Testimony of Dr. Andrew J. Wakefield MB, BS.

March 9, 2015

Introduction.

In support of Bill SB442 there has been a series of false claims and assumptions. I will illustrate this statement by reference to four matters.

First, my colleagues and I have been accused of ethical misconduct in the investigation of children with autism while at the RFH, London.

I have been accused of fraud by journalist Brian Deer and the British Medical Journal.

Most bizarrely, and as a measure of how incontinent these claims against me have become, I have been accused in the Oregon media of actually admitting to this fraud, thereby acknowledging 1. that there was fraud – which there was not – and 2. confessing to such fraud, which is entirely false.

I have never, at any stage, been part of, or committed scientific fraud or ethical misconduct. The allegations of ethical and research misconduct against and my colleagues and against me came before the English High Court in the appeal of Professor Walker-Smith. The judge utterly demolished the case against him – which was very much the same as the case against me – in effect, finding the General Medical Council guilty of incompetence, and worse, bias. Prof. Walker-Smith was immediately and completely exonerated. For financial reasons, I was unable to appeal.

The allegations of research fraud are dealt with in an independent investigation of the original Lancet study by Dr. David Lewis Ph.D. who was a senior scientist at the EPA and an acknowledged expert in research fraud. His investigation and conclusions are to be found in the book, *Science for Sale*. He confirms that what fraud there was, was on the part of journalist Brian Deer and Dr. Godlee, Editor of the BMJ. Efforts to bring these persons to justice for malicious defamation in Texas, failed only on jurisdictional grounds. If there is any doubt, I urge you to read his book and the affidavits publically available at Travis County Court.

Since 1998, the original discovery of intestinal disease in children with autism has been confirmed time after time (Appendix 1). The link between MMR vaccine and autism brings me to my second point; vaccine safety.

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1 Lewis D. Science for Sale. (NY) 2014 Skyhorse Publishing
Vaccine Safety

1. At the turn of the century the CDC were charged with investigating the possibility that there are subgroups of children at risk of autism from MMR.

In 1999 I proposed that the MMR-autism risk may, in part, be a function of age of exposure: the younger you get the vaccine the greater the risk. Why? Because, the younger you get measles, the greater the risk of an adverse outcome. This idea was shared with the CDC. They tested the hypothesis in children in the Atlanta Metro area and they found it to be true.

They found beyond a shadow of a doubt that two subgroups of children were at risk: children who were in effect developmentally normal to age 1, and black boys. They concealed this risk for 13 years and deceived everyone, putting millions of children at risk. In the words of Dr. William Thompson, the senior scientist responsible for this study, for the data analysis, and for disclosure of the fraud: “I was involved in deceiving millions of tax payers regarding the potential negative side effects of vaccines.”

I have filed a formal complaint with the Office of Research Integrity detailing the fraud. It is provided for you to examine. The matter is currently under investigation by the US Congress with the prospect of hearings later this year.

2. Third, there have been no studies of the safety of the vaccine schedule in children anywhere in the world.

The significance of this is driven home by the following example: in Europe, the Committee for Medicinal Products for Human Use, requested a review of neurological reactions in children who received Prevenar 13 (a pneumococcal vaccine) at the same time as Infarix Hexa a 6-in-1 vaccine.

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4 Email from Dr. Thompson to Dr. Hooker and Dr. Wakefield.

During a two-year period between 2009 and 2011 a total of 1,691 cases of adverse events were reported after the Prevnar 13 vaccine, including 312 neurological reactions, many serious.

The documents describe how 9% of those who had received Prevnar 13 alone suffered neurological reactions while of those who had received Prevnar 13 plus a six-in-one vaccine on the same day, 34% experienced neurologic reactions, nearly 4-times the rate. More is worse, not better.

There exists a state of what I believe to be deliberate ignorance about the adverse interactions between vaccines.

My fourth point:

**Vaccine efficacy.**

Merck are currently in Federal Court in Pennsylvania facing charges of defrauding the US Government in relation to their MMR vaccine, for which they have a monopoly in the US.

Faced with the fact that their mumps vaccine is far less effective that they claim in the product insert, they were threatened with loss of their license. They had two choices: one, to improve the vaccine in the interests of children or two, to falsify the laboratory testing in the interests of Merck. According to court documents, they chose to do the latter. According to Merck scientists they cheated on multiple levels, finally resorting to simply changing the data to give them the result they needed. It was a business decision. In mitigation Merck claim that it is not a matter of vaccine safety.

Yes it is. A mumps vaccine that does not work is a dangerous vaccine. Why? Because by the time you are a teenager the vaccine has stopped working. Mumps is a minor disease in children but a much more serious disease in boys after puberty, in particular, when it can cause testicular inflammation and sterility. Merck’s defective vaccine has made mumps a more dangerous disease with multiple documented outbreaks of mumps in highly vaccinated adults.

Profit was put before the safety of the public.

In summary, aside from the inevitable violation of parental rights, it is unthinkable that in the face of fraud - fraud that has genuinely been admitted to - by scientists in government and the vaccine industry, that there should be any consideration given to increasing the stringency of vaccine mandates.

Thank you.
Appendix 1.
Support for the discovery of gastrointestinal disease in autism:

The following is provided by way of illustrating the science that supports the original discovery of intestinal disease in children with autism, first reported in the Lancet Paper.

Key
Replication studies at the Royal Free Hospital**
Case series showing bowel disease in autism by independent groups##
Invited articles*#


