

Public statement – warning about Australian Vaccination Network, Inc. ('AVN')

The NSW Health Care Complaints Commission has completed an investigation into AVN and under section 94A(1) of the *Health Care Complaints Act* has decided to make the following public statement and warning.

The Australian Vaccination Network, Inc. ('AVN') was established in 1994 in New South Wales by a group of people concerned about the lack of scientifically-based information on the 'other side' of the vaccination issue (the tag line on their website is "*Because every issue has two sides*"). AVN state on its website that the government and the medical community, in general, "*exaggerate the safety and benefit profiles of vaccinations whilst downplaying their risks.*" AVN state it was formed with the express purpose of:

- providing medically-referenced information on vaccine safety and effectiveness;
- lobbying to ensure that vaccinations are never made compulsory for Australian children; and
- supporting those who have chosen not to vaccinate or to vaccinate selectively.

AVN disseminates information to the public via a variety of mediums. These include its website, www.avn.org.au, the magazine entitled 'Living Wisdom' (which ceased publication in January 2013), its Facebook page, Twitter account and YouTube. Meryl Dorey, the former President, has also held numerous radio interviews.

The Commission investigated whether information published and disseminated by AVN may be misleading and inaccurate. The investigation focused on numerous pieces of information provided on AVN's website and some information disseminated on AVN's Facebook page.

The investigation found that AVN provides information on vaccination that is misleading to the average reader because it is either incorrect, inaccurately represented or because it has been taken out of context. Specifically:

- AVN make specific assertions about the efficacy of the Gardasil vaccine. They state that the connection between Human Papillomavirus (HPV) and cervical cancer is tenuous at best and incomprehensive at worst; that the vaccine contains only four of the 100 strains of HPV and therefore its use is a "*shot in the dark*"; and that it is an experimental vaccine with no proven record of safety or effectiveness. What AVN fail to qualify is that Gardasil contains the four strains of HPV that have the greatest potential to cause cancer; that the link between HPV and cervical cancer has been established beyond reasonable doubt; and that significant research went into assessing the probable safety and efficacy of Gardasil before it was ever used in humans, and since its use extensive worldwide data on its safety and efficacy has been collected.
- AVN assert that the pertussis vaccine can't protect against a new strain of pertussis, and that 84% of cases in the community are caused by this new strain. Further, AVN claim that the administration of the new acellular vaccine sometimes requires surgery at the injection site and attributes this to the change in the vaccination schedule with the removal of the 18-month booster. It is incorrect to state that the vaccine can offer no protection against the new strain at all; and there is no evidence of severe local reactions to the administration of the acellular vaccine that requires surgical intervention at the injection site. Further, the removal of the 18-month booster dose from the vaccination schedule was based on a study that evidenced protection from pertussis was maintained until 6 years of age when the primary vaccine course is given at two, four and six months of age.

- AVN state that “*vaccines have never been tested, either individually or in combination.*” This statement is incorrect as all vaccines available in Australia must pass stringent safety testing before being approved for use by the Therapeutic Goods Administration (TGA). This testing is required by law and is usually done over many years during the vaccine’s development. There is also ongoing review of both vaccine safety and efficacy through post-marketing clinical trials and surveillance of disease and vaccine adverse events.
- AVN assert that “*all whole cell DTP vaccines contain mercury in the form of thiomersal*” and that it is one of the most toxic substances known to man and has been linked with autism. In the past, the whole cell pertussis vaccine used in Australia did contain thiomersal, however even if the maximum possible number of doses were given, it is unlikely that the World Health Organisation’s (WHO)¹ recommended limit of exposure per kilogram of body weight would have been exceeded. Further, thiomersal is not present in any of the vaccines on the current National Immunisation Program for young children. In 2012, the WHO’s Global Advisory Committee on Vaccine Safety² reviewed available information on the safety of thiomersal and concluded that the levels of thiomersal attained in the body from cumulative doses of vaccines do not reach toxic levels, making a causal association between thiomersal in vaccines and autism implausible.
- AVN provide links on their website to 68 journal studies that they consider support vaccine/autism causation. On reading the studies it is apparent that most describe an association between autism or other neurological disorders with vaccines or other environmental exposures, but they make no claim of causality. The subject of any link between vaccines and autism has been examined by a number of expert professional groups, none of which have substantiated any link. In fact, a study carried out by the Institute of Medicine³ in 2011 favours rejection of a causal relationship between the measles, mumps and rubella (MMR) vaccine and autism.
- AVN use data from the United States Vaccine Adverse Event Reporting System (VAERS) on the AVN website. However when they use the data they do not qualify that no cause-and-effect relationship has been established. This is because VAERS collects data on *any* adverse event following vaccination and it is specifically stated that any report of an adverse event to VAERS is not documentation that a vaccine caused the event.
- On the AVN website there is the headline ‘*Nurses don’t trust vaccines*’. Under this AVN have referenced an article from the Vaccine journal about a study conducted into the low rates of vaccinations among nurses who treat infants. AVN summarised the study conducted as conveying that a large number of nurses are saying no to vaccination because they don’t trust the way in which vaccines have been promoted.

¹ WHO is the directing and coordinating authority for health within the United Nations system. It is responsible for providing leadership on global health matters, shaping the health research agenda, setting norms and standards, articulating evidence-based policy options, providing technical support to countries and monitoring and assessing health trends.

² GACVS was established in 1999 by the World Health Organisation to respond promptly, efficiently, and with scientific rigour to vaccine safety issues of potential global importance. Its members are acknowledged experts from around the world in the fields of epidemiology, statistics, paediatrics, internal medicine, pharmacology and toxicology, infectious diseases, public health, immunology and autoimmunity, drug regulation and safety.

³ The United States Institute of Medicine is an independent, non-profit organisation that works outside of government to provide unbiased and authoritative advice to decision-makers and the public. It was established in 1970 and it is the health arm of the National Academy of Sciences.

When you read the article in context it becomes apparent that the study was performed on a group of nurses in Israel with the total number of interviewees being very small at 25. The findings from this sample size are much too small for statistical significance and its general applicability is doubtful. Further, the authors of the article do not definitively state that non-compliance is "*embedded deep in the mistrust nurses have towards health authorities and the nurses' desire for autonomy*" but they suggest that this might be the case with these nurses in Israel.

- AVN state that many of the Anti-D injections contain thiomersal. They also state that late cord clamping and lotus birth minimises or completely eliminates the exchange of blood after birth. In fact, the Anti-D injections used in Australia are made from Australian plasma and are free from thiomersal. Further, late cord clamping and lotus birth does not completely eliminate the exchange of blood after birth. There can still be contamination of the maternal system by foetal blood and there is an increase in post-partum haemorrhage and worsening of foetal jaundice.

Warning

The Commission considers that AVN's dissemination of misleading, misrepresented and incorrect information about vaccination engenders fear and alarm and is likely to detrimentally affect the clinical management or care of its readers. As seen through the examples provided above, AVN does not provide reliable information to enable its readers to make proper and informed decisions about vaccination.

Given the issues identified with the information disseminated by AVN, the Commission urges caution is exercised when using AVN's website or Facebook page to research vaccination.

The Commission has recommended that AVN amend its published information with regard to the above issues and the Commission will monitor the implementation of these recommendations.