A quick check of regulations concerning pharmaceutical companies shows that under the Therapeutic Goods Act, as published in the TGA’s “AUSTRALIAN GUIDELINE FOR PHARMACOVIGILANCE RESPONSIBILITIES OF SPONSORS OF REGISTERED MEDICINES REGULATED BY DRUG SAFETY AND EVALUATION BRANCH”,<sup>37</sup> there are stringent mandatory requirements for reporting adverse reactions to the TGA. These requirements apply to the pharmaceutical companies and other appropriately qualified persons such as a physicians, dentists, pharmacists, nurses, and coroners.

The TGA’s “Report of suspected adverse reaction to medicines or vaccines” form is included in the National Prescribing Services magazine “Australian Prescriber,” sent to all Australian pharmacists, doctors, dentists, and nurses, free on request. The form may be folded into an addressed postage-paid letter, is included as a reminder, and to make reporting easy.

As for her claim that these reports could be filed (by the company) “*in the circular filing cabinet for all the government knows or cares*”, that is clearly another lie, because in the TGA Regulations, the pharmaceutical companies are required to investigate adverse drug reaction reports, and to report to the TGA the results of those investigations.

And this comes from a person claiming to be “AUSTRALIA’S LEADING EXPERT IN VACCINATION”; see Lie 7 above.

<sup>37</sup> <http://www.tga.gov.au/adr/pharmaco.htm>

**LIE 17 THE “AVN HAS NEVER RECOMMENDED PARENTS USE HOMEOPROPHYLAXIS.”**

In August 2009, Meryl Dorey posted a comment in response to an article that appeared on the 6Minutes website, excerpt as follows:

*“.... the AVN never has and never will recommend that parents use homoeoprophylaxis (which is its proper name) or herbal remedies.”*

Let us investigate this claim.

“Vaccination Roulette” is a book co-authored by Meryl Dorey, and published by the Australian Vaccination Network. The other two co-authors are listed as “AVN Contributors”. This book devotes an entire chapter to Homeoprophylaxis. Other references to using homeopathy to treat, and build immunity to, infectious diseases appear throughout this book.

In another section of “Vaccination Roulette”, one finds the following form:

**DOCUMENTING A HOMEOPATHIC SCHEDULE**

Date:

To Whom it may concern,

\_\_\_\_\_ made an informed decision as to the most effective method to enhance their child’s/children’s immunity. After gathering abundant information from public meetings [yes, it does say 'public'] meetings, medical journals, lectures, books, seminars, AVN and discussion, it was decided that hoemoeopathic immunisation, lifestyle changes and diet were the most effective and safe ways to enhance immunity.

Homoeopathic immunisation covers the following diseases, and were prescribed for

\_\_\_\_\_

Pertussis ( )    Tetanus ( )

Polio ( )        Diphtheria ( )

Hepatitis A    H.I.B. Meningitis ( )

Measles ( )    Mumps ( )

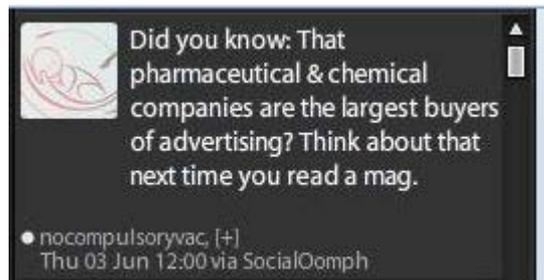
Rubella ( )    Hepatitis B ( )

So we have a whole chapter, and a form, devoted to homeoprophylaxis, appearing in a book published by the AVN

So would the statement , that the “AVN has never recommended parents use homeoprophylaxis” appear to be a lie to the average reader?

**LIE 18. “PHARMACEUTICAL & CHEMICAL COMPANIES ARE THE LARGEST BUYERS OF ADVERTISING.”**

Dorey has said on the AVN website and Twitter “*Did you know: That pharmaceutical & chemical companies are the largest buyers of advertising? “* <sup>38</sup>



A quick check with the industry publication, the US “Advertising Age” gave the most recent statistics on world-wide expenditure on company advertising. <sup>39</sup>

Procter & Gamble Co.	1	\$9.73 billion
Unilever	2	\$5.72 billion
L'Oreal	3	\$4.04 billion
General Motors Co.	4	\$3.67 billion
Toyota Motor Corp.	5	\$3.20 billion
Coca-Cola Co.	6	\$2.67 billion
Johnson & Johnson	7	\$2.60 billion
Ford Motor Co.	8	\$2.45 billion
Reckitt Benckiser	9	\$2.37 billion
Nestlé	10	\$2.31 billion
Volkswagen	11	\$2.31 billion
Honda Motor Co.	12	\$2.22 billion
Mars Inc.	13	\$2.00 billion
McDonald's Corp.	14	\$1.97 billion
Sony Corp.	15	\$1.85 billion
GlaxoSmithKline	16	\$1.83 billion
Deutsche Telekom	17	\$1.81 billion
Kraft Foods	18	\$1.79 billion
Nissan Motor Co.	19	\$1.72 billion
Walt Disney Co.	20	\$1.59 billion
Danone Groupe	21	\$1.58 billion
General Electric Co.	22	\$1.55 billion
Time Warner	23	\$1.53 billion
PSA Peugeot Citroen	24	\$1.51 billion
Pfizer	25	\$1.51 billion

<sup>38</sup> Twitter 23 June 2010, AVN webpage <http://avn.org.au/nocompulsoryvaccination/> 23 June 2010

<sup>39</sup> <http://adage.com/globalmarketers09/>

You will notice that the first company in the list which has any pharmaceutical business at all is Johnson & Johnson, but their major business is in hygiene and health care products, bandaids, shampoos, etc. They came in at Number 7, and the first real pharmaceutical company was GlaxoSmithKline who came in at Number 16. For someone who claims that she is Australia's leading vaccine researcher, this is a real clanger. Nobody could be that incompetent, this statement was an outright lie.

### LIE 19. "NOBODY EVER HAS MULTIPLE SIMILTANEOUS INFECTIONS"

In the Winter 2006 edition of the Australian Vaccination Network's "Informed Voice" Magazine, Meryl Dorey made the following claim:

*"It is also a fact that we will only ever contract one disease at a time—measles—not measles, mumps and rubella. Measles—not measles and 9,999 other diseases."*

This one generated quite some mirth on hospital wards. Dorey clearly didn't bother to do a web search, such as

- Google: "multiple simultaneous infections" 1,360,000 results describing that.
- Wikipedia: "multiple simultaneous infections" 236 articles describing that.
- Google Scholar: 191,000 articles describing "multiple simultaneous infections"

Nobody could be that stupid, this was a bare-faced lie.

### LIE 20. "I'M NOT ANTI-VACCINE, I'M PRO-CHOICE!"

Meryl Dorey has said on many occasions that she and the AVN are "**not and never have been anti-vaccination.**"<sup>40</sup> On Australian TV Channel 7 she said:

*"First of all I object to being called part of an anti-vaccination movement. I am part of a pro-choice movement, pro-information."*<sup>41</sup>

Meryl Dorey repeatedly denies that she is anti-vaccine. Despite this, the report from the HCCC found that she and the AVN are anti-vaccine and a cursory glance at the information provided by the AVN clearly displays its anti-vaccine bias. Even as recently as 9 July 2010 Dorey declared on a 2UE radio interview that she, and the AVN, were "*not against vaccination ... we are pro-choice. We never tell anyone that they should or should not vaccinate.*" When directly asked, she denied that she was "*proactive against vaccination*".

<sup>40</sup> <http://www.abc.net.au/news/stories/2010/07/27/2965255.htm?site=northcoast> July 27, 2010 10:44:00 and Radio interview 2UE "The Two Murrays" 13 July 2010. Dorey "We are not anti-vaccination, we are simply pro-choice, we provide a balance of information."

<sup>41</sup> <http://ama.com.au/node/583> 21 August 2002

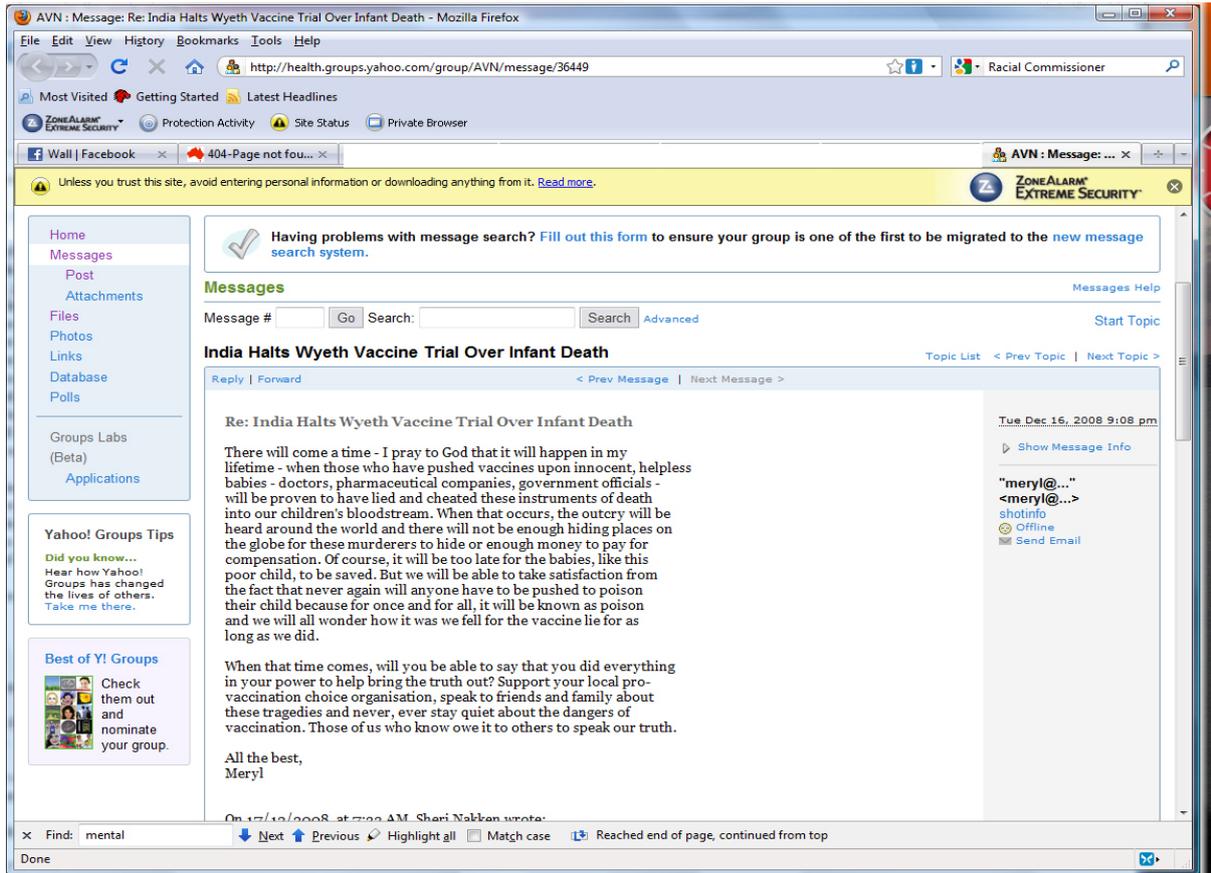
Let's have a look at some other statements made by Meryl Dorey:

- *"No one who is vaccinated is immune to a disease" (Interview on Truth News Radio 29th August 2008.)*
- *"And when you look at the list of ingredients in vaccines, the list of poisons, there's no other word for them. ... The only thing that poisons do is poison. So, if you are going to put something that's poisonous into the human body, what do you expect to happen? You expect it to get poisoned." ("Voodoo Children" webinar 31st July 2009).*
- *"This is a sort-of off-topic question. I would like to donate to the efforts to help in Haiti but I don't want ANY of my money going towards vaccines so that Red Cross and Unicef are out. Does anyone know of an organisation doing work on the ground there helping without vaccines?" (Post to the AVN Yahoo! Group.)*
- *"And I have been saying for years that the future of mankind may depend on the small number of individuals - most of whom live in the developing world - who have not been exposed to either medical drugs or vaccines. The rest of us and our children may have been so badly weakened that we will die out via infection" (Post to the AVN Facebook group 18th December 2009).*
- *"I would not take another vaccine ever!" (Post to the AVN Facebook group.)*

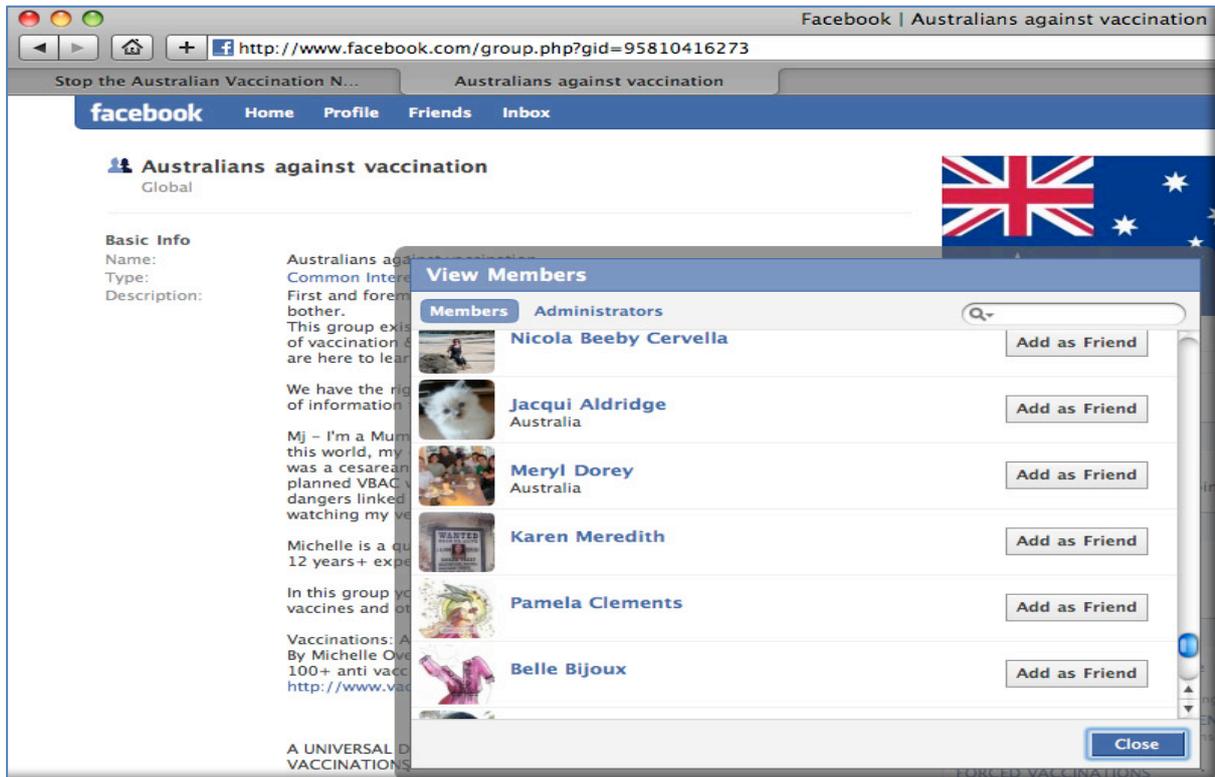
These statements are obviously anti-vaccine and have been made in public forums. Perhaps most damning is this post that Dorey made on the AVN Yahoo! Group in 2008:

*"There will come a time – I pray to God that it will happen in my lifetime – when those who have pushed vaccines upon innocent, helpless babies – doctors, pharmaceutical companies, government officials – will be proven to have lied and cheated these instruments of death into our children's bloodstream. When that occurs, the outcry will be heard around the world and there will not be enough hiding places on the globe for these murderers to hide or enough money to pay for compensation. Of course, it will be too late for the babies, like this poor child, to be saved. But we will be able to take satisfaction from the fact that never again will anyone have to be pushed to poison their child because for once and for all, it will be known as poison and we will all wonder how it was we fell for the vaccine lie for as long as we did."*

Wow! *"pushed vaccines", "instruments of death" "murderers" "poison" "vaccine lie"* If that's not anti-vaccine, what is?



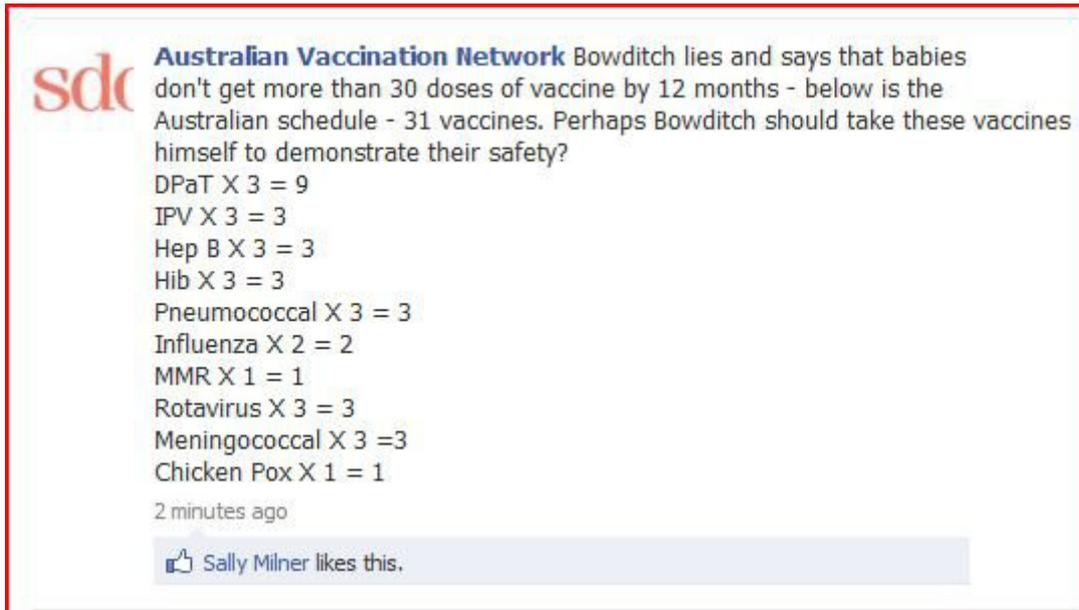
And consider this, Meryl Dorey is a member of the Facebook Group "Australians Against Vaccination"



Dorey can claim that she is not anti-vaccine until she is blue in the face - but it doesn't change the fact that it is just another lie.

## LIE 21. THERE ARE “31 DOSES IN THE AUSTRALIAN VACCINATION SCHEDULE?” REALLY?

Meryl Dorey, who, you might remember, claims to be “Australia’s leading vaccine researcher”, made this claim on her AVN Facebook discussion page on 18 July 2010.



So let's look at the schedules as recommended by each Australian State and Territory. Each vaccination schedule varies depending on what brand of vaccine is used. However, not one single state gives more than 14 vaccine doses up to and including the age of 12 months old, and this is only due to Western Australia listing the seasonal influenza listed on their schedule- however, this has been cancelled until further notice. Special risk groups may receive more.

State/Territory vaccination schedules can all be found at this link:

<http://www.health.sa.gov.au/immunisationcalculator/immcalc-schedule.htm>

It should be remembered that each vaccine is counted as one dose- the vaccines that contain the antigens of more than one disease, are not counted for each disease. For example- the Priorix (MMR) vaccine given at 12 months is one dose, not three doses because we do not count per disease. You can see in this information fact sheet, developed by The Children's Hospital of Philadelphia- you can see in the paragraph at the top that they discuss one vaccine being equivalent to being one dose (where they say that some vaccines require more than one dose to confer effective immunity)

<http://www.chop.edu/export/download/pdfs/articles/vaccine-education-center/too-many->

[vaccines.pdf](#) . The fact sheets talks about the belief that anti-vaccination proponents talk about too many vaccines being given.

This link [http://www.chop.edu/service/vaccine-education-center/vaccine-safety/#Why\\_are\\_some\\_vaccines](http://www.chop.edu/service/vaccine-education-center/vaccine-safety/#Why_are_some_vaccines) discusses why some vaccines must be given more than once to gain effective immunity; it talks of a vaccine equalling one dose (not dose per disease).

In the Australian Immunisation Handbook (2008), it states 'A policy of providing separate vaccines would cause some children to not receive the entire course, and combination vaccines can offer a reduced amount of vaccine stabiliser and adjuvant compared to 3 individual vaccine doses.'

<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/handbook-appendix5> . This shows again that we do not consider a dose to be per disease (which it would be if the vaccine is monovalent), but a dose is a vaccine as a whole (including the vaccines that are multivalent).

I will list the state/territory schedules below:

### **Western Australia**

Birth- Hep B (HB-VAXII)

2 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (Rotarix)

4 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (Rotarix)

6 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Influenza x2 a month apart (Fluvax or Vaxigrip)

12 months- MMR (Priorix), HIB (Hiberix), MenCCV (Neisvac-C)

**Total=** 14 vaccines (12 when seasonal influenza not counted)

### **Northern Territory**

Birth- Hep B (Engerix B)

2 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Synflorix), Rotavirus (Rotavirus)

4months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Synflorix), Rotavirus (Rotavirus)

6 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Synflorix)

12 months- MMR (Priorix), HIB (Hiberix), MenCCV (Neisvac-C)

**Total=** 12 vaccines

### **South Australia**

Birth- Hep B (HB-Vax II)

2 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (RotaTeq)

4months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (RotaTeq)

6 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (RotaTeq)

12 months- MMR (Priorix), HIB (Hiberix), MenCCV (Neisvac-C)

**Total= 13 vaccines**

### **Queensland**

Birth- Hep B

2 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (RotaTeq)

4months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (RotaTeq)

6 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (RotaTeq)

12 months- MMR (Priorix), HIB (Hiberix), MenCCV (Meningitec)

**Total= 13 vaccines**

### **New South Wales**

Birth- Hep B (HB-Vax II)

2 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (Rotarix)

4months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (Rotarix)

6 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar)

12 months- MMR (Priorix), HIB (Hiberix), MenCCV (Meningitec)

**Total= 12 vaccines**

### **Australian Capital Territory**

Birth-Hep B (HB-Vax II or Engerix B)

2 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (Rotarix)

4months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (Rotarix)

6 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar)

12 months- MMR (Priorix), HIB (Hiberix), MenCCV (Meningitec or Neisvac C)

**Total= 12 vaccines**

### **Victoria**

Birth- Hep B (HB-Vax II)

2 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (RotaTeq)

4months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (RotaTeq)

6 months- DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (RotaTeq)

12 months- MMR (Priorix), HIB (Hiberix), MenCCV (Neisvac-C)

**Total= 13 vaccines**

## **Tasmania**

**Birth-** Hep B (HB-Vax II)

**2 months-** DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (Rotarix)

**4months-** DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar), Rotavirus (Rotarix)

**6 months-** DTPa/IPV/HepB/HIB (Infanrix hexa), Pneumococcal (Prevenar)

**12 months-** MMR (Priorix), HIB (Hiberix), MenCCV (Meningitec or Neisvac C)

**Total= 12 vaccines**

Ms Dorey makes the following mistakes in her post on the Australian Vaccination Network 'fan page' located on FaceBook.

- 1.) She counts a dose per disease with the DTPa part of the Infanrix hexa vaccine, rather than count the single vaccine (although fails to be consistent and count the MMR as 3 doses as per her own guidelines)
- 2.) She counts Meningococcal C as three doses- only one dose is given at 12 months (the timeline that she provides in her post)
- 3.) She counts one dose of the Chicken Pox vaccine (Varicella)- this vaccine is not given until 18 months of age. Please see the below picture as she describes that it is given with the MMR. There is a vaccine that combines the Varicella dose with the existing MMR, but we do not give this particular vaccine in Australia yet).

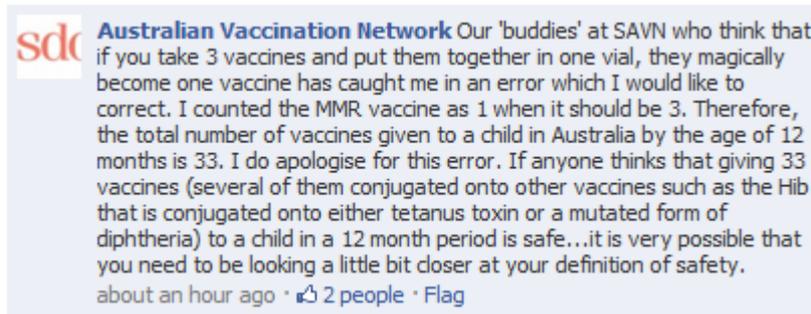


Ms Dorey states that the chicken pox and MMR have been combined and given at 12 months of age- it has not.



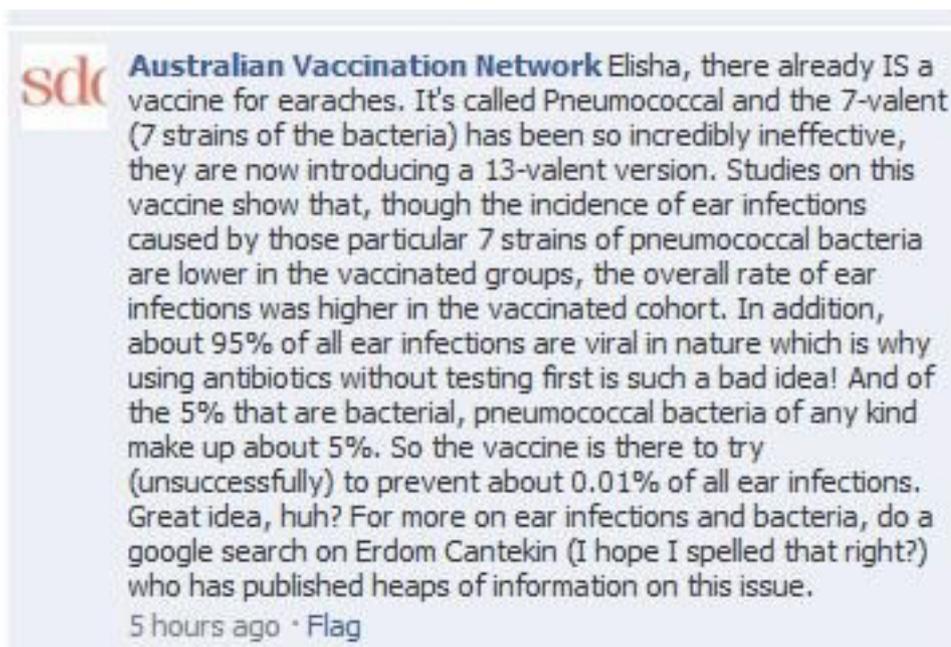
(the above is an example of a person taking Meryl's 'information' at face value- believing now that 30 vaccines are given before the age of 12 months. Health information that is blatantly not true.)

- 4.) Meningococcal vaccines is NEVER given before the age of 12 months- it has never been given at 2, 4, and 6 months of age. As you can see from the schedules, this is either an outright lie or plain ignorance.



Ms Dorey then recognises her inconsistencies after they were pointed out on the Stop the Australian Vaccination Network FaceBook group. She then decides that the MMR is three doses and therefore we give 33 vaccines to children in a 12 month period- but we do not, as discussed previously.

## LIE 22. THE PNEUMOCOCCAL VACCINE IS TO PREVENT EARACHES CAUSED BY THE PNEUMOCOCCAL BACTERIUM.



Here we have Ms Dorey telling an AVN 'fan page' member on Facebook that the pneumococcal vaccine is to prevent earaches caused by the pneumococcal bacterium.

This is, of course, wrong

Pneumococcal bacterium (*Streptococcus pneumoniae*) does cause many earaches via middle ear infections ([http://www.australiandoctor.com.au/patient/AD\\_047\\_JUL23\\_04.pdf](http://www.australiandoctor.com.au/patient/AD_047_JUL23_04.pdf)), however- this is not the reason the vaccine was developed.

The reason the pneumococcal vaccine was developed (covering 7 strains of the bacterium), was due to the hundreds of children per year experiencing **invasive** pneumococcal infections- the major three being **pneumonia, meningitis, and septicaemia**. *"In Australia it is estimated that three in every 1000 children will have at least one episode of invasive pneumococcal disease by age five, and every year hundreds of children are hospitalised for treatment of pneumococcal infection."*

[http://www.australiandoctor.com.au/patient/AD\\_047\\_JUL23\\_04.pdf](http://www.australiandoctor.com.au/patient/AD_047_JUL23_04.pdf)

In 2002 there were 2271 cases (confirmed) of pneumococcal in Australia- out of these cases there were 175 deaths. Out of those cases 761 were in children under 5 years of age, 9 of which died

([http://www.meningitis.com.au/about\\_meningitis/pneumococcal\\_meningitis.phtml](http://www.meningitis.com.au/about_meningitis/pneumococcal_meningitis.phtml)). It has been estimated that pneumococcal infection causes around 70 cases of meningitis every year and about 700 cases of septicaemia in children under 5 years of age

([http://www.meningitis.com.au/about\\_meningitis/pneumococcal\\_meningitis.phtml](http://www.meningitis.com.au/about_meningitis/pneumococcal_meningitis.phtml)).

The 7 strains currently covered in the childhood vaccine are known to cause around 85% of all cases of invasive pneumococcal in children under the age of 5 years. The vaccine has shown to reduce the overall incidence of invasive pneumococcal infection by 89% in children under 5 years of age

[http://www.australiandoctor.com.au/patient/AD\\_047\\_JUL23\\_04.pdf](http://www.australiandoctor.com.au/patient/AD_047_JUL23_04.pdf). Pneumococcal is considered to be the number one vaccine-preventable cause of death in children under 5 years <http://www.pneumoadip.org/resources/factsheets/pneumococcal.cfm>.

Now let's talk about the 3 most serious complications of invasive pneumococcal disease. Whilst reading this- please remember that young children, especially infants, get sick very quickly and are the ones likely to be experiencing the following complications of pneumococcal disease (as well as the elderly and those with chronic medical conditions).

### **Pneumonia**

This is the most common result of pneumococcal infection. This is an infection of the lung that causes symptoms such as high fever, congestion, coughing, headaches, chest pain, difficulty breathing, difficulty feeding, etc. In young children, especially infants, this is even more pronounced and can very easily lead to a medical emergency if not caught early or not treated effectively. Pneumonia is the cause for 1 in 5 deaths in children.

[http://www.meningitis.com.au/about\\_meningitis/pneumococcal\\_meningitis.phtml](http://www.meningitis.com.au/about_meningitis/pneumococcal_meningitis.phtml)

<http://www.immunize.org/catg.d/p4213.pdf>

<http://www.cdc.gov/Features/Pneumonia/>  
<http://www.pneumoadip.org/resources/factsheets/pneumococcal.cfm>

### **Meningitis**

Pneumococcal infection can lead to bacterial meningitis. Bacterial meningitis is an infection of the covering the brain and spinal cord- the meninges. It is dangerous and does lead to death if not treated effectively. Symptoms are fatigue, extreme headaches, stiff and painful neck, photophobia, vomiting, irritability, high fevers, seizures and coma.

[http://www.meningitis.com.au/about\\_meningitis/pneumococcal\\_meningitis.phtml](http://www.meningitis.com.au/about_meningitis/pneumococcal_meningitis.phtml)  
<http://www.immunize.org/catg.d/p4213.pdf>

In infants, the symptoms can be harder to assess- the following link shows a good table/guide on what the differences can be in infants.

[http://www.meningitis.com.au/signs\\_and\\_symptoms/meningitis.phtml](http://www.meningitis.com.au/signs_and_symptoms/meningitis.phtml)

Children under one year of age have the highest rate of meningitis caused from pneumococcal and 30% of these cases lead to death.

<http://www.immunize.org/catg.d/p4213.pdf>

### **Septicaemia/Bacteraemia**

This complication of pneumococcal infection is very serious. Septicaemia, known as bacteraemia in the USA, is also more commonly known as **sepsis**. Sepsis is an infection of the bloodstream, and if it is not caught and treated appropriately very early- it leads to multi-organ failure and death. The symptoms of sepsis are high fever, vomiting, diarrhoea, stomach pains, difficulty breathing, pains in limbs, mottled or pale complexion, irritability/drowsiness/confusion, and occasionally a rash may occur- but if it has gotten to that stage, the person is in critical danger. Infants have other symptoms as indicators which can be seen in the following links.

[http://www.meningitis.com.au/about\\_meningitis/pneumococcal\\_meningitis.phtml](http://www.meningitis.com.au/about_meningitis/pneumococcal_meningitis.phtml)  
<http://www.pneumoadip.org/resources/factsheets/pneumococcal.cfm>

Sepsis is the most common reason for presentation in children under 2 years, accounting for 70% of invasive pneumococcal disease in children under 2 years of age. It accounts for two-thirds of cases in children overall.

<http://www.immunize.org/catg.d/p4213.pdf>  
<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook-pneumococcal>

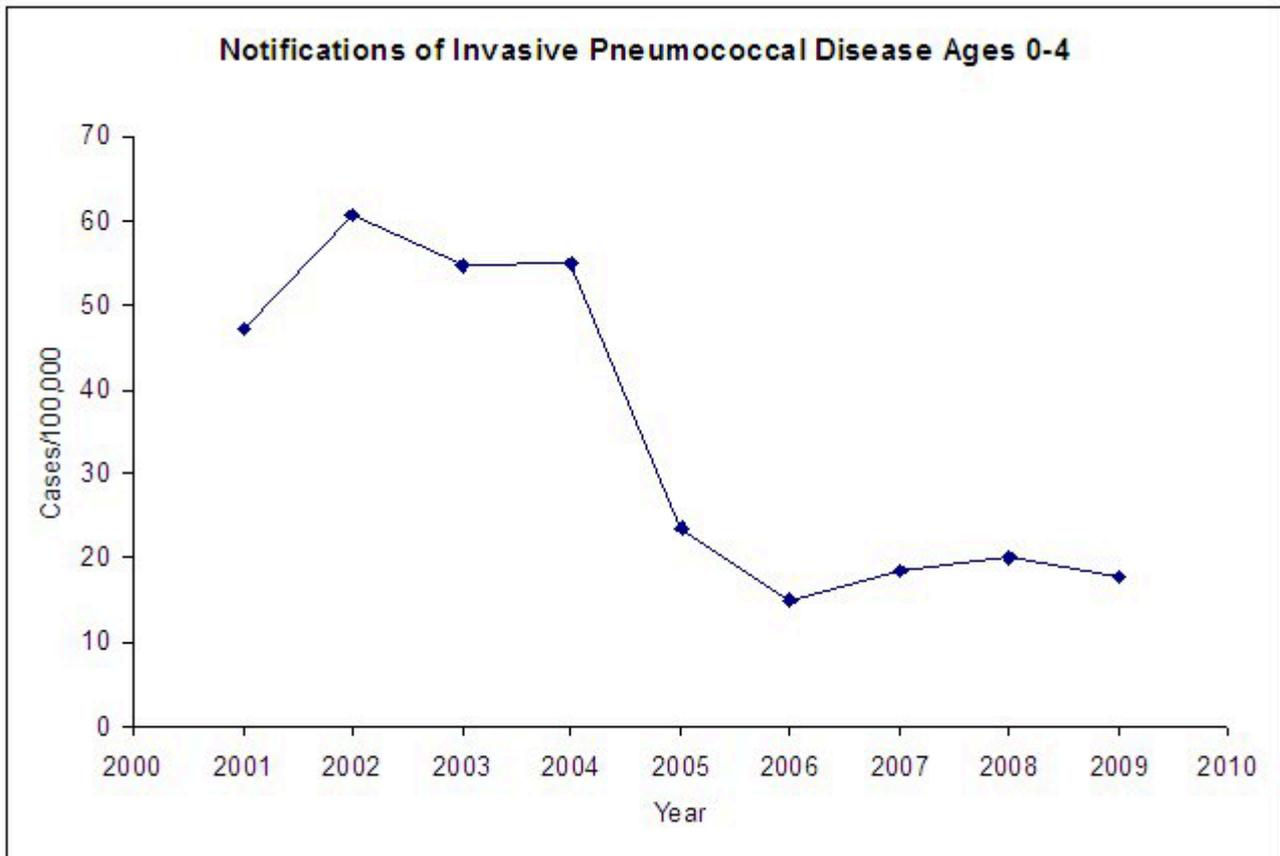
~ In Australia in the year 2004 there were **700** cases of invasive pneumococcal disease in the age group of 0-4 years.

~ The vaccine was introduced onto the childhood schedule in 2005.

~ In 2006 there were **196** cases of invasive pneumococcal disease in the 0-4 year age group.

[http://www9.health.gov.au/cda/Source/Rpt\\_5\\_sel.cfm](http://www9.health.gov.au/cda/Source/Rpt_5_sel.cfm)  
<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/handbook-appendix9>

In the following graph you can see the clear drop in incidence of invasive pneumococcal disease cases in the 0-4 age group after vaccination was introduced:



[http://www9.health.gov.au/cda/Source/Rpt\\_5\\_sel.cfm](http://www9.health.gov.au/cda/Source/Rpt_5_sel.cfm)

(information for graph based on notifications per 100,000 population)

So once again, Dorey's claim, that there is a vaccine for earache, is wrong.

**LIE 23. AND NOW, (DRUM ROLL)..... FOR THE BIGGEST LIE OF ALL.....**

Many of us first encountered Meryl Dorey and the AVN in 2009, when she sat in the audience of the TV show "Sunday Night" and announced her ignorance to the whole country by commenting on Pertussis (whooping cough):

*"You didn't die from it 30 years ago and you're not going to die from it today".<sup>42</sup>*

She also displayed enormous insensitivity by making that statement not 10 feet away from David & Toni McCaffery, just a couple of months after their daughter Dana had died from whooping cough.

<sup>42</sup> Channel 7 current affairs show, "Sunday Night". <http://www.youtube.com/watch?v=N-63XHxTM4>

Now this is clearly wrong. See the Australian Dept of Health study “Vaccine Preventable Diseases and Vaccination Coverage in Australia 2003 to 2005” and the total deaths which are now largely preventable, in Fig 3 below. Particularly, look at the deaths from Pertussis, (and note the deaths both before and after vaccination became widely available).

**Table 2. Number of deaths from diseases commonly vaccinated against, by decade, Australia, 1926 to 1995 and 1996 to 2004\***

Period	Diphtheria	Pertussis	Tetanus	Poliomyelitis	Measles†	Population estimate (yearly average)
1926–1935	4,073	2,808	879	430	1,102	6,600,000
1936–1945	2,791	1,693	655	618	822	7,200,000
1946–1955	624	429	625	1,013	495	8,600,000
1956–1965	44	58	280	123	210	11,000,000
1966–1975	11	22	82	2	146	13,750,000
1976–1985	2	14	31	2	62	14,900,000
1986–1995	2	9	21	0	32	17,300,000
1996–2004	0	17	6	0	0	19,200,000

\* Sources: Feery B. One hundred years of vaccination. *Public Health Bulletin* 1997;8:61–63; Feery B. Impact of immunisation on disease patterns in Australia. *Medical Journal of Australia* 1981;2:172–176. Deaths recorded for 1966–1975 and 1996–2004 updated with data provided by AIHW Mortality Database.

† Excludes deaths from subacute sclerosing panencephalitis.

■ Indicates decade in which community vaccination started for the disease.

The numbers above are for Australia, a healthy first-world country. Globally, in 1999 the estimated number of deaths for children under 15 years from Pertussis was between 295,000 and 390,000.<sup>43</sup> People do die from Pertussis, and to claim that “you’re not going to die from it” is so much a lie that it could qualify as psychotic.

Now, isn’t that the biggest lie you ever heard?

### **BUT DON’T TAKE JUST MY WORD FOR IT.**

On 7 July 2010, the New South Wales Health Care Complaints Commission issued its report<sup>44</sup> on my complaint (and from two others) to them that the AVN and Meryl Dorey were engaging in misleading and deceptive conduct to dissuade people, especially parents, from vaccinating themselves and their children.

The Commission upheld my complaint, with some choice phrases such as these:

*“The Commission has determined that the health education service provided by the Australian Vaccination Network on its website provides misleading and inaccurate information on the subject of vaccination.”*

<sup>43</sup> Dr NS Crowcroft, C Stein, P Duclos, M Birmingham “How best to estimate the global burden of pertussis?” *The Lancet, Infectious Diseases, Volume 3, Issue 7*, Pages 413 - 418, July 2003 <http://www.thelancet.com/journals/laninf/article/PIIS1473309903006698/abstract>

<sup>44</sup> Beginning page 51.

*“The statement that ‘Vaccines have never been tested’ is incorrect.”*

*“It is incorrect therefore for the AVN to indicate that thiomersal is present in any diphtheria vaccine currently used in Australia.”*

*“.....the AVN selectively relies on references in order to support an anti-vaccination stance.”*

*“There is no evidence that vaccines have been the subject of corrupt or incorrect research by manufacturers or independent bodies, although AVN's paralleling of the pharmaceutical industry to tobacco companies suggests that this is the case.”*

*“The AVN has not given a reference for the source of the statistic of 10% nor explained the context of the information about vaccination reactions.”*

*“This information is anecdotal only,....”*

*“As an organisation that is providing health education the AVN should make this clear in order not to mislead the reader.”*

*“In relation to the general information provided by the AVN on its website in the sections titled ‘Vaccine Information’ and ‘Ten reasons why parents should question vaccination’, the AVN is clearly taking an anti-vaccination stance,”*

*“This is not consistent with the mission on its home page, at the time of the investigation, to provide all the information that you need when deciding whether or not to vaccinate,”*

*“The Commission has found that there is evidence that the AVN misleads readers by using reliable and peer-reviewed research but quoting selectively from it, often in contradiction to the conclusions or findings of the studies themselves.”*

*“The AVN also provides information for which there are no references quoted and refers to cases where there are no tests of the reliability of data. The AVN gives this material the same prominence and authority as fully reviewed scientific literature.”*

*“The Commission further found evidence that the AVN makes strong assertions such as in relation to the benefit of exposure to childhood illnesses, without supporting them with any research.”*

*“There is evidence that the AVN also casts medical practitioners in a negative light, asserting that the profession is unethical and untrustworthy on the issue of immunisation without providing any cogent reasons or evidence for making such an assertion.”*

*“The AVN does not provide references in support of this claim.”*

*“The available evidence indicates that measles, mumps and rubella are all potentially serious illnesses. There is no evidence that these illnesses can be described, in all cases, as non-threatening, (contrary to Dorey’s claim that “measles, mumps and rubella are 'non-threatening illnesses in early childhood,).”*

*“It is inaccurate for Ms Dorey to state that pertussis does not kill.”*

*“The Commission expressed concern that these tables (presented by Dorey to support her argument that vaccination for pertussis does not offer protection from infection) appear to be two unrelated sets of statistical data, relating to different cohorts of children.”*

*“The Commission asked Ms Dorey to provide further information regarding this source but, to date, she has not responded.”*

*“The AVN has selectively quoted information to suggest that vaccination against meningococcal disease has been ineffective when there is no evidence of this.”*

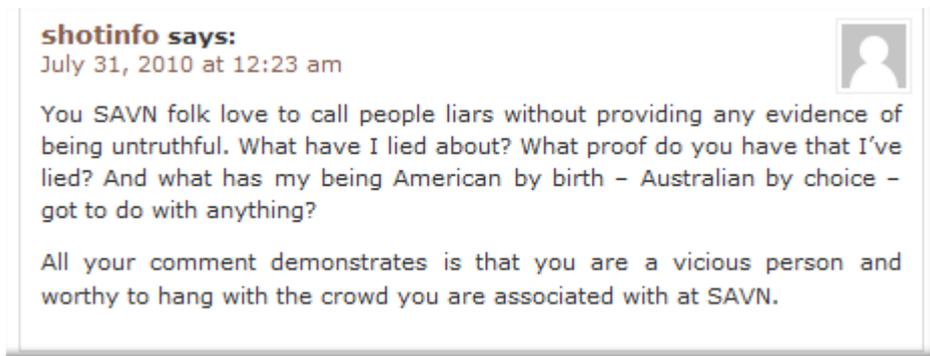
*“...the statements reportedly made at AVN seminars would seem to be in some cases grossly inaccurate, “*

*“.....Ms Dorey joined the debate in the media, she was not in possession of all the information relating to the facts and circumstances of Dana's illness and death when she spoke with the media and posted information relating to Dana on her weblog. This was offensive and painful for Dana's parents and family,”*

*“The AVN provides information that is misleading for the average reader by inaccurately representing information, selectively reporting information, and giving non-peer reviewed and anecdotal material the same authority as peer-reviewed literature. In all cases of misrepresentation, selective and inaccurate reporting and indiscriminate use of research material, the AVN and Ms Dorey were doing so to maintain an anti-vaccination position.”*

## SHE CAN'T HANDLE THE TRUTH!

On 31 July 2010 Meryl Dorey challenged her critics on her AVN blog:



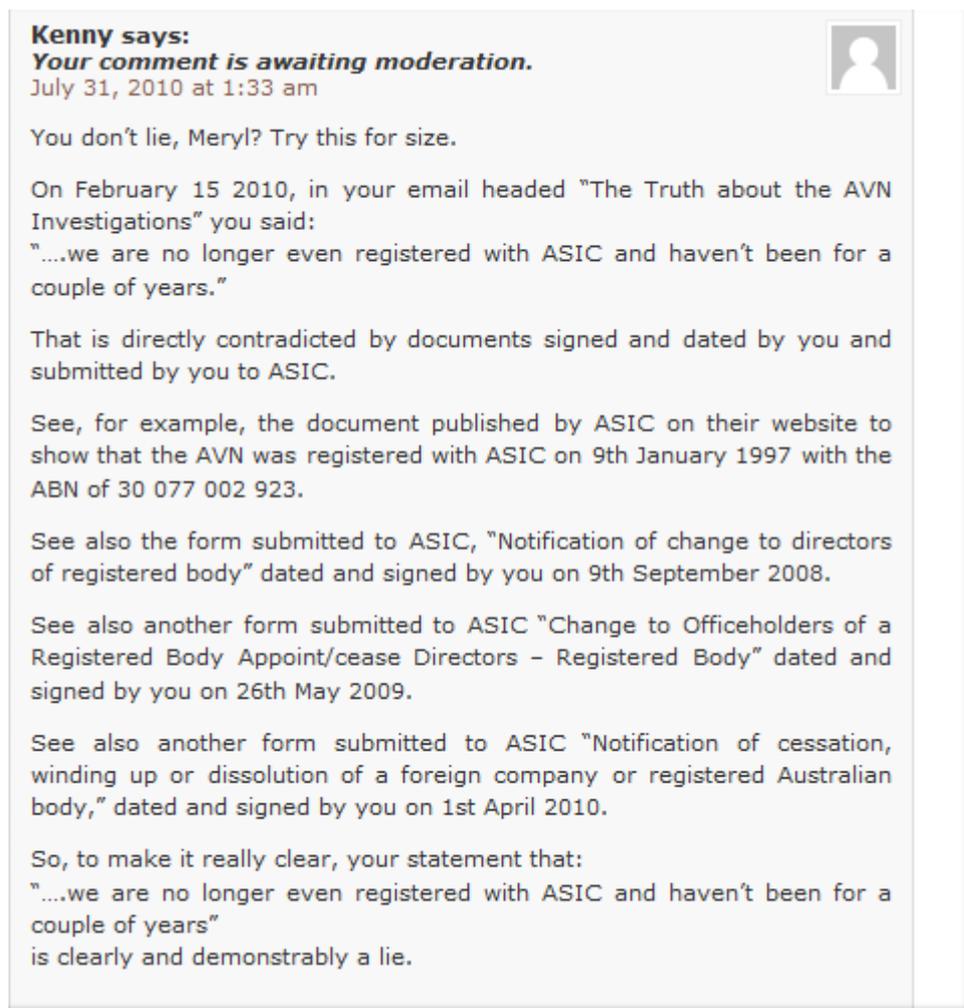
**shotinfo says:**  
July 31, 2010 at 12:23 am

You SAVN folk love to call people liars without providing any evidence of being untruthful. What have I lied about? What proof do you have that I've lied? And what has my being American by birth - Australian by choice - got to do with anything?

All your comment demonstrates is that you are a vicious person and worthy to hang with the crowd you are associated with at SAVN.

So being a perfect gentleman, always ready to rise to the occasion, respond to any challenge to provide proof that Meryl Dorey has lied, I put this reply on her blog:

### POST 1.



**Kenny says:**  
*Your comment is awaiting moderation.*  
July 31, 2010 at 1:33 am

You don't lie, Meryl? Try this for size.

On February 15 2010, in your email headed "The Truth about the AVN Investigations" you said:  
"...we are no longer even registered with ASIC and haven't been for a couple of years."

That is directly contradicted by documents signed and dated by you and submitted by you to ASIC.

See, for example, the document published by ASIC on their website to show that the AVN was registered with ASIC on 9th January 1997 with the ABN of 30 077 002 923.

See also the form submitted to ASIC, "Notification of change to directors of registered body" dated and signed by you on 9th September 2008.

See also another form submitted to ASIC "Change to Officeholders of a Registered Body Appoint/cease Directors - Registered Body" dated and signed by you on 26th May 2009.

See also another form submitted to ASIC "Notification of cessation, winding up or dissolution of a foreign company or registered Australian body," dated and signed by you on 1st April 2010.

So, to make it really clear, your statement that:  
"...we are no longer even registered with ASIC and haven't been for a couple of years"  
is clearly and demonstrably a lie.

Note that when I made the screen capture on 1 August 2010, the comment was shown as "awaiting moderation." (It was still "awaiting moderation" when I last looked on 26

September 2010, which means that it is not visible to the public.) ASIC have confirmed that the AVN “has been deregistered as of 24/08/2010,” six months after Dorey made the statement that “we are no longer even registered with ASIC and haven’t been for a couple of years.”

Then I made this response also:

## POST 2.

**Kenny says:**  
**Your comment is awaiting moderation.**  
July 31, 2010 at 1:40 am

You don't lie, Meryl? Well what was this.

You have appealed for donations to pay for Bounty Bag inserts in many of the AVN publications, since as early as May 29, 2006, saying that: "your donation will go towards the ability to offer our services and our magazine in the Bounty Bag which is given to every woman who births in hospital."

The Internet Archive shows that this appeal has appeared on the AVN's website since 3 February 2007. The same appeal appears in your emails, in the AVN magazine "Living Wisdom" and the AVN HPV brochure. This appeal remains on the AVN website until 2 weeks ago.

But there never was any arrangement with Bounty Bags, was there. They have said that they would never have anything to do with you. So you told a great big fat lie, didn't you?

Note that this one is also “awaiting moderation.” (It was still “awaiting moderation” on 26 September 2010 which means that it is not visible to the public.) Then I made yet another response:

## POST 3.

**Kenny says:**  
**Your comment is awaiting moderation.**  
July 31, 2010 at 1:46 am

Or how about this one, Meryl?

On a poster for the Woodford Folk Festival you described yourself as: "Australia's leading expert in vaccination." That poster is partially reproduced on the web and still has that accolade. So all those other Australian experts, such as Sir Macfarlane Burnet, OM, AK, KBE, and Professor Peter Doherty AC, (both of whom won Nobel Prizes for their work in immunology that led to vaccines), and Professor Ian Frazer AMA Gold Medal, stand in your shade, you who said on television that your medical qualifications are that you "have studied this issue for 20 years" and that you "has a brain." You admit to having no formal medical qualifications, and that "you don't need an M D to have a brain."

In your response to the HCCC on the 18th page you refer to *Treponema pallidum* as a virus. In fact it is a bacterium. You have added your name to a list of people who deny the "theory" that the Human Immunodeficiency Virus (HIV) causes AIDS. On the Yahoo AVN discussion group you said: "nobody has ever 'seen' the HIV virus..." This would come a surprise to the people who took pictures of the virus. They were not hard to find: type "photo of HIV" into Google and you will be offered 10,300,000 webpages of HIV photos.

Another big fat lie, Meryl?

Note that this one is also “awaiting moderation.” (It was still “awaiting moderation” on 26 September 2010, which means that it is not visible to the public.) Then I made yet another response:

#### POST 4.

**Kenny says:**  
*Your comment is awaiting moderation.*  
July 31, 2010 at 1:51 am 

Or how about this, Meryl?

In your “Doing the Rounds” newsletter of, August 2007 you said of the AMA that it is “an industry lobby group which receives massive amounts of funding from vaccine manufacturers,” Naturally, the AMA was not pleased with this and you had to retract and apologise:

“It has been brought to the attention of the Australian Vaccination Network that the comments published not only contained a number of factual errors but were felt to be offensive and embarrassing (sic) to AMA (NSW), its officers and employees.

In particular it has been brought to the attention of the Australian Vaccination Network, the Australian Vaccination Network accepts, that:

- 1- AMA (NSW) does not obtain any of its funding from pharmaceutical companies;
- 2- AMA (NSW) has not published any advertisement or advertorial for a pharmaceutical company in the NSW Doctor for a periods of at least four years, and at no time has the advertising in NSW Doctor been almost exclusively that of pharmaceutical companies;
- 3- AMA (NSW) does not actively censor information made available to its members.

The Australian Vaccination Network unreservedly apologises for any offence or embarrassment the publication may have caused AMA (NSW), its officers and employees”.

So was that just another big fat lie, Meryl?

Note that this one is also “awaiting moderation.” (It was still “awaiting moderation” on 26 September 2010, which means that it is not visible to the public.) So Dorey’s claim that the AMA is “an industry lobby group which receives massive amounts of funding from vaccine manufacturers” was just a big fat lie. Then I made yet another response:

#### POST 5.

**Kenny says:**  
July 31, 2010 at 1:58 am 

Gez Meryl, you said above: “What have I lied about? What proof do you have that I’ve lied?”

Well, how about this?

In the AVN “Living Wisdom” email newsletter dated 29 March 2010, you gave a link to an online proxy voting form relating to a change to the AVN constitution. The preamble to the form said: “According to the Department of Fair Trading’s rules, amendments to an association’s constitution require the approval of three-quarters of the members.

Therefore, we need at least 1,400 of you to vote...” Simple maths therefore gives the membership total to be 1,866.

Yet in your “Living Wisdom” email newsletter issued 15 February 2010 you said of her membership numbers: “Those 218 pledges leave about 2,300 members who have not pledged (out of approximately 2,500 AVN members).”

That is a big difference: “approximately 2,500 members” vs 1,866.”

You asked for proof that you lied, you got it.

That's strange; Post 5 passed Meryl Dorey's moderation and went onto her blog. Meanwhile I submitted Post 6, as below:

**POST 6.**

**Kenny says:**  
July 31, 2010 at 2:04 am 

You wanted proof that you lie?

You have said on the AVN website and Twitter "Did you know: That pharmaceutical & chemical companies are the largest buyers of advertising? "

A quick check with the industry publication, the US "Advertising Age" gave the most recent statistics on world-wide expenditure on company advertising.

Procter & Gamble Co. 1 \$9.73 billion  
Unilever 2 \$5.72 billion  
L'Oreal 3 \$4.04 billion  
General Motors Co. 4 \$3.67 billion  
Toyota Motor Corp. 5 \$3.20 billion  
Coca-Cola Co. 6 \$2.67 billion  
Johnson & Johnson 7 \$2.60 billion  
Ford Motor Co. 8 \$2.45 billion  
Reckitt Benckiser 9 \$2.37 billion  
Nestlé 10 \$2.31 billion  
Volkswagen 11 \$2.31 billion  
Honda Motor Co. 12 \$2.22 billion  
Mars Inc. 13 \$2.00 billion  
McDonald's Corp. 14 \$1.97 billion  
Sony Corp. 15 \$1.85 billion  
GlaxoSmithKline 16 \$1.83 billion  
Deutsche Telekom 17 \$1.81 billion  
Kraft Foods 18 \$1.79 billion  
Nissan Motor Co. 19 \$1.72 billion  
Walt Disney Co. 20 \$1.59 billion  
Danone Groupe 21 \$1.58 billion  
General Electric Co. 22 \$1.55 billion  
Time Warner 23 \$1.53 billion  
PSA Peugeot Citroen 24 \$1.51 billion  
Pfizer 25 \$1.51 billion

You will notice that the first company in the list which has any real pharmaceutical business is Johnson & Johnson, but their major business is in health care products, bandaids, shampoos, etc. They came in at Number 7, and the first real pharmaceutical company was GlaxoSmithKline who came in at Number 16.

For someone who claims that she is "Australia's leading vaccine researcher", this is a real clanger. Nobody could be that incompetent, this statement was an outright lie.

(Peter Bowditch was the first to notice this one, but unlike you, Meryl, I check my sources before quoting them.)

Crikey, this one also passed Meryl Dorey's moderation and was posted on her blog. She replied with an odd answer: *"Kenny – the difference is that neither you nor your leader knows how to read. I did not say individual companies, did I? I said pharmaceutical and chemical companies – eg, the industry as a whole. "*

Another respondent challenged Dorey by replying: *"statistics pertaining to the Australian media, especially as Direct-to-Consumer advertising is illegal in Australia? And maybe if you mean the industry then why write "companies" and not "industry" in the first place."*

So Dorey is exposed as:

- a) using statistics that do not apply in Australia, because Australian pharmaceutical companies are not permitted to advertise to the public and so their advertising budgets are much smaller in Australia than in the USA. (Only two OECD countries permit prescription pharmaceutical advertising to the public, New Zealand and the USA.)
- b) obfuscating her statement by changing the meaning of "pharmaceutical and chemical companies" to "the industry as a whole. "
- c) being incapable of adding up.

So, to draw this part of the saga to an end, let's summarise:

The real issue here is that I was challenged to provide proof that she lied, I provided 6 examples, as above. Two passed moderation, four remained unpublished at 26 September, two months later, and her attempt to change the meaning of what she had said is exposed as yet more dishonesty.

So the proof is here: When Meryl Dorey challenges others to show where she lies, she refuses to issue a correction and suppresses the evidence.

## **SO, TO BRING THIS TO A CONCLUSION.....**

On ABC TV's Lateline program of 12 July 2010, Meryl Dorey said in interview:

*"Our position is to provide information that balances what parents get from their doctors and from the Government. We have never said that we provide both sides of the story. We don't."*

So, by Meryl Dorey's logic, if doctors and government health authorities and nurses say one thing, she must say the opposite; she must lie to "balance" that.

**The evidence is overwhelming: Meryl Dorey is a serial liar, and now you know why.**

File No: 09/01695  
Contact: Leanne Evans  
Telephone: 9219 7416  
Email: levans@hccc.nsw.gov.au

Mr Ken McLeod  
PO Box 51  
MORUYA NSW 2537

PRIVATE AND CONFIDENTIAL

Dear Mr McLeod

**Re: Complaint concerning the Australian Vaccination Network**

I am writing to advise you of the outcome of the Office of the Health Care Complaints Commission investigation into your complaint concerning the Australian Vaccination Network and its president, Ms Meryl Dorey.

The Commission has determined that the health education service provided by the Australian Vaccination Network on its website provides misleading and inaccurate information on the subject of vaccination. In view of this, the Commission has made the following recommendation to the Australian Vaccination Network, pursuant to section 42(1)(b) of the *Health Care Complaints Act, 1993* (the Act):

Recommendation:

*The Australian Vaccination Network should include an appropriate statement in a prominent position on its website which states:*

- 1. the Australian Vaccination Network's purpose is to provide information against vaccination in order to balance what it believes is the substantial amount of pro-vaccination information available elsewhere;*
- 2. the information provided should not be read as medical advice; and*
- 3. the decision about whether or not to vaccinate should be made in consultation with a health care provider.*

Please find enclosed further information about the Commission's investigation and the reasons for its decision set out in the Investigation Report.

The Australian Vaccination Network has 14 days to comply with this recommendation.

Office address  
Level 13  
323 Castlereagh Street  
SYDNEY NSW 2000

Post address  
Locked Mail Bag 18  
STRAWBERRY HILLS  
NSW 2012

Toll Free in NSW 1800 043 159  
T (02) 9219 7444  
F (02) 9281 4585  
E hccc@hccc.nsw.gov.au

W www.hccc.nsw.gov.au  
ABN 62 909 056 262  
DX 11617 SYDNEY DOWNTOWN

APPENDIX 1.2

Under section 44 of the Act, the Commission will follow up the implementation of the recommendation and in the event that the Australian Vaccination Network fails to comply with the recommendation the Commission will make a public statement.

If you have any enquiries regarding the contents of this letter please contact Leanne Evans, Investigation Officer, on 9219 7416 or by email to [levans@hccc.nsw.gov.au](mailto:levans@hccc.nsw.gov.au).

Yours sincerely



Kieran Pehm  
**Commissioner**

07 JUL 2010

Private and Confidential

## INVESTIGATION REPORT

**Respondent:** Australian Vaccination Network / Ms Meryl Dorey  
**Complainants:** Mr Ken McLeod, Mrs Toni & Mr David McCaffery  
**File number:** 09/01695 & 10/00002  
**Investigator:** Leanne Evans

### Background

The Australian Vaccination Network (AVN) is an Australian non-profit organisation registered in New South Wales, founded in 1994.

The AVN provides information about vaccination on its website [www.avn.org.au](http://www.avn.org.au). On the home page of the website is a welcome message stating 'The AVN urges you to investigate *before* you vaccinate' which goes on to say:

*'We believe it is a parent's right to choose what's best for their child...some would say that this is one of the most basic rules of any civilised society. Yet governments all over the world have abridged or denied the right to free choice when it comes to vaccinations, vaccines and immunisations. The Australian Vaccination Network is working to help parents take back that right to free and informed choice by allowing them to see the less publicised side of this important issue before making a decision.'*<sup>1</sup>

Ms Meryl Dorey is the president of the organisation. Ms Dorey speaks on the subject of vaccination on local radio and at a number of different forums including the Bachelor of Naturopathy course conducted by Southern Cross University, pregnancy discussion groups, and the Woodford Folk Festival. Ms Dorey is also editor of 'Living Wisdom' magazine which is distributed through the AVN website.

### The complaints

#### **Mr Ken McLeod**

On 22 July 2009, Mr Ken McLeod made a complaint about the AVN and Ms Dorey to the Health Care Complaints Commission (the Commission), alleging that the AVN engages in misleading and deceptive conduct in order to persuade people not to vaccinate themselves or their children.

In his complaint, Mr McLeod claimed that the AVN is a health organisation and Ms Dorey a health care provider under the *Health Care Complaints Act 1993* (the Act) and alleged that both the AVN and Ms Dorey engage in misleading and deceptive conduct to dissuade parents from vaccinating their children by:

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<sup>1</sup> [www.avn.org.au](http://www.avn.org.au)

## Office of the Health Care Complaints Commission

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1. Claiming the AVN supports informed choice when it is only providing information directed at dissuading people from vaccination.
2. Stating on its website that Japan ceased using the measles, mumps and rubella (MMR) vaccine because of *'increased risk'*.
3. Stating on its website that research has suggested there is a connection between vaccination and autism, Crohn's Disease and Irritable Bowel Syndrome (IBS) and published an AVN newsletter that the United States 'vaccine court' ruled vaccination caused autism in a child.
4. Stating on its website that measles, mumps and rubella are *'non-threatening illnesses in early childhood'*.
5. Ms Dorey:
  - a. stating on Channel Seven's *'Sunday Night'* programme that pertussis (whooping cough) did not kill 30 years ago and does not kill today; and
  - b. writing in a magazine article that the majority of pertussis cases occur in vaccinated individuals.
6. Stating on its website the incidence of diphtheria decreased well before the use of mass vaccination.
7. Ms Dorey stating that bacterial meningitis has increased since meningococcal vaccines were introduced.
8. Ms Dorey selectively quoting from articles in order to link the vaccine, Gardasil, with deaths of vaccinated women.
9. Conducting a seminar at which a number of statements were made including:
  - a. meningococcal disease is harmless and hardly kills anybody;
  - b. vaccination is useless as children gain immunity from picking up objects on the street and sucking on them;
  - c. vaccination is being used to spread AIDS in third world countries;
  - d. measles, mumps and rubella are less dangerous diseases than vaccination;
  - e. autism is caused by mercury in vaccines which do not contain mercury; and
  - f. vaccination is unnecessary as homoeopathy can treat and protect against disease.
10. Selling t-shirts imprinted with the slogan: *'Love them. Protect them. Never Inject them.'*
11. Misrepresenting the facts of the death of Dana McCaffery.

Mr McLeod requested that the Commission make a prohibition order in relation to the AVN and Ms Dorey under section 41A of the Act on the basis that their activities are endangering public health and safety.

The AVN and Ms Dorey were provided with a copy of Mr McLeod's complaint on 31 July 2009.

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### **Mr and Mrs McCaffery**

On 16 December 2009, the Commission also received a complaint from Mrs Toni and Mr David McCaffery, whose four week old daughter, Dana, had died from complications of pertussis infection (whooping cough) in March 2009.

Mr and Mrs McCaffery alleged the AVN and Ms Dorey quote misleading statistics, spread misinformation through seminars and the internet, and give poor telephone advice. They also alleged that the AVN and Ms Dorey engaged in harassment and invasion of privacy following the death of their daughter.

Mr and Mrs McCaffery's complaint raises similar issues to those raised by Mr McLeod in that they also allege the AVN and Ms Dorey provide a health service that endangers public health. Mr and Mrs McCaffery allege the AVN and Ms Dorey:

- use misleading statistics to argue against vaccination for pertussis;
- actively target parents through seminars and provide misinformation about vaccination;
- have a website and Facebook group that give the impression of presenting information about vaccination but does not include information that is pro-vaccination;
- give anti-vaccination telephone advice to people who contact the AVN for information on vaccination.

Mr and Mrs McCaffery also alleged that following the death of their daughter, Dana McCaffery, Ms Dorey:

- engaged in harassment and invasion of their privacy regarding the death of Dana; and
- published inaccurate and misleading information in magazines, newspapers and AVN publications on the subject of Dana's death.

This complaint was assessed for investigation on 18 January 2010 and a decision was made to incorporate this complaint into Mr McLeod's complaint as the issues were essentially the same. The AVN and Ms Dorey were notified of this via a draft Investigation Report sent on 1 February 2010. The AVN and Ms Dorey were not provided with a copy of the complaint by Mr and Mrs McCaffery, as they expressed concern regarding risk of further harassment from AVN members.

Under section 16 of the HCCA, the Commission may give a copy of the complaint to the person against whom the complaint is made. However, if it appears that providing a copy of the complaint is likely to "*place the complainant or another person at risk of intimidation or harassment*"<sup>2</sup> then the Commission is not obliged to do so.

### **The Commission's handling of the complaints**

To assist its initial assessment of the complaint, the Commission sought a response from the AVN. Ms Dorey responded on behalf of herself and the AVN by letter dated 7 September 2009, in which she submitted that the Commission did not have jurisdiction to investigate herself or the AVN<sup>3</sup>.

The Commission subsequently decided to investigate this matter on 23 September 2009, as the complaint raised significant issues of public health and safety.

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<sup>2</sup> *Health Care Complaints Act, 1993*

<sup>3</sup> Letter to Commission from the AVN dated 7 September 2009

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### Application of the Act

The Commission examined the AVN website in detail and noted that the provision of 'health education' was evident in the following pages on the website:

- a 'news' page, that summarises and provides links to a number of recent media stories and articles about the risks of vaccination;
- a 'weblog' page, containing a series of discussions about articles and publications on the risks of vaccination;
- a page containing a program of 'webinar' health talks - online seminars regarding vaccination issues and other health issues.

Ms Dorey's participation in pregnancy discussion groups and in lecturing at university also suggests that the AVN operates as a 'health education service'.

The AVN includes a copy of its constitution on its website. In this document, it lists the purposes of the association as:

*'(a) the advancement and promotion of education and learning amongst the public about all matters concerning human health and human physical and social well-being;*

*(b) the propagation, publication, dissemination and diffusion of knowledge and information to the public about all matters concerning human health and human physical and social well-being;*

*(c) the encouragement and promotion of the widest possible dissemination to the public of all information concerning human health and human physical and social well-being.<sup>3</sup>*

According to its own constitution and through its activities the AVN is a health education service. Consequently it is a health service under section 4 of the Act.

### The Commission's investigation

The Commission has predominantly investigated issues raised by Mr McLeod in the context of how they are presented on the AVN website, because the website provides the main source of information to members of the public who may be seeking information about vaccination.

Studies have shown that the internet has become the primary source of information for the general public, with health related websites among the most widely used.<sup>4</sup> It is noted that in performing an internet search in Australia on 'vaccination' via search engine 'Google', the AVN website will often appear either first or second on the list of websites.

It is therefore appropriate to consider the AVN website as a common internet starting point for the general public in researching vaccination information.

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<sup>3</sup> Model Rules, AVN Inc

<sup>4</sup> Kummervold PE, Chronaki CE, Lausen B, Prokosch HU, Rasmussen J, Santana S, et al. *eHealth trends in Europe 2005-2007: a population-based survey*. J Med Internet Res. 2008;10(4):e42.

## Office of the Health Care Complaints Commission

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***Issue One: The AVN claims that it supports informed choice when it is only providing information directed at dissuading parents from vaccinations.***

Mr McLeod alleged the AVN claims to issue balanced information and advice; but instead provides advice that is wrong, misleading, deceptive and biased.

In her response to this allegation, Ms Dorey stated that the information provided by the AVN is not anti-vaccination but is provided *'in support of parental choice when it comes to vaccination and health and provide(s) referenced information on the benefits and risks of vaccination.'*<sup>5</sup>

In investigating this part of the complaint, the Commission began with the 'General Vaccine Info' section of the AVN website that is accessed through the heading 'Vaccine Info' in a sidebar on the home page, as it seems reasonable that a person researching vaccination information for the purpose of making a decision about vaccination would begin by looking at the general information on vaccination and reasons for and against vaccination. This section contains the following:

***'10 reasons why parents question vaccination'***<sup>6</sup>

***Reason 1 – Vaccines have never been tested***

*The gold standard of medical science is the double blind crossover placebo study. This test has never been performed on any vaccine currently licensed in Australia. In an astounding leap of logic, contrary to all rules of science, vaccines are assumed to be safe and effective, and therefore, it is considered to be unethical to withhold vaccinations for the purpose of testing them.*<sup>7</sup>

The statement that 'Vaccines have never been tested'<sup>8</sup> is incorrect. In Australia, all vaccines currently available must pass safety testing before being approved by the Therapeutic Goods Administration (TGA) – the body that makes the final decision about the safety of new treatments, medicine and devices<sup>9</sup>. In Australia, clinical trials are regulated by:

- The National Statement on Ethical Conduct in Research Involving Humans, Good Clinical Practice.
- Note for Guidance on Good Clinical Practice (CPMP/ICH/135/95).
- The Australian Code for the Responsible Conduct of Research<sup>10</sup>.

Reported vaccine reactions are monitored by the TGA<sup>11</sup>. Other organisations are involved in the monitoring of vaccine safety, including the manufacturers of the vaccines.

Vaccines are not tested by means of double blind crossover placebo studies, where the researchers and subjects of the study do not know which treatment is being given to the subjects.<sup>12</sup>

<sup>5</sup> Letter to Commission from the AVN dated 7 September 2009

<sup>6</sup> At the commencement of this investigation, this information was accessible from the homepage, however with the restructure of the website in December 2009 it is now under this section.

<sup>7</sup> [www.avn.org.au](http://www.avn.org.au) – General Vaccination Information – 10 Reasons why parents question vaccination

<sup>8</sup> *ibid*

<sup>9</sup> [www.mmri.mater.org.au](http://www.mmri.mater.org.au)

<sup>10</sup> [www.clinicaltrials.org.au](http://www.clinicaltrials.org.au)

<sup>11</sup> Currently reactions are monitored through a TGA scheme. The Advisory Committee on the Safety of Medicine (ACSON) is being established in 2010, and will monitor and manage the safety of medicines once they have been registered.

<sup>12</sup> [www.wikipedia.com](http://www.wikipedia.com)

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To perform this kind of study for a vaccine, half the subjects would be given the vaccine and the other half a placebo – meaning that those who received the placebo would be at risk from exposure to the disease. Additionally, if the ‘crossover’ element of the study were to occur halfway through the study, the entire group would have been exposed to the vaccine, negating the capacity of the study to accurately measure the long-term safety of the vaccine.

The AVN does not explain the reasons why double blind crossover placebo studies are not generally conducted for vaccines. The AVN’s information on vaccine testing thus gives the general impression that vaccines are not adequately tested and are simply ‘assumed to be safe and effective’<sup>13</sup>. If the AVN were providing a complete picture with regard to vaccine testing, it should say that vaccines are tested in thousands of people in clinical trials; that the information from these trials is used in combination with longitudinal studies of vaccinated and non-vaccinated groups; and that all vaccines are monitored for safety.

### ***Reason 2 – Vaccines contain toxic additives and heavy metals***

*The list of vaccine ingredients includes toxins such as formaldehyde, a substance which the Queensland Poisons Control Centre has said was “unsafe at any level if injected into the human body”.<sup>14</sup>.....*

*Thiomersal, a mercury based preservative which is a known neurotoxin ... It was also withdrawn from the American Hepatitis B vaccines, Engerix and HB Vax 11, though their Australian counterparts which are still being injected into children here today, are only just being made mercury free or mercury reduced (though the old, mercury-laced products will be used up rather than being withdrawn from us).<sup>15</sup>*

The Commission was unable to locate the reference given by the AVN, nor the organisation named on the website as the Queensland Poisons Control Centre.

In her submission to the Commission<sup>16</sup>, Ms Dorey referenced this quote from a conversation between a member of the Vaccination and Information Network with an organisation called the Queensland Poisons Information Centre.

Formaldehyde is naturally produced in small amounts in the human body<sup>17</sup> and is normally present at low levels in the air.<sup>18</sup> Formaldehyde is included in many vaccines as an ‘antimicrobial toxin inactivator, stabiliser’<sup>19</sup> and is used during the manufacturing process. If any formaldehyde remains after filtering, its presence is no greater than that which can be found present in air and breaks down very quickly.<sup>20</sup> The AVN has not included this additional contextual information about formaldehyde or the process for the manufacture of vaccines.

In her submission to the Commission,<sup>21</sup> Ms Dorey gave the example of Infanrix as a vaccine which contains formaldehyde. Clinical pharmacology for Infanrix is stated as: ‘Each 0.5 mL dose also contains ... </=100 mcg of residual formaldehyde.’<sup>22</sup>

<sup>13</sup> [www.avn.org.au](http://www.avn.org.au) – General Vaccination Information – 10 Reasons why parents question vaccination

<sup>14</sup> Ibid

<sup>15</sup> Ibid

<sup>16</sup> Submission to Commission from the AVN, received 25 June 2010

<sup>17</sup> [www.atsdr.cdc.gov](http://www.atsdr.cdc.gov)

<sup>18</sup> [www.cpsc.gov](http://www.cpsc.gov)

<sup>19</sup> Centres for Disease Control and Prevention (CDC) Vaccine Excipient and Media Summary

<sup>20</sup> Public Statement, Agency for Toxic Substances & Diseases Registry

<sup>21</sup> Letter to Commission from the AVN, received 5 March 2010

<sup>22</sup> [www.us.gsk.com](http://www.us.gsk.com)

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The current standard for Australian vaccines is a maximum of 0.02% w/v of free formaldehyde. During testing of Australian vaccines by the TGA, including Infanrix, the maximum concentration of formaldehyde detected was 0.0004% w/v.<sup>23</sup>

Mr McLeod noted in his complaint that the AVN site refers in its information under diphtheria vaccination to the use of thiomersal as an additive.

All vaccines on the current National Immunisation Program (NIP) for infants and children under the age of five years are either free of thiomersal, or contain a trace amount to maintain the sterility of the vaccine.<sup>24</sup>

In her submission to the Commission<sup>25</sup>, Ms Dorey states that the only diphtheria-tetanus (dT) vaccines currently used in Australia contain thiomersal: "*the only DT vaccines licensed for use in Australia are produced by CSL Pty Ltd and both of these shots contain thiomersal*". She uses the Australian Immunisation Handbook as her reference.

The Australian Immunisation Handbook states that ADT Booster can be given for a booster dose of dT in people aged ≥8 years or, if necessary, for the primary dT course<sup>26</sup>. Statens Serum Institut/CSL Biotherapies produce and distribute ADT Booster, which is free of thiomersal.<sup>27</sup>

Diphtheria-tetanus vaccines that contain thiomersal are the vaccine for children (CDT) and the adult vaccine (ADT). Currently, both ADT and CDT are registered in Australia - but they are not available for use.<sup>28</sup> The current designated diphtheria-tetanus vaccines are Boostrix, Adacel, Infanrix, Quadracel and Pediacel.<sup>29</sup> None of these contain thiomersal.

It is incorrect therefore for the AVN to indicate that thiomersal is present in any diphtheria vaccine currently used in Australia.

### ***Reason 3 – Vaccines are contaminated with human and animal viruses and bacteria***

*All childhood vaccines, apart from the Hepatitis B (which is genetically engineered and carries with it a different set of problems) are cultured on either animal tissue, a broth of animal and/or human blood and blood products or the cell lines from aborted human foetuses.<sup>30</sup>*

*None of these culturing methods is able to guarantee an uncontaminated vaccine ... many foreign viruses and bacteria can and do contaminate vaccines ... SV40 (simian or monkey virus 40 – just one of the 60 monkey viruses known to contaminate the polio vaccines) has been linked with cancer in humans.<sup>31</sup>*

<sup>23</sup> National Health and Medical Research Council (NHMRC) *The Australian Immunisation Handbook*. 9<sup>th</sup> ed. Canberra: AGPS: 2008 – Appendix 5

<sup>24</sup> NHMRC *The Australian Immunisation Handbook*. 9<sup>th</sup> ed. Canberra: AGPS: 2008 – Appendix 5

<sup>25</sup> Submission to Commission from the AVN, received 25 June 2010

<sup>26</sup> NHMRC *The Australian Immunisation Handbook*. 9<sup>th</sup> ed. Canberra: AGPS: 2008 – Section 3.14 Pertussis & 3.21 Tetanus

<sup>27</sup> ADT™ Booster Consumer Medicine Information Leaflet

<sup>28</sup> NHMRC *The Australian Immunisation Handbook*. 9<sup>th</sup> ed. Canberra: AGPS: 2008 – Appendix 3

<sup>29</sup> National Health (Immunisation Program – Designated Vaccines) Determination, 2009

<sup>30</sup> [www.avn.org.au](http://www.avn.org.au) – General Vaccination Information – 10 Reasons why parents question vaccination

<sup>31</sup> Ibid

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It is preferable to produce vaccines in human foetal cell lines because human immune systems prefer similar proteins and foetal cell lines divide more quickly.<sup>32</sup> The AVN does not give any explanation as to why vaccines are primarily cultured in this way.

The claim by AVN that SV40 simian virus has been known to contaminate polio viruses and has also been linked with cancer in humans, has been the subject of studies reviewing the SV40 contamination in polio vaccines between 1957 and 1963. These studies have produced conflicting evidence regarding the link with cancer.

The AVN provides references to two studies that show such a link - but not to other studies that fail to show a link, including a review commissioned by the TGA which concluded:

*'Studies of the prevalence of SV40 antibody in the community and the presence of SV40 in human tumours do not absolutely exclude the possibility of rare involvement of the virus in individual cases of cancer, but fail to provide evidence of statistically greater risk for people immunised during the period when SV40 was likely to have been present in polio vaccine.'*<sup>33</sup>

In providing the above information in Reason 3, there is evidence that the AVN selectively relies on references in order to support an anti-vaccination stance.

### ***Reason 4 & 5 – Vaccines can cause serious immediate and long-term side effects***

*As long as there have been vaccines, there have been reports of serious side effects following their administration. These side effects include (but are not limited to) convulsions and epilepsy, permanent brain damage, anaphylactic (life threatening allergic) reactions, sudden infant death syndrome (SIDS), retinal and brain haemorrhages (now being confused with shaken baby syndrome) and death...Vaccines have been associated with conditions such as autism and inflammatory bowel syndrome... and a raft of other chronic and autoimmune conditions which are experiencing dramatic rises in incidence.'*<sup>34</sup>

In Australia, if a medical condition arises or a reaction occurs after vaccination, it must be reported to the TGA. It is acknowledged that all reactions may not be reported. In the United States, post-vaccination reactions are monitored by the Vaccine Adverse Event Reporting System (VAERS). However, it should be noted that a reaction following vaccination need not necessarily be a side effect of vaccination. Significantly, the VAERS website states:

*'When evaluating data from VAERS, it is important to note that for any reported event, no cause-and-effect relationship has been established. Reports of all possible associations between vaccines and adverse events (possible side effects) are filed in VAERS.'*

*Therefore, VAERS collects data on any adverse effect following vaccination, be it coincidental or truly caused by a vaccine. The report of an adverse event to VAERS is not documentation that a vaccine caused the event.'*<sup>35</sup>

In relation to the issue of whether SIDS is a side effect of vaccination - there can be no demonstrated cause-and-effect relationship unless it can be shown that there is a higher incidence of SIDS in the vaccinated population than the non-vaccinated population.

<sup>32</sup> Department of Health and Ageing: Immunisation Myths and Realities: 4<sup>th</sup> ed. 2008

<sup>33</sup> Review of the health consequences of SV40 contamination of poliomyelitis vaccines and in particular a possible association with cancers – Professor Yvonne Cossart, 14 December 2004

<sup>34</sup> [www.avn.org.au](http://www.avn.org.au) – General Vaccination Information – 10 Reasons why parents question vaccination

<sup>35</sup> [www.vaers.hhs.gov](http://www.vaers.hhs.gov)

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There are studies showing that the incidence of SIDS reported after vaccination is below the rate of incidence in the general population.<sup>36</sup>

In relation to the issue of brain haemorrhages following vaccination being attributed to shaken baby syndrome (SBS) - there are large-scale studies indicating that the features of brain haemorrhage arising following vaccination never reproduce the findings present in SBS.<sup>37</sup>

There is a study which suggests that there is an increased risk of convulsion after DTP vaccination but little evidence that this produces brain injury or is a forerunner to epilepsy.<sup>38</sup>

The AVN claims that vaccination is linked with a range of long-term side effects. However, the AVN has provided no references to support their claim.

The Commission will address the issue of links between vaccination and autism and irritable bowel syndrome as alleged examples of longer term effects in more detail below under Issue Three.

In a submission to the Commission, Ms Dorey pointed out that the AVN website states that there have been reports of serious side effects following vaccination - not that these side effects are caused by vaccination.<sup>39</sup>

However, the use of the term 'side effects' suggests a causal relationship between the vaccine and the illness. The heading of Reasons 4 and 5 - "Vaccines can cause serious immediate and long-term side effects" also promotes a causal link.

It is noted that current events include the suspected link of influenza vaccination to a two year old girl's death in Queensland. Although the Queensland Coroner found no evidence to support a link between the vaccination and death, there continues to be a nationwide suspension on the use of this vaccine whilst investigations continue into the cause of adverse reactions among young children under the age of five.

The issue of vaccine-related side effects is an extremely important one and one where the AVN needs to be providing information that is factual and not misleading.

**Reason 6 – Vaccines do not necessarily protect against infectious diseases**

*... parents are asked to allow their children to be given vaccines that at best, will provide a temporary sensitisation to illnesses and at worst, can make their children more susceptible to both opportunistic and infectious illness.<sup>40</sup>*

The statement that vaccinations may make children more susceptible to illness suggests that vaccines are immuno-suppressive.

On the 'Sunday Night' programme on 26 April 2009, Ms Dorey also stated: 'vaccine by its very nature can suppress the immune system.'

<sup>36</sup> Vennemann MM, Butterfass-Bahloul T, Jorch G, Brinkmann B, Findeisen M, Sauerland C, Bajanowski T, Mitchell EA; 'Sudden infant death syndrome: no increased risk after immunisation', *Vaccine* 2007;25(2):336-340.

<sup>37</sup> eMJA: National Australian conference on shaken baby syndrome, 21 January 2002

<sup>38</sup> Golden GS. *Pertussis vaccine and injury to the brain.* *J Pediatr* 1990; 116: 854-861

<sup>39</sup> Letter to Commission from the AVN, received 5 March 2010

<sup>40</sup> [www.avn.org.au](http://www.avn.org.au) – General Vaccination Information – 10 Reasons why parents question vaccination

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In her response to the Commission, Ms Dorey repeated the assertion that vaccinations are immuno-suppressive and provided a list of studies demonstrating that vaccines are immuno-suppressive.

The Commission has examined Ms Dorey's references and found that while some studies have been conducted which support this hypothesis, others discredit it.<sup>41 42</sup> Two of the references provided by Ms Dorey support that vaccination can be immuno-suppressive, although one article concluded that the suppression period was temporary,<sup>43</sup> and the other concluded that booster vaccination would ensure long-lasting immunity<sup>44</sup>.

The AVN has also made specific assertions on the efficacy of vaccination, in the human papillomavirus (HPV) section of the section on specific vaccines where it has stated:

*'There are more than 100 strains of HPV. The current vaccine, Gardasil, is quadrivalent or contains only 4 of these strains and states in the manufacturer's information that it cannot treat or prevent HPV from other strains. Therefore, even if HPV were the single or most prevalent cause of cervical cancer, use of this vaccine would literally be a shot in the dark.'*<sup>45</sup>

Gardasil protects against two types of HPV that cause about 75% of cervical cancer cases.<sup>46</sup> Accordingly, the information provided by the AVN about Gardasil has the effect of misleading the reader.

Information about Gardasil also appears on the AVN website under the heading 'AVN News'. A link provides a summary of an article published by 'Natural News', titled 'Two more girls die after getting Gardasil 'cervical cancer' vaccine',<sup>47</sup> and quotes the following from the article:

*'The European Medicines Agency (EMA) has reported that two young women died shortly after receiving Merck's Gardasil, a vaccine against several varieties of human papillomavirus (HPV). The EMA did not release the names or ages of the women who died, and said the cause of death was still unknown. It described their deaths as 'sudden and unexpected.'*<sup>48</sup>

The AVN website then provides a link to the full 'Natural News' article. Examination of the full article reveals that the second paragraph is omitted on the AVN website page. This second paragraph states:

*'Gardasil and Glaxo SmithKline's Cervarix protect against the two strains of HPV that are responsible for 70 percent of cervical cancer cases. Gardasil also protects against two HPV strains that cause 90 percent of genital warts.'*<sup>49</sup>

The second paragraph contradicts the claim by the AVN that Gardasil is not effective in preventing most forms of cervical cancer. Its omission from the summary of the article is therefore significant.

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<sup>41</sup> Gerber JS, Offit PA (2009). 'Vaccines and autism: a tale of shifting hypotheses'. *Clin Infect Dis* 48 (4): 456–61. doi:10.1086/596476. PMID 19128068. <http://www.journals.uchicago.edu/doi/full/10.1086/596476>.

<sup>42</sup> Bacterial infections, immune overload, and MMR vaccine E Miller, N Andrews, P Waight, B Taylor, *Arch Dis Child* 2003;88:222–223

<sup>43</sup> Munyer Thomas P. et al, Depressed Lymphocyte Function after Measles-Mumps-Rubella Vaccination *The Journal of Infectious Diseases*, Vol 132, No. 1 Jul (1975).

<sup>44</sup> Manfred S. et al Depression of Immune Response to an Inactivated Hepatitis A Vaccine Administered Concomitantly with Immune Globulin, *The Journal of Infectious Diseases*, Vol 168, No.3 (Sept., 1993)

<sup>45</sup> [www.avn.org.au](http://www.avn.org.au) – Vaccination Information - HPV

<sup>46</sup> [www.gardasil.com](http://www.gardasil.com)

<sup>47</sup> [www.naturalnews.com](http://www.naturalnews.com)

<sup>48</sup> [www.avn.org.au](http://www.avn.org.au) - News-and-Events – Two more girls die after getting Gardasil cervical cancer vaccine

<sup>49</sup> [www.naturalnews.com](http://www.naturalnews.com)

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Ms Dorey submitted that it is not necessary to include the complete information from articles that are linked to the AVN website, because a reader can access the full publication and read it for themselves.<sup>50</sup> While this may be true, the AVN website does not clarify this and its selective reproduction of only some paragraphs of the article has the effect of misrepresenting the thrust of the article.

In her submission to the Commission<sup>51</sup>, Ms Dorey states: *"We are not representing the article – the article is misrepresenting the protection conveyed by Gardasil and Cervarix vaccines and I refuse to include information on the AVN website that I do not believe is based in fact."*

She further asserted that this is not selective reporting of information but that she *"simply quoted the sections that I felt were important."*

***Reason 7 - Doctors, as paid salesmen for vaccine products, are no longer considered to be trustworthy arbiters of their safety and effectiveness***

*Doctors are currently receiving several payments from the government to push vaccines. These include \$6 for reporting vaccinations to the Australian Childhood Immunisation Register (ACIR) ... As a result of this grossly unethical situation, doctors can no longer be thought of as objective when it comes to this issue. Parents no longer trust that their doctors will recommend that they vaccinate simply because it is the best thing for their child rather than the best thing for the doctor's bottom line.<sup>52</sup>*

The Commonwealth General Practice Immunisation Incentive (GPPI) scheme provides financial incentive to general practices that monitor, promote and provide immunisation services to children under the age of seven. The aim of this scheme is to encourage 90% of practices to achieve 90% proportions of full immunisation, which is consistent with current Government immunisation policy.<sup>53</sup>

The Medicare payment of \$6 is made to immunisation providers that make notifications of a vaccination to the ACIR. Additionally, a payment of \$3.50 per child under seven years of age per quarter is paid to practices (rather than the GPs themselves) that achieve a target of at least 90% immunisation coverage.<sup>54</sup>

On the AVN website and in the submission to the Commission<sup>55</sup>, reference is made to a further \$18.50 for GPs on top of their Medicare rebate for vaccinating a child on time. This Service Incentive Payment of \$18.50 ceased to be available from 1 October 2008.<sup>56</sup>

It is not clear how these payments for an administrative service may compromise a medical practitioner's objectivity. It is current government public health policy to keep immunisation rates against certain diseases at the levels quoted above and it is not clear how it could be described as *'grossly unethical'* for doctors to comply with government policy. Doctors have a choice whether or not to participate in this scheme and to suggest that those that do participate may be untrustworthy is not appropriate.

<sup>50</sup> Letter to Commission from the AVN, received 5 March 2010

<sup>51</sup> Submission to Commission from the AVN, received 25 June 2010

<sup>52</sup> [www.avn.org.au](http://www.avn.org.au) – General Vaccination Information – 10 Reasons why parents question vaccination

<sup>53</sup> [www.medicareaustralia.gov.au](http://www.medicareaustralia.gov.au)

<sup>54</sup> GPPI Guidelines, Medicare Australia April 2010

<sup>55</sup> Submission to Commission from the AVN, received 25 June 2010

<sup>56</sup> Medicare Australia

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In alleging that doctors are not trustworthy on the subject of vaccination, the AVN appears to be suggesting that it may not be appropriate to discuss the issue of whether or not to vaccinate with a medical practitioner.

In her submission to the Commission,<sup>57</sup> Ms Dorey states the AVN always advises people who contact it to visit their doctor or council clinic as well as accessing AVN information.

However, this information is not reflected on the AVN's website. In particular, information presented under this section of the website appears contrary to Ms Dorey's statement.

### ***Reason 8 – Pharmaceutical companies have paid for almost all vaccine research to date***

*Just as the tobacco companies paid for corrupt and incorrect research which purported to show that tobacco and tobacco products were safe for human consumption, so too the pharmaceutical companies have paid for and produced almost all of the research into vaccines.<sup>58</sup>*

The majority of research and testing of new pharmaceuticals is conducted by the manufacturers as a part of the research and development process of vaccines for large-scale markets<sup>59</sup>. Manufacturers share an interest with the community in drugs and vaccines being safe and effective. Although manufacturers may carry out much of the testing of new pharmaceuticals, vaccines are further independently tested<sup>60</sup> and researched thoroughly in Australia before being made available for human use.

There is no evidence that vaccines have been the subject of corrupt or incorrect research by manufacturers or independent bodies, although AVN's paralleling of the pharmaceutical industry to tobacco companies suggests that this is the case.

### ***Reason 9 – Doctors and health professionals rarely if ever report vaccine reactions***

*In discussions with representatives of both ADRAC ... and the SAEFVSS (Serious Adverse Events Following Vaccination Surveillance Scheme), the two government bodies charged with keeping track of reactions to vaccines and other drugs, the AVN's representatives were informed that less than 10% of all adverse reactions are ever reported.<sup>61</sup>*

As noted above, practitioners notify reactions that follow vaccinations to the TGA in Australia. Reactions can range in severity and may or may not be attributable to the vaccination itself. It is important to recognise this when considering the figures for notification of vaccine reactions. The AVN has not given a reference for the source of the statistic of 10% nor explained the context of the information about vaccination reactions.

The AVN states it has developed an adverse reactions database from information provided by the public through the website, with over 800 'serious adverse vaccine reactions' which it states were not reported to doctors.

<sup>57</sup> Submission to Commission from the AVN, received 25 June 2010

<sup>58</sup> [www.avn.org.au](http://www.avn.org.au) – General Vaccination Information – 10 Reasons why parents question vaccination

<sup>59</sup> The Vaccine Industry – An Overview – vaccine ethics.

<sup>60</sup> [www.tga.gov.au](http://www.tga.gov.au)

<sup>61</sup> *ibid*

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The AVN provides supporting information about the criteria used to define an 'adverse reaction'. This information is anecdotal only. As an organisation that is providing health education the AVN should make this clear in order not to mislead the reader.

***Reason 10 – Some childhood illnesses have beneficial aspects and therefore, prevention may not necessarily be in the best interests of the child.***

*Measles, for example, has been used in Scandinavian countries to successfully treat such autoimmune conditions as eczema and many studies have [been] performed which show that children who do not contract measles naturally as a child are more likely to suffer from certain cancers later in life. In addition, recent studies have shown that contracting the common childhood illnesses help to prime and strengthen the immune system in a way that vaccinations just cannot do.<sup>63</sup>*

In the submission to the Commission<sup>64</sup>, the AVN provided three references to support the statement that some childhood illnesses have beneficial aspects, and that contracting measles affords protection from certain cancers later in life.

Of these, the first refers to measles virus vaccine strain derivatives and not necessarily the virus itself.<sup>65</sup> The second reference appears to be an article written by a doctor of anthroposophic and homeopathic medicine<sup>66</sup> which does not appear to have been published in any peer-reviewed journal. The third hypothesises there is a relationship between natural infections and the suppression of cancer<sup>67</sup>.

Taking into account these claims that immunity against a disease is stronger when acquired naturally rather than artificially, research by the Commission shows there are studies into immunity levels that agree that naturally acquired immunity through exposure to illnesses may give higher antibody titres than primary vaccination<sup>68</sup>. However, it should be noted that most studies showing this were not questioning the effectiveness of vaccination but rather emphasising the importance of having a program of booster vaccinations to ensure long-lasting immunity.

The assertion that improved immunity may follow exposure to a childhood disease does not take into account the risks of exposure to and the adverse effects of childhood illnesses.

### **Summary: Issue One**

In relation to the general information provided by the AVN on its website in the sections titled 'Vaccine Information' and 'Ten reasons why parents should question vaccination', the AVN is clearly taking an anti-vaccination stance.

This is not consistent with the mission on its home page, at the time of the investigation, to provide all the information that you need when deciding whether or not to vaccinate.

<sup>63</sup> [www.avn.org.au](http://www.avn.org.au) – General Vaccination Information – 10 Reasons why parents question vaccination

<sup>64</sup> Submission to Commission from the AVN, received 25 June 2010

<sup>65</sup> Msaouel et al. *Engineered measles virus as a novel oncolytic therapy against prostate cancer*. *The Prostate*, 2009; 69 (1): 82 DOI: 10.1002/pros.20857

<sup>66</sup> Philip Incao, M.D *Supporting Children's Health From Alternative Medicine Digest* (September 1997)

<sup>67</sup> Post A *Environmental exposure to bacteria and viruses may provide oncolytic protection against cancers, and declining exposure to infections may contribute to a rising incidence of cancer*. *Med Hypotheses*. 007;68(3):558-61. Epub 2006 Oct 9.

<sup>68</sup> Manfred C., op cit.

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In her submission to the Commission<sup>68</sup>, Ms Dorey stated the words “*all the information you need*” were added to the AVN’s website without her knowledge or permission by the website designer. This sentence has now been removed from the home page of the website.

The Commission has found that there is evidence that the AVN misleads readers by using reliable and peer-reviewed research but quoting selectively from it, often in contradiction to the conclusions or findings of the studies themselves.

In her submission to the Commission<sup>69</sup>, Ms Dorey stated in response to this allegation that: “*It is true that oftentimes, our information will contradict the conclusions or summaries of the studies. This is because, as opposed to most doctors and government officials, we actually read the studies and frequently, the summary and conclusion does not agree with the raw data itself. It is as if there were a disconnect between the findings of the study and the research itself. Many times, that disconnect can be explained by the financial links between the study’s researchers and the companies whose products are being studied. So, whilst the AVN does frequently draw different conclusions to those printed at the end of these articles, it is because our analysis of the data shows that the printed conclusions do not correspond with the raw data. This is not selective reporting – it is accurate reporting.*”

The AVN also provides information for which there are no references quoted and refers to cases where there are no tests of the reliability of data. The AVN gives this material the same prominence and authority as fully reviewed scientific literature.

The Commission further found evidence that the AVN makes strong assertions such as in relation to the benefit of exposure to childhood illnesses, without supporting them with any research.

There is evidence that the AVN also casts medical practitioners in a negative light, asserting that the profession is unethical and untrustworthy on the issue of immunisation without providing any cogent reasons or evidence for making such an assertion.

***Issue Two: The AVN states on its website that Japan ceased using the MMR vaccine because of ‘increased risk’.***

Under the section relating to the MMR vaccine, the AVN website states: ‘*Japan ceased the use of the combination triple vaccine due to an increased risk of aseptic meningitis in vaccine recipients.*’<sup>70</sup>

It is true that Japan ceased the use of the MMR combination vaccine in 1993. The mumps vaccine used in Japan was the Urabe strain and a causal link between the Urabe strain of mumps vaccine and aseptic meningitis has been established.

The mumps vaccine currently used in Australia is the Jeryl-Lynn strain and not the Urabe strain.<sup>71</sup> No link between the Jeryl-Lynn mumps vaccine and aseptic meningitis has been established<sup>72</sup>.

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<sup>68</sup> Submission to Commission from the AVN, received 25 June 2010

<sup>69</sup> Ibid

<sup>70</sup> [www.avn.org.au](http://www.avn.org.au) – Vaccine information - MMR

<sup>71</sup> Sanjaya N Senanayake, *Mumps: a resurgent disease with protean manifestations*, MJA 2008; 189 (8): 456-459

<sup>72</sup> Afzal M a, Pickford A R, Forsey T, Heath A B, Minor P D *The Jeryl Lynn vaccine strain of mumps virus is a mixture of two distinct isolates. Journal of General Virology (1993), 74, 917-920*

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**Issue Three: AVN states on its website that research has suggested there is a connection between vaccination and autism, Crohn's Disease and inflammatory bowel syndrome (IBS) and published in an AVN newsletter that the United States 'vaccine court' ruled vaccination caused autism in a child.**

Under the section relating to the MMR vaccine, the AVN website states: 'Research also suggests that there is a connection between MMR vaccination and the development of autism, Crohn's Disease and Irritable Bowel Disease.'<sup>73</sup>

The AVN does not provide references in support of this claim. Ms Dorey, in her original response to the Commission, referred to Dr Andrew Wakefield's 1998 study on the link between the MMR vaccine and autism.<sup>74</sup> On 2 February 2010, *The Lancet*<sup>75</sup> retracted Dr Wakefield's 1998 publication, noting elements of his report had been falsified. The Commission notes that *The Lancet's* retraction of the Wakefield article occurred very recently.

Ms Dorey contends that: 'Dr Wakefield's study was only the first of many to indicate a very strong and, in some cases clinically verifiable connection between vaccination and the development of [autism spectrum disorders]'.<sup>76</sup> She lists ten articles to support this.<sup>77</sup> Of these, four were authored by Dr Wakefield and a further three do not relate vaccination to autism. The remaining three articles hypothesise a link between MMR vaccine and autism, but have not established any causal relationship between vaccination and autism.

In the submission to the Commission<sup>78</sup>, Ms Dorey includes a number of new references which discuss the link between the MMR vaccine and IBS, Crohn's Disease and autistic enterocolitis. These references also include one where the alleged link was inconclusive<sup>79</sup> and one linking autism and ileal / colonic inflammation.<sup>80</sup> Ms Dorey supports the use of these references in this submission by stating: "While it is true that several of the articles I presented to confirm Wakefield's original hypothesis did not specifically mention vaccination, they all described conditions in children which are identical to the novel autistic enterocolitis first discovered in the gut tissue of autistic children by Dr Wakefield."

Mr McLeod referred in his complaint to the AVN's claim about a US 'vaccine court'. The AVN sends newsletters to subscribers via email. The March 2009 newsletter requested donations to run an advertisement highlighting the link between vaccines and autism. The planned advertisement was based on one released by the American organisation, 'Generation Rescue'<sup>81</sup>, which included information regarding a 'US vaccine court' ruling, involving a boy receiving compensation from the US Government because of the link between his MMR vaccination and his autism.<sup>82</sup>

<sup>73</sup> [www.avn.org.au](http://www.avn.org.au) – Vaccine Information - MMR

<sup>74</sup> Wakefield AJ, Murch SH, Anthony A, Linnell J, Casson DM, Malik M, Berelowitz M, Dhillon AP, Thomson MA, Harvey P, Valentine A, Davies SE, Walker-Smith JA. (1998). Ileal-lymphoid-nodular hyperplasia, non-specific colitis, and pervasive developmental disorder in children. *Lancet*. **351**: 637-641.

<sup>75</sup> A peer-reviewed general medical journal

<sup>76</sup> Letter to Commission from the AVN dated 7 September 2009

<sup>77</sup> Ibid

<sup>78</sup> Submission to Commission from the AVN, received 25 June 2010

<sup>79</sup> Afzal MA and Minor PD Vaccines, Crohn's disease and autism, *Molecular Psychiatry* (2002) 7, S49–S50

<sup>80</sup> Krigsman A et. al *Clinical presentation and Histologic Findings at Ileocolonoscopy in children with Autistic spectrum Disorder and chronic Gastrointestinal symptoms*, *Autism Insights* 2010:2 1–11

<sup>81</sup> The 'Generation Rescue' website ([www.generationrescue.org](http://www.generationrescue.org)) claims it is 'an international movement of scientists, parents, and physicians researching the causes and treatments for autism, ADHD, and chronic illness'.

<sup>82</sup> Living Wisdom E-newsletter, March 2009

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The Commission found a US Court of Federal Claims case, Banks vs. Secretary of the Department of Health and Human Services (SDHHS), which ruled that a boy contracted Acute Disseminated Encephalomyelitis (ADEM) as a result of his MMR vaccination. It was further ruled that his ADEM caused lasting, residual damage and retarded his developmental progress, under the generalised heading of Pervasive Developmental Delay (PDD), not autistic spectrum disorder.<sup>84</sup>

### ***Issue Four: Stating that measles, mumps and rubella are 'non-threatening illnesses in early childhood'***

On the AVN website, under Vaccination Information – MMR, it refers to the diseases measles, mumps and rubella as '*non-threatening illnesses in early childhood*'.<sup>85</sup>

In her submission to the Commission<sup>86</sup>, Ms Dorey clarifies this by stating that "*for healthy, well-nourished children, measles mumps and rubella generally do not kill and present few long-term sequelae*".

The most recent mortality figures show that there were no deaths from measles in Australia between 2003 and 2006.<sup>87</sup> Statistics do show that measles is one of the leading causes of death among young children globally.<sup>88</sup> Similarly, both mumps and rubella are serious diseases. In Australia, between 1996 to 2005, mumps has been reported as the underlying cause of death in four adults.<sup>89</sup> Although there have been no deaths attributed to rubella in Australia in recent years, between 2003 and 2005, there were 116 notifications of rubella.<sup>90</sup> More importantly, there are various serious neurological conditions that have been proven sequelae from all three of these diseases, including convulsions, meningitis and pan encephalitis. The available evidence indicates that measles, mumps and rubella are all potentially serious illnesses. There is no evidence that these illnesses can be described, in all cases, as non-threatening.

### ***Issue Five: Pertussis:***

- ***Mrs Dorey stated on Channel Seven's 'Sunday Night' programme that pertussis did not kill 30 years ago and does not kill today;***
- ***Mrs Dorey wrote that that the majority of incidence of pertussis occurs in vaccinated individuals.***

During Ms Dorey's appearance on the Channel 7 television programme '*Sunday Night*' on 26 April 2009, she stated in relation to pertussis: '*You didn't die from it 30 years ago and you're not going to die from it today*'.<sup>91</sup>

<sup>84</sup> United States Court of Federal Claims Office of Special Masters no. 02-0738V 20 July 2007 Banks vs. Secretary of the Department of Health and Human Services.

<sup>85</sup> [www.avn.org.au](http://www.avn.org.au) - MMR

<sup>86</sup> Submission to Commission from the AVN, received 25 June 2010

<sup>87</sup> Department of Health and Ageing website: [www.health.gov.au/internet/main/publishing.nsf/Content/cda-cdi32suppl.htm~cda-cdi32suppl-results.htm~cda-cdi32suppl-results-measles.htm](http://www.health.gov.au/internet/main/publishing.nsf/Content/cda-cdi32suppl.htm~cda-cdi32suppl-results.htm~cda-cdi32suppl-results-measles.htm)

<sup>88</sup> World Health Organisation Fact Sheet, December 2009

<sup>89</sup> NHMRC *The Australian Immunisation Handbook*, 9<sup>th</sup> ed. Canberra: AGPS: 2008 – Part 3

<sup>90</sup> Vaccine Preventable Diseases and Vaccination Coverage in Australia, 2003 to 2005 *Communicable Diseases Intelligence* Volume 31 - Supplement - June 2007

<sup>91</sup> Channel 7, *Sunday Night*, 26 April 2009

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In her submission to the Commission<sup>91</sup>, Ms Dorey explained that this statement was just a small part of a three hour interview that was aired by Channel 7. The Commission accepts that it is unfair to take into account one statement made, when it is subject to editing by a third party.

In the May 2009 edition of the magazine 'Living Wisdom',<sup>92</sup> of which Ms Dorey is editor, Ms Dorey stated in an article titled 'Pertussis: The Fear Factor':

*'What about deaths from this disease? Well, to quote the CDI Bulletin from 25 December 1997, 'In the 20 years from 1976 to 1995, there were 21 deaths from pertussis in Australia.'*<sup>93</sup>

The Department of Health and Ageing states that the number of deaths from pertussis between 1976 and 1995 is 25. In the decade before introduction of pertussis vaccination more than 2800 people died of pertussis. This figure was reduced by 75% in the decade following introduction of the pertussis vaccination.<sup>94</sup>

The evidence indicates that pertussis may still kill a proportion of those who contract it.<sup>95</sup> Some of the complications of pertussis include pneumonia, fractured ribs, pneumothorax, inguinal hernia, aspiration, hearing loss, carotid artery dissection, urinary incontinence and prolapses; seizures, encephalopathy and inter-cranial bleeding in the elderly; and possible death in the very young.<sup>96</sup> It is inaccurate for Ms Dorey to state that pertussis does not kill.

In the same 'Living Wisdom' article, Ms Dorey also stated:

*'... in the US, vaccination was mandated for school entry in 1978 and since 1979, there has been a steady increase in the incidence of pertussis. This picture is duplicated in Australia and every other developed country where we see the majority of pertussis cases are occurring in fully vaccinated individuals.'*<sup>97</sup>

Further, the AVN's website, under Reason 6 – 'Vaccines do not necessarily protect against infectious diseases', states:

*'Australian government statistics have shown that the majority of outbreaks (of pertussis) in Australia occur in those who have been fully vaccinated or were too young to be fully vaccinated.'*<sup>98</sup>

Currently, the peak incidence of pertussis in Australia occurs in adolescents and adults, with more than 70% of pertussis notifications occurring in people older than fifteen years in 2004–05.<sup>99</sup> The disease is generally mild in previously vaccinated adolescents and adults.<sup>100</sup> Although the exact duration of immunity provided by the pertussis vaccine is unknown, research suggests that immunity, whether from immunisation or infection, wanes after approximately six to ten years, resulting in renewed susceptibility to infection.<sup>101</sup> A booster dose of pertussis vaccination is thus recommended.<sup>102</sup>

<sup>91</sup> Submission to Commission from the AVN, received 25 June 2010

<sup>92</sup> 'Living Wisdom' magazine is on sale through the AVN website

<sup>93</sup> Living Wisdom magazine, Volume 3, published May 2009

<sup>94</sup> [www.health.gov.au/internet/main/publishing.nsf/Content/cda-cdi31suppl.htm~cda-cdi31suppl-1.htm](http://www.health.gov.au/internet/main/publishing.nsf/Content/cda-cdi31suppl.htm~cda-cdi31suppl-1.htm)

<sup>95</sup> [www.health.nsw.gov.au](http://www.health.nsw.gov.au) - National Notifiable Diseases Surveillance System: Number of notifications of Pertussis, Australia in 2009

<sup>96</sup> Ibid

<sup>97</sup> Living Wisdom magazine, Volume 3, published May 2009

<sup>98</sup> [www.avn.org.au](http://www.avn.org.au) – General Vaccination Information – 10 Reasons why parents question vaccination

<sup>99</sup> [www.australianprescriber.com](http://www.australianprescriber.com)

<sup>100</sup> [www.hps.scot.nhs.uk](http://www.hps.scot.nhs.uk)

<sup>101</sup> Ibid

<sup>102</sup> [www.ncirs.usyd.edu.au](http://www.ncirs.usyd.edu.au)

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In her article Ms Dorey does not refer to the issue of waning immunity over time and the need for booster vaccinations.

In her response to the Commission<sup>104</sup> Ms Dorey supported her assertion that vaccination for pertussis does not offer protection from infection by presenting two 'Australian Government' tables. One of these tables relates to 'Immunised children aged 0 to 6 yrs from 1989 to 2001'. The other relates to 'Percentage of children immunised at 2 yrs of age, for the birth cohort 1 January to 31 March 2006; assessment date 30 June 2008'. Ms Dorey compared the data from the two tables and stated they indicate that Australia has had an increase of over 23% in the rate of pertussis vaccination, while there has been a concurrent increase in the incidence of pertussis of almost 40 times, hence routine mass vaccination can lead to an increase in the incidence of pertussis.

The Commission expressed concern that these tables appear to be two unrelated sets of statistical data, relating to different cohorts of children.

Ms Dorey further submitted<sup>105</sup> that the two statistics sets were appropriately compared and provided correspondence from Dr Gary Goldman<sup>106</sup> supporting this.

The Commission accepts that Dr Goldman has reviewed these data sets and has given an opinion that the comparison is appropriate. To an uninformed person, these clearly appear to be two unrelated sets of statistical data, relating to different cohorts of children and should not be compared without clear explanation. A detailed statistical analysis is not apparent to the general public and Ms Dorey has made no reference to the methodology of the calculations and, more importantly, no methodology nor calculations for her resulting statement that vaccination for pertussis does not offer protection from infection.

Significantly, these tables do not include the ages up to and beyond 15 years when immunity begins to decline, therefore to draw this conclusion is irresponsible.

These tables are also referenced from information provided by the Australian Bureau of Statistics<sup>107</sup> and Department of Health and Aging,<sup>108</sup> both of which are unambiguous in their support of vaccination regimes in Australia. Whilst these papers display the same tabulated data that Ms Dorey refers to, there is no associated mention specific to pertussis vaccination and notifiable disease made that supports Ms Dorey's claim that vaccination for pertussis does not offer protection from infection.

### ***Issue Six: Stating that the incidence of diphtheria decreased well before the use of mass vaccination***

Under the 'Vaccine Info- Diphtheria' section, the AVN website states:

*'Whilst there was a time in Australia when many children and adults died every year from this illness, better hygiene and nutrition in the early part of this century saw death rates drop substantially (well before mass use of the diphtheria vaccine). There has not been a case of diphtheria in Australia for many years.'*<sup>109</sup>

<sup>104</sup> Letter to Commission from the AVN dated 7 September 2009

<sup>105</sup> Submission to Commission from the AVN, received 25 June 2010

<sup>106</sup> President/Founder of Medical Veritas International Inc.- a non-profit, public charity that supports medical/scientific research and education ([www.drgoldmanonline.com](http://www.drgoldmanonline.com))

<sup>107</sup> ABS Occasional Paper: Vaccination Coverage in Australian Children - ABS Statistics and the Australian Childhood Immunisation Register (ACIR), 2001

<sup>108</sup> Department of Health and Aging, *Communicable Diseases Intelligence* Volume 32 No 3 - Sept 2008

<sup>109</sup> [www.avn.org.au](http://www.avn.org.au) - General Vaccination Information - 10 Reasons why parents question vaccination

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The information on the website does not provide any evidence to support the claim that substantial drops in death rates from diphtheria are attributable to improved hygiene and nutrition in Australia.

As a part of her initial response to the Commission, Ms Dorey provided Australian Bureau of Statistics (ABS) Yearbook statistics and stated:

*'While there definitely was a very large decline in mortality from infectious diseases during the twentieth century, there is no evidence from government statistics to show that vaccination played any part in contributing to that decline.'*<sup>110</sup>

The Commission has found that the ABS Yearbook 2001 states:

*'Infectious diseases fell before widespread vaccination was implemented. However, since the 1950s, mass vaccination has been the single most effective public health measure to reduce the occurrence of infections, to reduce child deaths and to improve child health.'*<sup>111</sup>

### **Issue Seven: Stating that bacterial meningitis has increased since meningococcal vaccines were introduced**

Under the section 'Vaccine Information – 'Meningococcal' the AVN website states:

*'The most sensible argument against this vaccine comes from the government's own bulletin which refers to the experience of the UK's 1999 campaign. 'A recent study has shown a 25% increase in serogroup B disease across all age groups in the United Kingdom since the vaccination campaign. This observation supports a hypothesis that serogroup replacement (i.e. B for C) may be an important factor in the epidemiology of meningococcal disease after the introduction of new vaccines. It therefore remains to be seen what the value of meningococcal vaccines will be in the future control of meningococcal disease.'*

The available literature accepts that current meningococcal vaccines are not as effective in preventing meningococcal disease (which can cause bacterial meningitis) as other vaccines. Current vaccines provide protection against serogroups A, C, W135 and Y.<sup>112</sup> There is currently no vaccine for meningococcal serogroup B.<sup>113</sup> Serogroup B disease accounts for the highest incidence of invasive meningococcal disease (though serogroup C disease has been associated with a higher rate of septicaemia and mortality).<sup>114</sup>

In 1999, the UK implemented a national immunisation program with the meningococcal C conjugate vaccine which resulted in an overall decrease in disease incidence of 81% from 1999 to 2001, at the same time the number of deaths decreased from 67 to 5.<sup>115</sup>

The AVN has not stated which government bulletin it is referring to. The Commission asked Ms Dorey to provide further information regarding this source but, to date, she has not responded.

<sup>110</sup> Letter to Commission from the AVN dated 7 September 2009

<sup>111</sup> Australian Bureau of Statistics Yearbook Australia 2001, *Child health since federation*.

<sup>112</sup> [www.health.gov.au](http://www.health.gov.au)

<sup>113</sup> [www.australianprescriber.com](http://www.australianprescriber.com)

<sup>114</sup> White Craig P, Scott Jeff, *Meningococcal serogroup C conjugate vaccination in Canada: how far have we progressed? How far do we have to go?* Canadian Journal of Public Health, 1 Jan 2010

<sup>115</sup> Ibid

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The Commission located an editorial on meningococcal disease<sup>115</sup> published on the Commonwealth Department of Health and Ageing website which refers to the UK campaign and the increase in serogroup B disease. This paper acknowledges that serogroup replacement is an important factor to consider. However, this paper also states: *'Ultimately the most effective public health strategy for controlling meningococcal disease may be routine vaccination of at-risk populations.'*<sup>116</sup>

The AVN has selectively quoted information to suggest that vaccination against meningococcal disease has been ineffective when there is no evidence of this. The evidence suggests that the most effective strategy for managing meningococcal disease is to widely vaccinate.

### **Issue Eight: Selectively quoting from articles relating the vaccine, Gardasil, to deaths of females**

The June 2009 e-newsletter of AVN states: *'The total number of Gardasil-related deaths is 47 since the vaccine was approved in 2006'*<sup>117</sup>

The reference given for this is a report from a US organisation, *'Judicial Watch'*<sup>118</sup>, which claims to have analysed US Food and Drug Administration reports regarding this issue. However, this information has been rebutted by US government and medical sites including *'CQ HealthBeat (10/4)'*<sup>119</sup> which raises suspicions about the data because the analysis included reports which come from several sources, some of which are unreliable.<sup>120</sup>

As discussed earlier, further information about deaths and Gardasil also appears on the AVN website, under the heading *'AVN News'*, providing a link to an article from *'Natural News'*. Apart from the omission discussed under Reason 6, the fourth paragraph of the original *'Natural News'* article has not been reproduced by the AVN. This is important as it changes the context of the original article. The fourth paragraph states that the EMEA concluded:

*'In both cases, the cause of death could not be identified. No causal relationship has been established between the deaths of the young women and the administration of Gardasil, the agency said.'*<sup>121</sup>

In not including this paragraph, it has the effect of suggesting there have been deaths related to the administration of the Gardasil vaccine when the full reference states that there is no causal link between the vaccine and the deaths.

### **Issue Nine: Conducting a seminar in which a number of anti-vaccination statements were made.**

Both Mr McLeod and Mr and Mrs McCaffery have made allegations that the AVN holds seminars at which incorrect and misleading information on the subject of vaccination is aired.

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<sup>115</sup> Department of Health and Aging, *Communicable Diseases Intelligence*, Volume 25, Issue number 3 - August 2001, Editorial: *Meningococcal disease*

<sup>116</sup> Ibid

<sup>117</sup> Living Wisdom E-newsletter, June 2009

<sup>118</sup> The Judicial Watch website ([www.judicialwatch.org](http://www.judicialwatch.org)) states it is a conservative, non-partisan educational foundation, promotes transparency, accountability and integrity in government, politics and the law.

<sup>119</sup> The CQ website ([www.cq.com](http://www.cq.com)) states that CQ HealthBeat is a new federal health care policy website and email newsletter

<sup>120</sup> [www.medicalnewstoday.com/articles/84804.php](http://www.medicalnewstoday.com/articles/84804.php)

<sup>121</sup> [www.naturalnews.com](http://www.naturalnews.com)

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While the statements reportedly made at AVN seminars would seem to be in some cases grossly inaccurate, it is open to an organisation such as the AVN to hold seminars where participants and guest speakers make statements that are anti-vaccination or that raise questions about vaccination.

***Issue Ten: The AVN sells t-shirts imprinted with the slogan: 'Love them. Protect them. Never Inject them.'***

It is open to the AVN to sell items that express anti-vaccination views. It is noted that selling these items may have the effect of disclosing honestly to members of the public the actual anti-vaccination stance of the AVN. Members of the public are free to make a choice to buy such items.

***Issue Eleven: Misrepresenting the circumstances of the death of Dana McCaffery***

Both Mr McLeod's and Mr and Mrs McCaffery's complaints alleged that the AVN and Ms Dorey had misrepresented the facts of Dana's death, harassed her family, and invaded their privacy. Since their daughter's death, Mr and Mrs McCaffery have made public statements advocating vaccination.

Ms Dorey contacted Mr Paul Corben, Director of Public Health, NSW Department of Health seeking further details on Dana's death, and contending he had misled the public in attributing her death to pertussis.<sup>122</sup>

Mr and Mrs McCaffery stated in their complaint to the Commission that on 4 September 2009, Ms Dorey presented tables of data on the incidence of pertussis and the incidence of vaccination in two different cohorts of children (see discussion of these tables in Issue Five above) during an appearance on an Australian Broadcasting Corporation (ABC) North Coast radio programme. Mr and Mrs McCaffery subsequently complained to the ABC outlining their concerns about the accuracy of the information as well as some references to their daughter.

In its investigation of the complaint, the ABC conceded that the comparative manner in which these statistics were presented was misleading, stating "*comparing the two statistics was inappropriate*".<sup>123</sup>

Ms Dorey also posted claims about Dana's death on her blog, the AVN Yahoo Discussion forum, letters to media outlets, radio interviews and various AVN publications – asserting that Dana did not die from pertussis.

Mr and Mrs McCaffery, as the parents of Dana, chose to speak with the media about the circumstances of her death and the evidence they have about the cause of Dana's death and any contributory factors.

While Ms Dorey joined the debate in the media, she was not in possession of all the information relating to the facts and circumstances of Dana's illness and death when she spoke with the media and posted information relating to Dana on her weblog. This was offensive and painful for Dana's parents and family, although it does not appear Ms Dorey was acting as a health service provider in this context.

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<sup>122</sup> Email from Mr Corben to Mrs McCaffery dated 19 May 2009

<sup>123</sup> Letter to Mr & Mrs McCaffery from Audience & Consumer Affairs, ABC, dated 26 October 2009

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### Summary

The AVN provides information through its website, a Facebook site, electronic magazines, seminars and webinars. Additionally Ms Dorey, through media appearances both locally and nationally, represents AVN and provides information in relation to vaccination.

The Commission has focussed chiefly on the issues raised by Mr McLeod and Mr and Mrs McCaffery in relation to the AVN website, examining most closely those elements of the website that would be commonly accessed by a person browsing the site for information.

The Commission has not examined the Facebook site run by AVN as this kind of social networking site may represent the views of AVN as well as subscribers and participants not associated with AVN and it is not reasonable in these circumstances to hold AVN wholly responsible for the content of such sites.

In Australia, vaccination is a key plank of public health strategy. It is thus extremely important for individuals, especially parents, to be able to make informed decisions about vaccination. The AVN provides information that is misleading for the average reader by inaccurately representing information, selectively reporting information, and giving non-peer reviewed and anecdotal material the same authority as peer-reviewed literature. In all cases of misrepresentation, selective and inaccurate reporting and indiscriminate use of research material, the AVN and Ms Dorey were doing so to maintain an anti-vaccination position.

In her response to the Commission, Ms Dorey conceded that the AVN provides anti-vaccination information. Ms Dorey stated there is a need to provide information about vaccination alternative to that disseminated by Government, pharmaceutical companies and the mainstream medical community which is one-sided and invariably pro-vaccination, submitting:

*'The AVN's charter is to put a balance of information regarding health policy before its users/website users/subscribers.'*<sup>125</sup>

*'While the AVN has always stated that we support everyone's right to make free and informed choices and we have spent years providing referenced information on the risks and effectiveness of medical procedures – information sourced from peer-reviewed, mainstream medical journals – we have never stated that we would provide information which the government and the medical community makes freely available to all Australians.....it is not our role nor are we resourced to provide the government's information though we do have links on our websites..... where people can access this information.'*<sup>126</sup>

While Ms Dorey has offered a justification for the AVN presenting anti-vaccination material, this is not a cogent reason for failing to clearly and frankly indicate its anti-vaccination position. If the AVN genuinely wants to empower people to make informed choices concerning vaccine use and education about risks, adverse reactions, and contraindications for vaccination, it should either present balanced and reliable information or clearly and openly articulate its stance against vaccination.

A similar organisation, *Vaccination Information South Australia (VISA)*, has a section on its website headed, *'What to do if you decide to have your child vaccinated'* with steps such as discussing the risks and benefits with the immunisation provider; reading the manufacturer's leaflet in the vaccine package, and keeping notes of information provided.<sup>127</sup>

<sup>125</sup> Letter to Commission from the AVN dated 7 September 2009

<sup>126</sup> Ibid

<sup>127</sup> www.visainfo.org.au

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VISA is clearly not in favour of vaccination - but it makes it clear that the reader should consider other relevant information.

Essentially the general public needs to know that the information they are reading on the AVN's website is anti-vaccination and is not consistent with current Government policy and mainstream medical opinion. Providing this context for its information would still enable the public to make an informed choice about whether or not to vaccinate.

Any decision affecting a person's health should be taken seriously and researched thoroughly through whatever means available. The current health climate is such that the internet provides a wide source of information for the general public on a wide range of health issues and concerns. Internet users who are conducting research need to be cautious that, when seeking health care information online, there may be misleading, incomplete, and inaccurate information.<sup>128</sup> A study on the issue of internet health care information has found:

*'substantial variation in both the completeness and accuracy of this [health care] information ... Internet users must still proceed with caution when seeking healthcare information online, as incomplete, inaccurate and even dangerous information still abounds in cyberspace'.<sup>129</sup>*

It is noted that just recently, on 23 April 2010, a nationwide ban on the influenza vaccinations for children under five was issued after more than twenty children suffered various reactions after receiving the vaccine in Western Australia.

Also, the Queensland Coroner has investigated the death of a two year old girl, on 9 April 2010, after receiving the influenza vaccine.

Whilst investigations have not established clear links between these vaccinations and the side effects, these recent events have illustrated that the issue of vaccination is not black and white and that it is important for people to make educated decisions about vaccination. The AVN must be open about the position it holds so that the information it provides can be properly understood.

### Notices

There are a number of organisations similar to the AVN. For the purposes of the investigation, the Commission reviewed the websites of these organisations.

*Vaccination News* has the following notice on its website:

*'All information, data and material contained, presented or provided here is for general information purposes only and is not to be construed as reflecting the knowledge or opinions of the publisher, and is not to be construed or intended as providing medical or legal advice. The decision whether or not to vaccinate is an important and complex issue and should be made by you, and you alone, in consultation with your health care provider.'<sup>130</sup>*

*Vaccine Awareness Network* has the following notice:

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<sup>128</sup> Karp S, Monroe AF. *Quality of healthcare information on the Internet: caveat emptor still rules*. *Manages Care Q.* 2002;10(2):3-8.

<sup>129</sup> *Ibid*

<sup>130</sup> [www.vaccinationnews.com](http://www.vaccinationnews.com)

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*'DISCLAIMER: We do not give medical advice as we are not GPs. We merely provide information and research studies surrounding vaccination to enable parents to make a fully informed decision. VAN UK is not responsible for any vaccination, birthing or infant feeding decision you may make. That is your responsibility as a parent.'*<sup>131</sup>

Vaccination Risk Awareness Network has this notice:

*'The contents of this website are for informational purposes only. Opinions expressed should not be construed as medical advice. The particulars of any person's concerns and circumstances should be discussed with a qualified health care practitioner prior to making any decision which may affect the health and welfare of that person or anyone under his or her care.*

*Anybody undergoing any medical treatment should consider the following:*

- 1. Are you fully confident in the ability and qualification of your health care professional or specialist?*
- 2. Are you completely informed about the procedure in question, its desired effect as well as its potential for short and long term side-effects? There is no medical procedure without possible side-effects and there is no guaranteed success either.*
- 3. Are you prepared to accept all the potential side-effects of the procedure and convinced that the potential benefits outweigh the potential risks?*

*If in any doubt, we suggest you ask your healthcare practitioner for clarification, find additional information from other sources (such as the medical literature, support groups, the internet) or get a second opinion from another health care professional.*

*It is your right to be informed.'*<sup>132</sup>

The AVN has the following paragraph on its website:

*'The Australian Vaccination Network recommends that we all become fully informed about the relevant risks and benefits of vaccines – and all medical procedures – and make the best possible choices for our families and ourselves. We ask everyone to remember that vaccination is not compulsory in Australia so the decision to vaccinate is always must be yours and yours alone.'*<sup>133</sup>

This paragraph is placed at the end of the vaccine information section regarding HPV and not in a prominent place on the website, such as the Home page.

In the course of the investigation, the Commission raised with Ms Dorey the possibility of the AVN featuring an appropriate notice on its website.

In response, Ms Dorey said the AVN already had one but that when a new website was launched in December 2009, the notice was not transferred correctly.

Ms Dorey said that the AVN remedied this in February 2010 and the notice is located via a link titled 'Legal Notice' at the bottom of the home page.

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<sup>131</sup> [www.vaccineriskawareness.com](http://www.vaccineriskawareness.com)

<sup>132</sup> [www.vran.org](http://www.vran.org)

<sup>133</sup> [www.avn.org.au](http://www.avn.org.au) – Vaccination Information - HPV

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This was further remedied in March 2010, with the link renamed 'Disclaimer'. The text of the notice that can be accessed by using the link is as follows:

*'The AVN makes no guarantees of any kind with regard to any products and other materials contained on this site. No warranty or guarantee is expressed or implied with any information at this site.*

*The AVN has, as far as it is possible, taken care to ensure that the information given on this site is accurate and up to date. However, this information is provided with the understanding that the AVN is not liable for the misconception or misuse of information provided. This information is continually being updated and so may not be accurate, current or complete and is subject to change without notice.*

*The information on this site is intended and applicable for Australian audiences only and adheres to Australian legislation and regulatory notice.<sup>133</sup>*

This does not advise the general public of the apparent purpose of the AVN in providing information about vaccination and that other sources of information, including medical advice, should be taken into account when making decisions about vaccination.

The inclusion of a prominent statement on the website which articulates clearly the anti-vaccination stance of the AVN, would obviate the need for a public statement to be issued by the Commission, however if the Commission is not satisfied that sufficient steps have been taken by the AVN to implement this it will issue a public statement under section 94A of the Act.

### **Recommendation:**

The AVN should include an appropriate statement in a prominent position on its website which states:

1. The AVN's purpose is to provide information against vaccination in order to balance what it believes is the substantial amount of pro-vaccination information available elsewhere;
2. The information provided should not be read as medical advice; and
3. The decision about whether or not to vaccinate should be made in consultation with a health care provider.

### **Application of the Code of Conduct for Unregistered Health Practitioners**

Mr McLeod submitted that the Commission should make a prohibition order against the AVN and Ms Dorey on the basis that the AVN breaches a number of clauses of the Code of Conduct for Unregistered Health Practitioners (the Code of Conduct).

The Code of Conduct applies only to individual practitioners, rather than organisations that provide health services. Accordingly, the Commission's consideration of the application of the Code of Conduct in this matter is confined to examining whether Ms Dorey, as President and spokesperson of the AVN, may be in breach of it.

The Commission has set out below the clauses of the Code of Conduct that Mr McLeod has alleged have been breached by the AVN, together with the Commission's discussion of the applicability of these clauses to the circumstances of this matter.

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<sup>133</sup> [www.avn.org.au](http://www.avn.org.au) - Disclaimer

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Clause 3(2)(a) states '*a health practitioner must maintain the necessary competence in his or her field of practice*'.<sup>134</sup>

It is difficult to define with any clarity what constitutes '*necessary competence*' in the field of the provision of information about vaccination.

Clause 3(2)(b) states '*a health practitioner must not provide health care of a type that is outside his or her experience or training*'.<sup>135</sup>

This clause specifically refers to the provision of 'health care'. As president of the AVN, Ms Dorey does not provide health care. In addition, it is apparent that Ms Dorey is well read on the subject of vaccination and so there are difficulties in reaching a firm view that Ms Dorey does not have appropriate '*experience or training*' in the provision of information about vaccination. An individual does not have to be a trained health practitioner to provide a health education service.

Clause 12(3) states: '*A health practitioner must not make claims, either directly or in advertising or promotional material, about the efficacy of or treatment or services provided if those claims cannot be substantiated*'.<sup>136</sup>

This clause appears to cover claims made by practitioners about their own treatments or services, not statements about the treatments provided by others as in the case of the AVN and Ms Dorey.

Clause 7 states, '*A health practitioner must not attempt to dissuade clients from seeking or continuing with treatment by a registered medical practitioner*'.<sup>137</sup>

While it could be argued that the effect of Ms Dorey's information, articles and statements is to dissuade people from having vaccinations, or seek advice from their general practitioners about vaccination, the Commission's investigation did not find clear evidence of specific statements made by Ms Dorey which establish a breach of this clause.

The Commission did consider whether statements made under Reason 7 amongst the '*10 reasons why parents question vaccination*' regarding doctors receiving payments for vaccinations (as discussed on page 11 of this report) was a breach of this clause by Ms Dorey.<sup>138</sup>

The statement: '*Doctors, as paid salesmen for vaccine products, are no longer considered to be trustworthy arbiters of their safety and effectiveness*'<sup>139</sup> and similar remarks made by Ms Dorey when she appeared on Channel Seven's '*Sunday Night*' programme on 26 April 2009, appear to be referring to the GPIL. In providing this information in this way, Ms Dorey is suggesting that it may not be appropriate to discuss the issue of whether or not to vaccinate with a medical practitioner. Ms Dorey's statement regarding doctors being untrustworthy arbiters of the safety and effectiveness of vaccination may undermine the trustworthiness of doctors with respect to vaccination generally.

This, however, is not considered sufficient to be a breach of the Code of Conduct as it is not a direct instruction not to seek vaccination from a registered medical practitioner to the extent that it may pose '*a risk to the health or safety of members of the public*'.<sup>140</sup>

<sup>134</sup> The Code of Conduct for Unregistered Health Practitioners, *Public Health (General) Regulation, 2002*

<sup>135</sup> *Ibid*

<sup>136</sup> *Ibid*

<sup>137</sup> *Ibid*

<sup>138</sup> Ms Dorey, as the president of the organisation, bears the responsibility for authorship of unreferenced information presented on the website.

<sup>139</sup> [www.avn.org.au](http://www.avn.org.au) – General Vaccination Information – 10 Reasons why parents question vaccination

<sup>140</sup> *Health Care Complaints Act, 1993*

## Office of the Health Care Complaints Commission

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There is also the difficulty of clearly legally establishing who Ms Dorey's client base is. The Act defines a client as '*a person who uses or receives a health service, and includes a patient.*'<sup>141</sup> It seems unlikely that it could be established that a person who either seeks advice directly from Ms Dorey or reads information posted by her on the AVN website is her client.

The context of this clause of the Code of Conduct is that it was largely to prevent unregistered practitioners potentially endangering the health or safety of their clients by advising them against conventional proven treatments by a registered medical practitioner. There is no evidence that Ms Dorey has done so and there is insufficient basis for the Commission to take action on this issue with respect to the Code of Conduct.

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<sup>141</sup> *Health Care Complaints Act, 1993*

HCCC REFERENCE 09/1695

APPENDIX 2.1

TOM SIDWELL

DELETED

VICTORIA  
MARCH 1, 2010

**TO: MS LEANNE EVANS  
INVESTIGATION OFFICER  
HEALTH CARE COMPLAINTS COMMISSION**

**RE: MERYL DOREY AND THE AVN RESPONSE TO HCCC COMPLAINT  
OF 7 SEPTEMBER 2009**

Dear Ms Evans,

The following is a critical analysis of ten articles directly referenced by Ms Meryl Dorey in her reply of September 2009 on behalf of herself and her organisation, the AVN, to the complaint submitted by Mr Ken McLeod.

All articles mentioned in this document are listed with their PubMed ID (PMID). This will make them easier to find, should any follow up be required. The PMID need only be copied and pasted into the PubMed search box (<http://www.ncbi.nlm.nih.gov/pubmed>) to bring up the article's details and often its abstract. Those without a stated PMID are from journals not indexed in the MEDLINE database.

Please note that the phrase 'Wakefield paper' refers to Dr Andrew Wakefield's 1998 study – reference [1].

The following material covers information on pages 18-19 of the 27 page version of the reply available at [http://avn.org.au/library/images/pdfs/hccc\\_reply.pdf](http://avn.org.au/library/images/pdfs/hccc_reply.pdf)

It should be noted that Ms Dorey's claim that "*Dr Wakefield's study was only the first of many to indicate a very strong and, in some cases clinically verifiable connection between vaccination and the development of ASDs [autism spectrum disorders]*" is incorrect; the Wakefield paper itself does not come to that conclusion. The discussion of the Wakefield paper clearly states "*We did not prove an association between measles, mumps, and rubella vaccine and the syndrome described*" and suggests further research into such an association. The hype surrounding the MMR vaccine from Wakefield comes from a video released by the Royal Free hospital NHS trust, in which Wakefield asserts no causal link, yet calls for immunisations against measles, mumps and rubella to be separated [2].

It is also worth noting that despite the initial claim being that "*Research also suggests that there is a connection between MMR vaccination and the development of autism,....*", Ms Dorey's response to Mr McLeod's criticism of this statement is not to provide any research that suggests a connection between MMR and the development of autism. She instead chooses to list articles which she says hypothesise a vaccine autism link. This kind of 'side-stepping' from a dis-proven argument (also known as

‘moving the goalposts’ – or even widening in this case) is dishonest, and reflects negatively on the credibility of both Ms Dorey and the AVN.

Despite Ms Dorey’s claim that “*Dr Wakefield’s study was only the first of many to indicate a very strong and, in some cases clinically verifiable connection between vaccination and the development of ASDs*” she provides no evidence for her statement of a clinically verifiable connection between vaccination and the development of ASDs. There has not been a single clinically verified case of a vaccine (or vaccines) being the cause of autism. For Ms Dorey to make such a grand statement without any justification is completely dishonest and dangerous.

Her selection of “*articles published in peer-reviewed journals... hypothesising that there could be a connection between vaccination and the development of ASDs*” is a collection of ten referenced pieces. It should be noted that hypothesising a connection does not constitute proof. This is most likely why Ms Dorey had merely hypothesising a link as her criteria for inclusion in the list – there is no evidence for such a connection; indeed, since Wakefield’s initial untruthful and discredited comments regarding the MMR vaccine much disconfirming evidence has emerged [3, 4, 5, 6, 7 and 8], including epidemiological studies [9, 10, 11 and 12].

- The first referenced paper in Ms Dorey’s reply, ‘*Key realities about autism, vaccines, vaccine-injury compensation Thimerosal, and autism-related research*’ (no PMID) is partially an attempt to rebut an earlier article [13] that appeared in *Skeptical Inquirer* magazine, explaining the lack of evidence for assuming the vaccine ingredient thimerosal causes autism, and the scare tactics used by the anti-vaccination movement. The entire article attempts to convince the reader of this disproved hypothesis. The lack of evidence for the hypothesis suits the ‘journal’ it is in: ‘*Medical Veritas*’.

The first paragraph of the abstract of this article sets the tone perfectly:

*“The propaganda dispensed by Public health care and vaccine apologists is, at best, a weak attempt to rationalize the healthcare establishment.’s positions using all the tools of doublespeak or, as George Orwell.’s called it in his book 1984, .“newspeak.”, to: (a) mislead, (b) distort reality, (c) pretend to communicate, (d) make the bad seem good, (e) avoid and/or shift responsibility, (f) make the negative appear positive, (g) create a false verbal map of the world, and (h) create dissonance between reality and what their narrative said or did not say”.*

According to a message [14] from the “*Editor-in-Chief and President/Founder Medical Veritas International Inc*”, the peer review process in mainstream journals is used to quash information which could hurt the Journals’ owners and/or advertisers. Some of the ‘truths’ which *Medical Veritas* aims to expose include a raft of conspiracy theories, regarding vaccines [15], autism [16], shaken baby syndrome [15 and 17] and HIV [18]. This journal, and indeed the paper, is not a reliable source of unbiased, scientifically accurate information, but rather a haven for conspiracy theories that do not pass the peer-review process.

- The second paper, ‘*An Investigation of the Association Between MMR Vaccination and Autism in Denmark*’ (no PMID) was published in the ‘*Journal of American Physicians and Surgeons*’, or JPANDS, the journal of the *Association of American Physicians and Surgeons* (AAPS). AAPS is a far right-wing organisation which fills its publications with papers that mirror the organisation’s fringe, far right-wing ideals. These include (in JPANDS) HIV denial [19], abortion causing premature birth and birth defects in the mother’s future pregnancies [20], the belief that the “gay male lifestyle” leads to a life expectancy shortened by 20 years [21] and casting doubt on the concept of shaken baby syndrome [22]. This non-peer-reviewed journal is not an accurate source of unbiased information.
- The third paper, ‘*Gastrointestinal abnormalities in children with autistic disorder*’ (PMID: 10547242) observes “*The upper gastrointestinal evaluations of children with autistic disorder support the presence of a chronic inflammatory process in the gut, as reported by Wakefield et al.*”. That is, the paper reports a high correlation between ASD and chronic inflammation in the gut, as did the Wakefield paper. The paper at no point makes any reference to any connection between vaccines and autism, with no reference to vaccines at all, in contrast to Ms Dorey’s statement preceding the references.
- The fourth paper, ‘*Constipation With Acquired Megarectum in Children With Autism*’ (PMID: 14523189) describes a correlation between children with ASDs and constipation with acquired megarectum. This paper does not address vaccines or the cause of ASDs.
- The fifth paper referenced, ‘*Autism, viral infection and measles mumps rubella vaccination*’ (PMID: 10731332) is a review, headed by Andrew Wakefield (of the Wakefield paper) in which he puts forward no new evidence, but suggests that “*MMR vaccination is a candidate worthy of investigation*” regarding the cause of autism. Of the ten articles Ms Dorey references, this is the only one from a mainstream, peer-reviewed journal to hypothesise a vaccine-autism link – and it is done so by Dr Andrew Wakefield, who has been shown to have had significant conflicts of interest, including: a patent on a monovalent alternative to the MMR vaccine [23] and being paid to find a link between MMR and autism by a lawyer representing parents making a court case blaming their children’s autism on the vaccine [24]. Interestingly, those conflicts of interest are undisclosed in this article.
- The sixth paper, ‘*Measles virus and autism*’ (PMID: 11085720) is a letter published in the *Lancet*, sent in by Wakefield and colleagues, replying to criticisms of the research methodologies used in two of their previous studies. This defence of their previous studies is just that, and does not mention any hypothesis linking vaccines to autism.
- The seventh paper, ‘*Measles Vaccination and Inflammatory Bowel Disease: A National British Cohort Study*’ (PMID: 11151885) found no association between the monovalent measles vaccine and all three of the conditions observed, which curiously do not include ASDs. The paper does not mention ASDs, and at no point hypothesises a vaccine-autism link.

## APPENDIX 2.4

- The eighth paper, '*Potential viral pathogenic mechanism for new variant inflammatory bowel disease*' (PMID: 11950955) examined an association between infection with the measles virus and the pathology of inflammatory bowel disease in autistic children. Despite being described by Ms Dorey in the preceding explanation as a study hypothesising a connection between vaccines and autism, this article does not mention any form of vaccination.
- The ninth paper, '*Detection of measles virus in children with ileo-colonic lymphoid nodular hyperplasia, enterocolitis and developmental disorder*' (PMID: 12142949) is a proceedings paper from the conference 'Meeting on Microbiology, Immunology and Toxicology of autism and other developmental disorders'. It is a paper that presents evidence of a link between the measles virus and the gut problems suffered by a large proportion of autistic children. Despite being put under the subheading 'vaccines and autism' in the journal, the paper makes no mention of any vaccine, and does not hypothesise a vaccine-autism link.
- The tenth paper, '*Abnormal Measles-Mumps-Rubella Antibodies and CNS Autoimmunity in Children with Autism*' (PMID: 12145534) suggests that the immune response of autistic people to the MMR vaccine is different to that of non-autistic people. They found an increase in antibodies against myelin basic protein (MBP) in autistic children that had the MMR vaccine. As MBP is found in myelin (part of neurons) it was hypothesised that the production of these antibodies may contribute to the symptoms of autism, yet a causal relationship was not hypothesised.

To follow up, as without doing so the previous paper and accompanying explanation are likely to be misconstrued by those who initially misconstrued the paper, a later study [25] found no such correlation in autistic children.

It should be noted that the AVN's reply stated these papers were "a selection of the many articles published in peer-reviewed journals... hypothesising that there could be a connection between vaccination and the development of ASDs". Of the ten papers cited, only three hypothesise this. Two of them are in journals which are not mainstream, nor peer-reviewed, and are known for publishing absurd, fringe conspiracy theories. The third was a review article, with Wakefield as one of the authors.

It is telling that of the ten articles Ms Dorey selected, the only three that support her assertion are either published in fringe conspiracy journals, and the other is written by Dr A. Wakefield, who has well-documented conflicts of interest.

The ten articles were referenced by Ms Dorey in an attempt to prove that more research, other than the Wakefield paper, suggest a connection between the MMR vaccine and ASDs:

"In section 7.1.3.2, Mr McLeod cites the AVN's statement that, "Research also suggests that there is a connection between MMR vaccination and the development of autism,..." He then goes on to say that, "the AVN is referring to the Wakefield study published in the Lancet.""

## APPENDIX 2.5

As has been shown in this analysis, the AVN's initial statement "Research also suggests that there is a connection between MMR vaccination and the development of autism,...." remains demonstrably untrue, with research suggesting a lack of association [4, 5, 6, 7, 8, 9, 10, 11 and 12]. Ms Dorey's apparent attempt to distract from this, by instead listing articles which she stated were published in peer reviewed journals and hypothesise "a connection between vaccination and the development of ASDs" simply drew attention to her own lack of evidence for this claim. The selection of articles Ms Dorey included suggests she is at best ignorant of the lack of evidence for her claims and those of her organisation, or at worst intentionally deceptive.

Signed,

Tom Sidwell

**References:**

[1]: Ileal-lymphoid-nodular hyperplasia, non-specific colitis, and pervasive developmental disorder in children; Wakefield AJ, Murch SH, Anthony A, Linnell J, Casson DM, Malik M, Berelowitz M, Dhillon AP, Thomson MA, Harvey P, Valentine A, Davies SE, Walker-Smith JA. *Lancet*. 1998 Feb 28;351(9103):637-41. PMID: 9500320 (Now retracted)

[2]: <http://briandeer.com/wakefield/royal-video.htm> Transcript of the video released by the Royal Free Hospital NHS trust.

[3]: Autism and measles, mumps, and rubella vaccine: no epidemiological evidence for a causal association; Taylor B, Miller E, Farrington CP, Petropoulos MC, Favot-Mayaud I, Li J, Waight PA. *Lancet*. 1999 Jun 12;353(9169):2026-9. PMID: 10376617

[4]: Time trends in autism and in MMR immunization coverage in California; Dales L, Hammer SJ, Smith NJ. *JAMA*. 2001 Mar 7;285(9):1183-5. PMID: 11231748

[5]: Mumps, measles, and rubella vaccine and the incidence of autism recorded by general practitioners: a time trend analysis; Kaye JA, del Mar Melero-Montes M, Jick H. *BMJ*. 2001 Feb 24;322(7284):460-3. PMID: 11222420

[6]: Is there a 'regressive phenotype' of Autism Spectrum Disorder associated with the measles-mumps-rubella vaccine? A CPEA Study; Richler J, Luyster R, Risi S, Hsu WL, Dawson G, Bernier R, Dunn M, Hepburn S, Hyman SL, McMahon WM, Goudie-Nice J, Minshew N, Rogers S, Sigman M, Spence MA, Goldberg WA, Tager-Flusberg H, Volkmar FR, Lord C. *J Autism Dev Disord*. 2006 Apr;36(3):299-316. PMID: 16729252

[7]: Pervasive developmental disorders in Montreal, Quebec, Canada: prevalence and links with immunizations; Fombonne E, Zakarian R, Bennett A, Meng L, McLean-Heywood D. *Pediatrics*. 2006 Jul;118(1):e139-50. PMID: 16818529

[8]: Measles vaccination and antibody response in autism spectrum disorders; Baird G, Pickles A, Simonoff E, Charman T, Sullivan P, Chandler S, Loucas T, Meldrum D, Afzal M, Thomas B, Jin L, Brown D. *Arch Dis Child*. 2008 Oct;93(10):832-7. PMID: 18252754

[9]: Measles, mumps, and rubella vaccination and bowel problems or developmental regression in children with autism: population study; Taylor B, Miller E, Lingam R, Andrews N, Simmons A, Stowe J. *BMJ*. 2002 Feb 16;324(7334):393-6. PMID: 11850369

[10]: No evidence for links between autism, MMR and measles virus; Chen W, Landau S, Sham P, Fombonne E. *Psychol Med*. 2004 Apr;34(3):543-53. PMID: 15259839

[11]: No evidence for a new variant of measles-mumps-rubella-induced autism; Fombonne E, Chakrabarti S. *Pediatrics*. 2001 Oct;108(4):E58. PMID: 11581466

[12]: MMR-vaccine and regression in autism spectrum disorders: negative results presented from Japan; Uchiyama T, Kurosawa M, Inaba Y. J Autism Dev Disord. 2007 Feb;37(2):210-7. PMID: 16865547

[13]: Novella, S. The Anti-Vaccination Movement Skeptical Inquirer 31.6, Nov/Dec 2007 – mentioned on the front cover as ‘Vaccines and Autism: Myths and Misconceptions’

[14]: <http://www.medicalveritas.com/images/MessageSenEd.pdf> “Message from the Editor-in-Chief concerning Medical Veritas®: The Journal of Medical Truth”, Gary S. Goldman PhD.

[15]: Shaken baby syndrome or medical malpractice?; Ali, A.M. Medical Veritas, 2004 Apr; 1(1):117-29

[16]: Digestion-gut-autism connection: the Specific Carbohydrate Diet; Elaine, G. Medical Veritas, 2004 Nov; 1(2):261-71

[17]: Analysis of causes that led to subdural bleeding and rib fractures in the case of Baby Patrick Gorman; Ali, A.M. Medical Veritas, 2006 Nov; 3(2):1019-40

[18]: Hypothesis--Examining the causes of AIDS; Ali, A.M. Medical Veritas, 2006 Apr; 3(1):901-13

[19]: Questioning HIV/AIDS: Morally Reprehensible or Scientifically Warranted?; Bauer, H. JPANDS. 2007: 12 (4): 116.

[20]: Induced Abortion and Risk of Later Premature Births; Brent, R, Calhoun, BC. JPANDS 2003: 8 (2): 46–9

[21]: Homosexuality: Some Neglected Considerations; Lehrman, NS. JPANDS 10 (3): 80-2

[22]: "Shaken Baby Syndrome": Do Confessions by Alleged Perpetrators Validate the Concept?; Leestma, J. JPANDS 11(1): 14-6

[23]: <http://briandeer.com/wakefield/vaccine-patent.htm> The patent Andrew Wakefield had on an alternative monovalent vaccine, which represents a substantial conflict of interest.

[24]: <http://www.timesonline.co.uk/tol/news/uk/article1265373.ece> MMR doctor given legal aid thousands. The news article in the Sunday Times where the payments to Wakefield, totalling “£435,643 in fees, plus £3,910 expenses” were first exposed.

[25]: Are there enhanced MBP autoantibodies in autism?; Libbey JE, Coon HH, Kirkman NJ, Sweeten TL, Miller JN, Stevenson EK, Lainhart JE, McMahon WM, Fujinami RS. J Autism Dev Disord. 2008 Feb;38(2):324-32. PMID: 17588145

HCCC REFERENCE 09/1695

APPENDIX 2.8

TOM SIDWELL

DELETED

VICTORIA  
MARCH 18 2010

**TO: MS LEANNE EVANS  
INVESTIGATION OFFICER  
HEALTH CARE COMPLAINTS COMMISSION**

**RE: MERYL DOREY AND THE AVN RESPONSE TO HCCC COMPLAINT  
OF 7 SEPTEMBER 2009 – AN ANALYSIS OF HER REFERENCES**

Dear Ms Evans,

The following is a critical analysis of five articles directly referenced by Ms Meryl Dorey in her reply of September 2009 on behalf of herself and her organisation, the AVN, to Mr Ken McLeod's initial complaint.

The following material covers information on page 23 of the 27 page version of the AVN reply available at [http://avn.org.au/library/images/pdfs/hccc\\_reply.pdf](http://avn.org.au/library/images/pdfs/hccc_reply.pdf)

Ms Dorey's reply references five studies which are "*just a few of the hundreds of references to peer reviewed studies which demonstrate the [sic.] vaccines are indeed immune-suppressive*". I shall demonstrate that of all five, none could be described as both peer reviewed studies and as evidence vaccines are immune-suppressive.

- The first referenced 'study', '*Susceptibility to Infection After Vaccination*' (PMID: 5015300) is a letter, not peer reviewed, nor a study, and suggests that the oral polio vaccine does not impair the function of the immune system: "*During convalescence from poliomyelitis susceptibility to other infections is not increased. A similar situation obtains after oral polio immunization (with attenuated viruses).*"
- The second referenced study, '*Epitopic overload at the site of injection may result in suppression of the immune response to combined capsular polysaccharide conjugate vaccines*' (PMID: 9987146) is incorrectly referenced by Ms Dorey as '*Vaccines May Cause Immune Suppression*', yet with the authors, journal, volume, date and page numbers all correct. The study investigates the lowered immune response to injected polysaccharides when there are multiple different epitopes very close together (an epitope is the specific region of the antigen that the receptors of the immune system recognise). This lowered response is due to physical constraints; this 'clumped' nature (to use an analogy) prevents each epitope from having maximal exposure to the cells that would normally recognise them. This is not immune suppression, but rather a (admittedly inconvenient) feature of our immune system and this method of antigen delivery.

- The third paper, *'Depression of the Immune Response to an Inactivated Hepatitis A Vaccine Administered Concomitantly with Immune Globulin'* (PMID: 8394864) shows that injecting immune globulin (antibodies) against Hep A while also injecting inactivated Hep A leads to the injected antibody interfering with the vaccine, depressing the immune response to it. This is not a vaccine suppressing the immune system, it is anti-Hep A antibodies removing Hepatitis A, it just so happens that the Hepatitis A it is removing is that from the vaccine, leading to less of a response to the vaccine.
- The fourth paper, *'Depressed Lymphocyte Function after Measles-Mumps-Rubella Vaccination'* (PMID: 1151122) is referenced as being from "Journal of Infection Disorder" but is from *'The Journal of Infectious Diseases'*. According to Doctor Fred Kantor, one of the co-authors: "Our paper does show that the measles/mumps /rubella vaccine temporarily suppresses delayed type hypersensitivity. It is important to note that clinical measles does the same but for a much more protracted period. It is also important to note that infections that affect people with diminished delayed sensitivity are not seen in patients receiving the MMR vaccine." [1]
- The fifth referenced paper, *'Immunosuppression with combined vaccines'* (PMID: 6618962) is another letter, not a peer reviewed study. This letter, by Beckenhauer et. al. corrects a previous letter to the journal, implicating their canine parovirus (CPV) vaccine in immunosuppression, among other things. The letter rejects the assertion, and explains why the source cited to support the charge is inappropriate. The final paragraph of *'Immunosuppression with combined vaccines'* reads:

*"One other point is relevant. Though not evident from his correspondence, the writer is not speaking as a private practitioner but as an employee of Salsbury Laboratories, Inc, parent company of Fromm Laboratories, which manufactures a competitive CPV vaccine."*

That is not to say it is impossible for a vaccine to suppress the immune system. It would be possible to create a vaccine to stimulate an immune reaction against a specific component of the immune system. However, it should be noted that the operative word is 'specific'. The vaccine would have to be designed to target that particular molecule – it would not be a side-effect of another vaccine. Another possible method of vaccine-induced immunosuppression would be if an infectious agent with an immunosuppressive effect (or an attenuated strain which retained this characteristic) were to be administered as a vaccine component. While it is hypothetically possible for a vaccine to suppress the immune system, none of the vaccines given in Australia have been shown to produce such an effect, and for someone in the position of a health care provider to suggest they do is dangerous.

As has been shown, none of the five articles submitted by Ms Dorey fit her criteria that she implies would bolster her case. Of all five, none are evidence that vaccines suppress the immune system. Of all five, two are letters, despite Ms Dorey's assertion that all are peer-reviewed studies. Letters are neither peer-reviewed, nor studies.

APPENDIX 2.10

The conclusions to be drawn from this are that at best Ms Dorey has read the papers she cites, yet completely misunderstood their contents and context. At worst, she has either read them and is intentionally including them, knowing full well they do not support her conclusions, or has copied them from another source, without reading them, happily unaware of the reflection this has on herself and the AVN.

Yours sincerely,

Tom Sidwell

Reference:

APPENDIX 2.11

[1] An email from Dr Fred Kantor to Tom Sidwell on February 20<sup>th</sup>, 2010.

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**Re: A paper you have written is being mis-construed** Saturday, 20 February, 2010 1:35 PM

From: "Fred Kantor" <fred.kantor@yale.edu>

To: "Tom Sidwell" <tomsidwell@yahoo.com.au>

Dear Tom,

Thank you for your letter. Our paper does show that the measles/mumps /rubella vaccine **temporarily** suppresses delayed type hypersensitivity. It is important to note that clinical measles does the same but for a much more protracted period. It is also important to note that infections that affect people with diminished delayed sensitivity are not seen in patients receiving the MMR vaccine.

Vaccines have done more good for world health than any other measure since Jenner first vaccinated milkmaids with cowpox virus to protect them against smallpox.

The anti-vaccination lobby is a misguided group of people who will grasp at any fact, taken out of context, to support their specious position. Vaccines have always fought an uphill battle because its hard to prove that because of them an individual did not contract an illness. We, the medical profession, must keep up the supply of facts that vaccines are good for people. Keep up the good work

On a personal note, I spent a sabbatical year at the Walter and Eliza Hall Institute in Melbourne in the late 60s with Gus Nossal and Jacque Miller and many immunological 'Greats'. We loved our time in Melbourne

'best

Fred

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HCCC REFERENCE 09/1695

APPENDIX 2.12

TOM SIDWELL

DELETED

VICTORIA

MARCH 7, 2010

**TO: MS LEANNE EVANS  
INVESTIGATION OFFICER  
HEALTH CARE COMPLAINTS COMMISSION**

**RE: MERYL DOREY AND THE AVN RESPONSE TO HCCC COMPLAINT  
OF 7 SEPTEMBER 2009 – AN ANALYSIS OF HER SOURCES**

Dear Ms Evans,

The following document details a worrying discovery made regarding where Ms Dorey, current president of the Australian Vaccination Network (AVN), sourced some of her references used in her reply to Mr Ken McLeod's initial complaint.

The following material covers information on page 23 of the 27 page version of the AVN reply available at [http://avn.org.au/library/images/pdfs/hccc\\_reply.pdf](http://avn.org.au/library/images/pdfs/hccc_reply.pdf)

Ms Dorey begins: "*Below are just a few of the hundreds of references to peer-reviewed studies which demonstrate the [sic.] vaccines are indeed immune-suppressive*". She then references five articles [1, 2, 3, 4 and 5].

Three of the five references are incorrect.

One article, "*Susceptibility to Infection After Vaccination*" [1] has the correct title, journal name, date of publication and page number, however it is attributed to *W. Ehrland* – the actual author being *W. Ehrengut*.

Another article, "*Vaccines May Cause Immune Suppression*" has the authors' names, journal, date of publication and page numbers correct. However, the name of the paper has been incorrectly cited, the paper's actual title being: "*Epitopic overload at the site of injection may result in suppression of the immune response to combined capsular polysaccharide conjugate vaccines*" [2].

The other, "*Depressed Lymphocyte Function after Measles-Mumps-Rubella Vaccination*" [4] has the correct title, authors and date of publication. The journal name is incorrect. The paper appears in the *Journal of Infectious Diseases*, which is abbreviated to *J Infect Dis*. It is cited, in Ms Dorey's reply, as being from "*Jour Infection Disorder*". It appears the abbreviated form of the journal title has been incorrectly expanded by someone unfamiliar with the journal. The page numbers are also incorrect, being cited by Ms Dorey as "*p 75-80*", when the article actually spans pages 75-78. It appears the notation of 75-8 (meaning 75-78) has been incorrectly expanded by someone unfamiliar with scientific references.

The fact that these articles are mis-referenced would suggest that either Ms Dorey has made the above mistakes, or she has copied the citation from another source without actually reading the papers. Below is evidence that the latter option is correct.

As it turns out, these same errors of attribution do appear in other places which predate Ms Dorey's response.

A simple Google search for the two longest incorrect terms (of "*Vaccines May Cause Immune Suppression*" "*Jour Infection Disorder*") yields several sites which contain these erroneous sources. I intend to demonstrate that all of these sites are disreputable – thus demonstrating that Ms Dorey uncritically copied and pasted references *for a document to be submitted to a government body* directly from an obviously disreputable and biased source.

Discounting sites that post-date the submission of the AVN's HCCC response, five remain [6, 7, 8, 9 and 10]. All five of these sites reference all five articles in question [1, 2, 3, 4 and 5], *with the same errors of attribution found in Ms Dorey's HCCC reply*.

Two of the five websites [6 and 7] have the articles referenced in a list of '*Vaccination and Allergy Citations*'. The list of articles on these two sites is largely identical, however neither site refers to any of the five papers as proving vaccine-mediated immunosuppression.

One of these sites, *Mercola.com* [6], sells multiple unproven and disproved products and treatments, and has many articles extolling the benefits of these products (found at reference [11]). The mandatory disclaimers on the product pages say much, beginning with: "*The entire contents of this website are based upon the opinions of Dr. Mercola, unless otherwise noted...*". The pages detailing his products are filled with unsourced, absurd assertions, each one with an asterisk, discretely linking to the following disclaimer "*\* These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure or prevent any disease*".

The other of the two sites, *Dr Eddy's Clinic* [7], says on its vaccine page [12] that "*vaccines lay the foundation for auto-immune diseases and other disorders of the immune system*". It claims that the definition of an 'epidemic' was changed with the introduction of the Salk polio vaccine to trick the public into thinking the vaccine was working, doctors knowingly and deceitfully changed the criteria for polio diagnosis to manipulate statistics and hide vaccine-induced infection, vaccines are used to insert genetic material that will be activated in the future to cause disease/infection, vaccines kill people, and that this is covered up: "*Asthma, however, acute lymphatic leukemia, streptococcal Cellulitis, tubercular meningitis, and infantile paralysis are just a few of the fake causes of death listed on the death certificate of people who are dying from vaccinations*".

The other three sites [8, 9 and 10] list, as Ms Dorey does, all five articles as proof that vaccines suppress the immune system.

One of these three, *VACINAÇÃO X PESQUISAS CIENTÍFICAS* [8], is a vaccine conspiracy page in Portuguese. It suggests that vaccines are responsible for AIDS, cancer, allergy, autoimmune disease, neurological disorders (apparently including depression and ADHD), and that vaccines overload the immune system, physically block the lymphatic system and deplete the body's stores of vital nutrients. As can be seen, this site is not an accurate, unbiased source of information.

The other two of these three sites, *vaccinetruth.org* [9] and *whale.to* [10] both claim vaccines cause autism [13 and 14], shaken baby syndrome [15 and 16], SIDS [17, 18 and 19] and Gulf War syndrome [20 and 21], along with the typically misquoted and fabricated information on vaccine ingredients such as thimerosal [22 and 23], squalene [24 and 25] and aluminium [26 and 27].

*Whale.to* does not restrict itself to vaccines, it also informs readers that HIV does not cause AIDS [28], polio's true cause is DDT [29], measles is a vitamin deficiency [30], as well as some other common conspiracy theories about aspartame [31], fluoridation [32], 9-11 [33] and UFOs [34 and 35]. Perhaps most bizarre is the belief that "deadly orgone radiation" - a mythical form of radiation which it claims is visible to 'energy psychics', it "hurts people" and "destroys the atmosphere's health" -is emitted by cell phone towers and chemtrails (the supposedly harmful trails of chemicals that planes leave behind them, as opposed to contrails, which is the reality) [36]. The site claims that this deadly orgone radiation can be neutralised by 'orgonite', a mixture of metal shavings and fiberglass resin [37].

All five of these sites contain the same misspelled and misused references used in Ms Dorey's response to the HCCC. This implies that any of these sites are likely to have been the source of Ms Dorey's 'supportive' evidence. All five sites are also shown to be utterly unreliable. They are not sites from which a person can sensibly defend the uncritical copying of references. All have shown to endorse the unbelievable, incorrect, and downright absurd, with no regard for correct information.

The nature of the errors of attribution included in Ms Dorey's reply demonstrate that, at best, she did not read the articles she cites nor did she commit to any kind of follow up. At worst, she uncritically copied her references from known conspiracy sites, assuming that there would be no detection of such lazy and completely unprofessional referencing on her part. This kind of cavalier attitude toward providing reliable sources *in a submission to a government body* shows a distinct lack of respect for any standards of evidence, and should not be tolerated by a person, or organisation, providing health care advice.

While it is disgraceful that Ms Dorey treats her submission to the HCCC with such disdain, the nature of the many complaints against her and the AVN are that their actions endanger public health. Not only is it dangerous to make bold medical claims with no regard for evidence, but this demonstrably sloppy approach by Ms Dorey and the AVN toward gathering reliable, reputable medical sources undermines any claim to benefit the public.

Yours sincerely,

Tom Sidwell

## References:

Note: All URLs listed were accurate as of 3<sup>rd</sup> March 2010

- [1] Susceptibility to infection after vaccination; Ehrengut W. Br Med J. 1972 Mar 11;1(5801):683. PMID: 5015300
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- [3] Depression of the immune response to an inactivated hepatitis A vaccine administered concomitantly with immune globulin; Green MS, Cohen D, Lerman Y, Sjogren M, Binn LN, Zur S, Slepion R, Robin G, Hoke C, Bancroft W, et al. J Infect Dis. 1993 Sep;168(3):740-3. PMID: 8394864
- [4] Depressed lymphocyte function after measles-mumps-rubella vaccination; Munyer TP, Mangi RJ, Dolan T, Kantor FS. J Infect Dis. 1975 Jul;132(1):75-8. PMID: 1151122
- [5] Immunosuppression with combined vaccines; Beckenhauer WH, Gill MA. J Am Vet Med Assoc. 1983 Aug 15;183(4):389-90. PMID: 6618962
- [6] <http://www.mercola.com/article/vaccines/citations.htm>
- [7] [http://www.dreddyclinic.com/integrated\\_med/parasites.htm](http://www.dreddyclinic.com/integrated_med/parasites.htm)
- [8] <http://www.vivendasantanna.com.br/vacina.htm>
- [9] [http://www.vaccinetruth.org/excellent\\_vaccine\\_articles.htm](http://www.vaccinetruth.org/excellent_vaccine_articles.htm)
- [10] <http://whale.to/vaccines/immune.html>
- [11] <http://products.mercola.com/>
- [12] [http://www.dreddyclinic.com/online\\_recources/articles/vaccination/danger\\_vaccination.htm](http://www.dreddyclinic.com/online_recources/articles/vaccination/danger_vaccination.htm)
- [13] [http://www.vaccinetruth.org/the\\_cause\\_of\\_autism.htm](http://www.vaccinetruth.org/the_cause_of_autism.htm)
- [14] <http://www.whale.to/vaccines/autism.html>
- [15] [http://www.vaccinetruth.org/is\\_it\\_child\\_abuse\\_or\\_something\\_else\\_entirely1.htm](http://www.vaccinetruth.org/is_it_child_abuse_or_something_else_entirely1.htm)
- [16] <http://www.whale.to/m/sbs24.html> A list of articles on shaken baby syndrome – many of which blame vaccines for the syndrome
- [17] [http://www.vaccinetruth.org/page\\_9.htm](http://www.vaccinetruth.org/page_9.htm)

- [18] <http://www.whale.to/m/sids.html>
- [19] <http://www.whale.to/vaccine/sids.html>
- [20] [http://www.vaccinetruth.org/new\\_page\\_7.htm](http://www.vaccinetruth.org/new_page_7.htm)
- [21] <http://www.whale.to/vaccines/army.html>
- [22] [http://www.vaccinetruth.org/new\\_page\\_4.htm](http://www.vaccinetruth.org/new_page_4.htm)
- [23] <http://www.whale.to/vaccines/thimerosal.htm>
- [24] <http://www.vaccinetruth.org/mf-59.htm>
- [25] <http://www.whale.to/v/squalene.html>
- [26] [http://www.vaccinetruth.org/aluminum\\_hydroxide1.htm](http://www.vaccinetruth.org/aluminum_hydroxide1.htm)
- [27] [http://www.whale.to/a/aluminium\\_q.html](http://www.whale.to/a/aluminium_q.html)
- [28] <http://www.whale.to/a/hivfraud.html>
- [29] [http://www.whale.to/vaccine/polio\\_ddt\\_h.html](http://www.whale.to/vaccine/polio_ddt_h.html)
- [30] <http://www.whale.to/m/measles.html>
- [31] <http://www.whale.to/w/excitotoxins.html>
- [32] <http://www.whale.to/d/fluoride.html>
- [33] <http://www.whale.to/b/911.html>
- [34] <http://www.whale.to/b/lear2.html>
- [35] [http://www.whale.to/b/ufo\\_man\\_h.html](http://www.whale.to/b/ufo_man_h.html) A page suggesting that most UFOs are man-made.
- [36] [http://www.whale.to/b/dor\\_h.html](http://www.whale.to/b/dor_h.html)
- [37] <http://www.whale.to/b/orgonite.html>

TOM SIDWELL  
DELETED

VICTORIA  
25 MARCH 2010

**TO: MS LEANNE EVANS  
INVESTIGATION OFFICER  
HEALTH CARE COMPLAINTS COMMISSION**

**RE: MERYL DOREY AND THE AVN RESPONSE TO HCCC COMPLAINT  
OF 7 SEPTEMBER 2009 – AN ANALYSIS OF HER REFERENCES**

Dear Ms Evans,

My previous submissions to the HCCC have dealt with a total of fifteen articles referenced by Ms Meryl Dorey in her reply of September 2009 to Mr Ken McLeod's initial complaint. In this document I will examine the remaining four articles she cites as evidence (excluding the now-retracted Wakefield paper, which is cited, but not as evidence).

The four articles are references 2, 3 20 and 26 in Ms Dorey's reply, and I shall cover them in this order.

### **Section 1 – Reference '2'**

The first of these references, listed as: "*Pertussis in the Netherlands: an Outbreak Despite High Levels of Immunization with Whole-Cell Vaccine; <ftp://ftp.cdc.gov/pub/EID/vol3no2/adobe/melker.pdf>; Emerging Infectious Diseases, Vol. 3, No. 2, April-June 1997*" [1] discusses a pertussis outbreak in a highly vaccinated population. As suggested by follow up research [2 and 3], this appears to be a case of antigenic drift. Antigenic drift refers to a microbe mutating to the point that it is antigenically different. Vaccines are designed to protect against specific antigens, which are often strain-specific. It is a common mis-understanding among anti-vaccinationists that if a vaccine does not offer protective immunity against a species of microbe then it has failed – this is not the case: if they confer some degree of protective immunity against that for which they were designed, then they have succeeded. Her implication -that this is a failure of the vaccine – demonstrates, at best, a mis-understanding on her part of how vaccines work; or, at worst, intentional deception on her part.

### **Section 2 – Reference '3'**

The second of these four references, "*Impact of routine vaccination with a pertussis toxoid vaccine in Denmark; 10.1016/j.vaccine.2004.03.046*" [4] is used by Ms Dorey to support her statement "...we are seeing an outbreak of pertussis despite a substantial increase in vaccination against it – an experience which is being

*duplicated in every country for which mass vaccination against this illness exists.”* This reference does not support Ms Dorey’s assertion. To quote the final paragraph of the article; *“Our study is the first to evaluate the effectiveness of pertussis vaccination in a unique nationwide cohort with longitudinal individual-level information on vaccination history and pertussis. It shows that the pertussis toxoid vaccine used in Denmark has been highly effective in preventing pertussis. However, pertussis incidence has increased among the youngest infants, a direct consequence of the new schedule.”* Presumably the outbreak Ms Dorey is referring to is this increase amongst those too young to be vaccinated. A comparatively high proportion of pertussis in the unvaccinated is not a failure of the pertussis vaccine, but rather evidence of its efficacy. Ms Dorey’s inability to understand this point demonstrates her ignorance of this issue. This is a dangerous trait inherent in someone who provides healthcare advice.

### Section 3 – Reference ‘20’

*“Prod Roy Soc Med, 1974; 67: 24”* [5] is the source cited by Ms Dorey for the figure stated in this paragraph of her reply:

*I can with great confidence (because I have a primary reference) state that, “Convulsions after measles vaccine injections occurred in 1 in every 526 vaccine recipients”*

This paper does not contain the figure stated by Ms Dorey. Furthermore, this paper has nothing to do with neither measles nor vaccines. The paper is titled *Necrolytic migratory erythema with carcinoma of pancreas*, and is a case report of someone suffering the condition mentioned in the title. Ms Dorey’s statement remains unsourced.

It is difficult to understand why Ms Dorey would cite a paper completely unrelated to the topic at hand in her HCCC reply. One plausible explanation, which I intend to substantiate, is that she uncritically copied and pasted the reference from another place where it was identically incorrectly listed.

### Section 3.1 – Implications of Reference ‘20’

The citation’s lack of a title and author names as well as the uncommon abbreviation of the journal name (Prod rather than Proc) are features that do not fit with the format of the previous references in Ms Dorey’s reply. Had the citation been copied from elsewhere, with no follow-up, this would explain the deviation from the standard of the other references. A simple Google search of the terms *“Prod Roy Soc Med” “1974; 67: 24”* returns two (non-AVN) sites which list the reference as it appears in Ms Dorey’s reply, along with the erroneous statistic [6 and 7]. One [6] is a letter sent to the British Medical Journal, titled *‘Vaccination MYTHOLOGY’* which invokes government-level conspiracies to explain why vaccines are accepted as safe. The other [7] is the same letter, hosted on the site <http://www.whale.to/>

As I explained in my third submitted analysis, (titled ***‘RE: MERYL DOREY AND THE AVN RESPONSE TO HCCC COMPLAINT OF 7 SEPTEMBER 2009 – AN ANALYSIS OF HER SOURCES’***, submitted as *‘Source of AVN references.pdf’* on March 7), there are five websites it appears Ms Dorey may have uncritically copied and pasted citations from. One of those was whale.to – where this citation and the associated statistic can be found.

The laziness shown by Ms Dorey in not only researching, but also in follow up, demonstrates just how dangerous she is in the position of a health care provider.

#### Section 4 – Reference ‘26’

The fourth paper, “*ANNUAL REPORT: SURVEILLANCE OF ADVERSE EVENTS FOLLOWING IMMUNISATION IN AUSTRALIA, 2007; Glenda Lawrence, Michael S Gold, Richard Hill, Shelley Deeks, Amy Glasswell, Peter B McIntyre, CDI Vol 32 No 4 2008*” [8] details, according to the abstract, “*Australian passive surveillance data for adverse events following immunization (AEFI) reported to the Therapeutic Goods Administration for 2007, and describes reporting trends over the 8-year period 2000 to 2007*”. In this extract Ms Dorey is avoiding a response to Mr McLeod’s actual complaint by treating a statement, by a CDC spokesperson, as if it is the basis of Mr McLeod’s complaint. This is a typical strawman fallacy. That the number of complaints about gardasil is less than those about other drugs is inconsequential to the point Mr McLeod was making; for Ms Dorey to obfuscate the way she has demonstrated just how conscious she is of her inability to defend her original statement.

#### Section 5 – Conclusion

As has been shown throughout this analysis, and my previous three analyses, Ms Dorey’s HCCC reply references papers which do not support her conclusions (or suggest the opposite); are unrelated to the statements she states they support; and appear to be copied directly from conspiracy websites. Her reply provides no sound scientific support for the assertions that she or the AVN make, and exemplifies the apparent contempt which she, and the organization, have toward research, responsibility and science.

The reply concludes (bold mine):

“*Since we have shown that our information is:*

***Sourced from peer-reviewed medical journals***

*Given freely to those who request it*

*Not medical advice or education*

***Not dangerous to the broader community***

*Legal under the Australian Constitution*

*We hope to see a quick and positive resolution to this complaint and a complete exoneration of the work of the AVN and myself.”*

As I have shown, not all the information provided from the AVN is from peer-reviewed journals, and that which is does not support their conclusions. Given their statements are not grounded in fact and most likely sourced from those with ulterior motives, as I have demonstrated, the advice given are definitely dangerous to the broader community, as can be seen in areas where herd immunity has broken down, as indicated in Mr Ken McLeod’s initial complaint.

Yours sincerely,

Tom Sidwell

**References**

- [1] Pertussis in The Netherlands: an outbreak despite high levels of immunization with whole-cell vaccine; de Melker HE, Conyn-van Spaendonck MA, Rümke HC, van Wijngaarden JK, Mooi FR, Schellekens JF. *Emerg Infect Dis.* 1997 Apr-Jun;3(2):175-8. PMID: 9204299
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- [3] Comparative genomic profiling of Dutch clinical *Bordetella pertussis* isolates using DNA microarrays: identification of genes absent from epidemic strains; King AJ, van Gorkom T, Pennings JL, van der Heide HG, He Q, Diavatopoulos D, Heuvelman K, van Gent M, van Leeuwen K, Mooi FR. *BMC Genomics.* 2008 Jun 30;9:311. PMID: 18590534
- [4] Impact of routine vaccination with a pertussis toxoid vaccine in Denmark; Hviid A, Stellfeld M, Andersen PH, Wohlfahrt J, Melbye M. *Vaccine.* 2004 Sep 9;22(2728):3530-4. PMID: 15315832
- [5] Necrolytic migratory erythema with carcinoma of pancreas; Warin AP. *Proc R Soc Med.* 1974 Jan;67(1):24-6. PMID: 4821588
- [6] <http://www.bmj.com/cgi/eletters/320/7229/240>
- [7] <http://www.whale.to/drugs/heptonstall.html>
- [8] Annual report: surveillance of adverse events following immunisation in Australia, 2007; Lawrence G, Gold MS, Hill R, Deeks S, Glasswell A, McIntyre PB. *Commun Dis Intell.* 2008 Dec;32(4):371-87. PMID: 19374268

ATTACHMENT 1.1

Ken McLeod

**From:** "Meryl Dorev - President Australian Vaccination Network" <meryl@avn.org.au>  
**To:** [REDACTED]  
**Sent:** Monday, 15 February 2010 1:08 PM  
**Subject:** The Truth about the AVN Investigations



## The AVN under investigation



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### Why all the investigations?

I just received the following email from one of our members (a very long-time supporter of the AVN):

Hi Meryl,

It may be worth responding to recent press about the investigation into AVN fund-raising. I'm comfortable with pledging money to you - particularly considering that you're not asking for it until you know there's going to be enough to make it worthwhile continuing - but others may have concerns.

Good luck!

TC

### To tell or not to tell - that is the question

I have been up in the air about whether to write to you about this issue or not, but TC's letter has made me realise that I do need to let you, our members and supporters, aware of the pressure we are under and the terrible victimisation of both the AVN and myself personally by an Australian-based anti-choice organisation known to many of our members in particular and the group, SAVN (Stop the AVN) in general.

This will be a long email so please bear with me - I want it to be as complete as it can be though much of this is still up in the air.

First off, I have not been writing to you about most of what has been happening because I haven't wanted to feed the

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## ATTACHMENT 1.2

fire of these groups. The people who are behind these attacks are, in my own personal opinion, totally without morals and ethics. While I oppose those organisations that want to tell you and your children what you can and cannot do in regards to your own bodies, I never have and never will stoop to the level of personal attacks, vilification, and the underhanded lying tactics which have been used against myself and the AVN by these individuals - with the complete cooperation of both the media and government departments may I add.

The only thing I have ever asked for is to have an open and honest debate so that others can decide for themselves which side has the best information. But that has never been allowed. Instead, these groups who cannot argue with the information the AVN produces instead, attack the messenger with a viciousness that almost belies their claim to humanity.

For an overview of some of these issues which I will not go into further here, please visit my blog post [Why I did what I did, Why I do what I do](#) (first printed in the AVN's publication, the Inside Edition)

### 12 months of attack

Approximately 12 months ago, an unremitting campaign of harassment began with a complaint filed by an anonymous complainant against the AVN with the Office of Liquor, Gaming and Racing (OLGR). They stated that we were fundraising without the correct authorisation because our fundraising certificate had expired.

This was a situation that both the AVN and the OLGR were perfectly aware of. Our last auditor, a woman who was an AVN member and who helped us out by doing our audit for free for several years, sold her firm so we needed to find a new auditor. Because of the regulations, we could not use an accountant - it needed to be an auditor and, being in a rural area, they are very hard to come by.

We stayed in communication with the OLGR and they were perfectly aware and understanding of the fact that we would not be able to submit our audit until we found an auditor. Our paperwork was already with the auditors at the time this complaint was filed and the OLGR stated that they had no issues with our charitable status and as soon as the audit was submitted (about a month later), our certificate was renewed.

During this time, members of the group previously

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ATTACHMENT 1.3

mentioned and the organisation, Stop the AVN, contacted all of our advertisers and asked them to pull their ads from our publication. One of our advertisers, someone who had taken out a full years' worth of advertising in both the magazine and on our website / enewsletter, pulled out. Her husband said that she had been so terrified by the calls she received, she was unable to sleep for 2 weeks!

To show you how 'ethical' these characters are, they found out that one of the other vaccination support groups in Australia had not registered their business name properly. This group started the same month as the AVN - in March 1994 - and have gone by that name for all that time.

These people set up a website using this organisation's name to specifically attack all of the volunteer groups in Australia who freely give their time and energy to making sure that people can access the other side of the vaccination story. On this website, they have established something called the Hall of Shame where they have listed the names of people who support free and informed health choice and have asked people not to support their businesses.

They have listed the business details for everyone who is involved in these organisations - even our partner's private businesses - without any explanation but perhaps so that the harassment can continue with those who love us and support what we do.

They have tried to get venues where I am scheduled to present vaccination seminars to cancel and have harassed those who sponsor such events.

They continually attribute things I haven't said to me. Saying that I believe in the Illuminati and Reptilian Aliens are just some of the most blatant examples of this. There are so many more it's not even funny. They have even gone so far as to follow links on articles I've sent to our email list and say that I support what is at that link even when I have sent an article - the links on that page are not under my control.

There is more I could tell you including death threats and accusations of being a child killer, but suffice it to say that it has been 12 months of this sort of thing and I am well and truly over it!

This whole situation came to a head about 7 months ago when a complaint was filed against both the AVN and myself with the HCCC which you have all had links to. This seems to have disappeared from our website since we put the new

23/04/2010

**ATTACHMENT 1.4**

site up but I will be speaking with our website designer this afternoon and will ask her to put this back up so if any of you have not read the original complaint and our replies, please visit the site tomorrow and you should (hopefully) see that information there.

Along with this HCCC complaint, there have been an unending string of complaints filed against both myself and the AVN every time I'm on either the radio, TV or in newspapers. Without fail, the media will receive complaints stating that they should not be interviewing someone like myself who is not only anti-vaccine (in their words), but under investigation to boot!

This last week, two more complaints were filed. I only found out about these complaints when our local rag, the Northern Star, published an article entitled [Vaccination Group Investigation](#).

I found out from the paper that one of the complainants was the same person who filed the complaint against us with the HCCC. The other one was, no doubt, one of his cronies from Stop the AVN.

As a result, the OLGR is coming out to do a complete internal audit of the AVN and I am not concerned about this because we take the trust of our members and supporters very seriously. But it is yet another example of how we are constantly under attack from these people and how we have to waste such an enormous amount of time and energy taking care of this crap when there are so many other things that are actually important for us to be taking care of!

In addition, they have filed a second complaint with ASIC when **we are no longer even registered with ASIC and haven't been for a couple of years.** Grasping at straws and wasting the public's time and money - but that is nothing new for these people.

In addition, members of SAVN are saying that the AVN has no money because I have spent it all and that I have taken out bank loans to prop up the organisation.

Both of these statements are complete lies.

I started this organisation in 1994 and from that time to the present, I have been a full-time volunteer for the AVN. It is not unusual for me to spend 60-80 hours a week on AVN work. Despite this huge investment of my time, I am not now nor have I ever been paid by the AVN.

23/04/2010

**ATTACHMENT 1.5**

For approximately the last 2 1/2 - 3 years, I have drawn a very small weekly amount as editor of Living Wisdom which is a separate body that is owned by the AVN (and I edited the magazine for 4 years before we were in a position to pay me anything). When times have been tough, I have foregone even that small payment.

My husband and I have put our own money into the AVN as we have been able when there has been a shortfall (my husband is a farmer and you know how hard times are and have been for those on the land...). We have usually been paid back over time.

At this point however, our biggest personal exposure comes from the fact that we have gone guarantor for all of the leases and obligations that the AVN has taken on (computers, photocopier, etc.) so were the AVN to fold, we would be personally liable for those obligations.

Anyone who claims that we have profited personally in any way from this organisation is not only wrong, they are immoral and have probably never done a day's volunteer work in their lives.

**No regrets**

I have said many times that if I had put the time and energy that I have given to the AVN into my own business, I would be rich right now. I believe that firmly. But my own business would never have given me the strong, enduring sense of satisfaction that my involvement with the AVN has done. Nor would it allow me to look back over these last 17 years and know that no matter what the future holds, I have done what I could to protect not only the health and rights of my own children, but of all the other children in Australia whose parents otherwise would not have known they had a choice.

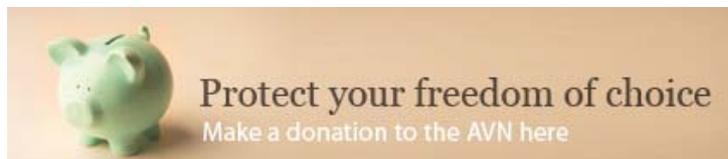
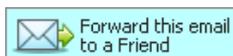
Whether you feel comfortable with pledging or donating to the AVN is up to you. What the outcome of all these investigations will be is unknown. I gave up a long time ago expecting justice from government departments but am hopeful that those who throw the dirt will find it flying back in their faces.

Thanks for reading this and feel free to give me a ring if you would like to discuss anything that I've said.

All the best,  
Meryl  
02 6687 1699

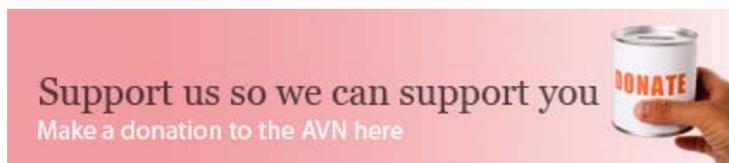
23/04/2010

ATTACHMENT 1.6



### AVN Online

Did you know that the AVN now has a presence on Facebook and Twitter as well as a Blog that is updated on an almost daily basis? If you are interested in staying abreast of the current issues involved in the fields of vaccination, natural health, organics, the environment and instinctive parenting, click on the links below to follow us on our progress towards a better informed and more proactive Australian nation.



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23/04/2010



**ASIC**

Australian Securities & Investments Commission

**National Names Index**

Index of corporate and business names

ATTACHMENT 2

[SEARCH TIPS](#)

Extracted from ASIC's database at AEST 14:16:41 on 23/04/2010

**Name** AUSTRALIAN VACCINATION NETWORK INCORPORATED

**ARBN** 077 002 923

**ABN** 30 077 002 923

**Type** Registered Australian Body

**Registration Date** 09/01/1997

**Next Review Date** Unknown

**Status** Strike-Off Action In Progress

**Locality of Registered Office** Harbord NSW 2096

**Jurisdiction** Australian Securities & Investments Commission

---

**Former Name(s)** AUSTRALIAN COUNCIL FOR IMMUNIZATION INFORMATION INC.

---

These are the documents that ASIC has most recently received from or in relation to this organisation. Page numbers are shown if processing is complete and the document is available for purchase.

Date	Number	Pages	Description
09/04/2010	026479268	3	407A Notification of Cessation of Business
01/06/2009	025528978	3	490A Change to Officeholders of a Registered Body Appoint/cease Directors - Registered Body
17/09/2008	025039031	4	490A Change to Officeholders of a Registered Body Appoint/cease Directors - Registered Body

- Complete Document Listing
- Document Listing Between Dates

Exclude form 7053A (Disclosure notice for disclosing entity)

Australian Securities & Investments Commission



# Notification of change to directors of a registered body

Use this form to notify ASIC of new or ceasing director(s), and for changes to the name or address of current director(s), of a registered Australian body or foreign company. Do not use for changes to an Australian company.

Related forms:  
484 Change to company details (for change to directors of an Australian company)

If there is insufficient space in any section of the form, you may photocopy the relevant page(s) and submit as part of this lodgement

### Registered body details

Do not use this form for an Australian company; refer to the Guide for definitions.

Registered body name

ARBN

Type of registered body (tick one box)  
 Registered foreign company     Registered Australian body

### Lodgement details

Who should ASIC contact if there is a query about this form?  
 Firm/organisation

Contact name/position description

ASIC registered agent number (if applicable)

Telephone number  
   

Postal address or DX address  
   

### Signature

This form must be signed by a director (or equivalent), secretary, local agent of a foreign company or director or secretary of a company appointed as local agent of a foreign company.

I certify that the information in this form is true and complete.

Name

Capacity  
 Director (or equivalent)  
 Secretary  
 Local agent of a foreign company  
 Director or secretary of a company appointed as local agent of a foreign company

Signature

Date signed  
    
 (D) (M) (Y)

**1 Appoint or cease director**

Tick one box

Appoint director       Cease director

Date of change

Date of change  
 2 9 / 0 8 / 0 8  
(D D) (M M) (Y Y)

Name

Provide full given names, not initials.

The name of the appointed or ceased director is

Family name: BEGG      Given names: MELISSA

Date of birth  
 0 4 / 0 7 / 6 7  
(D D) (M M) (Y Y)

Place of birth (town/city): SYDNEY      (state/country): NSW

For new appointments only

Former name (if applicable)  
 (eg change by deed poll, marriage)  
 Residential address

Their previous name was (Provide full given names, not initials)

Family name:      Given names:

The residential address of the appointed director is

Street number and Street name: 285 MAFEKING Rd

Suburb/City: GOONENGERY      State/Territory: NSW

Postcode: 2482      Country (if not Australia):

**1 Continued... Appoint or cease another director**

Tick one box

Appoint director       Cease director

Date of change

Date of change  
 2 9 / 0 8 / 0 8  
(D D) (M M) (Y Y)

Name

Provide full given names, not initials

The name of the appointed or ceased director is

Family name: STACEY      Given names: MICHAEL FRANCIS

Date of birth  
 2 0 / 0 2 / 4 6  
(D D) (M M) (Y Y)

Place of birth (town/city): MALDON      (state/country): VIC

For new appointments only

Former name (if applicable)  
 (eg change by deed poll, marriage)  
 Residential address

Their previous name was (Provide full given names, not initials)

Family name:      Given names:

The residential address of the appointed director is

Street number and Street name: 7 Newstead Rd

Suburb/City: MALDON      State/Territory: VIC

Postcode: 3463      Country (if not Australia):

ATTACHMENT 3.3

**1 Appoint or cease director**

Tick one box  Appoint director  Cease director

Date of change Date of change  
 2 9 / 0 8 / 0 8  
[D] [D] [M] [M] [Y] [Y]

Name Provide full given names, not initials.  
 The name of the appointed or ceased director is  
 Family name: ALLEN Given names: RICKIE  
 Date of birth: 2 9 / 0 7 / 7 5  
[D] [D] [M] [M] [Y] [Y]  
 Place of birth (town/city): MELBOURNE (state/country): VIC

For new appointments only  
 Former name (if applicable) (eg change by deed poll, marriage)  
 Residential address  
 Their previous name was (Provide full given names, not initials)  
 Family name: Given names:  
 The residential address of the appointed director is  
 Street number and Street name: 124 BROOKDALE ST  
 Suburb/City: FLORENT State/Territory: WA  
 Postcode: 6014 Country (if not Australia):

**1 Continued... Appoint or cease another director**

Tick one box  Appoint director  Cease director

Date of change Date of change  
 2 9 / 0 8 / 0 8  
[D] [D] [M] [M] [Y] [Y]

Name Provide full given names, not initials.  
 The name of the appointed or ceased director is  
 Family name: KNIGHT Given names: MOLLY.  
 Date of birth: 1 1 / 0 7 / 5 2  
[D] [D] [M] [M] [Y] [Y]  
 Place of birth (town/city): ARIMIDALE (state/country): NSW

For new appointments only  
 Former name (if applicable) (eg change by deed poll, marriage)  
 Residential address  
 Their previous name was (Provide full given names, not initials)  
 Family name: AUKIM Given names: MOLLY.  
 The residential address of the appointed director is  
 Street number and Street name: 7 NEWSTEAD RD  
 Suburb/City: MALDON State/Territory: VIC  
 Postcode: 3463 Country (if not Australia):

**1 Appoint or cease director**

Tick one box

Appoint director  Cease director

Date of change

Date of change  
 29/08/08  
(D D) (M M) (Y Y)

Name

Provide full given names, not initials.

The name of the appointed or ceased director is

Family name: M'PHEE  
 Given names: STUART

Date of birth  
 18/02/70  
(D D) (M M) (Y Y)

Place of birth (town/city): MELBOURNE  
 (state/country): VIC

For new appointments only

Former name (if applicable)  
 (eg change by deed poll, marriage)  
 Residential address

Their previous name was (Provide full given names, not initials)

Family name: \_\_\_\_\_  
 Given names: \_\_\_\_\_

The residential address of the appointed director is

Street number and Street name: \_\_\_\_\_  
 Suburb/City: \_\_\_\_\_ State/Territory: \_\_\_\_\_  
 Postcode: \_\_\_\_\_ Country (if not Australia): \_\_\_\_\_

**1 Continued... Appoint or cease another director**

Tick one box

Appoint director  Cease director

Date of change

Date of change  
 29/08/08  
(D D) (M M) (Y Y)

Name

Provide full given names, not initials

The name of the appointed or ceased director is

Family name: TOUZEL  
 Given names: GRETA

Date of birth  
 21/04/72  
(D D) (M M) (Y Y)

Place of birth (town/city): BANKSTOWN  
 (state/country): NSW

For new appointments only

Former name (if applicable)  
 (eg change by deed poll, marriage)  
 Residential address

Their previous name was (Provide full given names, not initials)

Family name: BEAMES  
 Given names: GRETA JANE

The residential address of the appointed director is

Street number and Street name: Lot 1 NEWRYBAR SWAMP Rd  
 Suburb/City: NEWRYBAR State/Territory: NSW  
 Postcode: 2479 Country (if not Australia): \_\_\_\_\_

ATTACHMENT 4.1

Australian Securities & Investments Commission



Form 490  
Corporations Act 2001  
601CV11(c)

# Notification of change to directors of a registered body

Use this form to notify ASIC of new or ceasing director(s), and for changes to the name or address of current director(s), of a registered Australian body or foreign company. Do not use for changes to an Australian company.

Related forms:  
484 Change to company details (for change to directors of an Australian company)

If there is insufficient space in any section of the form, you may photocopy the relevant page(s) and submit as part of this lodgement

### Registered body details

Do not use this form for an Australian company; refer to the Guide for definitions.

Registered body name  
Australian Vaccination Network.

ARBN  
30 077 002 923

Type of registered body (tick one box)

Registered foreign company  Registered Australian body

### Lodgement details

Who should ASIC contact if there is a query about this form?

Firm/organisation  
Australian Vaccination Network

Contact name/position description  
J. Devereux. office Manager

ASIC registered agent number (if applicable)

Telephone number  
02 66 871 699 IPC

Postal address or DX address  
P.O. Box 177  
Bangalow NSW 2479 AJ  
1 - JUN 2009

### Signature

This form must be signed by a director (or equivalent), secretary, local agent of a foreign company or director or secretary of a company appointed as local agent of a foreign company.

I certify that the information in this form is true and complete.

Name  
Meryl Dorey

Capacity

Director (or equivalent)  
 Secretary  
 Local agent of a foreign company  
 Director or secretary of a company appointed as local agent of a foreign company

Signature  
Meryl Dorey

Date signed  
26/05/09  
[D] [D] [M] [M] [Y] [Y]

ATTACHMENT 4.2

**1 Appoint or cease director**

Tick one box  Appoint director  Cease director

Date of change Date of change  

0	4	/	0	4	/	0	9
D	D		M	M		Y	Y

Name Provide full given names, not initials. The name of the appointed or ceased director is  
 Family name  Given names

Date of birth  

2	1	/	0	4	/	7	2
D	D		M	M		Y	Y

Place of birth (town/city) (state/country)

For new appointments only  
 Their previous name was (Provide full given names, not initials)  
 Family name  Given names

Former name (if applicable) (eg change by deed poll, marriage)  
 Residential address The residential address of the appointed director is  
 Street number and Street name   
 Suburb/City  State/Territory   
 Postcode  Country (if not Australia)

**1 Continued... Appoint or cease another director**

Tick one box  Appoint director  Cease director

Date of change Date of change  

0	4	/	0	4	/	0	9
D	D		M	M		Y	Y

Name Provide full given names, not initials. The name of the appointed or ceased director is  
 Family name  Given names

Date of birth  

2	8	/	1	2	/	4	6
D	D		M	M		Y	Y

Place of birth (town/city) (state/country)

For new appointments only  
 Their previous name was (Provide full given names, not initials)  
 Family name  Given names

Former name (if applicable) (eg change by deed poll, marriage)  
 Residential address The residential address of the appointed director is  
 Street number and Street name   
 Suburb/City  State/Territory   
 Postcode  Country (if not Australia)

**1 Continued ... Appoint or cease director**

**Residential address**

The residential address of the appointed director is  
Street number and Street name

Suburb/City

State/Territory

Postcode

Country (if not Australia)

**1 Continued ... Appoint or cease another director**

Tick one box

Appoint director       Cease director

Date of change

Date of change

  /   /    
[D] [D] [M] [M] [Y] [Y]

Name

The name of the appointed director is

Family name

Given names

Date of birth

  /   /    
[D] [D] [M] [M] [Y] [Y]

Place of birth (town/city)

(state/country)

Former name (if applicable)  
(eg change by deed poll, marriage)

Their previous name was (Provide full given name, not initials)

Family name

Given names

Residential address

The residential address of the appointed director is  
Street number and Street name

Suburb/City

State/Territory

Postcode

Country (if not Australia)

**2 Change of director name**

Personal name change  
(eg change by deed poll, marriage)

Their previous name was (Provide full given name, not initials)

Family name

Given names

Date of birth

  /   /    
[D] [D] [M] [M] [Y] [Y]

Place of birth (town/city)

(state/country)

The director's new name is

Family name

Given names

Date of change

  /   /    
[D] [D] [M] [M] [Y] [Y]

ATTACHMENT 5.1

Australian Securities & Investments Commission

IPC  
09 APR 2010  
AB



Form 407  
Corporations Act 2001  
601CC(1), 601CL(1) & (14)(a)

# Notification of cessation, winding up or dissolution of a foreign company or registered Australian body

If there is insufficient space in any section of the form, you may photocopy the relevant page(s) and submit as part of this lodgement

Foreign company or registered body details	Foreign company or registered body name	Australian Vaccination Network Inc
	ARBN	077 002 923

Lodgement details	Who should ASIC contact if there is a query about this form?	
	Firm/organisation	Australian Vaccination Network
	Contact name/position description	Judy Devereux - Office Manager
	ASIC registered agent number (if applicable)	
	Telephone number	02 66 871 699
	Postal address or DX address	P.O. Box 177 BANGALOW NSW 2479

## 1 Details of event

Tick one box and provide details required.

<input checked="" type="checkbox"/>	The registered Australian body ceased to carry on business.	Effective date	09/04/10
<input type="checkbox"/>	The foreign company ceased to carry on business in Australia.	Effective date	
<input type="checkbox"/>	The foreign company was dissolved/deregistered in its place of origin.	Effective date	
<input type="checkbox"/>	Proceedings commenced to wind up the foreign company in its place of origin.	Effective date	
<input type="checkbox"/>	A liquidator was appointed (complete details below).		
Name of liquidator			
Family name		Given names	
Office, unit, level			
Street number and Street name			
Suburb/City		State/Territory	
Postcode		Country (if not Australia)	

ATTACHMENT 5.2

**Signature**

See guide for signature requirements.

I certify that the information in this form is true and complete.

Name

MERYL DOREY

Capacity

- Director of the foreign company or registered body
- Secretary of the foreign company or registered body
- Duly appointed local agent of the foreign company
- Director or secretary of a company which has been duly appointed as local agent of the foreign company

Company name

Australian Vaccination Network.

ACN/ABN

Signature

*Meryl Dorey*

Date signed

01/04/10  
[D] [M] [Y]

**Lodgement**

Send completed and signed forms to:  
Australian Securities and Investments Commission,  
PO Box 4000, Gippsland Mail Centre VIC 3841.

**For help or more information**

Telephone 1300 300 630  
Email [info.enquiries@asic.gov.au](mailto:info.enquiries@asic.gov.au)  
Web [www.asic.gov.au](http://www.asic.gov.au)

ATTACHMENT 5.3

407



1 April 2010

Dear Sir/Madam, I would like to confirm as per my conversation and email on the 30 March 2010 with Lyn Woodbridge Compliance Officer, Registry Services & Licensing that this form only deregisters the Australian Vaccination Network from ASIC and does not in any other way affect our registration as a Not For Profit incorporated association or in any other way affect our carrying out business in NSW under the name Australian Vaccination Network

Regards



Judy Devereux

Office Manager

Australian Vaccination Network

Phone: 02 66871 699

Yahoo! My Yahoo! Mail

**ATTACHMENT 6.1**

Welcome [redacted] [Sign Out, My Account]

Search the Web

Health - Groups - Help

---

**deleted** [redacted] Group Member - [Edit Membership](#) [Start a Group](#) | [My Groups](#)

**AVN - Australian Vaccination Network**

Home

Messages

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**Yahoo! Groups Tips**

Did you know... Show off your group to the world. [Share a photo of your group with us.](#)

---

**Best of Y! Groups**

 Check them out and nominate your group.

 **Having problems with message search? Fill out this form to ensure your group is one of the first to be migrated to the new message search system.**

**Messages** [Messages Help](#)

Message #   Search:   [Advanced](#) [Start Topic](#)

**An idea from one of our members - PLEASE READ!** [Message List](#)

[Reply](#) | [Forward](#) Message #29638 of 41210 < Prev | Next >

Mon May 29, 2006 7:16 am  
[Show Message Option](#)

**"Meryl Dorey"**  
<meryl@...>  
[shotinfo](#)  
[Offline](#)  
[Send Email](#)

Hi All,

In the latest edition of Informed Voice, we put out a call for funds because we desperately want to be able to accomplish some very specific goals of reaching more people with our information and also hopefully, getting more members/readers - you name it. The goals were as follows:

Need to raise approximately \$20,000 over the next 12 months to successfully lobby Federal Parliament for changes to legislation taking away the need for parents to see doctors in order to register as conscientious objectors to vaccination

\$17,000 would allow us to advertise our services and our magazine in the Bounty bag. This information is currently given out to every woman who births in hospital in Australia - exactly the people who need our information the most!

We need to raise \$10,000 to proceed with our plans to test all currently-licensed childhood and adult vaccines for the presence of mercury, lead and other heavy metals.

\$5,000 would help to cover the annual running cost of our 1-800 number (1800 007 468) which has been set up to allow parents and health professionals to report vaccine reactions when they occur.

I just got a call from one of our members who said that these figures are enormous and people will most likely feel that there is no way they can raise that kind of money so they just give up. But what she asked is - how many members we have. We currently have just over 2000 members. And to add up all of the money and divide it by the number of members. If I do that, it comes out to \$260 per year per member or just over \$21 a month.

So - for less than the cost of sponsoring a child who is overseas, you can actually help support Australian children right here at home. Can you please \$21 a month for the next 12 months to help achieve these goals? Maybe you can only pledge \$5 a month - or \$10? Maybe you are in a position to give \$40 or \$50 a month?

Whatever the case may be, please have a think about it and if you can give, please do. If you are not yet a member, please join! We need you and God only knows, you need us too!

Please support us - we will always support you. Visit our website at [www.avn.org.au](http://www.avn.org.au) and click on the links to either subscribe or donate - or both! And if you are overseas, we do accept Paypal for donations - there is a paypal link in the middle of the right hand part of our home page - totally secure.

Thanks so much - hope to hear from you soon,  
Meryl

<<http://www.incredimail.com/index.asp?id=509&lang=9>> Add FUN to your email  
- CLICK HERE!

[Non-text portions of this message have been removed]

ATTACHMENT 6.2

[Reply](#) [Forward](#)

Message #29638 of 41210 < [Prev](#) | [Next](#) >

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Author [Sort by Date](#)

**An idea from one of our members - PLEASE READ!**

Hi All, In the latest edition of Informed Voice, we put out a call for funds because we desperately want to be able to accomplish some very specific goals of ...

Meryl Dorey [shotinfo](#) May 29, 2006 7:17 am



< [Prev Topic](#) | [Next Topic](#) >

Message #   Search:

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[Insure-Inc.com](http://Insure-Inc.com) - Get Instant Health Insurance Quotes online.

[Yellow Teeth Cured. Learn the Trick](#)

[NewsKTV13.com](http://NewsKTV13.com) - Find how Sunnyvale mom whitened her teeth without dentist.

ATTACHMENT 7.1

**Ken McLeod**

---

**From:** "Baker, Megan" <MBaker@acpmagazines.com.au>  
**To:** <turlinja@internode.on.net>  
**Sent:** Monday, 9 November 2009 2:22 PM  
**Attach:** AVN.doc  
**Subject:** Bounty inserts  
Dear Mr McLeod

Thank you for contacting Bounty. Please be assured that Bounty and ACP Magazines do not distribute information on behalf of the AVN and have no intention of distributing information on behalf of the AVN. Please see attached letter.

Kind regards

**Megan Baker**  
**Hospitals Manager**  
**Bounty Services | ACP Parenting Group**  
66-68 Goulburn Street Sydney NSW 2000  
T: 02 8116-9351

---

The information contained in this e-mail communication may be confidential. You should only read, disclose, re-transmit, copy, distribute, act in reliance on or commercialise the information if you are authorised to do so. If you are not the intended recipient of this e-mail communication, please immediately notify the sender by e-mail and then destroy any electronic or paper copy of this message.

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18/11/2009

ATTACHMENT 7.2

9<sup>th</sup> November 2009

Dr K Foo  
Staff Specialist Oncologist

deleted

Dear Dr Foo

Thank you for your correspondence alerting Bounty to the Australian Vaccination Network website. We were extremely concerned to note the reference to Bounty on this website as we have no dealings with this organisation and would never endorse any group which sought to defy NH&MRC recommendations. **We have no knowledge of the AVN magazine or the information contained on their website.**

Bounty has worked hard over the years to comply with the National Health and Medical Research Council guidelines and WHO guidelines for the protection and promotion of Breastfeeding. The Bounty Bags only contain information in support of immunisation; for example, a current immunisation schedule, sponsored by Panadol is included in every Bounty New Mother Bag.

Bounty only carries products and information associated with reputable companies in the baby market, including many Government departments who choose the Bounty distribution for their health promotion campaigns. We currently distribute information on behalf of the NSW Ambulance Service and also a Department of Health and Ageing DVD called 'Living with Water' a new drowning prevention initiative.

We appreciate you raising the issue as we were unaware of the AVN website. Bounty will contact the Australian Vaccination Network to ensure that the Bounty reference is removed from the site ASAP as it wrongfully implies collaboration between the two organisations.

Please reassure your colleagues that Bounty would not consider promoting this kind of information. If you have any questions or need further clarification feel free to contact me direct (02 8116-9351).

Yours sincerely

Megan Baker  
Hospitals Manager

AVN : Message: Re: India Halts Wyeth Vaccine Trial Over Infant Death - Mozilla Firefox

File Edit View History Bookmarks Tools Help

http://health.groups.yahoo.com/group/AVN/message/36449

Most Visited Getting Started Latest Headlines

Wall | Facebook

Unless you trust this site, avoid entering personal information or downloading anything from it. [Read more.](#)

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Yahoo! Groups Tips

Best of Y! Groups

AVN : Message: ... X

ZONEALARM EXTREME SECURITY

Having problems with message search? Fill out this form to ensure your group is one of the first to be migrated to the new message search system.

Message # Search: Go Search Advanced

India Halts Wyeth Vaccine Trial Over Infant Death

Re: India Halts Wyeth Vaccine Trial Over Infant Death

There will come a time - I pray to God that it will happen in my lifetime - when those who have pushed vaccines upon innocent, helpless babies - doctors, pharmaceutical companies, government officials - will be proven to have lied and cheated these instruments of death into our children's bloodstream. When that occurs, the outcry will be heard around the world and there will not be enough hiding places on the globe for these murderers to hide or enough money to pay for compensation. Of course, it will be too late for the babies, like this poor child, to be saved. But we will be able to take satisfaction from the fact that never again will anyone have to be pushed to poison their child because for once and for all, it will be known as poison and we will all wonder how it was we fell for the vaccine lie for as long as we did.

When that time comes, will you be able to say that you did everything in your power to help bring the truth out? Support your local pro-vaccination choice organisation, speak to friends and family about these tragedies and never, ever stay quiet about the dangers of vaccination. Those of us who know owe it to others to speak our truth.

All the best,  
Meryl

Tue Dec 16, 2008, 9:08 pm

"meryl@..."  
<meryl@...>  
shotinfo  
Offline  
Send Email

ATTACHMENT 8

On 17/10/2008 at 7:08 AM, Sheri Nakken wrote:

Next Previous Highlight all Match case Reached end of page, continued from top

Find: mental Done



Main	Day	Name	Venue	Genre	Your Festival Experience
------	-----	------	-------	-------	--------------------------

Act Names

1 result(s) returned

**Meryl Dorey**

Meryl Dorey has committed her career to researching the science of vaccination and how it can benefit or harm us. She is Australia's leading expert in vaccination and offers her unbiased and well researched knowledge in this years folk medicine program.

contact: 0266871699

SUN	Blue Lotus - Woodforum Optimal Health Strategies	5:00 PM	<a href="#">add</a>
TUE	Blue Lotus - AH1N1 Vaccination. History, Facts, Future	2:30 PM	<a href="#">add</a>
FRI	Blue Lotus - Woodforum Global Health	5:00 PM	<a href="#">add</a>

SEARCH  artist name FOR  exact phrase Go

ATTACHEMENT 9.1

## UK: HIV tests for everyone may become routine

[Message List](#)

[Reply](#)

ATTACHMENT 9.2

Message #41116 of 43440 < [Prev](#) | [Next](#) >

Re: [AVN] UK: HIV tests for everyone may become routine

Actually Katherine, nobody has ever 'seen' the HIV virus - all they have are antibodies. We don't 'know' the virus and the vaccines that are being tested are just bits of protein - not bits of viral RNA or DNA.

Also, while we are on the subject, let me ask you a question. Perhaps you can go back and ask your sources for the answer to this. In all other viral and bacterial diseases, the medical community considers the existence of antibodies to indicate immunity. With HIV and Hep B however, they indicate infection. Why is that?

In Australia, it is a matter of what hospital you are at as to whether you will be allowed to opt out as we saw with the recent HepB cases - some will bully - some will not. In the US, it is mandatory. Read the archives of mothering magazine - can't remember how many years ago = 5 maybe? They did a great article on this.

Take care,  
Meryl

Mon Nov 16, 2009 2:59 pm

[Show Message Option](#)

**Meryl Dorey**

<meryl@...>

[shotinfo](#)

 Offline

 [Send Email](#)

ATTACHMENT 10.1



## Australian Vaccination Network Proxy form

\* Required Question(s)

The AVN's constitution needs to be amended due to changes in legislation as well as changes in the structure of our committee. The new rules can be found on our website at <http://avn.org.au/20100322252/Constitution.html>.

According to the Department of Fair Trading's rules, amendments to an association's constitution require the approval of three-quarters of the members. Therefore, we need at least 1,400 of you to vote (only financial members can vote - those who were subscribers to Living Wisdom but not members are not able to cast a vote on this issue).

In order to vote, you can either attend the Special General Meeting which will be held on Tuesday, April 20th at 7:30 PM AEST, or fill in the electronic proxy form below. If you are not attending, we must have your proxy form no later than Friday, April 16th at 5:00 PM.

It is URGENT that you attend to this as soon as possible. If we do not get the three-quarters vote we require, we will have to hold another meeting and all the expense and time spent preparing for this meeting will have been wasted.

Please don't let that happen.

Either attend on the evening (you will need a computer, an internet connection and a free copy of Skype which can be downloaded from [www.skype.com](http://www.skype.com)) or fill in the questions on this survey.

**ATTACHMENT 10.2**

If you plan on attending, please confirm this with Janiece ([janiece@avn.org.au](mailto:janiece@avn.org.au)) as she will need to send you information on how to connect to the meeting.

If you are submitting a proxy form, you can either nominate another AVN member who will be attending on the night to vote for you or else, nominate Meryl Dorey (address PO Box 88, Bangalow NSW, 2479) to hold your proxy. Please remember to note below how you would like to vote - for or against the changes to the constitution.

We hope to see you at the meeting but if you can't attend, please do take the time to send in your proxy form so the AVN can bring its constitution in line with government regulations.

All the best,

Meryl W Dorey

PS - at the bottom of this form is a place for you to enter your details. We must ask that you fill this in so we can confirm that you are a current financial member.

50 character(s) left.

---

**\* I hereby appoint the following person (please enter name and address) being a member of the AVN (the incorporated association), as my proxy to vote for me on my behalf at the Special General Meeting of the association to be held on Tuesday, the 20th day of April 2010 via Skype and at any adjournment of that meeting.**

350 character(s) left.

**ATTACHMENT 10.3**

**\*** My proxy is authorised to vote as below on the changes to the AVN's constitution which can be found on the AVN's website at <http://avn.org.au/20100322252/Constitution.html>

- In favour of the changes to the AVN's constitution
- Against the changes to the AVN's constitution

**\*** Please enter the information indicated below.

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_  
emailaddress@xyz.com

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_

State/Province (US/Canada): -- Select a state --

Postal Code: \_\_\_\_\_

Country: -- Select a country --

**Finish**

ATTACHMENT 11.1

**Ken McLeod**

**From:** "Meryl Dorey - President Australian Vaccination Network" <meryl@avn.org.au>  
**To:** ~~deleted~~  
**Sent:** Monday, 15 February 2010 8:43 AM  
**Subject:** Update on pledges - going well but more needed



## An update on pledges



Join Our List

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## Pledging to help the AVN



As promised, I will be sending you regular updates on the situation with the AVN.

From Friday until now, we have received pledges from 218 members and supporters (as of about 10 minutes ago) which is fantastic! We really thank everyone who has pledged funds to help ensure our future. I have tried to write to everyone but if I missed your email, please excuse that - it's been a bit of a hectic weekend.

Those 218 pledges leave about 2,300 members who have not pledged (out of approximately 2,500 AVN members) and about 4,500 people who subscribe to our enewsletter but are not members who have also not pledged.

Come on folks! You don't need to pledge \$100 - whatever you can give would be great! And very much needed.

If you can pledge \$10 or \$20, that would be fantastic; and if you want to make it \$10 or \$20 a month ongoing - even

4/05/2010

**ATTACHMENT 11.2**

better.

The idea is to make the AVN sustainable for 2-3 years so we are not constantly at the mercy of finances and can get on with getting our jobs done of protecting your rights to be able to choose what form of healthcare you will use for your family and making sure you always have the information you need. Isn't that worth a pledge?

To pledge funds, please send an email to both [meryl@avn.org.au](mailto:meryl@avn.org.au) as well as [judy@avn.org.au](mailto:judy@avn.org.au). Give us your name and the amount you are pledging (remember, it does not have to be \$100 - any amount would be appreciated) and we will take care of the rest.

If you want to make a donation rather than a pledge, please [click here](#) to donate via our website's secure processing facility. Remember that we accept donations using Mastercard, VISA or Paypal on the website.

You can also call our office on 02 6687 1699 and speak with either Janiece or Judy to pledge or donate or, donate via our Westpac bank account - the details are below. Remember to leave your name as identification and to send [Judy](#) an email with the details so she can get a receipt off to you.

AVN Gift Fund account  
Westpac Bank  
BSB - 032591  
Account number - 196282

Please just keep in mind that we will be deciding the future of the AVN by the 28th of February so don't pledge more than you can afford because if things go according to plan, we will need those funds by that date.

Thanks as always,  
Meryl

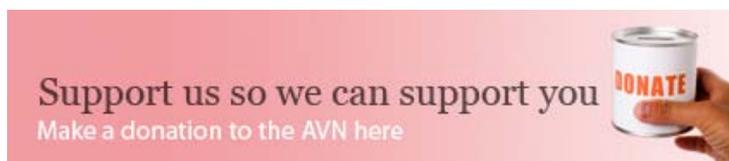


**AVN Online**

4/05/2010

**ATTACHMENT 11.3**

Did you know that the AVN now has a presence on Facebook and Twitter as well as a Blog that is updated on an almost daily basis? If you are interested in staying abreast of the current issues involved in the fields of vaccination, natural health, organics, the environment and instinctive parenting, click on the links below to follow us on our progress towards a better informed and more proactive Australian nation.



**Some more of your wonderful letters!**

Dear Meryl,

I wish to make a pledge of \$100 to keep you going and I truly hope this will help or this is the money you need from us to stay. You have bought to me and my family (four children) a lot of great information and wisdom and it would be terrible if you were not there anymore for this knowledge and support on this very controversial subject and one that should stay a parent's decision without being bullied into it by terrible scare mongering.

I have people asking me where and from whom they can get some information on the subject of vaccination because they are on the fence as to what to do and it is hard for me to know what to say to them because at the moment, the only place I know of for this kind of information and support is in limbo and may fold. Again I hope this helps and thanks.

Yours truly,

EM

I hope you can continue the good work of getting

4/05/2010

ATTACHMENT 11.4

information out there to all of us - it's what someone does. At the moment, I cannot pledge as much as I'd like to (thousands!), so if you do decide you can continue, I will happily donate \$50 to help things along. Perhaps later I will be able to give more.

Thank you for having the courage to be a voice to all of us about our CHOICES!

SS

Hi Meryl,

Sorry to hear of the position of the AVN I hope that you can keep going as you are such an essential part of the non vaccination movement.

I can only pledge \$40 at the moment but I hope every bit counts.

Thank you so much for your dedication to date and I hope that you can keep up the great work.

EB

Dear Meryl,

Thank you so much for this email reminder. I have just forwarded your email on to the \*\*\*\*\* Attachment Parenting group so hopefully you will receive more pledges soon.

I have only just renewed my membership in the last couple of weeks, which included hard copies of the magazine, but would also like to pledge \$80.00.

I think your work is vital for all of us and it is very important that the AVN remains open. Thank you for everything you do and your passion to continue with this crucial work for us all. Please keep the email reminders going! Some people have very good intentions and just forget unless they get another reminder.

All the best,  
KP

*Thanks KP. I was not going to write again today so soon after the last email, but your message reminded ME that reminders are very important for most of us who, with all the right intentions, tend to put things off all the time.*

Dear Meryl,

4/05/2010

**ATTACHMENT 11.5**

We do want to see your wonderful organisation stay alive. Whether you go ahead or not I would like to donate \$300. The work you have provided over many years could not be matched by any donation. The \$300 is only a very small token of your dedicated hard work for one of the most important (if not the most important) issues to human health on the planet today. Vaccinations are barbaric and need to be eradicated.

Even if your organisation does not continue, you have already set up the foundation of truth about vaccinations that will carry through in other streams for the future. Nothing is ever lost when it is for the good of all. Thank you Meryl for providing that foundation of truth.

I will give your office a ring through the week to provide my details for a donation.

Kindest Regards,  
LC

[Please share the information by forwarding to a friend!](#)

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