Collectivism: Family or State? An Essay On Mandatory Vaccination by Neurosurgeon, Russell Blaylock, MD

A recent article appearing in the January issue of the American Medical Association Journal of Ethics, titled Virtual Mentor, should alert thinking Americans to a dangerous precedent being set by so-called health "authorities." Actually, the concept of compulsion by the state for the "public good," is not all that new and is consistent with a collectivist philosophy. So, you may ask–what is collectivism?

Basically, collectivism does not recognize the individual as being important to society; in fact, its philosophers feel that the individual, especially the intellectual, is an enemy of the "public good." Collectivism's most recognized political expression in modern times is known as socialism (actually communism–See the Communist Manifesto).



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The founders of our country did not hold this view, rather they reasoned that the

individual must be protected from collectivism at all levels, hence the Constitution and Bill of Rights. The court system was designed during the founding to protect the rights of the individual. Within the founders' philosophical view, the family is central to the individual's rights. That is, it is the father and/or mother who represent the most protective structure for innocent children and not the state. The state intervenes only in the most extreme cases of abuse and this is carefully regulated so as to prevent abuse by the state.

Since the Civil War, we have witnessed a gradual, yet progressive move toward the collectivist philosophy, where the state replaces the family and individuals are sacrificed in the name of the "public good." This process has gained rapidly on many fronts, but one of the most disturbing is in the area of public health.

Ronald Reagan warned in 1961–"One of the traditional methods of imposing statism or socialism on a people has been by way of medicine. It is very easy to disguise a medical program as a humanitarian project." Students of the history of collectivism will also recognize that calls for increasing the power of the state over the individual is always couched in terms of the "public good" and "protecting the public." That is, it is a "crisis" that demands collectivist solutions and these solutions must be accepted without debate or analysis by critics or more thoughtful and cautionary individuals. The perfect example of this is the debate over vaccine effectiveness and safety.

With that short introduction to collectivist thinking, let us examine the paper, Virtual Mentor, written by Susanne Sheeley and Joel Meyer. They begin by lamenting the fact that the previous system of recruiting volunteers for testing experimental vaccines has fallen on hard times. That is, fewer people are volunteering. They note that the "volunteers" are fully informed of possible complications caused by the vaccines and these volunteers have consented to be used in the experiments, in essence, as human guinea pigs. The former assurance is not true, as several studies have shown that quite often recognized, serious potential complications are withheld from the volunteer.

Because of this fall in volunteers, they tell us– "But relying on altruism alone to facilitate clinical trials is potentially unsustainable and ethically contentious." So, what is their solution to this problem? Compulsory involvement in vaccine studies is one alternative solution that is not as outlandish as it might seem on first consideration.— Mandatory involvement in vaccine trials is therefore perhaps more akin to military conscription—. In both conscription and obligatory trial participation, individuals have little or no choice regarding involvement and face inherent risk over which they have no control, all for the *greater good of society*. (Italics mine). This statement is reminiscent of a statement made by the Fabian socialist and first general director of UNESCO Juliar Huxley in which he said concerning implementation of a radical eugenics program—"it will be important for UNESCO to see that the eugenic problem be examined with the greatest care, and that the public mind is informed of the issues at stake so that much that is now *unthinkable may at least become thinkable*." (italics mine)

The extreme left collectivists bristle at being compared to the National Socialists, so I will instead examine the source of Hitler's eugenic thinking, another "unthinkable" idea made "thinkable" by careful manipulation of American social opinion makers in the very early 1900s. Keep in mind that all these eugenic programs eventually resorted to compulsion because the public could not be convinced to voluntarily accept the deadly prescription being proposed by the state and self-appointed protectors of the public good.

The beginning of the eugenic movement started with suggestions for human betterment through selective breeding by British biologist Sir Francis Galton in 1882. At the beginning of the 20th century (1904-1920s) the need for enforcement of eugenic programs became a matter of "public health." The eugenic movement was heavily funded by the Rockefeller foundations and Carnegie Institutions from its inception and continued even beyond the National Socialist era.

It is also important to appreciate that this public health movement was led by some of the most prominent individuals in society. Harvard educated Charles Davenport was at center stage in this terrifying public health movement. The elite proponents of mandatory eugenic policies included Professor Henry Osborn, director of the American Museum of Natural History, Alexander Graham Bell, wife of railroad magnate E.H. Harriman, the prestigious Cold Spring Harbor biology laboratory, James Wilson, secretary of the Department of Agriculture, Major Leonard Darwin (Charles Darwin's son), Winston Churchill, Theodore Roosevelt and Linus Pauling, to name a few.

University and college courses were provided for America's most prestigious institutions of learning, such as Harvard, Princeton, Yale, Purdue, University of Chicago, Northwestern University, New York University and University of California at Berkley. Soon eugenic courses were being adopted by high school textbooks and courses. The journal of the American Medical Association (JAMA) proudly covered the international eugenics meeting in London and did so in glowing terms.

The goal of the eugenics proponents was to eventually sterilize 14 million people in the United States alone and millions more worldwide. Before clearer heads prevailed, 60,000 Americans were coercively sterilized and this is considered a conservative figure. Support for this monstrous program was based on pseudoscience and powerful state-supported propaganda, just as we are witnessing in the present day vaccine mania.

Each generation thinks it is far more intelligent than previous generations and therefore comparisons with earlier abuses of science and public policy cannot be made. Yet, support for forced sterilization and interment camps for the "unfit" were strongly supported by men considered to be the giants of biology and medicine as well as influential men of government and private foundations. Eugenic mania spread across the world among the most intelligent class. Opponents were labeled "enemies of the public good" and as individuals unqualified to discuss the problem, just as we hear today with vaccine safety. Vaccine mandate proponents state that opponents of their programs are uneducated and unqualified to speak on the subject, even when they are far greater experts in the field of vaccine safety and pathophysiology than the proponents.

I have written eight papers and several chapters on the mechanisms of vaccine-induced neuropathology and neurological injury and proposed a plausible mechanism to explain a link to vaccine-induced autism, yet the only person quoted on this issue in the national media is Paul Offit, who not only profits handsomely from his own vaccine creation, but admitted in an interview that he knows nothing about neurology or brain function.

It was assumed by the eugenics social engineers that all crime, mental subnormality, laziness, alcoholism, blindness and "antisocial behavior" were hereditary and therefore controllable by forced sterilization. Laws were passed based on this phony science and tens of thousands suffered.

Lucien Howe, one of the most prominent names in ophthalmology, in 1918 took up the cause of eugenic prevention of blindness and poor vision, just as Offit carries the vaccine banner. He compiled data showing that \$3.8 million was the national cost of blindness and that mandatory sterilization of the blind would prevent this nation tragedy. The problem was that over 90% of blindness had no hereditary link. Despite this, he campaigned tirelessly to have laws passed for forced sterilization of all blind individuals.

Howe did not stand alone, but was given valuable support by the AMA and Carnegie Institution. He suggested that authorities wait to discover a blind person and "then go back and get the rest of his family." By 1921, the Eugenic Record Office (ERO) and the AMA section on ophthalmology had drafted a more comprehensive law that targeted all people with imperfect vision. Doctor Howe insisted that the law include provisions to imprison the visually impaired. The AMA provided a list of prominent medical professors to support Howe's legislative proposals. All of this is reminiscent of the present vaccine battle.

Sheehy and Meyer makes the argument that because the public benefits from vaccine trials people should be made to participate against their will. We must then ask–Should people be forced to have an experimental surgical procedure because if successful, it will benefit many? Should they be forced to take experimental medications?

This principle of mandatory medical procedures could also apply to experimental brain surgery, such as the infamous frontal lobotomy. After all, at the time, it was thought to greatly benefit thousands and was used to treat sadness, depression, unruly behavior in children and anxiety. Sure, the effects were irreversible, but so is the neurological damage caused by vaccine reactions.

The history of medicine should have taught us that excitement over a treatment or procedure can often turn to disaster down the road. Thalidomide was considered to be a very safe tranquilizer–no one knew at the time if given to pregnant mothers, the child would be born with crippling limb deformities. What if taking thalidomide had been mandatory at the time–millions would have been crippled.

We are learning a great deal about the safety issue associated with vaccines, but much of this careful research is being ignored. Tomljenovic and Shaw, Strunecka and others have published a number of very important papers in this field and I think I have made a compelling case for a mechanism, immunoexcitotoxicity, to explain the effect of multiple vaccines on brain development including vaccine-associated seizures.

All of us should be terrified by the totalitarian nature exercised by the proponents of mandatory vaccines. Many are openly calling not only for mandatory vaccinations, but also hiding critical safety data from the public so as to give the impression of vaccine safety. Programs for mandated eugenics ended when the public realized the true result of such plans. This history is now rarely spoken about, yet present vaccine policies are just as frightening because they hold the potential to irreversibility destroy the lives of millions of our children.

I would make an open proposal to those who support mandated vaccines and participation in vaccine trials. The first participants should be the CEOs of pharmaceutical vaccine makers, their board members, their families and then all their employees and their families. All those who have written or proposed legislation or rules for mandating vaccines should also be submitted for testing, including Sheehy and Meyers. This, of course includes all of their families. At the top of the list should be Paul Offit. I can assure you that if such a policy were instituted we would be hearing a whole lot less about mandating vaccines.

Visit Dr Blaylock's website HERE

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Curriculum Vitae

Name: Russell L. Blaylock, M.D.; CCN DOB: November 5, 1945 Spouse: Diane Kempff Blaylock

Pre-medical education: Northeast State University, Monroe, Louisiana: 1963-1966 Louisiana State University, Baton Rouge, Louisiana: 1966-1967

Medical Education: Louisiana State University School of Medicine in New Orleans 1967-1971

Internship: Medical University of South Carolina: Charleston, South Carolina Straight surgery intern (Trained with Curtis Arts, M.D. and John Moncrief, M.D, authorities in burn and trauma.)

Residency: Medical University South Carolina: Neurosurgery Residency, 1972-1977. Chief Resident and Teaching fellow 1976-1977. Chief of Neurology, 1973-1974. Trained with Ludwig G Kempe, M.D

Board Certification: American Association of Neurological Surgeons, 1980. Certified Clinical Nutritionists in 2007.

Private Neurosurgical Practice: May, 1977 through Feb 2001.

Present Profession: President of Advanced Nutritional Concepts and Theoretical Neurosciences, LLC. Visiting Professor of Biology; Belhaven University, Jackson, Mississippi.

Editorial Appointments: Journal of American Physicians and Surgeons, Journal of the American Nutriceutical Association, Scientific Advisory Board of the Life Extension Foundation, Editorial Board of Fluoride Journal; Editorial board of Surgical Neurology International

Appointments: Clinical Assistant Professor in Neurosurgery at the University of Mississippi Medical Center, retired in 2001. Visiting Professor of Biology, Belhaven University-Jackson, Mississippi.

Journal Publications:

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