

# Swine Flu - Another Point of View on H1N1

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I expect to contract the H1N1 (swine flu) virus this year. It will be annoying, will cause me some forced down time, but I'm not overly anxious about it. Swine flu can be deadly, this is true. But regular seasonal flu can also be deadly. The evidence to date is that H1N1 is more contagious than the seasonal flu virus but so far is not more deadly. What is especially different with this flu is that every casualty attributed to H1N1 is an anecdote the media seems compelled to sensationalize.

The reason I expect to get H1N1 is twofold. I am in the presence of a lot of different people as a normal course of my daily life, and people ill with the virus are likely to seek me out -- I have significant exposure risk. The other reason I expect to get this flu is that I've made a strategic decision to not be vaccinated.

I'm not categorically anti-vaccine. Vaccination is always a risk-reward decision. The risks from this particular vaccine don't seem extraordinarily large. I do have a huge issue with the mercury preservative used in multi-dose vaccine bottles. Mercury is a potent neuro-toxin and we are currently experiencing unprecedented epidemics of neuro-degenerative conditions such as Multiple Sclerosis, ALS (Lou Gehrig's disease), and Alzheimer's disease.

For the vast majority of us not subsisting on large ocean going fish, mercury in dental fillings and mercury preservative in annual flu vaccinations are our largest sources for lifelong mercury accumulation. These are risks to your brain and nervous system you should not have to take, and in my opinion you should actively avoid.

Mercury preservative is not the reason I'm choosing to refrain from being vaccinated

for H1N1. H1N1 vaccine is also available both as an aerosol and in single dose vials that contain no mercury. Everyone who chooses to vaccinate should demand a mercury-free dose. When enough people choose to not be injected with mercury preservative the vaccine manufacturers will quit producing with it. You can help protect the human herd by just saying no to vaccines with mercury preservative.

The purpose of a vaccine is to expose the immune system to non-infectious antigens. The immune system forms a molecular memory to the virus bits in the vaccine, and if those bits are ever again noticed by your immune cells the body forms a prompt response to eliminate the actual virus. The usual difference between having pre-existing immunity when newly infected is feeling rundown for a few days versus being sick in bed for up to a week or two.

The Centers for Disease Control recommend H1N1 vaccination for pregnant women,

persons who live with or provide care for infants aged <6 months (e.g., parents, siblings, and daycare providers), health-care and emergency medical services personnel, persons aged 6 months-24 years, and persons aged 25-64 years who have medical conditions that put them at higher risk for influenza-related complications.

Risk factor information for complications from H1N1 infection is limited. Of those who have so far developed serious complications the vast majority (90% in some assessments) have had a documented compromising health condition such as diabetes, obesity, heart

disease, or a respiratory disease such as asthma or tuberculosis. But even these increases in risk are modest and not appreciably different from seasonal flu viruses. The age distribution of those few who have developed serious complications is statistically younger than from seasonal flu and this observation has fueled parental anxiety.

I am a health care provider, but I'm not in a high risk group, nor do I have an infant at home. My general health is very good, and my colleagues and I have an arsenal of treat-

ments that facilitate the immune system's ability to put up a good fight. In Oregon it is my civil liberty to make this choice and I will promptly remove myself from patients and public if I become ill. I mentioned my decision to not vaccinate is a strategic one.

While vaccination introduces some virus bits (antigens) for the immune system to recognize, an actual infection forces the immune system to go through its complete set of responses to defeat the virus. If H1N1 follows the habits of seasonal influenza and starts mutating every year, then its descendants are going to be with us for a long time.

While this year's virus is not so deadly, another year's variation might be. If I experience the full infection this year when the virus is not so dangerous, I will completely train my immune system to deal with this original virus. This increases my odds of having at least partial immunity to future H1N1 variations. I have more confidence in my own immune system's ability to protect me than I do in vaccine maker's ability to predict, concoct and deliver in a timely manner an effective flu vaccine year after year.

Proper immunity is a larger topic than just vaccination. Its time for us to get over the flu scare and to become empowered about our own health. Resilient health is a daily affair that everyone should be attending to with their lifestyle choices.



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