

## **A PLAN COMES TOGETHER-THE SHEEP OBEY**

**BY DR. SHERRI TENPENNY**

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On May 1, 2009, the LA Times reported some amazing occurrences:

- Hospitals on New York's Long Island were scrambling to bring extra workers in to handle a 50% surge in visitors to emergency rooms.
- In Galveston, Texas, the local hospital ran out of flu testing kits after being overwhelmed with patients worried about having contracted swine flu.
- At Loma Linda University Medical Center near San Bernardino, California, emergency room workers set up tents in the parking lot to handle a crush of similar patients.
- In Chicago, ER visits at the city's biggest children's hospital are double normal levels, setting records at the 121-year-old institution.

A 2006 study conducted by the Harvard School of Public Health confirmed that public health officials could easily convince most people to alter their daily lives to stem the spread of influenza. "The Pandemic Influenza Survey" documented our willingness to do what we are told after only a little hyping that a deadly global pandemic was eminent.

The 2006 survey included 1,700 Americans. More than 90 percent said they would [willingly] comply with government orders to postpone air travel, avoid public places such as movie theaters and shopping malls, and would keep their children home from school in the event of a flu pandemic.

### **How Soon We Forget**

The word "pandemic" is not synonymous with "massive death," although the media would have us believe that the two are equal. In fact, most persons over 50 years of age experienced the last two documented pandemics and the pandemic scare of 1976. And according to a 2008 report by the CDC, "even those who experienced [the 1957 and the 1968] pandemics do not recall them as particularly memorable events."

Most persons at least 43 years of age will no doubt recall the Swine flu hype of 1976. Starting from a single, infected military recruit, the threat of a pandemic and global death turned into a full-scale media and government circus.

In the end, the absolute belief in the effectiveness of vaccines resulted in the disability of 532 people who contracted Guillain-Barre Syndrome, a life-threatening form of paralysis. While many recovered in the ensuing months, at least 33 died and up to 10 percent remained paralyzed, to varying degrees, for the rest of their lives. While vaccine manufacturers reaped the rewards of government handouts to make vaccines, and secured legislation to protect them from liability (the Swine Flu Act of 1976), more than \$1.3 billion of taxpayer dollars were released to compensate those who had been injured by the swine flu vaccine.

### **More Vaccines On The Way**

Lessons about bad vaccines are rarely learned and the race to make more experimental doses has never been hotter. In 2005, Congress allocated \$3.8 billion to developers with the stated goal of being able to "distribute a

vaccine to every American within six months of the onset of a pandemic.” In 2006, our elected representatives went even further to ensure we are vaccinated: They created incentives for manufacturers by funding the *Biodefense and Pandemic Vaccine and Drug Development Act of 2005*, nicknamed *BioShield II*.

Along with BioShield II, legislation was passed to amend the Public Health Service Act and establish a division called Biomedical Advanced Research and Development Agency, or BARDA. On March 18, 2009, the BARDA requested \$1.7 billion for FY 2010 to fund research and development of additional vaccines and drugs. Interestingly, just this week, President Obama released \$1.5 billion of appropriations for pandemic planning. Although the funds were not specifically earmarked, it is probable that a portion of your tax dollars will go to fund BARDA.

On May 1, 2009, the *Working Group of the Infectious Disease Society of America* chimed in and requested more funding for the current swine flu outbreak. Commending the President for releasing emergency appropriations for H1N1 (Swine Flu), the *Working Group* appealed to Congress for an additional \$1.9 billion to fund the following:

- \$870 million requested to expand cell and egg-based vaccine capacity. This money was requested from the previous Administration, but not funded in FY 2008. The money will also be used to purchase antivirals for the federal stockpile and to accelerate the R&D of rapid diagnostic tests;
- \$350 million for States and localities to purchase equipment; funding staff and maintaining 24-hour disease-reporting hotlines; increase public and clinician education about vaccines; distribute medical countermeasures [vaccines and antivirals], and refill staff positions lost to budget cuts;
- \$122 million for State antiviral stockpiles for the treatment of people who become ill; and
- \$563 million for States and localities to purchase personal protective equipment and antivirals for prophylaxis of healthcare and critical infrastructure workers.

This is amazing. A billion here, a billion there. A close look at these requests and it is apparent where the money flows: Directly into the pockets of the drug companies who make antivirals like Tamiflu and Relenza. The research and development funds will go toward new, novel flu vaccines, and shots that much of the public has confirmed it would refuse.

In October, 2006 a survey reported by Reuters News service documented that fewer than half of Americans planned to get the flu vaccine that year, mostly because they do not worry about flu. Flu experts called the findings “disappointing,” and from that point forward, a full-court press has been on to increase the uptake of annual flu shots. No doubt the fear generated by the potential swine flu pandemic is part of the *Play Book* to make the flu seem serious enough for everyone to get vaccinated.

However, it appears the latest Swine flu buzz is fading away as fast as it materialized. Scientists are coming to the conclusion that the new swine flu strain may actually be less dangerous than garden-variety, seasonal influenza. Even though there are positive cultures from 331 people in 11 countries, and 10 have died, even the WHO admits the numbers are “extremely small.” It is estimated that globally between 3 and 5 million people experience some level of the flu each year. One has to wonder why this has even made the news.

### **Something Bigger?**

We have had three warm-up rounds: SARS, H5N1 bird flu and now, a “novel swine flu” from Mexico. Is there something bigger in store? There is no way to know for sure, but it is highly suspect. What we can say for sure is that another pandemic test round has passed muster. The media machine did its job, the government handed over billions for more vaccines and vaccine technologies, and, of course, many of the sheep obediently put on masks and fearfully ran off to doctors to be tested. When this has run its course, bureaucratic agencies

will be slapping themselves on the back, affirming that all the systems worked 'as planned.' They turned the crank; the world danced to their tune.

I hope most of you find the reports of runs on emergency rooms and the optional mask- and glove-wearing to be somewhere between amusing and annoying. Fear runs this country and when the great "What If" boogey man shouts, a large number seem to listen. As I write this, I am on a completely full, 737 airplane about to complete a three-hour flight from Houston to San Diego. Not one person came on the plane with a mask and I have not heard a single sneeze or a sniffle. I'm glad to see that many are going about their lives, business as usual.

The information in my book, FOWL!, is as timely now as when it was written. In 2006, I reported that the Director General of the WHO had said in 2005, "It is only a matter of time before an avian flu virus—most likely H5N1—acquires the ability to be transmitted from human-to-human, sparking the outbreak of human pandemic influenza. We don't know when this will happen. But we do know it will happen." (He didn't say "might" or "maybe" – he said a pandemic "will" occur).

And if he is right and we do see another sizable pandemic –whether the virus is man-made or created by some natural, random reassortment of viral genes – my hope is that everyone will take a deep breath, exercise normal health precautions, increase their Vitamin D, A and E intake, get lots of extra sleep and remember the lessons from history so we do not repeat them.

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*"Pandemic Preparedness Planning VI", <http://www.pandemicflu.gov/plan/pdf/panflureport6.pdf>*