# A Study of the Association of Vaccinations and Injections with Food Allergies

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**Objective:** To see if the cause of the food allergy "epidemic" is due to vaccinations.

**Methods:** I did a major search of Internet sources: patents, medical studies, allergy sites, allergy discussions, vaccination information sites both pro and con, animal studies, veterinary websites, vaccine package inserts, etc. and correlated the information.

**Results:** Vaccinations are given to create an immune response in the individual. Any protein in the vaccine, especially if given with an aluminum adjuvant, can create an immune response in some people. Many vaccine ingredients are protected by trade secret and are not listed on the package insert. But many of these ingredients can be found listed in patents for vaccine adjuvants and culture mediums. For every food allergy but one (I would need to read Japanese patents to find that one), I have found that food listed in a patent. I found that animals who are vaccinated also suffer from food allergies and that food allergies are nearly unknown in unvaccinated people and animals. There are so many factors that correlate with vaccines as the main cause of food allergies that the question now isn't if food allergies are caused by vaccines but why some people don't develop food allergies from vaccines. It is quite possible given the large number of types of foods used in vaccine production, that the vaccinated public has many undiagnosed food allergies.

**Conclusions:** **Vaccines and injections are the main cause of food allergies**. The first allergy in children is casein (milk) allergy due to the casein and aluminum adjuvant in the DTaP – Diphtheria, tetanus and pertussis (whooping cough) shot which is often given at 2-3 months of age. Since all babies are fed milk in some form immediately, this is the first allergy to be recognized. The next allergy to usually show up at about 3 months of age is soy allergy due to the soy peptone broth and aluminum adjuvant in the Pneumococcal Conjugate vaccine given at approximately 2 months of age. Since soy formula is frequently fed to infants, this allergy also shows up early. Peanut and nut allergies have shown up as early as 6 months of age in children. Peanut oil is a common trade secret ingredient in vaccine adjuvants. Some manufacturers rely more predominantly on other oils in the vaccines - sesame oil in the vaccines used in Israel and parts of Europe or fish oil which is used in the Scandinavian countries. At 6 months of age, children can have had as many as 16 vaccinations several of which can contain mixed oils in the vaccine adjuvant. Many different food oils can be used in the vaccine adjuvant and even more foods used in the culture medium. These ingredients do not have to appear on the package insert because they are considered "inactive" and are a protected trade secret. Most physicians do not know that all of the ingredients do not appear on the package insert. Vaccines are not identical from batch to batch or even from dose to dose. The food protein remaining from the oils in the adjuvant or the culture medium varies which is why all the children getting vaccinated from a particular batch of vaccine may not all get the same food allergies.

**Background:** I read in the book Healing the New Childhood Epidemics, Autism, ADHD, Asthma, and Allergies, by Kenneth Bock, M.D. and Cameron Stauth [1]about his theories about allergies and how he is actually healing the children. The puzzle of why peanuts should be a major allergy, I found interesting. What if peanut products are used in childhood immunizations? If that was the case, then the source of the allergy was in the shot that was injected into the child's body and directly caused the allergy. As I investigated peanut allergies, my study expanded to include all food allergies.

**Food allergies have become a major problem in "industrialized countries":**

***Australia:*** "1 in 20 Australian children suffers from a potentially fatal food allergy..." [2]

***Canada:*** "...nearly 6 % of children suffer from food allergies..." [3]"...the Anaphylaxis Canada's Summer 2001 newsletter states that "approximately 4% of children and 2% of adults have developed a potentially lethal allergy to food."[4]

***France:*** 4 to 8.5% of preschool children have food allergies [5]

***Greece:*** 6% -8% of infants and young children have food allergies [6]

***Italy:*** "An estimated 6 to 8% of the Italian population has food allergies." [7]

***Japan:*** "about 10% of Japan's population suffers from food allergies" [8]

***Malaysia:*** "about 30% of young children are likely to develop allergic disorders in the first five years of life" [9]

***Netherlands:*** about 4.8% of the population has food allergies [10]

***South Africa:*** up to 6% of young children have food allergies [11]

***Sweden:*** approximately 10% of children have food allergies [12]

***USA:*** 6 to 8 percent of children 4 years of age or under have food allergies [13]

***UK:*** 5-7% of infants have food allergies [14]

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In populations with low vaccination rates, food allergies statistics are much lower or non-existent. "...developing countries have almost no allergy..." [15] The Hispanic population of the United States has a lower vaccination rate and a lower food allergy rate. [16] [17]

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The fact that vaccinations can cause allergies seems to have been forgotten recently. It has been known since 1839 that injections of food protein cause "allergy-like" symptoms in animals. [18] Gelatin when injected along with an alum adjuvant has been known to cause gelatin allergy. [19] Jones-Mote Hypersensitivity Protein-Adjuvant Reactions says that "any pure protein mixed with adjuvant could induce an immune response." [20] Injections of food protein are used to induce allergies in animals. [21] [22] It has been known that the egg protein in vaccines can cause egg allergy in children. [23] Any ingredient in a vaccine can cause an allergy. [24]

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**The known ingredients cause allergies.** The first allergy in children is casein (milk) allergy due to the casein and aluminum adjuvant in the DTaP – Diphtheria, tetanus and pertussis (whooping cough) shot which is often given at 2-3 months of age. [25] [26] Since all babies are fed milk in some form immediately, this is the first allergy to be recognized. The next allergy to usually show up at about 3 months of age is **soy allergy** [27] due to the soy peptone broth and aluminum adjuvant [28] in the **Pneumococcal Conjugate** vaccine given at approximately 2 months of age. Since soy formula is frequently fed to infants, this allergy also shows up early. The aluminum adjuvant can cause **aluminum allergy**. [29] **Calf serum** [30] causes **beef allergy**. [31] **Yeast** [32] allergy is a problem for some people. [33] **Chick embryo cell culture** in the MMR [34] has been known to cause egg allergy. [35] **Hydrolyzed gelatin** from pork is an ingredient in the **Varicella** vaccine. [36] "Poorly hydrolyzed bovine gelatin was immunogenic when administered with alum adjuvant." Even though the "well" hydrolyzed bovine gelatin is less immunogenic, it can still cause allergies. [37] It is also possible that the **monkey kidney cells** in the Diphtheria, Tetanus, Pertussis (DTP) [38] is responsible for the monkey fur allergy in some race car drivers. [39] **Chinese Restaurant Syndrome** has all the same symptoms as **monosodium glutamate allergy** which could be due to the MSG in the **MMR vaccine**. [40] [41] The MMR has **neomycin** as an ingredient that causes allergies. [42] [43] **Thimerosal** which is still used in Fluval causes allergies, too. [44] [45]

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**Many of the ingredients in vaccines are not listed on the package insert** because they are considered "inactive". They are considered a trade secret and by law cannot be revealed by the government nor do they appear on the package insert. [46] [47] [48] [added 5/11/2010] **Peanut oil is generally recognizes as safe (GRAS)** and does not have to appear as an ingredient in pharmaceuticals. [93] The **FDA gave pharmaceutical companies the power to decide other ingredients are generally recognized as safe** without needed specific approval from the FDA. [94]

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Even though the only way we could find out the exact ingredients used in vaccines is by paying to have them analyzed, we can find out what foods are likely to be used in vaccines by reading **patents for vaccine adjuvants and culture mediums**. For every food allergy that I could find mentioned on the Internet (with the only exception of squid which causes allergy in Japan) I have found that food listed as an ingredient in a vaccine adjuvant or culture medium.

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**This is a list of the oils that I have found listed as an ingredient in vaccine adjuvants:** almond oil, animal oils, apricot oil, avocado oil, babassu oil, black currant seed oil, borage oil, canola oil, castor oil, castor oil hydrogenated, chicken fat oil, coconut oil, cod liver oil, corn oil, cottonseed oil, cottonseed oil hydrogenated, cottonseed oil partially hydrogenated, emu oil, evening primrose oil, fish oils, flax seed oil, grapeseed oil, groundnut oil, hazelnut oil, jojoba oil, lard oil, linseed oil, lupin oil, Menhaden oil, mineral oil, mink oil, mustard seed oil, oat oil, olive oil, orange roughy oil, palm kernel oil, palm oil, palm oil hydrogenated, peanut oil, rapeseed oil, rice oil, rye oil, safflower oil, sesame oil, shark liver oil, soybean oil, soybean oil partially hydrogenated, squalane, sunflower oil, teff oil, terpene oils [derived from pine trees (turpentine) and oil contained in the peels of citrus fruits (orange oil)], triticale oil, walnut oil, wheat germ oil. [49] [50] [51] [52] These oils can be mixed in any combination.

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**Any foods missed in the vaccine adjuvant seems to have been covered in the list of foods in culture mediums.** The growth medium can have agar, gelatin, fruit and vegetable wastes, left-over animal parts (cow brains and hearts), yeast (from brewing) or digests of plants or animal slurries (peptones are one example of this category). [53] This patent for fermented hydrolyzed medium [54] lists enough variety of ingredients to show that even hay fever allergies can be due to vaccines: "Vegetables preferably used are of leaf and root types e.g. various cabbages, beets, rutabaga, carrot, pumpkin, spinach, beet, watermelon, melon, peanut, artichoke, eggplant, pepper sweet, asparagus, and tomato. Fruits to be preferably used are apples, pears, kiwi, plums, citrus, apricots, grapes/raisins, mango, guava, bananas, biwa, cornel, fig, cherry plum, quince, peach, pomegranate, avocado, pineapple, date, papaya. Berries preferably include raspberry, bilberry, guelder rose, dog rose, ash berry (red and black), currant (red, black, and white), sea-buckthorn berries, gooseberry, schizandra, blackberry, cowberry, bird cherry, cranberry, sweet cherry, cherry, and strawberry. Preferred herbs and their roots are ginseng, celery, parsley, dill, dandelion, nettle, ginseng, and spinach. Preferred high protein products are offals including spleen, kidney, heart, liver, brains, maw, and stomach as well as mushrooms, sea products (fish, mussel, plankton for example), eggs or nuts. Preferred products of beekeeping are propolis, honey, royal jelly, and pollen of flower."

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The next question is **can't these food proteins be eliminated from the vaccines?** No, there will always be a small residue. Let's look at peanut oil, for instance. I had thought that vaccine manufacturers would be using "pharmaceutical grade" oil but there is no such thing. [55] Even the most highly refined oil contains a small amount of protein. [56] And even if the vaccine manufacturer could eliminate all of the food protein from the culture medium, I would assume that since the bacteria were feeding off that protein, there would still be undigested food protein in the bacteria which could cause a problem.

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**There are a number of countries that manufacture vaccines.** The oils used in the vaccine adjuvant vary which accounts for the lack of peanut allergy in Israel. [57] The **Israeli** people consume peanuts in their diet. Their children are highly vaccinated. [58] Jewish children in London get peanut allergies. [59] Fewer children in Britain eat peanuts at an early age than the children in Israel. [60] This would indicate that the consumption of foods along with being vaccinated is not the cause of food allergy. They do have a problem with sesame allergy. [61] My conclusion is that the vaccines used in Israel use sesame oil and do not use peanut oil. One woman emailed me to tell me that I was wrong because Israel uses the same source of vaccines that are used in Europe. But France also has a problem with sesame allergy. [62] This would indicate that both countries use vaccines containing sesame oil. I don't have enough information about what country uses which vaccines to match the food allergies to the vaccines manufactured by specific companies.

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The study that is frequently cited saying that **Indonesia and Thailand** people do not suffer from peanut allergies [63] was erroneous. Children dismissed from the study were "sick young children and those with atopic tendency" which may have eliminated children with peanut allergy. Many children in the study reacted to peanuts in the skin prick test. The study also relied on parents to report food reactions. When I searched the Internet, I found a Thai parent quoted on the Internet saying that her child had a peanut allergy. [64] I also found a physician from Singapore stating that peanut allergy is a major problem there. [65]

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**Our vaccinated animals are getting food allergies.** Animals normally are not allergic to food. [66] Dogs are becoming allergic to peanuts, milk, and wheat. [67] Food allergy is common among dogs and cats and usually develops before the animal reaches 12 months old. [68] Searching the Internet - I found a wild elephant allergic to wheat; the elephant had been immunized. (Wheat germ oil is used as a carrier of vaccines. Wheat protein is used to manufacture vaccines/medicines.) [69]

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**The history of food allergies follows the history of vaccines and injections.** "The first case report of food allergy ***(cows' milk allergy)*** was published by Hamburger in 1901." [70] By that time we already had these vaccines: 1879 cholera, 1890 tetanus, 1896 typhoid fever, and 1897 bubonic plague. [71] In 1919 oil started to be used in vaccines instead of saline. [72] ***At Google books, the "Peanut Allergy Answer" book says 1920 was the first reference of a nut allergy.*** [73] Peanut oil was common in the U.S. long before this time (1840's). [74] More vaccines were developed: 1917 another Cholera vaccine, 1917 Typhoid vaccine (parenteral), 1921 diphtheria, 1926 pertussis (whooping cough), 1927 tuberculosis. [75] In 1934 Dr. Vaughan studied an entire village of 508 people who lived in and around Clover, Virginia. He found that 37% of the population suffered from some form of food allergy. [76] 1935 Yellow Fever vaccine, 1945 First vaccine for influenza [77] In 1945, peanut oil and beeswax was added to the **penicillin injection.** [98] When the ***first case of sesame allergy was reported in 1950***, the allergen was considered very unusual. [78]

In 1960 children received on average one or two vaccines. [79] The "Peanut Allergy Answer" book says that there was no research in the field of peanut allergy until 1976. [80] In 1980 children were up to 8-9 vaccines. [81] The ***first case of Brazil nut anaphylaxis*** in the UK occurred in 1983. [82] In ***1988 four people died of peanut allergy***. [83] The first known case of ***lupin allergy*** was 1994. [84] In 1997, the incidence of food allergy in children was approximately 1.3% [85] and ***1 in 250 young children had peanut allergy in the US.*** [86] Using combination vaccines in 1999 a minimum of 13 separate injections were needed to immunize a child from birth to age six. [87] ***In 2002, 1 in 125 young children had peanut allergy in the US***. [88] 2003, the first case of allergy to ***lingonberry.*** [89] 2008 ***one in every 17 children under the age of 3 has food allergy***. [90]

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ADDED May 11, 2010

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**"Medical literature illustrated that the only means by which mass allergy had ever been created was by injection**. Serum sickness was the first mass allergic phenomenon in history." [91]

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**"ER records, eyewitness accounts and cohort studies all pointed to a specific moment around 1990 when peanut and other food allergies in children suddenly escalated."** [92] In 1989 the recommended number of vaccines for children was more than doubled, from 10 to 24.[95]

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ADDED February 7, 2014

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Medical literature discusses "**Hypersensitivity Reaction to Vaccine Components**".[96] Delayed hypersensitivity reactions are discussed openly in medical literature addressing aluminum, thimerosal, formaldehyde, 2-phenoxyethanol, and neomycin. **"Although other constituents of vaccines, such as egg protein and gelatin, can cause immediate immunoglobulin E (IgE)-mediated hypersensitivity reactions, this article will focus primarily on delayed hypersensitivity reactions."**

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ADDED February 21, 2014

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**Wyeth Memo** - [97]memo made public. **Pharmaceutical companies spread the distribution of batches of vaccines out over a wide geographical area so the public and doctors cannot connect the occurance of death or illness to a specific vaccine batch.**

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business information." "The Act, under Third Party Information, states, 20. (1) Subject to this section, the head of a government institution shall refuse to disclose any record requested under this Act that contains a) trade secrets of a third party; b) financial, commercial, scientific or technical information that is confidential information supplied to a government institution by a third party and is treated consistently in a confidential manner by the third party; c) information the disclosure of which could reasonably be expected to result in material financial loss or gain to, or could reasonably be expected to prejudice the competitive position of, a third party; or d) information the disclosure of which could reasonably be expected to interfere with contractual or other negotiations of a third party." "

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