

# For aluminium-free vaccines

A public health campaign

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# **PREAMBLE**

The aluminum salts are identified as neurotoxic by the highest French health authorities. Many diseases could be involved according to Prof. Exley (GB), renowned specialist in aluminum toxicity: Alzheimer's disease, Parkinson's disease, Crown's disease, Sarcoidosis...

Aluminum was introduced as an adjuvant in vaccines in 1926. Because of its toxicity, it should have caused a strong reaction in the immune system, and improved the effectiveness of the vaccine. It was then supposed to be excreted within 2 or 3 weeks through urination.

Unfortunately, this «assumption» has never been checked, and **alerts on serious side effects related to the presence of aluminum salts in many vaccines have existed for many years**. Of course they can be criticised as any scientific approach. But as they emanate from researchers with indisputable professional qualities, they must be taken into serious consideration by the health authorities.

And yet, it is not the case.

We are entitled instead to an outcry from experts or officials of health agencies, and resignation of public authorities in most countries of the world. Clearly, it is forbidden to express doubts about this adjuvant, which is in complete contradiction with the scientific spirit, that can not consider the knowledge as unbreakable dogmas.

This is unacceptable from a scientific, ethical and political point of view.

A neuromuscular disease is now clearly identified as induced by alum-containing vaccines: the macrophagic myofasciitis (MMF). Studying MMF has enabled substancial scientific progress.

Until now, macrophagic myofasciitis patients were in the front line to alert and request delivery of aluminum-free vaccines. The awareness is growing among the world population, it is time that this requirement be carried by all citizens aware of public health issues related to vaccination.

**This is why the E3M Association** (Entraide aux Malades de Myofasciite à macrophages, a neuromuscular pathology induced by aluminum salts contained in many vaccines) **decided to launch a campaign**:

# FOR ALUMINUM-FREE VACCINES

Let's create together a strong citizen movement, let's inform the public overall, let's bring massive research funding.

The reason and knowledge must be the cornerstone of our involvement, let's act together for a public health to the benefit of citizens

This campaign is not directed against the very principle of vaccination: it is not about to question its benefits. At the heart of our concerns: aluminum, which must be removed from all vaccines.



# **SUMMARY**

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This document is a summary of the website created to support the campaign (www.vaccinssansaluminium.org). If you are interested in leading the same campaign in your own country, we will be very pleased to help you.

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# 1. HARMFUL EFFECTS OF THE ALUMINUM SALTS: FROM DOUBT TO CERTAINITIES

Aluminum is a neurotoxical product. Many diseases could be partly caused to it according to Professor Exley, international specialist in aluminum toxicity: Alzheimer's disease, Parkinson's disease, Crown's disease, Sarcoidosis...

The aluminum used as a vaccine adjuvant is behind myofascitis macrophages (debilitating neuromuscular disease).

It is also involved in the development of allergies, cases of chronic fatigue, multiple sclerosis, amyotrophic lateral sclerosis or of disorders of the autistic spectrum. It would be at the origin (in part) of the gulf war syndrome.

The most recent works of Professor and GHERARDI AUTHIER (INSERM Unit U955 / E10) show:

- Aluminum lasts many months in the injection site of the vaccine. Simultaneously, it migrates in the body and access to distant organs such as the spleen, liver, brain.
- This migration occurs more or less rapidly according to 3 criteria:
- The injection site: faster migration if the injection is administrated by subcutaneously rather than intramuscularly,
  - o Genetics: faster migration on some mice than others,
- The dose: a moderate dose of aluminic adjuvant forms small aggregates of particle. It migrates in the brain faster than a significant dose which in turn forms larger aggregates, long stored in the periphery.
- It also accumulates in the lymph nodes and spleen, which are organs related to the immune system.
- Patients with macrophagic myofasciitis suffer of cognitive disorders matching a brain dysfunction, associated with a persistence extended aluminum in their body at the injection site.

The quality of these studies conducted by the INSERM team is such that **the results are taken on board by Prof. Shoenfeld, a world reference in the field of autoimmunity**. He includes macrophagic myofasciitis in his « adjuvants syndrome - ASIA ». Individual cases have been reported in many countries. **Portuguese researchers** are now involved and follow a cohort of individuals with macrophagic myofasciitis.

Finally, the court ruled: the Council of State (the highest French administrative jurisdiction) has acknowledged the link between macrophagic myofascite and aluminic vaccine 8 times (2012, 2013, 2014, 2015).



# 2. AN URGENT NECESSITY: PROTECT THE POPULATION

Any honest person can only establish the existence of serious warnings about health risks related to the use of aluminum as a vaccine adjuvant. The point emphasized in this campaign « For aluminum-free vaccines » and the brief summary above, testified it .The conference organized on 22nd May 2014 at the French National Assembly by the National Parliamentary Office for Evaluation of Scientific and Technological Choices (OPECST), also showed the urgent necessity to act on the issue.

Many lives are broken because of the presence of aluminum of which its use could be avoided, and tens of thousands of people are in waiting for diagnosis.

People who are diagnosed with « macrophagic myofasciitis » are often socially excluded. 78% of them can no longer work. The exhaustion prevents them from going out, having friends (see "they support us – citizens testimony").

Failures of the health system that are emphasized by these life trajectories, imply an expensive cost. This is unacceptable, of course, for the victims, to the extent that all could have been avoided if the warnings were taken into account. But also for society, because these diseases induce substantial costs (care, disability pension, non-participation in the national production of wealth...).





# 3. OUR FINDING: THE INERTIA OF THE PUBLIC AUTHORITIES

The alerts even launched by great personalities, of course, can be challenged, it is a characteristic of any scientific approach. But since these are the work of researchers with indisputable professional qualities, they must be taken into account. However, this is not the case.

We are entitled instead to an outcry from experts or officials of health agencies, and resignation of public authorities. Clearly, it is forbidden to express doubts about this adjuvant, which is in total contradiction with the scientific spirit, which cannot consider knowledge as unbreakable dogmas.

This is unacceptable from a scientific, ethical, and political point of view.

This behaviour is probably induced by a major fear: the questioning of the adjuvant could lead to questioning the very principle of vaccination, with two consequences:

- A decline in immunization coverage
- A decline in production for companies.

This vision is part of the past. We are in an age of rapid transmission of information and knowledge sharing, and the non-commitment of the health authorities and governments dealing with health warnings generates increased distrust of our citizens. The consequences of this inaction leads to the growing list of victims.

Let us not forget also that this abandonment of sick persons has a « collateral » cost: a widespread distrust moving towards the health system, which undermines the effectiveness of prevention campaigns on a global level.

# 4. OUR WILLINGNESS: ACT QUICKLY

Against the undeniable alerts involving aluminum used as a vaccine adjuvant, Against the denial of health authorities, and the lack of reaction from the Ministry of Health, Against damage it causes in human concern (thousands of broken lives) and political (loss of confidence in all of our health and political authorities).

Only a set up and determined citizen action can give consideration to the importance of linking aluminum-containing vaccines issue: which is a major public health issue.



# 5. OUR METHOD

Through this campaign we want to move in three directions:

# a. Inform the general public

Information must be available to those who seek it.

Vaccination cannot ruled out this democratic rule. The campaign aims to communicate the risks linked to aluminum-containing vaccines based on the progress of scientific knowledge.

# b. Ensure public involvment

The issue of the aluminic vaccine is beyond the struggle of its victims, it is a social issue that affects all of us. We know the prominence of the pharmaceutical industry and its influence on political decisions. We need to act together, whether we are an elected National, European or local politician, physician, union activist (we all want an industry concerned about public health and its employees), researcher, employee, parent, ordinary citizen, entrepreneur, journalist or member of these authorities supposed to protect us as Medicines Agencies with the will to change roles and to be on the patients' side.

# c. Funding independent research

Public funding is very uncertain, because of the omerta surrounding the issue of vaccine security. Of course we are looking for them to be implemented. Only citizen mobilization may help to raise significant funds, so that researchers could inform us as soon as possible on all the consequences linked to the post-vaccinal aluminum accumulation in our body.

# Two imperatives are focused in our campaign: transparency and efficiency

Transparency because we are committed to report annually on the website the accounts of the campaign, with budgets allocated to research and the results of such research.

Efficiency because the chosen plan research that we finance must answer the questions raised by the people involved and in a very short time scale. Until now, the E3M association, through its network of donors, has provided 80,000 Euros for research. The results obtained allow us to view the future with confidence because we know the purpose.





# 6. A LONG-TERM CAMPAIGN

The total withdrawal of aluminum of all vaccines will of course take longer to obtain. **But this time will be shortened even more as our voice is heard with force.** 

We have lost 10 years, as shown by these facts:

- In 2005, on the occasion of a written question from a French senator, the Ministry of Health replied that the aluminic adjuvant would require years of study to be removed.
- Same answer in 2011 to a written question from a French deputy.
- In 2012, the Secretary of State for Health answered to Alain Anziani (Senator, Quaestor of the Senate): « The automatic substitution of adjuvant to another is not possible in a simple and quick way. Indeed, this would mean resuming laboratory studies to search for the new optimum (if this optimum can even be reasonably found), then confirm vaccine efficiency of the new couple « antigen-adjuvant » in the combination dose that will be selected, and finally to establish the safety profile of this new vaccine with a new adjuvant. »
- On 5th March 2015 the Ministry of Health answered identically to a question from Daniel Laurent (Senator). « The removal of aluminic adjuvant in the vaccine composition requires at prior implementation of long development studies and clinical trials to ensure the effectiveness and tolerability of the new formulation. »
- Since July 2011, 250 French parliamentarians questioned the Ministry of Health on the measures it intends to take regarding the aluminic vaccine. In March 2012, the Study Group on Vaccination of the National Assembly recommended the establishment of a moratorium on aluminic adjuvant.

Jules Renard summed up very well this kind of attitude: « Lost time is never regained. So continue to do nothing. »

Everyone must therefore assume responsibility for their actions. Because it is unthinkable to wait for another 10 years to put a vaccine on the market, whether a free-adjuvant vaccine or an adjuvant that has been proven as calcium phosphate.





# 7. IN CONCLUSION

Is it not time to boost and provide the financial resources to our public research so that it develops safe vaccines?

The US Army is working on the development of adjuvanted vaccines whith a nanoparticle calcium phosphate, a path followed by other companies.

As we have written previously, the Pasteur Institute was a pioneer in the field, before its vaccine production branch was bought by a competitor less concerned about Public Health. With regard to the INSERM team who has a pioneering role at a global level in the field of understanding the migration process of adjuvants our body. They can study the way the body behaves when alternative adjuvants are used.

We have the means to move forward, faster and further, provided that there is a real political will. This will is currently very weak (except for some deputies invited by our sides). It is our role to make it happen.

This is the challenge of this campaign.





# PATIENT TESTIMONY

My macrophagic myofasciitis was diagnosed in 2011 (after a very long wandering of diagnosis).

I am granted category 1 disability and I work half-time. I live in fear of tomorrow (losing my job, managing the pain, etc). Indeed, I am constantly in pain, with never-ending headaches, and I must take medication against narcolepsy. Despite his caring, my GP is helpless.



I do not have any social life anymore and I can no longer attend physiotherapy

sessions as I must make a choice between my treatments. Therefore, I meet with the speech therapist as it greatly helps me with my day-to-day living.

So, for all of us and for the people around us, who can no longer share much with us, Madam Minister, KEEP YOUR PROMISES.

Karen

I am Katia and I live in Alsace. As a mother of two, my day-to-day has been very very tough since 2007 when I was diagnosed.

I work, yes, but, daily, that is physically and morally tough. Unfortunately, in order to survive, I have no choice. I was very active in the past (as a postwoman by bicycle but laid off in 2008 for impairment) and into sports (women's football



player in a club); since 2011, I have been a childminder. That is the only job I have been able to do without disclosing my disease ... does this make sense?

My day-to-day life is hell and it is also my fear for my children, to know whether or not I should have their latest booster vaccine administered has been an uphill struggle. The reason being the removal of dt polio aluminum-free vaccine from the market (that is not right because we must be able to choose our vaccines!!).

I must hold on for my family and for my children. And we need help!

Thank you for understanding this. Sincerely Yours.





Lucie, 29, ill for 10 years following an hepatitis B vaccination during my teenage years.

I live in fear of my two children having macrophagic myofasciitis because there is no aluminum-free vaccine.

For me, it is too late.

One has already stolen my golden years. Let's not take those of my children away.

Lucie



Martine, 47, assistant nurse. I have had the obligatory vaccination against hepatitis B. I contracted a disease: macrophagic myofasciitis following that vaccination induced by the aluminium-salt adjuvant.

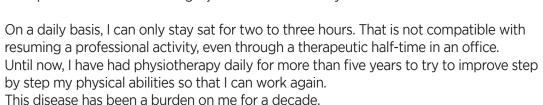
At that point, my life radically changed. My body is crushed by muscular pain, joint pain, exhaustion, cognitive disorders, sleeping disorders and vision disorders.

My daily life is very tough. I must keep moving despite constant pain. I can no longer practise my profession and my day-to-day depends on the level of pain and tiredness.



I have been affected by macrophagic myofasciitis for about 10 years. Today, I am 35. I was diagnosed in 2011 but the disabling symptoms appeared back in 2005 when I went on sick leave. I am currently on long-term sick leave. My job as an airspace controller was exciting. I had invested a lot into it.

However, since 2005, exhaustion symptoms, quasi-continuous pains and cognitive disfunctions have prevented me from doing a job that is close to my heart.



Yassine

I am Bernadette, 51.

To get my accreditation as a childminder in 1995, I had to get vaccinated against hepatitis B. One year later, in 1996, at age 34, I started to suffer from severe fatigue. Though I was a great sportswoman, I went from tendinitis to tendinitis. Then, year after year, pain grew until it became overwhelming. I saw many doctors, I heard all sorts of things.



As I was not asking for sick leave, I was being told that I was anxious. I ended up having bad anxiety attacks, I could not stand their diagnosis anymore. I had to shout my pain, and the word is not weak, so that my GP would refer me to a rheumatologist. The diagnosis was finally made: stage 2 Gougerot's disease and confirmation of macrophagic myofasciitis.

In February 2012, one morning, not being able to stand it anymore, I thought that I could look after the children while laying down on the coach for a quarter of an hour. Unfortunately too

after the children while laying down on the coach for a quarter of an hour. Unfortunately, too exhausted, I fell asleep, leaving 3 children, 20, 18 and a 13 month old without supervision. One of the children tried to open the balcony's French window using a children's chair. Fortunately, the chair rolled over and she cut open her chin. I was living on the fourth floor. That still sends shivers down my spine.

I often told my GP that I was exhausted but he never offered me sick leave. Whose responsibility would that have been? In March 2012, I was forced to ask for sick leave. I realised that it was over. In June 2013, I am granted category 2 disability.

I have no driving license. That disease prevents me from being able to drive. I no longer have any social life. I can no longer take care of my grand children like all grandmothers. Madam Minister, you must absolutely keep your promise. I cannot believe that a government lets us down that much.

# **KEY SCIENTIFIC PUBLICATIONS**

Aluminium migration through the body

Professor Romain Gherardi, former director of the INSERM's UMR955 E10 team is responsible for the Neuromuscular Pathology Expert Centre at Henri Mondor Hospital, Créteil, France. Furthermore, he is an assessor for biomedical research at Paris-Est Créteil University.



# « Slow CCL2-dependent translocation of biopersistent particles from muscle to brain »

Romain K. Gherardi, Zakir Khan, Christophe Combadière, François-Jérôme Authier, Valérie Itier, François Lux, Christopher Exley, Meriem Mahrouf-Yorgov, Xavier Decrouy, Philippe Moretto, Olivier Tillement et Josette Cadusseau - France - 2013

# The publication in a few words

The biodistribution of aluminum hydroxide, the most widely used vaccine adjuvant, is largely unknown. We have run experiments on mice to assess that biodistribution.

Intramuscular injection of alum-containing vaccine is associated with the appearance of aluminum deposits in distant organs, such as spleen and brain where they were still detected one year after injection.

>>> Read the full publication in <u>French</u> or in <u>English</u>

# $\ensuremath{\mathbf{w}}$ Biopersistence and brain translocation of aluminum adjuvants of vaccines $\ensuremath{\mathbf{w}}$

Romain Kroum Gherardi, Housam Eidi, Guillemette Crépeaux, François Jérôme Authier and Josette Cadusseau - France - 2014

# The publication in a few words

This publication takes stock of knowledge on the unexpected biopersistence of aluminum at the site of vaccine injection, and on the aluminum migration process through the body.

It also lists the main outstanding questions that require urgent answers.



# Macrophagic myofasciitis

**Professor Jérôme Authier** is a neurologist. Director of the INSERM's U955 E10 unit at Paris-Est University, he coordinates the Centre of Reference for Neuromuscular Diseases at H. Mondor Hospital, Créteil, France.



# Clinical features in patients with long-lasting macrophagic myofasciitis

François-Jérôme Authier, Muriel Rigolet, Jessie Aouizerate, Maryline Couette, Nilusha Ragunathan-Thangarajah, Mehdi Aoun-Sebaiti, Romain Kroum Gherardi and Josette Cadusseau - France - 2014

# The publication in a few words

Macrophagic myofasciitis (MMF) is characterized by specific muscle lesions assessing abnormal long-term persistence of aluminum hydroxide within macrophages at the site of previous immunization. Affected patients mainly presenting with arthromyalgias, chronic fatigue, and marked cognitive deficits that generate chronic disability with possible social exclusion.

>>> Read the full publication in French or in English

## The adjuvant syndrome

Professor Yehuda Shoenfeld has been heading the medical department of Tel-Aviv University since 1984. He founded and has been leading the Centre for Autoimmune Diseases since 1985 at Israel's greatest hospital. He holds the Laura Schwarz-Kipp Research Chair in autoimmune diseases.



## ASIA - Autoimmune/inflammatory syndrome induced by adjuvants

Yehuda Shoenfeld, Nancy Agmon-Levin

#### The publication in a few words

Immune system disorders are a leading cause of disease and mortality worldide and their prevalence is rising.

Some adjuvants (including aluminum) were found to induce autoimmunity by themselves in different animal models and may possibly provoke an auto-immune or auto-inflammatory disease in humans.



# Aluminium-induced damages

Professor Christopher Shaw is a neurologist at British Columbia University, Vancouver, Canada. He is a professor within the Ophthalmology and Visual Sciences Department at British Columbia University. He also works within the Experimental Medicine

Department and within the Neuroscience Advanced Studies Program.

Lucija Tomljenovic earned her Ph.D. in Biochemistry in 2009, at the Comparative Genomic Laboratory at James Cook University, Townsville, Australia. In 2010, she joins as a researcher the Neural Dynamics Research Group at British Columbia University, Vancouver, Canada (Pr Chris Shaw's laboratory). She recently became Associate Editor of Journal of Alzheimer's Disease.



# **Aluminium Vaccine Adjuvants: Are they Safe?**

Lucija Tomljenovic and Chris Shaw.

# The publication in a few words

An increasing number of studies establish a link between the use of aluminum adjuvants and severe auto-immune consequences in humans. No proper study has been done to assess the safety of simultaneously injecting various vaccines into young children, or to demonstrate the safety of concurrent injection of two neurotoxins, aluminum and mercury, into new-borns and children.

Knowing if the risk of protection against a dreaded disease is more important than the risk of toxicity coming from a presumed prophylactic agent is a question that requires a thorough review, far more rigorous than the one that has been done so far.



Gardasil: danger ahead!

**Dr Sin Hang Lee**, Pathologist, is the Director of the Milford Molecular Laboratory, Milford, USA. Graduated from Wuhan Medical College, China (1956), he is an acknowledged, international expert in the use of DNA sequencing for molecular diagnostics.



Dr Lee has taught at McGill University and at Yale University.

Detection of human papillomavirus (HPV) L1 gene DNA possibly bound to particulate aluminum adjuvant in the HPV vaccine Gardasil®

Dr Sin Hang Lee - USA - 2012

# The publication in a few words

Samples of Gardasil (HPV vaccine) have been tested. All Gardasil vials contained DNA fragments, probably linked to aluminum hydroxyphosphate sulfate nanoparticles. Further investigation required Vaccination safety.

>>> Read the full publication in <u>French</u> or in <u>English</u>

In the aluminium age

Professor Christopher Exley is a professor in inorganic chemistry at Birchall Centre at Keele University, Straffordshire, UK. He is also an honorary professor at University of the Highlands and Islands (UHI), Millennium Institute. Prof. Exley is a biologist, with a doctorate in aluminum ecotoxicology.



ASIA - Autoimmune/inflammatory syndrome induced by adjuvants Why industry propaganda and political interference cannot disguise the inevitable role played by human exposure to aluminum in neurodegenerative diseases, including Alzheimer's disease - Christopher Exley - UK - 2014

## The publication in a few words

Today, we all have a body burden of aluminum and it is likely that it is present in every physical and chemical compartment in the human body, including the brain. At some point, its toxicity will be exerted, brain systems will become dysfunctional and cascades of events eventually leading to accelerated cell and neurone loss will begin to dominate.

# SCIENTIFIC PUBLICATIONS: ALUMINIC VACCINE TOXICITY

- **2015** <u>Biopersistence and brain translocation of aluminum adjuvants of vaccines</u> Romain Kroum Gherardi, Housam Eidi, Guillemette Crépeaux, François Jerome Authier and Josette Cadusseau Frontiers in Neurology doi: 10.3389/fneur.2015.00004.
- **2015** Neuropsychological Correlates of Brain Perfusion SPECT in Patients with Macrophagic Myofasciitis Axel Van Der Gucht, Mehdi Aoun Sebaiti, Emmanuel Itti, Jessie Aouizerate, Eva Evangelista, Julia Chalaye, Romain K. Gherardi, Nilusha Ragunathan-Thangarajah, Anne-Catherine Bachoud-Levi, François-Jérôme Authier.
- **2014** <u>Selective elevation of circulating CCL2/MCP1 levels in patients with longstanding post-vaccinal macrophagic myofasciitis and ASIA</u> Josette Cadusseau, Nilusha Ragunathan-Thangarajah, Mathieu Surenaud, Sophie Hue, François-Jérôme Authier, et Romain K. Gherardi.
- **2014** Macrophagic myofasciitis and vaccination: Consequence or coincidence? T. Santiago · O. Rebelo · L. Negrão · A. Matos Rheumatol Int DOI 10.1007/s00296-014-3065-4.
- **2014** <u>Etiology of autism spectrum disorders: Genes, environment, or both?</u> C. A. Shaw, S. Sheth, D. Li, L. Tomljenovic OA Autism 2014 Jun 10;2(2):11.
- **2014** Why industry propaganda and political interference cannot disguise the inevitable role played by human exposure to aluminum in neurodegenerative diseases, including Alzheimer's disease Christopher Exley Front. Neurol. 5:212. doi: 10.3389/fneur.2014.00212.
- **2014** <u>Aluminum-Induced Entropy in Biological Systems: Implications for Neurological Disease</u> Christopher A. Shaw, Stephanie Seneff, Stephen D. Kette, Lucija Tomljenovic, JohnW. Oller Jr., and RobertM. Davidson.
- **2014** Are there negative CNS impacts of aluminum adjuvants used in vaccines and immunotherapy? Christopher A Shaw, Dan Li & Lucija Tomljenovic- Immunotherapy 2014;6(10):1055-71. doi: 10.2217/imt.14.81.
- **2014** Evolution of multiple sclerosis in France since the beginning of hepatitis B vaccination Dominique Le Houezec Immunol Res DOI 10.1007/s12026-014-8574-4.
- **2014** <u>Clinical features in patients with long-lasting macrophagic myofasciitis</u> Muriel Rigolet, Jessie Aouizerate, Maryline Couette, Nilusha Ragunathan-Thangarajah, Mehdi Aoun-Sebaiti, Romain Kroum Gherardi, Josette Cadusseau and François Jérôme Authier Frontiers in Neurology PMID: 25506338.
- **2014** <u>Aluminum and Glyphosate Can Synergistically Induce Pineal Gland Pathology:</u> <u>Connection to Gut Dysbiosis and Neurological Disease</u> Stephanie Seneff, Nancy Swanson, Chen Li Agricultural Sciences, 2015, 6, 42-70.
- **2013** Slow CCL2-dependent translocation of biopersistent particles from muscle to brain Khan Z, Combadière C, Authier FJ, Itier V, Lux F, Exley C, Mahrouf-Yorgov M, Decrouy X, Moretto P, Tillement O, Gherardi RK, Cadusseau J.- France BMC Med.
- **2013** <u>Autoimmune/autoinflammatory syndrome induced by adjuvants (ASIA syndrome) in commercial sheep</u> Lluís Luján, Marta Pérez, Eider Salazar, Neila Álvarez, Marina Gimeno, Pedro Pinczowski, Silvia Irusta, Jesús Santamaría, et al Espagne Immunologic Research.
- **2013** Aluminum in the central nervous system (CNS): toxicity in humans and animals, vaccine adjuvants, and autoimmunity Shaw CA, Tomljenovic L Canada Immunol Res.
- **2013** Administration of aluminium to neonatal mice in vaccine-relevant amounts is associated with adverse long term neurological outcomes Shaw CA, Li Y, Tomljenovic L Canada Journal of Inorganic Biochemistry.



# SCIENTIFIC PUBLICATIONS: ALUMINIC VACCINE TOXICITY

- **2013** <u>Distinctive clinical features in arthro-myalgic patients with and without aluminum hydroxyde-induced macrophagic myofasciitis: An exploratory study</u> Nilusha Ragunathan-Thangarajah, Christine Le Beller, Pierre Boutouyrie, Guillaume Bassez, Romain K. Gherardi, Stéphane Laurent, François-Jérôme Authier France Journal of Inorganic Biochemistry.
- **2013** <u>Aluminum enhances inflammation and decreases mucosal healing in experimental colitis in mice</u> G Pineton de Chambrun, MBody-Malapel, I Frey-Wagner, MDjouina, F Deknuydt, K Atrott, N Esquerre3, F Altare, C Neut, MC Arrieta, T-D Kanneganti, G Rogler, J-F Colombel, A Cortot, P Desreumaux and C Vignal Mucosallmmunology published online 16 October 2013. doi:10.1038/mi.2013.78 PMID: 24129165.
- **2013** <u>Aluminum's Role in CNS-immune System Interactions leading to Neurological Disorders</u> Shaw CA, Kette SD, Davidson RM and Seneff S Immunome Res 9: 069. doi: 10.4172/1745-7580.1000069.
- **2013** Autoimmune/inflammatory syndrome induced by adjuvants (ASIA) 2013: Unveiling the pathogenic, clinical and diagnostic aspects Carlo Perricone, Serena Colafrancesco, Roei D. Mazor, Alessandra Soriano, Nancy Agmon-Levin, Yehuda Shoenfeld Journal of Autoimmunity (2013), <a href="http://dx.doi.org/10.1016/j.jaut.2013.10.004">http://dx.doi.org/10.1016/j.jaut.2013.10.004</a>.
- **2012** <u>Macrophagic myofasciitis: characterization and pathophysiology</u> RK Gherardi and FJ Authier France Lupus.
- **2012** Mechanisms of aluminum adjuvant toxicity and autoimmunity in pediatric populations Tomljenovic L, Shaw CA Canada Lupus.
- **2012** <u>Hepatitis B vaccine induces apoptotic death in Hepa1-6 cells</u> Heyam Hamza Jianhua Cao Xinyun Li Changchun Li Mengjin Zhu Shuhong Zhao Chine Apoptosis.
- **2012** Empirical Data Confirm Autism Symptoms Related to Aluminum and Acetaminophen Exposure Stephanie Seneff, Robert M. Davidson, and Jingjing Liu USA Entropy.
- **2011** <u>Aluminum Vaccine Adjuvants: Are they Safe?</u> L. Tomljenovic et C.A. Shaw Canada Current Medicinal Chemistry.
- **2011** <u>Do aluminum vaccine adjuvants contribute to the rising prevalence of autism?</u> L. Tomljenovic, C. Shaw Journal of Inorganic Biochemistry.
- **2010** The immunobiology of aluminium adjuvants: how do they really work? C. Exley, P. Siesjo et H. Eriksson Grande-Bretagne Trends in Immunology.
- **2010** <u>Infants' exposure to aluminum from vaccines and breast milk during the first 6 months</u> J.Dórea JG, Marques RC.- Brésil Expo Sci Environ Epidemiol.
- **2010** « ASIA » Autoimmune/inflammatory syndrome induced by adjuvants Y. Shoenfeld et N. Agmon-Levin Israël Journal of Autoimmunity.
- **2009** <u>Long-term persistence of vaccine-derived aluminum hydroxide is associated with chronic cognitive dysfunction</u> M. Couette, M.F. Boisse, P. Maison, P. Brugieres, P. Cesaro, X. Chevalier, R. K. Gherardi, A-C. Bachoud-Levi et F-J. Authier France Journal of Inorganic Biochemistry.
- **2009** <u>Aluminum hydroxide injections lead to motor deficits and motor neuron degeneration</u> C. A. Shaw et M.S. Petrik Canada Journal of Inorganic Biochemistry.
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# E3M ASSOCIATION

The French Association « Entraide aux Malades de la Myofasciite macrophages » (E3M) was created in May 2001. It brings together patients with Macrophagic Myofasciitis (MMF) disease, as well as their family members.

E3M has the benefit of the French accreditation to act as an association representing hospital authorities or public health users.

The struggle of E3M is not against the very principle of vaccination: it is not about calling into question its benefits. However, the issue of the aluminum adjuvant is at the heart of its action.

# The objectives of E3M

- Promote and take into account this illness so that the medical staff is informed and trained.
- Make patients feel less alone and provide moral support.
- Assist patients in their requests with state, social and court organisations.
- Reduce misdiagnosis time to avoid endless and painful suffering (physically and mentally). To do that, referring patients to physicians and skilled specialists so that they receive effective medical care.
- Support the research to better understand the MMF development process and identify the predisposant factors for MMF.

# **Current requests from E3M**

3 immediate steps must be taken:

- It is timely for health governmental agencies to support research programs for the long-term health impact of the aluminic vaccine to understand its effects within the body and identify the «genetic predisposition» to the concerned population.
- Until the final results of this report and by applying the precautionary principle, a DTPolio free-aluminum vaccine must be made available to citizens, for it has been mandatory for children entering into a care structure or for adults willing to carry on those vaccines in a safe way.
- No vaccine with aluminum adjuvant should be promoted. For this reason, we oppose the widespread vaccination against HPV.

The aluminum adjuvant must be removed from all vaccines in a fixed time.

# The E3M expertise

E3M had to develop a strong expertise so that it can be trusted and bring forward with great force the patients' testimony.

E3M is now widely recognized and is regularly requested by both health (pharmacy academy, parliamentary committees) and media organisations that are willing to hear «another voice» as that of politically oriented experts.

