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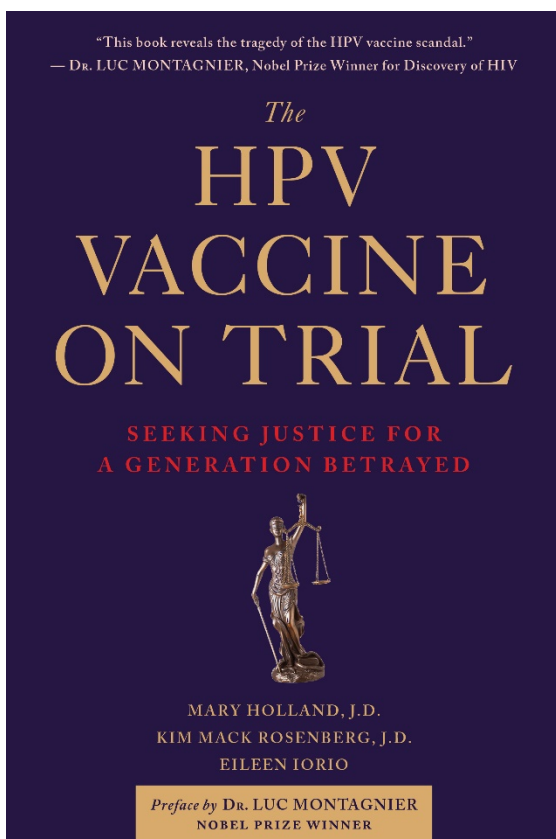
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“This book reveals the tragedy of the HPV vaccine scandal.”

—Dr. Luc Montagnier, Nobel Prize Winner for Discovery of HIV



The HPV Vaccine on Trial: Seeking Justice for a Generation Betrayed paints a devastating picture of corporate and government conflicts of interest, negligence, and malfeasance in approving and promoting human papillomavirus (HPV) vaccines, touted to prevent cervical and other cancers. Coming out on the heels of recent *New York Times* revelations about astounding financial conflicts of interest at Memorial Sloan-Kettering Cancer Center, this groundbreaking book highlights the lack of transparency, manipulated science, and abuse of state power to market this medical juggernaut, already raking in over \$2.5 billion per year.

Authors Holland, Rosenberg, and Iorio uncover:

- HPV vaccines have *never* been proven to prevent cancer of any kind.
 - HPV vaccine inventor Ian Frazer acknowledges that “[C]ervical cancer screening if used and promoted effectively would be almost entirely able to prevent” cervical cancer deaths in countries like the US and Australia, without HPV vaccines.
 - No participants in the original HPV clinical trials received true saline placebos.
- The clinical trials never investigated the vaccine’s possible effects on human fertility or potential to cause cancer.
 - The clinical trials show that the vaccines can backfire and contribute to HPV lesions, and potentially cancer, in some women. Despite this, neither the manufacturers nor government agencies recommend prescreening to eliminate those with clear risk factors.
 - Although the vaccine is targeted for 11-12-year-old children, only a small fraction of clinical trial subjects was in this age range.

—Over—

- Lawsuits against HPV vaccine manufacturers and government health agencies are progressing around the world, including the US, India, Japan, Colombia, Spain, and France.
- The US government earns millions in royalties from Merck and GSK, the vaccine manufacturers, for its role in the invention of HPV vaccine technology.
- Although the US government proclaims HPV vaccines safe and effective, it has paid out millions of dollars to compensate families for death, brain injury, multiple sclerosis, ulcerative colitis, and other severe, debilitating conditions.

With praise from some of the world's leading scientists on aluminum, autoimmunity, and vaccines, this book fills a critical void, giving people information they need to make commonsense decisions about this vaccine. Written in plain language, *The HPV Vaccine on Trial* ultimately is about how industry, government, and medical authorities may be putting children in harm's way.

About the Authors

Mary Holland, M.A., J.D., is on the faculty at NYU School of Law, directs its Graduate Lawyering Program, and lives in New York City.

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Eileen Iorio has practiced in the financial and health fields and lives outside New York City.

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The HPV Vaccine on Trial: Seeking Justice for a Generation Betrayed

By Mary Holland, M.A., J.D.; Kim Mack Rosenberg, J.D.; Eileen Iorio

Skyhorse Publishing paperback, also available as an ebook

On Sale: October 2, 2018 / \$19.99

ISBN: 9781510710801

Skyhorse Publishing, Inc.
307 West 36th Street, 11th Floor
New York, NY 10018
(212) 643-6816
www.skyhorsepublishing.com

Medical/Health Policy

US \$19.99

THIS BOOK IS A GROUNDBREAKING EXPOSÉ OF THE HPV VACCINE.

“The reader will see the truth: the side effects are under-reported by medical personnel while there are a growing number of parents suing manufacturers and governments for inducing life-long handicaps, even death, of their loved ones. In fact, this is the tragic example of various segments of our society, worldwide, placing economic interests before the health and protection of our younger generation. I congratulate the authors of this book who are showing the world this scandal.” —**LUC MONTAGNIER, MD, Nobel Prize winner for discovery of the HIV virus**

“Having worked with HPV vaccination studies in Denmark and subsequently with severely disabled patients attributing their disorder to possible side effects of vaccination, it is both fascinating and scary to read such a thorough unravelling of the faulty processes and the hidden facts behind the development and marketing of the vaccine. A real page turner that anyone ought to read before considering vaccination.” —**JESPER MEHLSSEN, MD, former National Coordinator, HPV Vaccine Studies, Denmark**

“Vaccines are one of the most important revolutions in medicine, leading to reduced morbidity and mortality, as well as the eradication of some deleterious viral and bacterial-associated diseases. Yet to expect that injecting foreign substances, especially immersed in adjuvants, will not cause any side effects in some genetically prone individuals is a historic mistake. This book, written in clear language, explains how the US government has given vaccine manufacturers almost blanket liability protection, leading to unreasonably risky vaccines, including the HPV vaccine. This book should lead regulatory institutions and medical journals to recognize vaccine adverse effects more accurately.” —**Professor YEHUDA SHOENFELD, MD, Sheba Medical Center, Tel Aviv University**

“This book is the most informative source you will find on the sordid machinations that went into convincing the public that Human Papilloma Virus (HPV) vaccination is a wise health choice. The clinical trials never showed that it protects from cervical cancer. There is overwhelming evidence that the vaccine causes harm, both in terms of autoimmune disease and infertility or even death in rare cases. Please read this gripping book before deciding whether to allow your son or daughter to receive the HPV vaccine.” —**STEPHANIE SENEFF, PhD, Senior Research Scientist, MIT**

“I have voiced concerns about this vaccine from the time it first got fast tracked through the system and even spoke out about it on an *Oprah* appearance years ago. Finally the whole story is revealed in this book. It is high time.” —**CHRISTIANE NORTHRUP, MD, New York Times bestselling author of Women's Bodies, Women's Wisdom**



SKYHORSE PUBLISHING, INC.
New York, New York
www.skyhorsepublishing.com

Cover design by Brian Peterson
Printed in the United States of America



HOLLAND
ROSENBERG
IORIO

The HPV VACCINE ON TRIAL



“This book reveals the tragedy of the HPV vaccine scandal.”
— DR. LUC MONTAGNIER, Nobel Prize Winner for Discovery of HIV

The HPV VACCINE ON TRIAL

SEEKING JUSTICE FOR
A GENERATION BETRAYED



MARY HOLLAND, J.D.
KIM MACK ROSENBERG, J.D.
EILEEN IORIO

Preface by DR. LUC MONTAGNIER
NOBEL PRIZE WINNER

ADVANCE PRAISE FOR *THE HPV VACCINE ON TRIAL*

“The reader will see the truth: the side effects are underreported by medical personnel, while there are a growing number of parents suing manufacturers and governments for inducing lifelong handicaps, even death, of their loved ones. In fact, this is the tragic example of various segments of our society, worldwide, placing economic interests before the health and protection of our younger generation. I congratulate the authors of this book, who are showing the world this scandal.” —Luc Montagnier, MD, Nobel Prize winner for discovery of the HIV virus

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“For most people, quarantine conjures up a set of procedures put in place to avoid people with the Plague or Ebola infecting the rest of us. In extreme cases, anyone escaping from the Hot Zone might be killed. It has a new meaning. Quarantine now means what Government and Business put in place to contain anyone who has been injured by a vaccine or a drug from infecting the rest of us, in extreme cases . . . Read this measured but compelling book from inside the Hot Zone and find out.” —David Healy MD, author of *Pharmageddon* and *Let Them Eat Prozac*

“Living in the ‘Aluminum Age’ inevitably exposes us to aluminum in myriad ways. The majority of such exposures are benign in the shorter term while potentially harmful over decades of living. However, the injection of an aluminum adjuvant in a vaccine preparation is an acute exposure to a high concentration of aluminum, with cell death at the injection site the immediate consequence. Harvesting of aluminum adjuvant by immune-reactive cells at

injection sites transports this toxicity well beyond this site and in susceptible individuals is responsible for serious adverse events, which may span the lifetime of affected individuals. This is no longer a 'dirty little secret' to those of us who understand the toxicity of aluminum. This is a serious book about a very serious subject, and it demands to be taken seriously now." —Professor Christopher Exley, PhD FRSB, Keele University

"Should we give the HPV vaccine?" is an ethical question. Good ethics starts with good facts. The authors of *The HPV Vaccine on Trial* have conducted painstaking research, and their book is a rich source of facts. Their book points to troubling conflicts of interest of HPV vaccine researchers and those who have editorialized about it. It makes a convincing case that the push for mandatory HPV vaccination should cease and that HPV vaccination of the individual should only follow an informed consent process in which patients are told of its benefits and risks." —Alvin H. Moss, MD, Center for Health Ethics and Law, West Virginia University

"Like no other, this book provides thorough and sound scholarship on all that is known about the HPV vaccines, including the junk science devised by the industry and its shameless promotion by the government agencies that were created to regulate it. The authors have left nothing out: *The HPV Vaccine on Trial* is a must-read for every serious student." —Richard Moskowitz, MD, Author of *Vaccines: A Reappraisal*

"What is happening to our young people? How is it that perfectly healthy young women (and now men) suddenly lose energy, become wheelchair-bound, or even die? Why are birth rates among teens and young adults suddenly plummeting? Holland et al. provide convincing evidence that these worldwide phenomena could be linked to the HPV vaccine. Get informed!" —Gayle DeLong, PhD, Associate Professor, Baruch College, City University of New York

“You may have heard that clinical trials of the HPV vaccine (which included thousands of children) did not include a saline placebo in the control arm. That’s just the tip of the iceberg that the authors elucidate.” —Shira Miller, MD, Founder and President, Physicians for Informed Consent

“This meticulously researched book deftly answers why wherever HPV vaccines have been introduced, young girls and boys have suffered unacceptably high rates of medically unexplained paralysis, autoimmune disease, syncope, infertility, severe chronic pain, and other devastating health problems, including deaths. Contrary to how the media and policy makers label and attack those who are raising questions about safety, the authors give clear and convincing evidence to support that the ‘antiscience’ label rests firmly on those who would dismiss these sudden or delayed onset symptoms as a ‘coincidence.’ The authors explain how vaccine manufacturers, policy makers, media, and NGOs have formed an unholy global alliance to hide the flawed science that formed the foundation for the HPV vaccine approval. These actors suppress science that raises safety concerns and market this neurotoxic vaccine to eleven- and twelve-year-olds, who are pressured by schools and their peers to get this vaccine, or else die of a disease when safer alternative preventative measures exist. This book will help you understand how to protect yourself from policies that put profit over health and safety—a must read.” —Claire Dvoskin, Founder, Children’s Medical Safety Research Institute

“No parent should make the decision to vaccinate their child until they have read and understood this book.” —Jonathan Irwin, Founder, the Jack & Jill Foundation Ireland, former racetrack executive, parent of a child who reacted adversely to the HPV vaccine

“As a father who has witnessed debilitating side effects of ‘Big Pharma’ medications on his son, I am outraged to learn of thousands of injuries and even death suffered by girls and boys being given the unnecessary HPV vaccine to prevent cervical cancer. Once

again, millions are being made by the same company (Merck) responsible for the Vioxx drug that killed more than 100,000 people before being withdrawn from the market. The meticulous research put forward in *The HPV Vaccine on Trial* should compel American lawmakers to follow the lead of Japan to withdraw its recommendation for the HPV vaccine.” —Dick Russell, Author, *My Mysterious Son: A Life-Changing Passage Between Schizophrenia and Shamanism*

“As an oncology nurse of twenty-five years and a mother of four fully vaccinated children, I truly believe that *HPV on Trial* is a crucial and desperately needed exposé of the controversial HPV vaccine. The authors have done extensive research and reporting to uncover the devastating side effects that have long been dismissed as psychological, while also revealing the faulty clinical trials. With our children’s lives in the balance, this remarkable and gripping story is essential reading for all parents and doctors concerned with the future of our youth.” —Deborah Hall Sullivan, RN BSN OCN

“Finding a book that summarizes in a methodical, serious, and well-documented way the story of the great HPV vaccine fraud—described with the rigor of true connoisseurs—fills me with gratitude and respect. Few brave people have faced the power of two multinationals like Merck and GlaxoSmithKline. No one understands better than I the pain, frustration, and impotence of trying to prove the real injury for thousands of girls and women who lost their health and innocence because of this deception. History will smile on those who said and did the right thing, even if branded as fanatics, antivaccine activists, and crazy, merely for daring to do what every parent, ethical professional, and human being has a duty to do. Disguised as the greater good, the HPV vaccine is a farce that has harmed the lives of thousands of young people in the last decade. In the not-too-distant future, with the help of books like this, ethical scientists, the outcry of thousands of injured families, and courts that will not be fooled by the appearance of philanthropy and science, we will be able to declare in unison THE TRUTH HAS TRIUMPHED.” —Monica Leon del Rio, Attorney

for HPV vaccine-injured women in Colombia and mother of an HPV vaccine-affected daughter.

“If you care about your children’s health and future, this book is a must-read. The book confirms the approval of the HPV vaccine without any adequate safety studies. US authorities’ denial of the large number of harmed children is equivalent to what we experience in Europe. This book is scary reading. Unfortunately, it’s not fiction. It is fact.” —Karsten Viborg, Chairman, HPV Vaccine Victims, Denmark

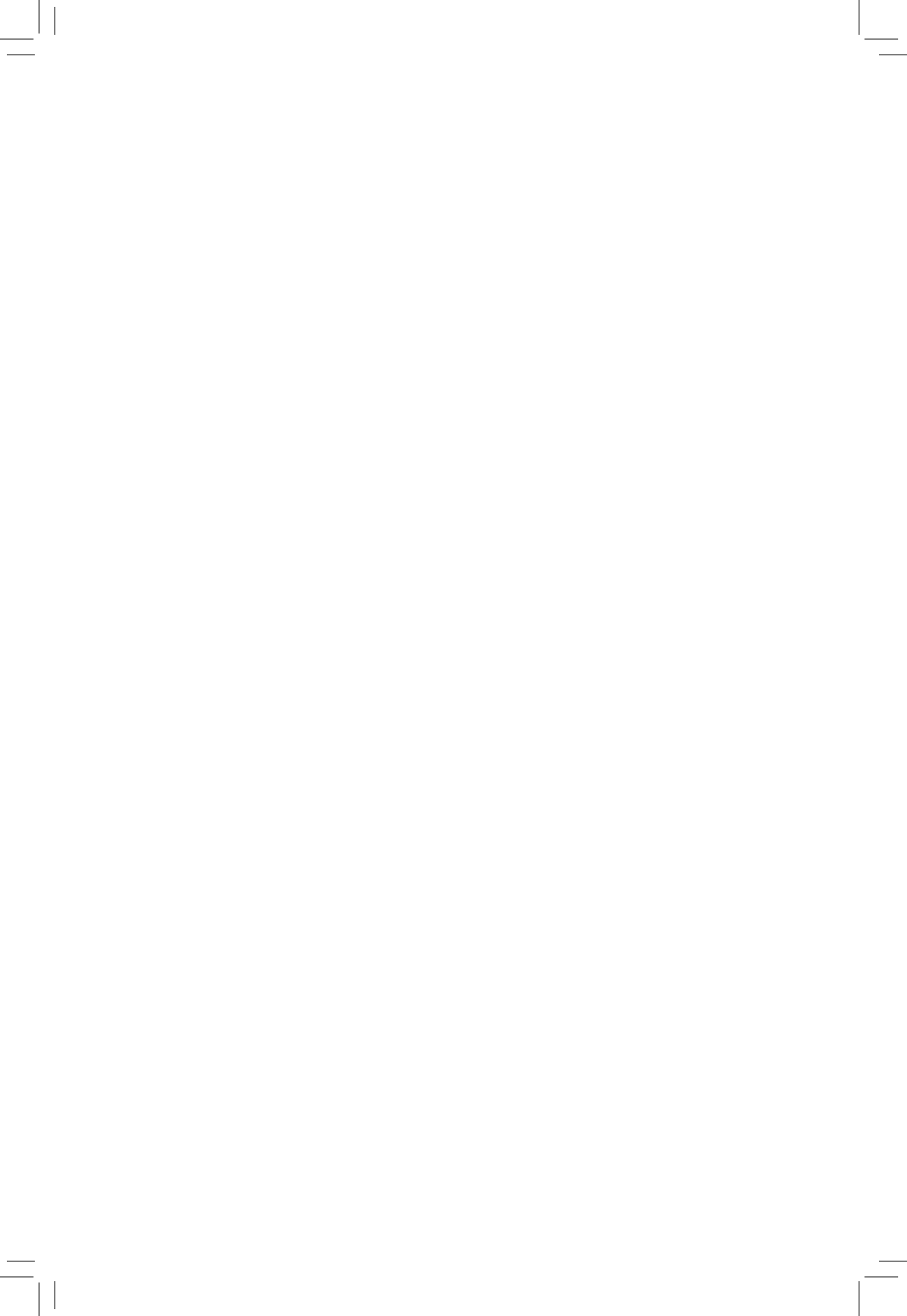
“This is a forensic case against all involved with the development, marketing, and institutional defense of HPV vaccines, presented with formidable clarity. It is hard to believe that the proponents of these vaccines ever intended any good: either that they had any strong conviction in the long-term possibility of eradicating cervical cancer, or that they did not plan to cover up widespread harm to the recipients of the products from the earliest trials. In sum, it poses the most profound questions about the real purpose of public health programs in the twenty-first century.” —John Stone, Author, UK Editor, Age of Autism blog

“Many new vaccines are being created and marketed to enrich corporations rather than improve our health. This important book exposes a corrupt system that no longer prioritizes safety and has been co-opted by profiteers. When we understand how HPV vaccine has managed to stay on the market despite its fatal flaws, we will understand how to fix a broken system.” —J.B. Handley, Author, *How to End the Autism Epidemic* and Cofounder, Generation Rescue

“The authors have unmasked and exposed the clinical trials of the HPV vaccines, filtered out all the propaganda designed to mislead the public on the safety of this vaccine, and provided a clear and concise discussion of the effectiveness of the human papillomavirus vaccine. Too many women, girls, and boys are being harmed, only to be silenced by the medical community and treated as collateral

damage.” — Wayne Rohde, Author, *The Vaccine Court: The Dark Truth of America’s Vaccine Injury Compensation Program*

“Parents, take heed—your child’s health and life is at stake. Clinicians, here is the evidence on the risks of HPV vaccine—please take note. Regulators & legislators, the facts in this book are all you need to uphold the integrity of conflict of interest, accountability, and honest reporting. The depth of research in this book is remarkable.” —Sabeeha Rehman, Author, *Threading My Prayer Rug: One Woman’s Journey From Pakistani Muslim to American Muslim*



THE
**HPV
VACCINE**
ON TRIAL

Seeking Justice for a Generation Betrayed

MARY HOLLAND, J.D.
KIM MACK ROSENBERG, J.D.
EILEEN IORIO

Preface by Dr. LUC MONTAGNIER, Nobel Prize Winner



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10 9 8 7 6 5 4 3 2 1

Library of Congress Cataloging-in-Publication Data has been applied for.

Cover design by Brian Peterson

Cover photo credit: iStock

Print ISBN: 978-1-5107-1080-1

Ebook ISBN: 978-1-5107-1081-8

Printed in the United States of America

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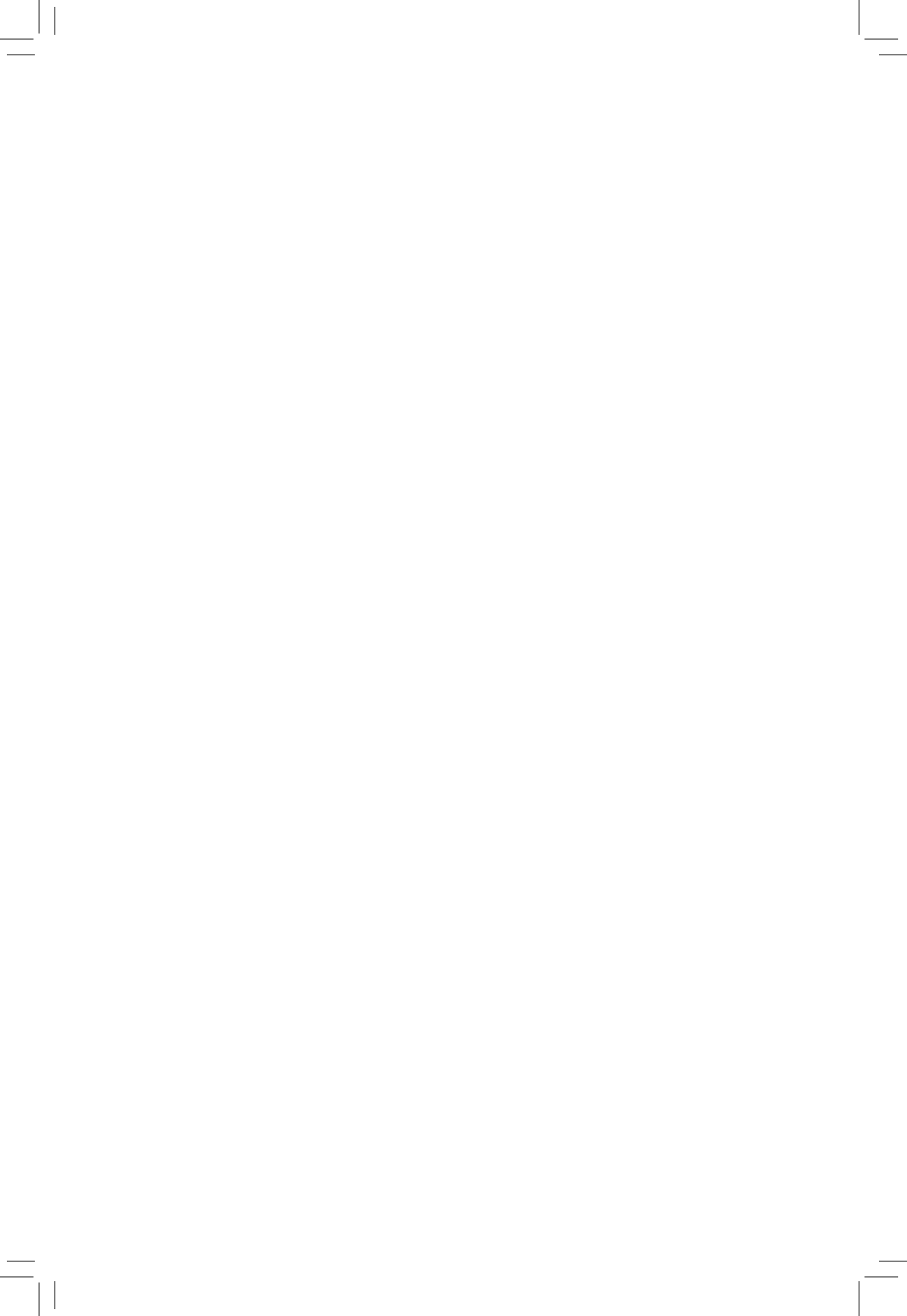
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PREFACE

This book is not fiction. It is unfortunately the accurate description of facts occurring in our time: a promising vaccine against a virus involved in cervical cancer turns out to be the source of extremely grave side effects, even death, of young girls and boys.

This vaccine still has the support of official agencies—the WHO, FDA, CDC, EMA—and with the marketing and lobbying efforts of the manufacturers, it continues to be recommended in several countries, and even mandated in some US states!

The reader will see the truth: the side effects are underreported by medical personnel, while there is a growing number of parents suing manufacturers and governments for inducing lifelong handicaps, even death, of their loved ones.

In fact, this is the tragic example of various segments of our society, worldwide, placing economic interests before the health and protection of our younger generation.

I congratulate the authors of this book, who are showing the world this scandal.

What this vaccine is doing to thousands of our young worldwide is a crime.

Historically, vaccines have protected many people. Presently, over these last many years, too many vaccines, HPV and others, have harmed and killed so many people.

Let us mandate that ALL vaccines be safe for everyone. This is possible.

Our future depends on respect for medical ethics, according to the Hippocratic Oath:

FIRST DO NO HARM.

by Luc Montagnier, M.D.

Nobel Prize winner for the discovery of HIV

INTRODUCTION

Cancer strikes fear in people around the globe. So a vaccine to prevent cancer—as the human papillomavirus (HPV) vaccine is touted to do—seemed like a game changer. Since 2006, when the US approved the first HPV vaccine, over 125 countries have introduced it to prevent cervical and other HPV-related cancers. The three HPV vaccines bring in over \$2.5 billion in annual sales for Merck (Gardasil, Gardasil 9) and GlaxoSmithKline (Cervarix). They have been pharmaceutical juggernauts, yet scandal has followed worldwide. The HPV vaccine is on trial—literally and figuratively—around the world in courts of law and public opinion.

No one disputes that cancer is a ravaging disease that leads to death, if uncontrolled. But the fact that cancer is a grave disease does not necessarily mean that a vaccine purporting to prevent it is safe and effective for everyone. The US Food and Drug Administration, the US Centers for Disease Control and Prevention, the European Medicines Agency, the World Health Organization, and many other public health agencies have embraced the HPV vaccine as a safe and effective way to prevent HPV-related cancers. Here are a few representative statements:

FDA: Based on the review of available information by FDA and CDC, Gardasil continues to be safe and effective, and its benefits continue to outweigh its risks.

CDC: The HPV vaccine is very safe, and it is effective at preventing HPV. Vaccines, like any medicine, can have side effects. Many people who get the HPV vaccine have no side effects at all. Some people report having very mild side effects, like a sore arm, from the shot. The most common side effects are usually mild.

WHO: The WHO's Vaccine Safety Committee considers HPV vaccines to be extremely safe.

EMA: The benefits of HPV vaccines continue to outweigh the known side effects.

These official statements contrast starkly with the reports of devastating injuries and death that we recount in this book. You'll get to know these and other children and young adults.

Christina Tarsell, 21 years old.

Chris was an undergrad at Bard College, New York. A talented athlete, artist, and honor student, she received three Gardasil doses when she was twenty-one. Shortly after the third dose, she died in her sleep. After eight years of hard-fought litigation in the only judicial forum available, Chris's mom "won"—the Court of Federal Claims finally acknowledged that Gardasil more likely than not caused the heart attack that led to Chris's untimely death. You can see Chris, and a memorial to her, in the photo insert.

Alexis Wolf, 13 years old.

In 2007, when Alexis was in 7th grade, she began the Gardasil series. After the second dose, her health deteriorated. After the third, she could no longer focus, sleep, eat, or behave normally. She started to have many seizures every day. She was put in psychiatric hospitals. A year and a half after

her symptoms began, Alexis tested at a 4th grade level. Today, at 25, Alexis still suffers from severe neurological injury, including daily seizures. You can see pictures of Alexis both before and after receiving the vaccine in the photo insert.

Joel Gomez, 14 years old.

Joel was an athletic, healthy teenager when he got two Gardasil doses in 2013. Without warning, Joel died in his sleep after the second dose. Joel's family sued for compensation in the Court of Federal Claims. The family's expert witness, Dr. Sin Hang Lee, testified that Gardasil likely caused his heart attack. The Department of Justice settled the case, awarding the family almost the full statutory death benefit.

Abbey Colohan, 12 years old.

In a small town in Western Ireland, Abbey received the first dose of Gardasil at school. Abbey fainted immediately and then had seizures for more than an hour. Two days later, she passed out again. Abbey started to have chronic pain, fatigue, and frequent fainting spells. Abbey's teen years have been consumed with illness and hardship. Ireland's health service denies that Abbey had an adverse vaccine reaction at school.

Colton Berrett, 13 years old.

Colton was an athletic, kind, helpful teenage boy. He loved all outdoor sports. Colton started the three-dose Gardasil series when he was thirteen. Shortly after the third dose, he became paralyzed from the neck down and had to use a ventilator. Through intensive physical therapy, Colton eventually recovered some mobility but remained on a round-the-clock ventilator. He committed suicide two months before his eighteenth birthday. In the photo insert, you can see pictures of Colton that convey far more than words ever can.

Lucy Hinks, 13 years old.

Lucy was a healthy English teenager when she began the Cervarix series in her school. Shortly after the third shot, Lucy's health plummeted. She could barely walk, slept 23 hours a day, and could not think straight. She could not attend school and had to be spoon-fed. Her parents described her as being in a "walking coma." Through many therapies and treatments, Lucy has substantially recovered but still suffers from chronic fatigue.

Maddie Moorman, 15 years old.

Maddie began the Gardasil series at the gynecologist's recommendation. After the second shot, Maddie became bedridden and ill. She had debilitating headaches every day and could no longer remember things. Her mom declined the third shot for her. Through conventional and holistic treatment, Maddie's health began to recover slowly, and she was able to complete high school and go to college. But some of Maddie's symptoms never abated, including a constant buzzing in her head and the inability to think the way she could before. She took her own life at twenty-one. You can see her pictures in the photo insert.

We show that the HPV vaccine clinical trials paved the way for such tragic results. Here are some of the little-known facts we'll explore:

HPV vaccines have never been proven to prevent cervical or any other cancer. Merck and GlaxoSmithKline, the manufacturers, did not have to prove that the vaccines prevent cancer. They were allowed to use precancerous lesions as "surrogate endpoints" in the clinical trials. Scientists do not know if the decline in cases of precancerous lesions will

translate into fewer cases of cervical cancer in 20–30 years.

Even if they were 100 percent effective, which they are not, HPV vaccines do not prevent all cases of cervical cancer. The vaccines do not prevent infections from all HPV types associated with cancer, and not all cervical cancer is associated with HPV. HPV vaccines are *not* a replacement for cervical screening, yet evidence strongly suggests that young women are skipping screening in the mistaken belief that they no longer need it. HPV vaccine marketing hype appears to have contributed to a sharp drop-off in cervical screening among young women.

None of the participants in the clinical trials received a true saline placebo. None of the clinical trials included a straightforward comparison of the effects of the vaccine against a true control. We use the term “fauxcebo” to describe the aluminum-containing adjuvants, other vaccines, and chemical mixtures that control subjects received instead of true saline placebos. These fauxcebos masked the adverse effects of the vaccines, making them appear safer than they would have if compared to true placebos.

Merck told young female clinical trial subjects that the vaccine had already been proven safe and that the placebo was saline. Both claims were false. A key purpose of the clinical trials was to establish safety, and the placebo was not saline. Clinical trial subjects suffered because of these lies.

The manufacturers never tested HPV vaccines on human fertility. Although this vaccine is given to adolescents throughout the world, the manufacturers acknowledge in their package inserts that they never tested the vaccine for fertility effects in humans—only rats. We look at the substantial evidence of severe adverse effects on fertility, including miscarriage and premature ovarian failure in girls and young women.

Evidence shows that certain ingredients in HPV vaccines, including sodium borate (also known as borax, a cleaning agent), may have negative effects on fertility. The European Chemicals Agency requires sodium borate to carry the following warning: “DANGER! May damage fertility or the unborn child.” In the US, borax is banned in food but allowed in vaccines.

The manufacturers never tested HPV vaccines to discover if they might cause cancer. The package inserts acknowledge that the vaccines have never been tested for “carcinogenicity.” But clinical trial data suggest that if women have HPV infections when they get the vaccines (and prescreening is not recommended), then they may be at higher risk for precancerous cervical lesions or worse. Some clinical trial participants later developed cancer, including cervical cancer.

The Gardasil clinical trials used a new metric, “New Medical Conditions,” as a way to claim that serious health problems after vaccination were unrelated to the vaccine or aluminum-containing fauxcebo. More than 50 percent of all clinical trial participants reported “new medical conditions,” including infections, reproductive disorders, neurological syndromes, and autoimmune conditions. The FDA did not question this novel metric or whether the vaccine itself might be contributing to these conditions.

Although 11–12-year-olds are the target population for this vaccine (and it is approved for children as young as nine), the vast majority of clinical trial subjects were considerably older. Only a small percentage of participants were aged 12 or younger, and their age cohort, or group, lacked a true saline control placebo, as did the older age groups. Preteens, on the cusp of puberty, have significant biological differences from young adults, the primary age group in the clinical trials. Thus, the target population was insufficiently studied

before the vaccine received approval.

Doctors and scientists have published peer-reviewed articles on the adverse effects that many young women reported after HPV vaccination. Here is a nonexhaustive list:

- Headache
- Orthostatic intolerance
- Syncope
- POTS
- Fatigue
- Cognitive dysfunction
- Disordered sleep
- Visual symptoms
- Blurring of vision
- Gastrointestinal symptoms
- Neuropathic pain
- Motor symptoms
- Skin disorders
- Voiding dysfunction
- Limb weakness
- Vascular abnormalities
- Irregular period

Despite US government assertions that the vaccine is safe,

the federal compensation program for vaccine injury has paid out millions of dollars in damages for HPV vaccine injuries. Families have received compensation for death, brain injury, multiple sclerosis, complex regional pain syndrome, Guillain-Barré syndrome, ulcerative colitis, and other severe, debilitating conditions. We delve into reported HPV vaccine injuries and the pursuit of justice.

All participants in the Gardasil clinical trials who received a “placebo” rather than the vaccine were encouraged to receive HPV vaccines at the end of the clinical trial period. By doing this, Merck destroyed any opportunity for large-scale, long-term safety and efficacy studies of vaccinated versus the original control subjects.

Lawsuits have been filed against Merck, GlaxoSmithKline, and government health agencies around world, including in the US, India, Colombia, Japan, Spain, and France. Families want treatment for their injured children and young adults. They also want to hold the manufacturers accountable and to prevent future injuries to other children.

National and international health agencies are working hand in glove with the HPV vaccine manufacturers to promote, advertise, finance, recommend, and even compel children to get HPV vaccines. We have included examples of CDC and UK National Health Service ads for HPV vaccines in the photo insert.

The US government earns royalties from Merck and GSK for licensing HPV vaccine technology. Scientists at the National Institutes of Health, with others, participated in the invention of HPV vaccines. While receiving millions of dollars in annual royalty income from these corporations, the US government ostensibly holds the upper hand in regulating them. The conflict of interest is obvious.

The HPV vaccine saga began just as Merck was trying to turn the page on its criminal conduct with Vioxx, its failed painkiller drug. Just as Vioxx was raking in \$2.5 billion in annual revenue—almost the same amount Gardasil and Gardasil 9 are now bringing in—Merck withdrew it from the market because it was causing heart attacks, strokes, and death. Merck had not disclosed known heart attack risk in its clinical trial data. In 2005, Merck paid multimillion-dollar civil and criminal penalties and entered into a \$4.85 billion settlement with injured plaintiffs. Congress, the Department of Justice, and the media investigated Merck for falsifying data, making false statements to regulators, making false marketing claims, failing to disclose material information to consumers, and more. In 2006, the FDA approved Gardasil, leading some to dub the HPV vaccine “Help Pay for Vioxx.” History repeats itself in the Merck Vioxx and Gardasil sagas.

In researching and writing this book, we spoke with more than a hundred people who shared with us their time, expertise, and deeply personal stories. We also spoke with many injured young people and their parents, as well as with parents whose children died. We are humbled that they trusted us with their stories and have done our best to give them voice.

We also reached out to doctors, scientists, and medical researchers. We met with advocates fighting for those who have been injured. We met personally with women who were subjects in the clinical trials and spoke with doctors who were principal trial investigators. We also contacted HPV vaccine proponents, including the FDA, and are grateful for their assistance. We reached out to Merck with a long list of questions on two occasions but received no replies.

We bring legal and financial backgrounds to this task. While we are not doctors or scientists, we believe that our perspective is critical to this debate. For too long, those with real and potential conflicts of interest in industry and government have dominated public discourse about vaccine safety.

Part I examines the clinical trials and the race to develop the vaccine. It analyzes surprising data that have received little attention to date. We also provide a primer on cervical cancer to explain its real risk factors. While we focus on the Gardasil clinical trials, we also look at Cervarix, GlaxoSmithKline's version, and at Gardasil 9, the only currently available HPV vaccine in the US. (GSK took Cervarix off the US market, likely because of low sales. Merck replaced Gardasil with Gardasil 9, the new HPV vaccine against a broader range of HPV viruses.) We use official documents and the accounts of two young women injured in the clinical trials to examine their many flaws. We close Part I with a look at India, where clinical trials led to national outrage and a legal battle against the pharmaceutical industry and its partners.

Part II covers what happened after the vaccines hit the market. How do you sell a vaccine for an infection that clears almost all the time? We look at the marketing magic and "disease branding" that created a market out of thin air. We also share heartbreaking stories of injury and death. We follow several families' fights for justice. We look closely at the US and Australia, powerhouses in HPV vaccine development, whose governments are leading the charge toward universal HPV vaccine uptake.

Part III is a deeper dive into the latest research on aluminum-containing adjuvants and other ingredients of concern, including DNA fragments. We discuss HPV transmission, the potential threat of "type replacement," cervical screening in both high and low resource countries, and more. If you don't need the deep science dive, skip ahead.

Finally, Part IV takes readers around the world to Japan, Denmark, Ireland, the UK, and Colombia. Each of these countries is a unique case study regarding the HPV vaccine, and the role that governments, media, and the law play. You'll get a close look at the latest developments in each country yet also see the global threads in common.

We strongly advocate for informed consent and hope that this book will help people to make truly informed decisions about this

vaccine. Only you can be the ultimate judge for yourself or your loved one.

This story is ever-evolving, so inevitably there will be new developments before and after this book goes to print. We anticipate future editions, but in the meanwhile, for additional information or to contact us, please go to www.hpvvaccineontrial.org.

We include a glossary below to help with the “alphabet soup” of agencies and organizations that this topic requires.



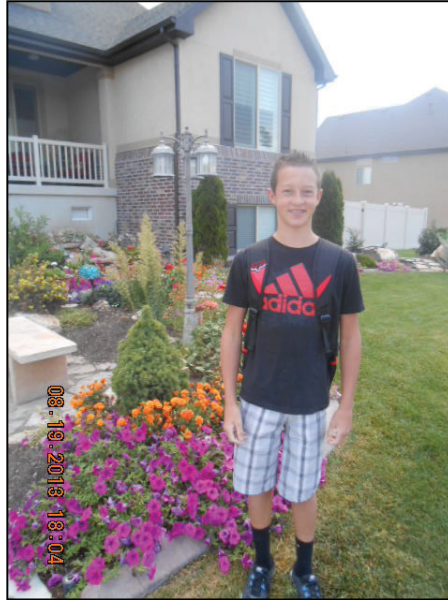
In Chapter 15, we learn about Alexis Wolf, who suffered permanent, serious neurological injury after HPV vaccination. These are before and after photos.

In 2010, Chris Tarsell died shortly after her third Gardasil shot. In Chapter 15, we learn how Emily Tarsell, Chris's mother, took the case through the Vaccine Injury Compensation Program, which determined that Gardasil vaccination likely caused Chris's death.





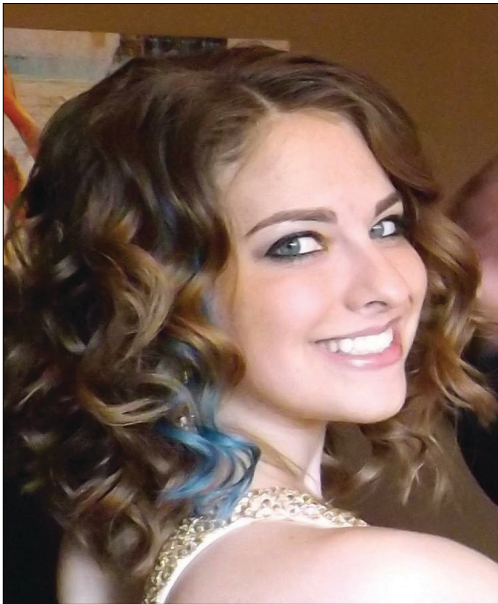
As we discuss in Chapter 15, Chris Tarsell was a talented young artist. Above is one of her paintings.



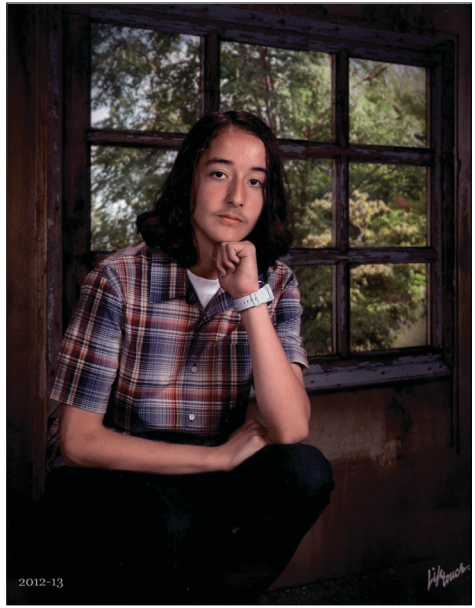
Colton Berrett had a reaction within two weeks of his second Gardasil shot in 2013. He became paralyzed and dependent on a ventilator 24/7. Colton took his own life in 2018, shortly before his 18th birthday. His story is in Chapter 15.



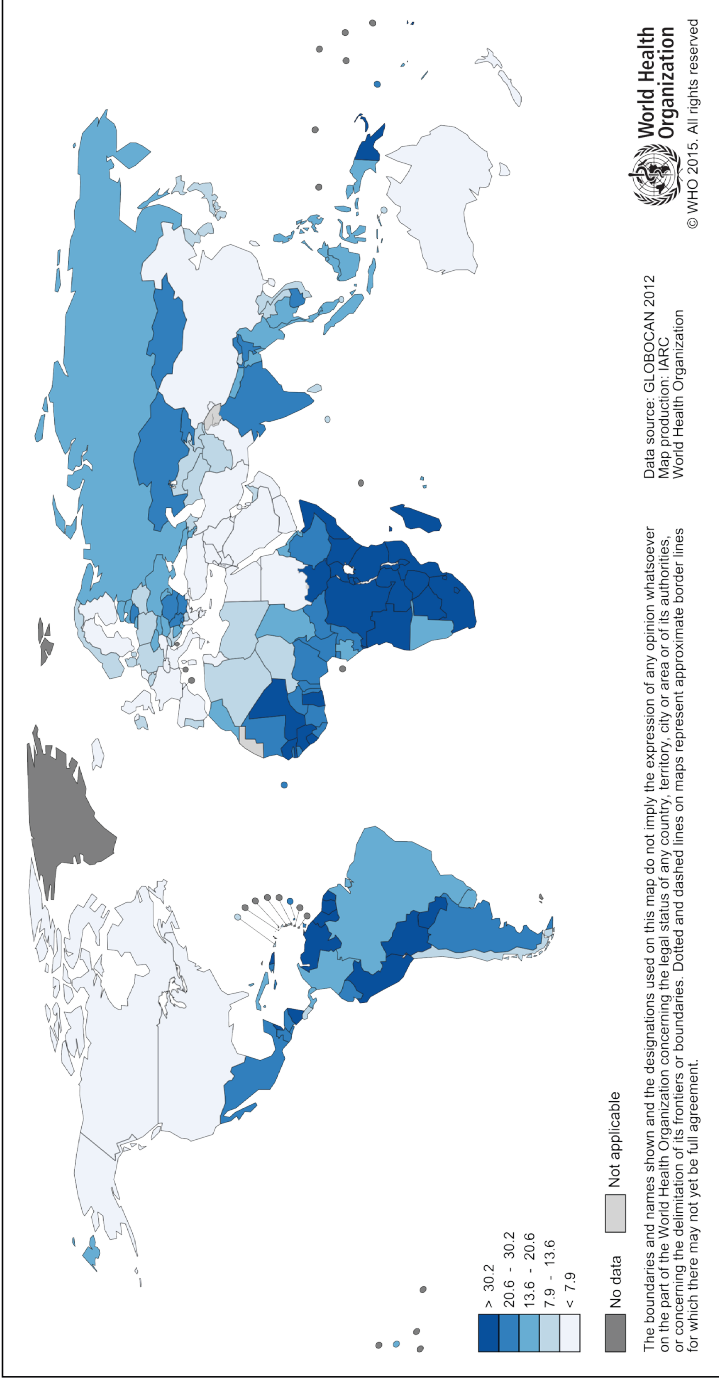




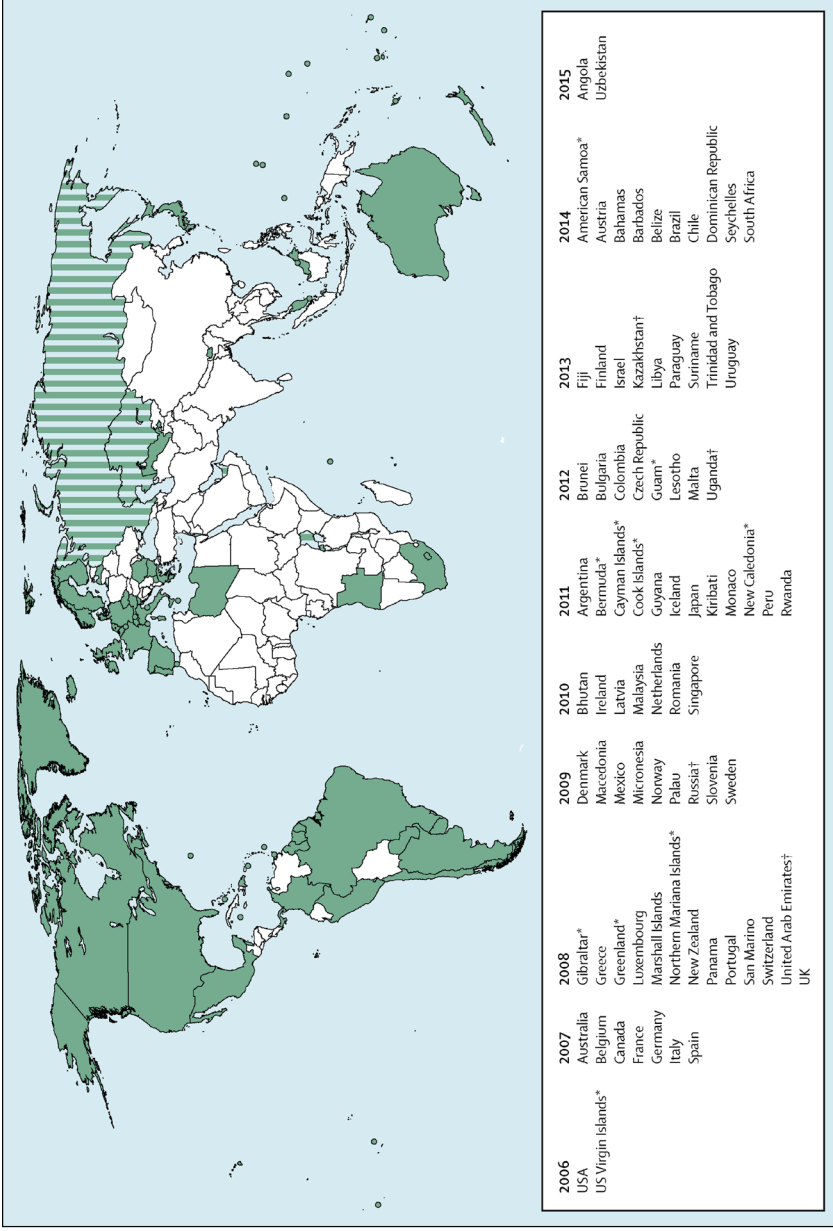
We learn in Chapter 15 of the painful shock Maddie's family suffered when she took her own life, unable to endure the silent pain of her lasting adverse effects from HPV vaccination.



Joel Gomez died within hours of receiving his second Gardasil dose. In Chapter 15, we delve into the case Joel's parents brought to the Vaccine Injury Compensation Program for his death.



The incidence of cervical cancer predominantly affects low resource countries. We explore the many factors influencing cervical cancer incidence in Chapter 4.



Cervical cancer incidence is rare in high resource countries, as we discuss in Chapter 4. Despite low incidence in these countries, HPV vaccine producers market there aggressively. (Source: The Lancet, "Global estimates of human papillomavirus vaccination coverage by region and income level: a pooled analysis," [https://www.thelancet.com/journals/lanlgl/article/PIIS2214-109X\(16\)30099-7/fulltext](https://www.thelancet.com/journals/lanlgl/article/PIIS2214-109X(16)30099-7/fulltext); license agreement: <https://creativecommons.org/licenses/by/4.0/>.)

As we learn in Chapters 13 and 14, the CDC strongly promotes the HPV vaccine. The US government earns substantial royalties from sales, as we analyze in Chapter 3.

**If there were a
vaccine against
cancer, wouldn't
you get it for
your kids?**

**HPV vaccine is
cancer prevention.
Talk to the doctor
about vaccinating
your 11–12 year old
sons and daughters
against HPV.**

www.cdc.gov/vaccines/teens



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention



Distributed by:

HPV Vaccination

can **prevent** an estimated

28,500 new cancers per year.

That's more than the average attendance at one of the largest pop concert tours of last year.



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

CS267091

HPV vaccination is the best way to **PREVENT** many types of **CANCER**.

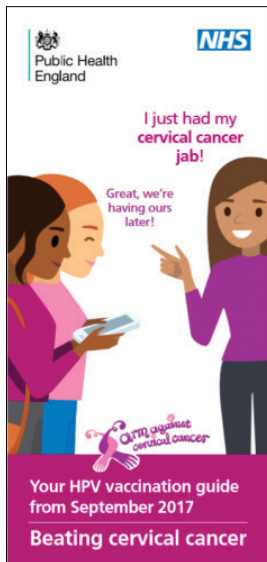
HPV vaccination is **RECOMMENDED** at ages 11 or 12.

HPV vaccination is **REDUCING** HPV DISEASE.

3 THINGS PARENTS
SHOULD KNOW **ABOUT**
PREVENTING CANCER

www.cdc.gov/vaccines/teens





The UK has one of the highest uptake rates of HPV vaccines in the world. In Chapter 27, we examine why UK direct marketing to school children may explain why.

The National HPV Vaccination Program

Males and females aged **12-13** can get the vaccine for **free** at school.



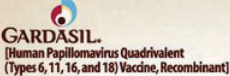
They must return a **signed consent form** to their school.

Males and females need **three doses** of the HPV vaccine for best protection.



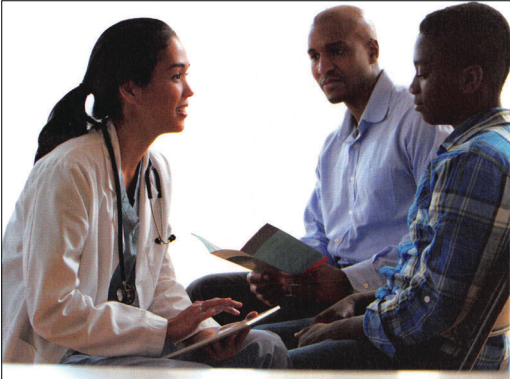
If a dose is missed, talk with your **school or GP** about a catch up.

Boasting one of the HPV vaccine co-inventors, Australia was one of the first countries to approve the vaccine. We discuss the vaccine's invention in Chapter 3 and Australia's role in it. Australian children receive HPV vaccines in school, as we discuss in Chapter 18.



Your **SON** or **DAUGHTER** could be **oneless** person affected by HPV disease.

PARENTS:
Why GARDASIL for your son or daughter?
[Find Out](#)



HPV facts every parent should know.

- Approximately 14 million people will become newly infected with human papillomavirus (HPV) each year.¹
- For most people, HPV clears on its own. But, for others who don't clear the virus, it could cause certain precancers, cancers, and other diseases later in life (such as cervical or anal cancer). Your child may not be at risk for HPV now, but the risk may increase as they get older.
- Talk to your child's doctor about the potential risks of HPV. **Schedule an appointment today.**


Facts about HPV.


What is HPV?
HPV (short for human papillomavirus) is a virus that can cause certain cancers and diseases in both males and females later in life.

Signs and symptoms
Because HPV often has no visible signs or symptoms, many people who have the virus don't even know it.

What can parents do?
Protection starts with knowing the facts. Now that you're armed with more information, talk to your child's doctor.

Talk to your child's doctor about HPV vaccination.

 Most preventive services are covered at \$0 out of pocket when you visit a network doctor.*

 Don't have a network doctor? Visit provider search on myuhc.com.

*Certain preventive care services are provided as specified by the Patient Protection and Affordable Care Act (PPACA), with no cost-sharing to you. Some plans may require copayments, deductibles and/or coinsurance for these benefits. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on your health plan ID card.
Reference: 1. Centers for Disease Control and Prevention (CDC). Human papillomavirus. In: Hamborsky J, Kroger A, Wolfe C, eds. *Epidemiology and Prevention of Vaccine-Preventable Diseases*. 13th ed. Washington DC: Public Health Foundation; 2015: 175-186.

Merck markets HPV vaccines to parents and children alike. This 2018 flyer from an insurance company urges parents to vaccinate their preteenage children. We discuss marketing in Chapters 13 and 14.



Parents in Ireland (top) and Colombia (bottom), literally continents apart, took to the streets to protest government neglect in the face of severe HPV vaccine injuries. In Chapters 26 and 28, we discuss what happened in these two different countries. Girls suffered the same adverse reactions, yet their injuries were labeled “psychosomatic,” and the girls and their families were branded “antivaccine.” We discuss the marginalization of injury in Chapter 15.

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