# **Vaccine safety: Learning from the Boeing 737 MAX disasters**

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### **Abstract**

Aircraft are designed and engineered for safety by experts who understand aeronautical engineering and safety engineering. Vaccines are developed by tinkerers using trial and error, who fail to apply basic safety engineering principles and admit that they lack understanding of the mechanisms involved in the immune response to vaccines.

Aircraft safety problems are immediately obvious. Vaccine safety problems manifest over a longer term and are easily hidden by other factors.

Boeing is liable for product safety. Vaccine makers have no liability.

Greed and incompetence defeated the hard work that went into engineering the 737 aircraft. CDC lies about autism. It took the incompetent FDA 25 years to find out that the pertussis vaccine does not prevent transmission. They still don't understand the difference between injected and ingested proteins. The incompetent CDC/ACIP flip-flopped on the Flumist vaccine - twice.

Vaccine "expert" Dr. Plotkin "believes" calf serum proteins used in vaccine manufacturing is completely removed from the product. It is not. He admits, residual protein can cause sensitization (development of allergy). He speculates that casein in milk is somehow different than calf serum proteins in regards to sensitization. He is wrong again. Dr. Richet showed us a hundred years ago, that all injected proteins sensitize. Drs. Plotkin and Offit admit it is ok to lie to parents about vaccines and autism and they do lie about it.

The Seattle Times investigated and reported the root cause of the 737 MAX disasters. They are not being dismissed as "anti-MAXXERs". But anyone who investigates and reports the root cause of vaccine-induced diseases are dismissed as "anti-vaxxers". Why?

Boeing has made numerous safety improvements in the past. HHS admitted there have been no safety improvement in vaccines for three decades.

Aeronautical engineering is well understood. Immunological mechanisms involved in vaccines are poorly understood.

The vast majority of vaccine safety claims are based on broken epidemiological studies. Unsafe vaccines and the corrupted science that covers it up is the worst scandal in the history of medicine.

# Safety engineering

Aircraft are designed and engineered for safety by experts who understand aeronautical engineering and safety engineering. There are thousands of safety specifications, developed, applied and complied with in aircraft design. Safety engineering techniques such as Failure Modes and Effects Analysis (FMEA) are used extensively to ensure product safety. Redundancy is common. As a result, when air crashes occur, they are usually not the result of a single failure but a sequence of unforeseeable events.

Vaccines are developed by tinkerers using trial and error, who fail to apply basic safety engineering principles and admit that they lack understanding of the mechanisms involved in the immune response to vaccines (1,2). No FMEA is performed for product safety. There are no safety specifications governing non-target protein content in vaccines (3–5). Sensible proposals such as requiring

bioinformatics analysis (6) and autoimmune serology (7) during clinical trials to improve vaccine safety, are ignored. No FMEA means the failure will first manifest in a vaccinated child and may not even be recognized as vaccine related. Aluminum salts are used as an immunological adjuvant in vaccines. Aluminum immunotoxicity has never been studied. Instead, the Food and Drug administration (FDA) studied aluminum pharmacokinetics and inappropriately concluded that aluminum in vaccines is safe (8). So 70 years after the introduction of aluminum adjuvant in vaccines, fundamental safety questions remain. Cochrane is studying them right now (9,10). However, their approach has fundamental limitations (11). As if that is not bad enough, Cochrane's recent history means expectations should be set even lower (12).

Aircraft safety problems are immediately obvious. They fall out of the sky and kill hundreds of people. It is is easy to see that commercial aircraft have had a pretty good record of improving safety until these 737 MAX crashes. Vaccine safety problems manifest over a longer term and are easily hidden by other factors. Therefore extreme caution is needed and the bar needs to be set even higher for safety. Vaccines can be causing damage and we may not even know about it for decades. Instead we have the opposite. The bar is set ridiculously low for vaccine safety. Many vaccine trials had follow up times of a few days (13). Fake placebos are used all the time to cheat on clinical trials (14).

## U.S. Consumer Product Safety Commission (CPSC) (15) says:

**Design** is the dominant influence on product safety. Product safety starts in the mind of the product **designers**. If all the elements of manufacturing were ranked in order of their potential effect on consumer product safety, the **design** function would lead the list. Additionally, design importantly affects subsequent decisions and practices related to materials, production, <u>testing</u>, processes, labeling, packaging and distribution.

There is **no design** involved in vaccines. Vaccines are developed using trial and error (1). Therefore they are **fundamentally unsafe**. Safety claims are based on testing alone. And vaccine makers cheat on those tests.

### Liability

Boeing is liable for product safety. Vaccine makers have no liability (16).

### Corruption, incompetence, greed and fraud

#### **Boeing**

When greed (cost-cutting) and incompetence impact the design process, it is easy to see how a single point of failure turns up in an aircraft. In the case of the 737 MAX, reliance on a single poor quality angle-of-attack sensor. Boeing of course knew about the design flaw and that's why the bug fix was available even before the crash investigations were complete. So it was greed, incompetence, corruption and fraud at Boeing and the Federal Aviation Administration (FAA) that resulted in the introduction and concealment of the flaw.

### CDC lies about autism

Vaccine "expert" Dr. Stanley Plotkin was deposed in Jan 2018 (13).

The Institute of Medicine (IOM) 2011 report concluded that there was inadequate evidence to accept or reject a causal relationship between the DTap vaccine and autism (17).

Regarding the DTap vaccine, Dr. Plotkin says (pg.249 of deposition): I would say it is logically true that you cannot say, **you cannot point to proof that it doesn't cause autism**.

The Centers for Disease Control (CDC) however, lies and makes a blanket claim that vaccines do not cause autism (18).

## FDA is incompetent

Nearly 25 years after licensing the acellular pertussis vaccine, the FDA discovered in 2014 (19) that the vaccine does not prevent disease transmission. They approve and license vaccines based on **assumptions** rather than evidence.

The FDA's ridiculous opinion is that it is safe to inject proteins because they are part of our diet (20). By that line of reasoning, since cobra venom is a protein that is safe to eat for most people, it will be approved by the FDA as a safe vaccine ingredient.

# CDC/ACIP's incompetence

The CDC's Advisory Committee on Immunization Practices (ACIP) voted for the Flumist vaccine before they voted for and against it (21–23). This flip-flopping committee fails to understand how vaccines work or fail. It is all trial and error. The general public are the guinea pigs in their vast laboratory.

### **EMA** is incompetent

The European Medicines Agency (EMA) approved a methylprednisolone injection used to treat allergic reactions to allergens such as milk. The injection itself contained milk proteins. So the reaction will get worse and doctors will think one injection is not enough and administer more (24). These are the insane "regulators" we depend on for vaccine safety.

### Vaccine "experts" demonstrate incompetence

On Pg. 316 of the deposition:

Plotkin: Well, frequently calf serum is used to make the vaccine, but calf serum is removed before the vaccine is used because you don't want to sensitize the vaccinee to cows.

So Plotkin agrees that a vaccine containing calf serum proteins can sensitize (cause the development of allergy in) the vaccinee to cows.

Attorney Siri: And that would be -- and they could develop an allergy to it, right?

Plotkin: If there were, yes.

Attorney Siri: If there were calf serum in the vaccines, correct?

Plotkin: Yes.

Attorney Siri: And this is one of the ingredients that remains in the vaccine?

Plotkin: I do not believe so.

Believe so? Speculation? It is about beliefs, speculations and assumptions. There are no specifications or regulations to control the level of purification (5) and amounts of residual protein in the vaccine.

Dr. Plotkin is wrong about removal of bovine/calf serum proteins from vaccines. It is of course true that there are purification steps in vaccine manufacturing that **reduce**, **not completely remove** calf serum proteins from vaccines. Allergic reactions following vaccine administration, in people allergic to calf serum proteins is proof that vaccines do contain residual calf serum proteins. And of course, it is the same calf serum proteins in a previous vaccine that caused the development of allergy to those proteins in people (and animals), in the first place (25–29) . Similarly, calf serum itself, can contain trace amounts of any bovine protein. Again, because there are no specifications or regulations to control the level of purification and amounts of residual protein. Greedy vaccine makers refuse to invest in better technology to clean up these residual proteins. They have no liability, competition or regulatory incentive to clean up. So they sicken us with their dirty vaccines.

Attorney Siri:

Do you know if any vaccines contain cows' milk in it or products from cow --

Plotkin: Cows' what?

Attorney Siri: Any product derived from cows' milk, any component derived from cows' milk?

Attorney Siri: could be --

Plotkin: Casein --

Attorney Siri: -- could be used.

Attorney Siri: Dr. Plotkin -- Dr. Plotkin, and if there Plotkin: Oh, well, could be, casein, for example,

Attorney Siri: was casein in the vaccine, a child could become sensitized to that, correct?

Plotkin: No, I'm not sure about that.

Attorney Siri: You're not sure anymore about that?

Plotkin: No.

Attorney Siri: Yeah.

Plotkin: I think there are other sensitizing things in calf serum.

When cornered into admitting that milk proteins such as casein in vaccines have caused the epidemic of milk allergy, Dr. Plotkin evades the question with "I'm not sure about that." and speculates about "other sensitizing things in calf serum". This is the vaccine "expert" who wrote the book on vaccines - Plotkin's Vaccines (30). If vaccine safety science is settled, why would a vaccine "expert" not be sure about such a fundamental and simple question? The truth is every protein in the vaccine, including milk proteins cause the development of allergy to those protein. The IOM came to this conclusion after reviewing the entire literature from 1950 to 2011 (17). And of course, injected proteins causing allergy has been known for a hundred years (31).

Dr. Offit cites Ameratunga et al. (32) as evidence that vaccines do not cause autoimmunity, at the Vaccine Education Center website of the Children's Hospital of Philadelphia. This betrays a fundamental lack of understanding of immunological concepts by both parties, as detailed here (33).

For vaccine "experts", lying is ok

The IOM concluded in its 2012 report that (17):

"Conclusion 10.6: The evidence is inadequate to accept or reject a causal relationship between diphtheria toxoid, tetanus toxoid, or acellular pertussis—containing vaccine and autism."

On pg. 255 of the deposition, Attorney Siri asks, referring to the IOM conclusion above: And so for that reason, you're okay with telling the parent that DTaP/Tdap does not cause autism even though the science isn't there yet to support that claim? Plotkin responds: Absolutely.

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So to push vaccines, it is ok to lie about vaccine safety to parents.

Here is Dr. Offit lying about the same thing.

The Notice of proposed rulemaking (NPRM) (34), only specifically states:

"1. The scientific evidence favors a rejection of a causal relationship between MMR vaccine and autism.", based on the IOM 2012 (17) report.

Commenting on the above NPRM, Dr. Offit wrote (35):

"Given the controversy on the issue, however, it would be helpful to explicitly refer to autism in this context – as noted in the NPRM, the evidence supports rejection of a connection between vaccines and autism."

Dr. Offit took NPRM's MMR vs. autism conclusion, lied and generalized it to cover <u>all vaccines and autism</u>.

### Corruption of the media and the scientific inquiry process

Just like the vaccine makers and the FDA/CDC declared that vaccines are safe, Boeing and the FAA declared the 737 MAX was safe.

The 737 MAX killed 346 people.

Vaccines do not always kill immediately. They can maim and kill over time. This makes it easier to hide vaccine safety problems. So the safety scrutiny should be even more intense.

The Seattle Times investigated and reported numerous flaws in the 737 MAX design and certification that led to the crashes. Similarly, numerous investigators have documented fundamental vaccine safety flaws (36–38).

Are The Seattle Times investigators being dismissed as a bunch of "anti-MAXXERs"? Should we not just trust the Boeing and FAA experts and ignore The Seattle Times? Boeing and the FAA are the aircraft safety experts. What would a bunch of The Seattle Times investigators know about aircraft safety?

With vaccines, the mainstream media **never** investigates safety problems. They blindly trust the "experts". We are told that everyone should blindly trust these "experts". Anyone who investigates and

reports vaccine safety problems are immediately attacked, ridiculed and dismissed as "anti-vaxxers"? Why?

Aeronautical science is well understood. Not so for vaccines. "Experts" admit they are clueless about mechanism involved in vaccines (1). "Experts" admit they are clueless about the mechanisms involved in adjuvants used in vaccines (2). "Experts" admit they are clueless about the root cause of food allergies, asthma, autism and autoimmune disorders after billions and decades wasted.

Aeronautical science respects and uses fundamental findings such as Bernoulli's principle from 1738. Medicine ignores fundamental concepts such as Charles Richet's Nobel winning 1913 discovery that injecting proteins causes the development of allergy to those proteins. Thus they inject people with numerous proteins and sicken millions with food allergies (5,39), autism (40), asthma (41) and numerous other diseases that are still being discovered (42).

Instead, in the case of the 737, even the FBI is getting involved. The Seattle Times' reporting was proven right as Boeing's software fix addressed exactly the issues identified and reported. This proves that our **corporations and regulators cannot be trusted for product safety**. With corruption, incompetence, greed and fraud involved, **you cannot trust the experts**. This proves that when corruption, incompetence and greed are involved, safety problems need not always be complex. Safety problems can be identified quickly even by non-experts, using common sense.

Boeing made tremendous safety improvements over decades but the 737 MAX shows greed, incompetence and corruption can strike at any time. In contrast, vaccine makers have **failed** to make any safety improvements in 30 years even though **continuous product safety improvement is required by law**. The Department of Health and Human Services (HHS) admitted that they broke the law repeatedly and made **no** safety improvements to vaccines for 30 years (16).

### Epidemic of epidemiological fraud

Most doctors don't bother to understand the mechanism involved in diseases. It is all about associations (43).

The US Institute of Medicine committee in their 2011 report (17) on Adverse Effects of Vaccines: Evidence and Causality

wrote:

"The committee concluded the evidence convincingly supports 14 spe-cific vaccine—adverse event relationships. In all but one of these relation-ships, the conclusion was based on strong mechanistic evidence with the epidemiologic evidence rated as either limited confidence or insufficient."

So in an overwhelming 93% (13 of 14) cases, mechanistic studies provided convincing evidence and epidemiological studies failed to do so. At best, epidemiological studies are weak, have numerous sources of confounding and offer little value. At worst, they mislead, sicken millions and setback science by decades (43–45). Epidemiological study results are misinterpreted leading to type II errors (46). The vast majority of vaccine safety claims however, are based on such broken epidemiological studies.

Vaccines are not created equal. As described before, since vaccines lack specifications for non-target antigens, it is **impossible** to study their safety. Replication of studies is key to science. Replication

requires clear characterization of the intervention (vaccines). Lack of specifications makes that impossible. So the vast majority (if not all) vaccine epidemiological studies are invalid. The details are described in my comments published in the Annals of Internal Medicine, against Hviid et al. (47), which is another invalid study. It is fashionable among researchers to combine numerous such invalid studies in a meta-analysis which can then claim to be a "large study of millions". Meta-analysis and "systematic reviews" attempt to launder or squeeze gold out of these piles of garbage. They just end up producing mega-piles of meta-garbage.

#### Conclusion

In spite of the above meticulous aircraft design and engineering process, in spite of product liability, we had the 737 MAX disasters because all that good work was defeated by greed, corruption, incompetence and fraud. Due to the nature of air disasters that involve hundreds of deaths in one event, media coverage results in swift safety actions such as grounding the fleet. Within days of the second 737 MAX disaster, The Seattle Times had investigated and reported the root cause.

In contrast, vaccines have none of these safeguards. They are not even designed to be safe. And there is at least an equal measure of greed, corruption, incompetence and fraud in the vaccine industry and regulatory agencies. Vaccine makers have even corrupted medical science itself (48–50) to make vaccines look safe. Unlike air disasters, individual vaccine victims receive no media coverage. Even when vaccine disasters such as Pandemrix induced narcolepsy (51,52) receive media coverage years after sickening people, there is no safety action on other vaccines that have the same failure mode (nontarget protein induced autoimmunity (53)). Unsafe vaccines therefore continue to maim and kill. The media in contrast never even investigates vaccine safety. The Institute of Medicine concluded that for the vast majority (135 vaccine adverse event pairs) there is no evidence to either accept or reject a causal relationship to vaccines (17). In other words, there is no science behind vaccine safety claims. Vaccine safety is thus an oxymoron. As if the failure of investigative journalism is not bad enough, the mainstream media lies that vaccine science is settled, when the science does not even exist.

The medical community admits they don't know the root cause of food allergies, asthma, autism, or autoimmune disorders. All these diseases are immune mediated diseases. Vaccines are the most widely administered immunomodulatory intervention. Vaccinologists admit they have no understanding of the immunological mechanisms involved with vaccines or adjuvants (1,2). With such huge fundamental knowledge gaps in immunology, any claim of vaccine safety can only be described as organized scientific fraud.

Vaccine victims like myself and other volunteers are now involved in performing FMEA for vaccines (36), after the fact, after millions have been injured because the people whose job it is to perform such safety engineering have failed miserably.

Eternal vigilance they say is the price of liberty. Eternal distrust is the price we pay for a corrupted system. Never trust corporations, government regulators or the media. Question everything.

Independent institutions such as the Insurance Institute for Highway Safety, offer some protection in the case of automobile safety. We need similar independent entities for aircraft and vaccine safety.

The government and the media lied about Iraqi WMDs. The FAA and Boeing lied about 737 MAX safety. Vaccine makers and the FDA/CDC lie about vaccine safety.

Corrupt corporations, the FAA/FDA/CDC, the media are all monsters in the same swamp. All of them kill and maim. The swamp must be drained.

Unsafe vaccines and the corrupted science that covers it up is the worst scandal in the history of medicine.

#### References

- 1. Pulendran B, Ahmed R. Immunological mechanisms of vaccination. Nat Immunol. 2011 Jun;12(6):509–17.
- 2. Mojsilovic SB. Immunological effects of adjuvants, their mechanisms, and relevance to vaccine safety. Cent Eur J Paediatr Vol 13, No 1 Cent Eur J Paediatr [Internet]. 2017; Available from: http://www.paediatricstoday.com/index.php/pt/article/view/282
- 3. Arumugham V. Pharmacovigilance is no substitute for good vaccine design [Internet]. The BMJ. 2018. Available from: https://www.bmj.com/content/362/bmj.k3948/rr-11
- 4. Arumugham V. Pandemrix and Arepanrix vaccine safety analysis and scrutiny fell short [Internet]. The BMJ. 2018. Available from: https://www.bmj.com/content/363/bmj.k4152/rr-14
- 5. Arumugham V. Evidence that Food Proteins in Vaccines Cause the Development of Food Allergies and Its Implications for Vaccine Policy. J Dev Drugs. 2015 Oct;04(04):1–3.
- 6. Verdier F. Chapter 14 Preclinical Safety Evaluation of Vaccines A2 Thomas, John A. In: Fuchs RLBT-B and SA (Third E, editor. San Diego: Academic Press; 2003. p. 397–412. Available from: http://www.sciencedirect.com/science/article/pii/B9780126887211500155
- 7. Wraith DC, Goldman M, Lambert P-H. Vaccination and autoimmune disease: what is the evidence? Lancet (London, England). 2003 Nov;362(9396):1659–66.
- 8. Arumugham V. Ignoring immunotoxicity of aluminum adjuvants in vaccines, won't make it go away [Internet]. The BMJ. 2018. Available from: https://www.bmj.com/content/360/bmj.k1378/rr-14
- 9. Djurisic S, Jakobsen JC, Petersen SB, Kenfelt M, Klingenberg SL, Gluud C. Aluminium adjuvants used in vaccines. Cochrane Database Syst Rev [Internet]. 2018;(7). Available from: https://doi.org//10.1002/14651858.CD013086
- 10. Djurisic S, Jakobsen JC, Petersen SB, Kenfelt M, Gluud C. Aluminium adjuvants used in vaccines versus placebo or no intervention. Cochrane Database Syst Rev [Internet]. 2017;(9). Available from: http://dx.doi.org/10.1002/14651858.CD012805
- 11. Arumugham. Comment on: Aluminium adjuvants used in vaccines [Internet]. Cochrane Database of Systematic Reviews. John Wiley & Sons, Ltd; 2018 [cited 2019 Feb 16]. Available

- from: https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD013086/detailed-comment/en?messageId=167025477
- 12. Ioannidis JPA. Cochrane crisis: Secrecy, intolerance and evidence-based values. European journal of clinical investigation. England; 2018. p. e13058.
- 13. STATE OF MICHIGAN IN THE CIRCUIT COURT FOR THE COUNTY OF OAKLAND 3
  [Internet]. [cited 2019 Mar 19]. Available from:
  http://www.cafepeyote.com/files/Plotkin\_Deposition\_Transcript\_-\_Matheson\_Case\_-\_2018-01-11.pdf
- 14. Jorgensen L, Gotzsche PC, Jefferson T. The Cochrane HPV vaccine review was incomplete and ignored important evidence of bias. BMJ evidence-based Med. 2018 Jul;
- 15. HANDBOOK FOR MANUFACTURING SAFER CONSUMER PRODUCTS [Internet]. 2006 [cited 2019 Mar 30]. Available from: https://www.cpsc.gov/s3fs-public/pdfs/blk\_pdf\_handbookenglishaug05.pdf
- 16. ICAN HHS Stipulated Order [Internet]. 2018. Available from: http://icandecide.org/government/ICAN-HHS-Stipulated-Order-July-2018.pdf
- 17. Stratton K. Adverse Effects of Vaccines: Evidence and Causality [Internet]. Stratton K, Ford A, Rusch E, Clayton EW, editors. Washington, DC: The National Academies Press; 2012. Available from: https://www.nap.edu/catalog/13164/adverse-effects-of-vaccines-evidence-and-causality
- 18. CDC. Vaccines do not cause autism [Internet]. [cited 2019 Apr 5]. Available from: https://www.cdc.gov/vaccinesafety/concerns/autism.html
- 19. Warfel JM, Zimmerman LI, Merkel TJ. Acellular pertussis vaccines protect against disease but fail to prevent infection and transmission in a nonhuman primate model. Proc Natl Acad Sci. 2014 Jan;111(2):787–92.
- 20. Research C for BE and. Vaccine Safety & Damp; Availability Common Ingredients in U.S. Licensed Vaccines. [cited 2019 Apr 5]; Available from: https://www.fda.gov/biologicsbloodvaccines/safetyavailability/vaccinesafety/ucm187810.htm
- 21. Grohskopf LA, Sokolow LZ, Fry AM, Walter EB, Jernigan DB. Update: ACIP Recommendations for the Use of Quadrivalent Live Attenuated Influenza Vaccine (LAIV4) United States, 2018–19 Influenza Season. MMWR Morb Mortal Wkly Rep [Internet]. 2018 Jun 8 [cited 2019 Apr 6];67(22):643–5. Available from: http://www.cdc.gov/mmwr/volumes/67/wr/mm6722a5.htm?s\_cid=mm6722a5\_w
- 22. Notice to Readers: Expansion of Use of Live Attenuated Influenza Vaccine (FluMist®) to Children Aged 2--4 Years and Other FluMist Changes for the 2007--08 Influenza Season [Internet]. [cited 2019 Apr 15]. Available from: https://www.cdc.gov/mmwr/preview/mmwrhtml/mm5646a4.htm

- 23. Grohskopf LA, Sokolow LZ, Broder KR, Walter EB, Bresee JS, Fry AM, et al. Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices United States, 2017–18 Influenza Season. MMWR Recomm Reports [Internet]. 2017 Aug 25 [cited 2019 Apr 15];66(2):1–20. Available from: http://www.cdc.gov/mmwr/volumes/66/rr/rr6602a1.htm
- 24. Medicines Agency E. PRAC recommends that injectable methylprednisolone products containing lactose must not be given to patients allergic to cow's milk proteins [Internet]. 2017 [cited 2019 Apr 19]. Available from: www.ema.europa.eu/contact
- 25. Mackensen A, Drager R, Schlesier M, Mertelsmann R, Lindemann A. Presence of IgE antibodies to bovine serum albumin in a patient developing anaphylaxis after vaccination with human peptide-pulsed dendritic cells. Cancer Immunol Immunother. 2000 Jun;49(3):152–6.
- 26. de Silva R, Dasanayake WMDK, Wickramasinhe GD, Karunatilake C, Weerasinghe N, Gunasekera P, et al. Sensitization to bovine serum albumin as a possible cause of allergic reactions to vaccines. Vaccine. 2017 Mar;35(11):1494–500.
- 27. Debiec H, Lefeu F, Kemper MJ, Niaudet P, Deschenes G, Remuzzi G, et al. Early-childhood membranous nephropathy due to cationic bovine serum albumin. N Engl J Med. 2011 Jun;364(22):2101–10.
- 28. Fuchtenbusch M, Karges W, Standl E, Dosch HM, Ziegler AG. Antibodies to bovine serum albumin (BSA) in type 1 diabetes and other autoimmune disorders. Exp Clin Endocrinol Diabetes. 1997;105(2):86–91.
- 29. Gershwin LJ, Netherwood KA, Norris MS, Behrens NE, Shao MX. Equine IgE responses to non-viral vaccine components. Vaccine. 2012 Dec;30(52):7615–20.
- 30. Plotkin SA, Orenstein WA, Offit PA. Plotkin's vaccines.
- 31. Charles Richet Nobel Lecture: Anaphylaxis NobelPrize.org [Internet]. [cited 2019 Feb 12]. Available from: https://www.nobelprize.org/prizes/medicine/1913/richet/lecture/
- 32. Ameratunga R, Gillis D, Gold M, Linneberg A, Elwood JM. Evidence Refuting the Existence of Autoimmune/Autoinflammatory Syndrome Induced by Adjuvants (ASIA). J Allergy Clin Immunol Pract [Internet]. 2017 Nov 1 [cited 2019 Mar 13];5(6):1551-1555.e1. Available from: https://www.sciencedirect.com/science/article/pii/S2213219817305172
- 33. Arumugham V. Ameratunga et al. fail to refute Autoimmune/autoinflammatory syndrome induced by adjuvants (ASIA) [Internet]. 2019 [cited 2019 Apr 10]. Available from: https://doi.org/10.5281/zenodo.2596908
- 34. HHS. National Vaccine Injury Compensation Program: Revisions to the Vaccine Injury Table [Internet]. Federal Register. 2015. Available from: https://www.federalregister.gov/documents/2015/07/29/2015-17503/national-vaccine-injury-compensation-program-revisions-to-the-vaccine-injury-table

- 35. Offit PA. Comment Re: HRSA-0906-AB01, National Vaccine Injury Compensation Program: Vaccine Injury Table Revisions [Internet]. 2015. Available from: http://www.regulations.gov/contentStreamer?documentId=HRSA-2015-0003-0015&attachmentNumber=1&disposition=attachment&contentType=pdf
- 36. Arumugham V. Vaccines and Biologics injury table based on mechanistic evidence Mar 2019 [Internet]. 2019. Available from: https://doi.org/10.5281/zenodo.2582634
- 37. Hoyt AEW. Presentation: Changes in IgE Levels Following One-Year Immunizations in Two Children with Food Allergy (WAO Symposium on Food Allergy & Discrete Microbiome) [Internet]. 2018 [cited 2019 Jan 29]. Available from: https://wao.confex.com/wao/2015symp/webprogram/Paper9336.html
- 38. Shoenfeld Y, Agmon-Levin N. "ASIA" autoimmune/inflammatory syndrome induced by adjuvants. J Autoimmun. 2011 Feb;36(1):4–8.
- 39. Arumugham V. Vaccines and the development of food allergies: the latest evidence [Internet]. BMJ. 2016. Available from: https://www.bmj.com/content/355/bmj.i5225/rr-0
- 40. Arumugham V, Trushin M V. Autism pathogenesis: Piecing it all together, from end to beginning .... J Pharm Sci Res [Internet]. 2018;10(11):2787–9. Available from: https://doi.org/10.5281/zenodo.1477515
- 41. Arumugham V. Medical muddles that maim our children with allergies, asthma and autism [Internet]. Unpublished; 2017. Available from: https://www.zenodo.org/record/1034595
- 42. Arumugham V, Trushin M V. Role of NMDA receptor autoimmunity induced by food protein containing vaccines, in the etiology of autism, type 1 diabetes, neuropsychiatric and neurodegenerative disorders. Int J Pharm Res [Internet]. 2019 Mar 1 [cited 2019 Apr 15];11(1). Available from: https://doi.org/10.5281/zenodo.1463600
- 43. Arumugham V. Rebutting vaccine safety claims made by Dr. Hotez in Nature Pediatric Research [Internet]. 2019 [cited 2019 Apr 10]. Available from: https://doi.org/10.5281/zenodo.2582599
- 44. Arumugham V. Epidemiological studies that ignore mechanism of disease causation are flawed and mechanistic evidence demonstrates that vaccines cause autism [Internet]. 2017. Available from: https://doi.org/10.5281/zenodo.1041905
- 45. Arumugham V. Rebutting Drs. DeStefano and Offit's claims of vaccine safety in: Principal Controversies in Vaccine Safety in the United States [Internet]. 2019 [cited 2019 Mar 1]. Available from: https://zenodo.org/record/2567372
- 46. Arumugham V. MMR, TBE vaccine and type 1 diabetes [Internet]. The BMJ. 2018. Available from: https://www.bmj.com/content/360/bmj.k1378/rr-2
- 47. Hviid A, Hansen JV, Frisch M, Melbye M. Measles, Mumps, Rubella Vaccination and Autism. Ann Intern Med [Internet]. 2019 Mar 5 [cited 2019 Mar 5]; Available from: http://annals.org/article.aspx?doi=10.7326/M18-2101

- 48. Opinion | Transparency Hasn't Stopped Drug Companies From Corrupting Medical Research The New York Times [Internet]. [cited 2019 Jan 22]. Available from: https://www.nytimes.com/2018/09/14/opinion/jose-baselga-research-disclosure-bias.html
- 49. Dickinson J. Deadly medicines and organised crime: How big pharma has corrupted healthcare. Can Fam Physician [Internet]. 2014 Apr;60(4):367–8. Available from: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4046551/
- 50. Gyles C. Skeptical of medical science reports? Can Vet J = La Rev Vet Can [Internet]. 2015 Oct;56(10):1011–2. Available from: https://www.ncbi.nlm.nih.gov/pubmed/26483573
- 51. Doshi P. Pandemrix vaccine: why was the public not told of early warning signs? BMJ [Internet]. 2018;362. Available from: https://www.bmj.com/content/362/bmj.k3948
- 52. Godlee F. A tale of two vaccines. BMJ [Internet]. 2018 Oct 4;363:k4152. Available from: http://www.bmj.com/content/363/bmj.k4152.abstract
- 53. Ahmed SS, Volkmuth W, Duca J, Corti L, Pallaoro M, Pezzicoli A, et al. Antibodies to influenza nucleoprotein cross-react with human hypocretin receptor 2. Sci Transl Med [Internet]. 2015 Jul [cited 2019 Feb 19];7(294):294ra105-294ra105.

  Available from: http://www.ncbi.nlm.nih.gov/pubmed/26136476