#### The Purdue Vaccination Studies and Auto-Antibodies



- Catherine O'Driscoll
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A team at Purdue University School of Veterinary Medicine conducted several studies (1,2) to determine if vaccines can cause changes in the immune system of dogs that might lead to life-threatening immune-mediated diseases. They obviously conducted this research because concern already existed. It was sponsored by the Haywood Foundation which itself was looking for evidence that such changes in the human immune system might also be vaccine induced. It found the evidence.

The vaccinated, but not the non-vaccinated, dogs in the Purdue studies developed autoantibodies to many of their own biochemicals, including fibronectin, laminin, DNA, albumin, cytochrome C, cardiolipin and collagen.

This means that the vaccinated dogs — "but not the non-vaccinated dogs" – were attacking their own fibronectin, which is involved in tissue repair, cell multiplication and growth, and differentiation between tissues and organs in a living organism.

The vaccinated Purdue dogs also developed autoantibodies to laminin, which is involved in many cellular activities including the adhesion, spreading, differentiation, proliferation and movement of cells. Vaccines thus appear to be capable of removing the natural intelligence of cells.

Autoantibodies to cardiolipin are frequently found in patients with the serious disease systemic lupus erythematosus and also in individuals with other autoimmune diseases. The presence of elevated anti-cardiolipin antibodies is significantly associated with clots within the heart or blood vessels, in poor blood clotting, haemorrhage, bleeding into the skin, foetal loss and neurological conditions.

The Purdue studies also found that vaccinated dogs were developing autoantibodies to their own collagen. About one quarter of all the protein in the body is collagen. Collagen provides structure to our bodies, protecting and supporting the softer tissues and connecting them with the skeleton. It is no wonder that Canine Health Concern's 1997 study of 4,000 dogs showed a high number of dogs developing mobility problems shortly after they were vaccinated (noted in my 1997 book, What Vets Don't Tell You About Vaccines).

Perhaps most worryingly, the Purdue studies found that the vaccinated dogs had developed autoantibodies to their own DNA. Did the alarm bells sound? Did the scientific community call a halt to the vaccination program? No. Instead, they stuck their fingers in the air, saying more research is needed to ascertain whether vaccines can cause genetic damage. Meanwhile, the study dogs were found good homes, but no long-term follow-up has been conducted. At around the same time, the American Veterinary Medical Association (AVMA) Vaccine-Associated Feline Sarcoma Task Force initiated several studies to find out why 160,000 cats each year in the USA develop terminal cancer at their vaccine injection sites.(3) The fact that cats can get vaccine-induced cancer has been acknowledged by veterinary bodies around the world, and even the British Government acknowledged it through its Working Group charged with the task of looking into canine and feline vaccines(4) following pressure from Canine Health Concern. What do you imagine was the advice of the AVMA Task Force, veterinary bodies and governments? "Carry on vaccinating until we find out why vaccines are killing cats, and which cats are most likely to die."

In America, in an attempt to mitigate the problem, they're vaccinating cats in the tail or leg so they can amputate when cancer appears. Great advice if it's not your cat amongst the hundreds of thousands on the "oops" list.

But other species are okay – right? Wrong. In August 2003, the Journal of Veterinary Medicine carried an Italian study which showed that dogs also develop vaccine-induced cancers at their injection sites.(5) We already know that vaccine-site cancer is a possible sequel to human vaccines, too, since the Salk polio vaccine was said to carry a monkey retrovirus (from cultivating the vaccine on monkey organs) that produces inheritable cancer. The monkey retrovirus SV40 keeps turning up in human cancer sites.

It is also widely acknowledged that vaccines can cause a fast-acting, usually fatal, disease called autoimmune haemolytic anaemia (AIHA). Without treatment, and frequently with treatment, individuals can die in agony within a matter of days. Merck, itself a multinational vaccine manufacturer, states in The Merck Manual of Diagnosis and Therapy that autoimmune haemolytic anaemia may be caused by modified live-virus vaccines, as do Tizard's Veterinary Immunology (4th edition) and the Journal of Veterinary Internal Medicine.(6) The British Government's Working Group, despite being staffed by vaccine-industry consultants who say they are independent, also acknowledged this fact. However, no one warns the pet owners before their animals are subjected to an unnecessary booster, and very few owners are told why after their pets die of AIHA.

## A Wide Range of Vaccine-induced Diseases

We also found some worrying correlations between vaccine events and the onset of arthritis in our 1997 survey. Our concerns were compounded by research in the human field.

The New England Journal of Medicine, for example, reported that it is possible to isolate the rubella virus from affected joints in children vaccinated against rubella. It also told of the isolation of viruses from the peripheral blood of women with prolonged arthritis following vaccination.(7)

Then, in 2000, CHC's findings were confirmed by research which showed that polyarthritis and other diseases like amyloidosis, which affects organs in dogs, were linked to the combined vaccine given to dogs.(8) There is a huge body of research, despite the paucity of funding from the vaccine

industry, to confirm that vaccines can cause a wide range of brain and central nervous system damage. Merck itself states in its Manual that vaccines (i.e., its own products) can cause encephalitis: brain inflammation/damage. In some cases, encephalitis involves lesions in the brain and throughout the central nervous system. Merck states that "examples are the encephalitides following measles, chickenpox, rubella, smallpox vaccination, vaccinia, and many other less well defined viral infections".

When the dog owners who took part in the CHC survey reported that their dogs developed short attention spans, 73.1% of the dogs did so within three months of a vaccine event. The same percentage of dogs was diagnosed with epilepsy within three months of a shot (but usually within days). We also found that 72.5% of dogs that were considered by their owners to be nervous and of a worrying disposition, first exhibited these traits within the three-month post-vaccination period.

I would like to add for the sake of Oliver, my friend who suffered from paralysed rear legs and death shortly after a vaccine shot, that "paresis" is listed in Merck's Manual as a symptom of encephalitis. This is defined as muscular weakness of a neural (brain) origin which involves partial or incomplete paralysis, resulting from lesions at any level of the descending pathway from the brain. Hind limb paralysis is one of the potential consequences. Encephalitis, incidentally, is a disease that can manifest across the scale from mild to severe and can also cause sudden death.

Organ failure must also be suspected when it occurs shortly after a vaccine event. Dr Larry Glickman, who spearheaded the Purdue research into post-vaccination biochemical changes in dogs, wrote in a letter to Cavalier Spaniel breeder Bet Hargreaves:

"Our ongoing studies of dogs show that following routine vaccination, there is a significant rise in the level of antibodies dogs produce against their own tissues. Some of these antibodies have been shown to target the thyroid gland, connective tissue such as that found in the valves of the heart, red blood cells, DNA, etc. I do believe that the heart conditions in Cavalier King Charles Spaniels could be the end result of repeated immunisations by vaccines containing tissue culture contaminants that cause a progressive immune response directed at connective tissue in the heart valves. The clinical manifestations would be more pronounced in dogs that have a genetic predisposition [although] the findings should be generally applicable to all dogs regardless of their breed."

I must mention here that Dr Glickman believes that vaccines are a necessary evil, but that safer vaccines need to be developed.

## Vaccines Stimulate an Inflammatory Response

The word "allergy" is synonymous with "sensitivity" and "inflammation". It should, by rights, also be synonymous with the word "vaccination". This is what vaccines do: they sensitize (render allergic) an individual in the process of forcing them to develop antibodies to fight a disease threat. In other words, as is acknowledged and accepted, as part of the vaccine process the body will respond with inflammation. This may be apparently temporary, or it may be longstanding.

Holistic doctors and veterinarians have known this for at least 100 years. They talk about a wide range of inflammatory or "-itis" diseases which arise shortly after a vaccine event. Vaccines, in fact, plunge many individuals into an allergic state. Again, this is a disorder that ranges from mild all the

way through to the suddenly fatal. Anaphylactic shock is the culmination: it's where an individual has a massive allergic reaction to a vaccine and will die within minutes if adrenaline or its equivalent is not administered.

There are some individuals who are genetically not well placed to withstand the vaccine challenge. These are the people (and animals are "people", too) who have inherited faulty B and T cell function. B and T cells are components within the immune system which identify foreign invaders and destroy them and hold the invader in memory so that they cannot cause future harm. However, where inflammatory responses are concerned, the immune system overreacts and causes unwanted effects such as allergies and other inflammatory conditions.

Merck warns in its Manual that patients with, or from families with, B and/or T cell immunodeficiencies should not receive live-virus vaccines due to the risk of severe or fatal infection. Elsewhere, it lists features of B and T cell immunodeficiencies as food allergies, inhalant allergies, eczema, dermatitis, neurological deterioration and heart disease. To translate, people with these conditions can die if they receive live-virus vaccines. Their immune systems are simply not competent enough to guarantee a healthy reaction to the viral assault from modified live-virus vaccines.

Modified live-virus (MLV) vaccines replicate in the patient until an immune response is provoked. If a defence isn't stimulated, then the vaccine continues to replicate until it gives the patient the very disease it was intending to prevent.

Alternatively, a deranged immune response will lead to inflammatory conditions such as arthritis, pancreatitis, colitis, encephalitis and any number of autoimmune diseases such as cancer and leukaemia, where the body attacks its own cells.

A new theory, stumbled upon by Open University student Gary Smith, explains what holistic practitioners have been saying for a very long time. Here is what a few of the holistic vets have said in relation to their patients:

Dr Jean Dodds: "Many veterinarians trace the present problems with allergic and immunologic diseases to the introduction of MLV vaccines..." (9)

Christina Chambreau, DVM: "Routine vaccinations are probably the worst thing that we do for our animals. They cause all types of illnesses, but not directly to where we would relate them definitely to be caused by the vaccine." (10)

Martin Goldstein, DVM: "I think that vaccines...are leading killers of dogs and cats in America today."

Dr Charles E. Loops, DVM: "Homoeopathic veterinarians and other holistic practitioners have maintained for some time that vaccinations do more harm than they provide benefits." (12)

Mike Kohn, DVM: "In response to this [vaccine] violation, there have been increased autoimmune diseases (allergies being one component), epilepsy, neoplasia [tumours], as well as behavioural problems in small animals." (13)

## A Theory on Inflammation

Gary Smith explains what observant healthcare practitioners have been saying for a very long time, but perhaps they've not understood why their observations led them to say it. His theory, incidentally, is causing a huge stir within the inner scientific sanctum. Some believe that his theory could lead to a cure for many diseases including cancer. For me, it explains why the vaccine process is inherently questionable.

Gary was learning about inflammation as part of his studies when he struck upon a theory so extraordinary that it could have implications for the treatment of almost every inflammatory disease — including Alzheimer's, Parkinson's, rheumatoid arthritis and even HIV and AIDS.

Gary's theory questions the received wisdom that when a person gets ill, the inflammation that occurs around the infected area helps it to heal. He claims that, in reality, inflammation prevents the body from recognising a foreign substance and therefore serves as a hiding place for invaders. The inflammation occurs when at-risk cells produce receptors called All (known as angiotensin II type I receptors). He says that while At1 has a balancing receptor, At2, which is supposed to switch off the inflammation, in most diseases this does not happen.

"Cancer has been described as the wound that never heals," he says. "All successful cancers are surrounded by inflammation. Commonly this is thought to be the body's reaction to try to fight the cancer, but this is not the case.

"The inflammation is not the body trying to fight the infection. It is actually the virus or bacteria deliberately causing inflammation in order to hide from the immune system [author's emphasis]." (14)

If Gary is right, then the inflammatory process so commonly stimulated by vaccines is not, as hitherto assumed, a necessarily acceptable sign. Instead, it could be a sign that the viral or bacterial component, or the adjuvant (which, containing foreign protein, is seen as an invader by the immune system), in the vaccine is winning by stealth.

If Gary is correct in believing that the inflammatory response is not protective but a sign that invasion is taking place under cover of darkness, vaccines are certainly not the friends we thought they were. They are undercover assassins working on behalf of the enemy, and vets and medical doctors are unwittingly acting as collaborators. Worse, we animal guardians and parents are actually paying doctors and vets to unwittingly betray our loved ones.

Potentially, vaccines are the stealth bomb of the medical world. They are used to catapult invaders inside the castle walls where they can wreak havoc, with none of us any the wiser. So rather than experiencing frank viral diseases such as the 'flu, measles, mumps and rubella (and, in the case of dogs, parvovirus and distemper), we are allowing the viruses to win anyway – but with cancer, leukaemia and other inflammatory or autoimmune (self-attacking) diseases taking their place.

# The Final Insult

All 27 veterinary schools in North America have changed their protocols for vaccinating dogs and cats along the following lines; (15) however, vets in practice are reluctant to listen to these changed protocols and official veterinary bodies in the UK and other countries are ignoring the following facts.

Dogs' and cats' immune systems mature fully at six months. If modified live-virus vaccine is giver after six months of age, it produces immunity, which is good for the life of the pet. If another MLV vaccine is given a year later, the antibodies from the first vaccine neutralise the antigens of the second vaccine and there is little or no effect. The litre is no "boosted", nor are more memory cells induced.

Not only are annual boosters unnecessary, but they subject the pet to potential risks such as allergic reactions and immune-mediated haemolytic anaemia.

In plain language, veterinary schools in America, plus the American Veterinary Medical Association, have looked at studies to show how long vaccines last and they have concluded and announced that annual vaccination is unnecessary. (16-19)

Further, they have acknowledged that vaccines are not without harm. Dr Ron Schultz, head of pathobiology at Wisconsin University and a leading light in this field, has been saying this politely to his veterinary colleagues since the 1980s. I've been saying it for the past 12 years. But change is so long in coming and, in the meantime, hundreds of thousands of animals are dying every year – unnecessarily.

The good news is that thousands of animal lovers (but not enough) have heard what we've been saying. Canine Health Concern members around the world use real food as Nature's supreme disease preventative, eschewing processed pet food, and minimise the vaccine risk. Some of us, myself included, have chosen not to vaccinate our pets at all. Our reward is healthy and long-lived dogs.

It has taken but one paragraph to tell you the good and simple news. The gratitude I feel each day, when I embrace my healthy dogs, stretches from the centre of the Earth to the Universe and beyond.

#### References

- 1. "Effects of Vaccination on the Endocrine and Immune Systems of Dogs, Phase II", Purdue University, November 1,1999
- 2. See www.vet.purdue.edu/epi/gdhstudy.htm.
- 3. See http://www.avma.org/vafstf/default.asp.
- 4. Veterinary Products Committee (VPC) Working Group on Feline and Canine Vaccination, DEFRA, May 2001.
- 5. JVM Series A 50(6):286-291, August 2003.
- 6. Duval, D. and Giger, U. (1996). "Vaccine-Associated Immune-Mediated Hemolytic Anemia in the Dog", Journal of Veterinary Internal Medicine 10:290-295.
- 7. New England Journal of Medicine, vol.313,1985.

See also Clin Exp Rheumatol 20(6):767-71, Nov-Dec 2002.

- 8. Am Coll Vet Intern Med 14:381,2000.
- 9. Dodds, Jean W., DVM, "Immune System and Disease Resistance", at http://www.critterchat.net/immune.htm.
- 10. Wolf Clan magazine, April/May 1995.
- 11. Goldstein, Martin, The Nature of Animal Healing, Borzoi/Alfred A. Knopf, Inc., 1999.

- 12. Wolf Clan magazine, op. cit.
- 13. ibid.
- 14. Journal of Inflammation 1:3,2004, at http://www.journal-inflammation.com content/1/1/3.
- 15. Klingborg, D.J., Hustead, D.R. and Curry-Galvin, E. et al., "AVMA Council on Biologic and Therapeutic Agents' report on cat and dog vaccines", Journal of the American Veterinary Medical Association 221(10):1401-1407, November 15,2002,

http://www.avma.org/policies/vaccination.htm.

- 16. ibid.
- 17. Schultz, R.D., "Current and future canine and feline vaccination programs", Vet Med 93:233-254, 1998.
- 18. Schultz, R.D., Ford, R.B., Olsen, J. and Scott, P., "Titer testing and vaccination: a new look at traditional practices", Vet Med 97:1-13, 2002 (insert).
- 19. Twark, L. and Dodds, W.J., "Clinical application of serum parvovirus and distemper virus antibody titers for determining revaccination strategies in healthy dogs", J Am Vet Med Assoc