

Flu “Epidemic”: The Numbers Just Don’t Add Up

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Should the government be recommending mercury-containing flu shots to everyone, especially if they are useless for 97.5% of adults?

[One prominent media outlet says](#) ^[1], “Influenza has reached epidemic proportions in the United States, with 7.3 percent of deaths last week caused by pneumonia and the flu,” according to the CDC. [Another’s report, released the same day](#) ^[2], says that “despite all those news reports about overcrowded emergency rooms, it’s too soon to say whether it will be worse than normal” and quoted the CDC as saying that the number of states reporting “high” levels of flu activity has actually dropped from 29 to 24. [A third wonders why](#) ^[3] fewer than 65% of Americans got a flu shot this year, while [a fourth notes that the flu vaccine is only about 62% effective](#) ^[4], meaning that over a third of the people who do get flu shots still get the flu.

But that 62% figure is misleading. There are currently three different “epidemics” hitting the US: “true” influenza (type A, type B, or seasonal H1N1 influenza), norovirus (“stomach flu”), and whooping cough. [According to a meta-analysis](#) ^[5] published in the weekly peer-reviewed medical journal *The Lancet*, the flu vaccine is only 62% effective **in preventing type A or B influenza or seasonal influenza A (H1N1)**. It doesn’t protect **at all** against norovirus and whooping cough. In other words, [only 2.7% of all adults get type A or B or H1N1 influenza](#) ^[6], and of them, the vaccine will fail 38% of the time, which means it really benefits only about 1.8% of the population.

Moreover, even preventing traditional influenza depends on the government guessing correctly well in advance about which strains will be a problem in the coming season. This year they got two influenza strains right but missed one.

In addition, there is no evidence that flu vaccine provides any protection whatsoever for adults 65 and over—even though the elderly are one of the flu vaccine campaign’s target populations. And to top it all off, [the](#)

[effectiveness of the whooping cough vaccine drops as time passes](#) ^[7]: a study found that the effectiveness fell from 98.1% within a year of completion of the vaccine regimen to 71.2% five or more years later. And even that figure is doubted by some scientists.

[As we noted two years ago](#) ^[8], the CDC's figures are fabricated or false. It's as if they're saying, "Well, we really have no idea what the truth is, so we just make stuff up." Could it have something to do with the cozy relationship between pharmaceutical companies, regulators, and the media?

Last October [we told you about](#) ^[9] the flu shot being forced on healthcare workers. But it's gotten even worse. Hospitals are incentivized to vaccinate their staff in order to receive favorable treatment under Medicare reimbursements. The Affordable Care Act established [Hospital Value-Based Purchasing](#) ^[10], which offers payment reductions if the hospital meets certain government-determined performance standards—and this often includes flu vaccination for its healthcare workers.

But if the vast majority of healthcare workers who *do* receive the mandatory flu vaccine will get the flu anyway, how does that really help the overall health of the staff? In light of this, it becomes obvious that [mandatory flu vaccination policies are financially driven, and not patient-safety driven](#) ^[11].

The problem is that some of the best healthcare workers choose not to vaccinate because they recognize the shot's ineffectiveness—not to mention its risks—even at the threat of being fired. How absurd is it that the government is continuing to push the flu vaccine, when the shot is proving ineffective against [the majority of current flu cases](#) ^[12], and when there is a [shortage of the vaccine](#) ^[13] anyway?

Of course, as both [Dr. Jonathan Wright](#) ^[14] and [Dr. David Brownstein](#) ^[15] strongly recommend, the best advice is to skip the flu shot, build up your immunity instead with vitamin C and vitamin D, and if you become infected, take vitamin A (real A, not beta carotene). Or use other [tried-and-true natural remedies](#) ^[16].