

COMPLAINT

PURSUANT TO THE HEALTH CARE COMPLAINTS ACT 1993 THAT THE “AUSTRALIAN VACCINATION NETWORK” IS PROVIDING A HEALTH SERVICE THAT ENDANGERS PUBLIC HEALTH

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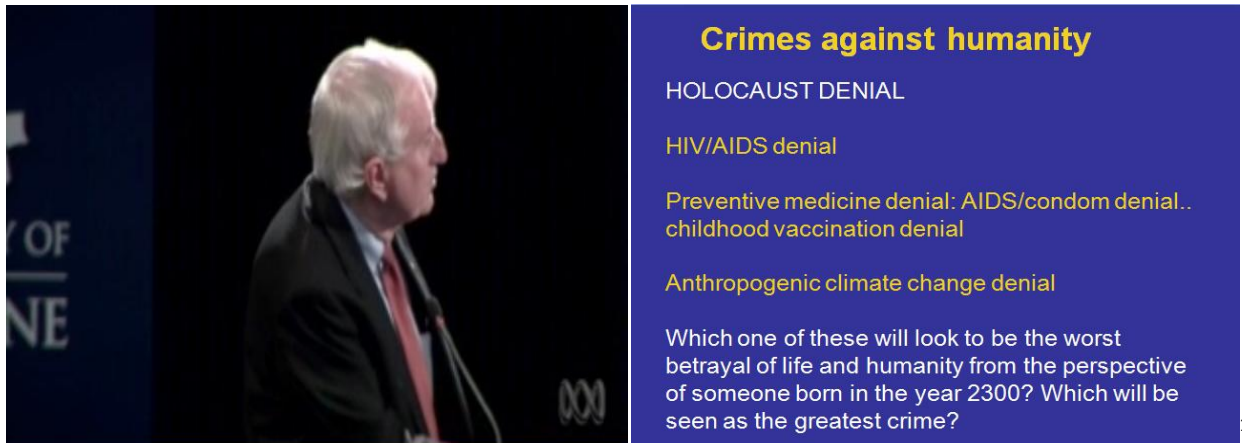
COMPLAINT

PURSUANT TO THE HEALTH CARE COMPLAINTS ACT 1993

THAT THE "AUSTRALIAN VACCINATION NETWORK" IS PROVIDING A HEALTH SERVICE

THAT ENDANGERS PUBLIC HEALTH

0. INTRODUCTION.



These pictures show Nobel laureate Professor Peter Doherty, delivering the keynote address at Melbourne's 2009 Festival of Ideas, hosted by Melbourne University, with one of his PowerPoint presentations. Professor Doherty said there that Childhood Vaccination Denial is a "Crime Against Humanity." Professor Doherty AC is a researcher in the field of medicine. He received the Albert Lasker Award for Basic Medical Research in 1995, the Nobel Prize in Physiology or Medicine in 1996, and was named Australian of the Year in 1997.

Professor Doherty's research focuses on the immune system, and his Nobel work described how the body's immune cells protect against viruses. His views on immunology and vaccination should therefore be taken seriously.

He described the increase in the incidence of whooping cough due to the decrease of vaccination as *"a tragedy and a completely preventable tragedy."*

It is therefore remarkable that no action has been taken against the most active and most effective childhood vaccination deniers, the Australian Vaccination Network, (AVN).

This complaint is therefore submitted with the intent of persuading the NSW Health Care Complaints Commission to take action against the AVN. This complaint is not intended to enter into the debate about the risks and benefits or otherwise of vaccination or any particular vaccine. This complaint is intended to prove that the Australian Vaccination Network engages in misleading and deceptive conduct to dissuade people from vaccinating themselves and their children, and that consequently the AVN is a danger to public health and safety.

Pursuant to S96 of the Health Care Complaints Act, this Complaint is made in good faith with the

intent of preventing an organisation and its officers from endangering public health and safety, and therefore I claim exoneration from any action, liability, claim or demand.

1. WHO IS THE AUSTRALIAN VACCINATION NETWORK? (AVN).

The AVN is a very active group who freely dispense information and advice on diseases and vaccinations. The AVN's activities include a magazine "Living Wisdom", a quarterly newsletter "The Inside Edition," a website, email newsletters, public meetings and seminars, Internet Web Seminars, production and sale of videos DVDs and CDs, and appearances on radio and television. In all of these, Meryl Dorey features very prominently. The AVN's magazine "Living Wisdom" claims to have a circulation of over 2,500 to subscribers and 5,000 via newsagents. ²

One logo used by them is:



The AVN is registered with the Australian Securities and Investment Commission as a business with the ARBN of 30 077 002 923,

The AVN is registered with the NSW Office Of Liquor Gaming and Racing as a charity for fundraising purposes with licence number 11694.

The AVN was first registered in 1994 with the NSW office Of Fair Trading as an Incorporated Association with the registration number 20791 27, (under its original title of "The Australian Council For Immunization Information").

Their postal address is listed as PO Box 177, BANGALOW NSW 2479, near Byron Bay.

The AVN's objects, as listed in the Application For Incorporation of Association are:

- "(a) To maintain and provide information relating to immunization and vaccination.*
- (b) To be a central source of information for public benefit.*
- (c) To ensure and assist community awareness as to immunization issues."*

The AVN's principal activities, as listed in the Application For Incorporation of Association are:

- "(a) To provide counselling and support in relation to immunization issues.*
- (b) To provide a network between parents and health carers.*

(c) To compile information and data and arrange distribution.”

2. WHO IS THE PUBLIC OFFICER?

The Public Officer is listed by the Office of Fair Trading as **MERYL DOREY**. The public face of the AVN is Meryl Dorey who claims that her medical qualifications are that she *“has studied this issue for 20 years”* and that she *“has a brain.”* She admits to having no formal medical qualifications, and said on television that *“you don’t need an M D to have a brain.”*³

3. WHO ARE THE AVN’S BOARD MEMBERS?

Documents filed with ASIC list the directors as Meryl Dorey, Melissa Begg, Michael Francis Stacey, Molly Knight, Grant Touzel. The reader should note that under Australian law, all Directors are personally responsible and culpable and liable for any consequences of the actions of the organisation and its officers.

4. JURISDICTION: DOES THE HEALTH CARE COMPLAINTS ACT 1993 APPLY TO THE AVN AND MERYL DOREY?

In Division 1 of the Act, we find that a complaint may be made by any person against a health service provider even though, at the time the complaint is made, the health service provider is not qualified or entitled to provide the health service concerned.

The Act defines a "health practitioner" as *“a natural person who provides a health service (whether or not the person is registered under a health registration Act).”* It defines a "health service provider" as a *“person who provides a health service (being a health practitioner or a health organisation).”*

The Act defines a "health service" as including the following services, *inter alia*, whether provided as public or private services:

*“(f) community health services,
(g) health education services,
(k) services provided in other alternative health care fields.”*

Clearly therefore, both the AVN, (being a health service provider), and Meryl Dorey (being a health service provider and health practitioner), fall within the jurisdiction of The Health Care Complaints Act 1993, via these three sub-paragraphs and their claims to provide *“counselling,” “information,”* and *“support,”* and their activities in providing technical medical information and medical advice.

As Meryl Dorey is the spokesperson for the AVN, and a Director and the Public Officer, my complaint is against both her and the AVN. For convenience I shall usually refer to simply “the AVN” in this complaint, although my complaint applies also to her.

5. IS THE AVN PROTECTED BY A “RIGHT OF FREE SPEECH?”

Contrary to the perceptions of an Australian public raised on a diet of Hollywood movies, there is no right of free speech in the Australian Constitution. On the contrary, Australian legislation and case law are littered with restrictions on speech, from contempt of parliament, national security, contempt of Court, *sub judice* rules, criminal defamation, breach of copyright, racial vilification, etc. For example, see *Jones v Frederick Toben*. In 2002, a judge of the Federal Court of Australia found that Töben's website "vilified Jewish people", and ordered Töben to remove offensive material from his site. In May 2009, he was sentenced to three months in jail by Justice Bruce Lander after being found guilty of 24 charges of contempt, in that he continued to publish offensive views in defiance of Court orders.⁴

Likewise, cancer quack Jillian Margaret Newlands has been ordered by the Queensland Supreme Court to cease providing her quack cancer cure and dangerous advice, such as advising clients not to seek chemotherapy treatment.⁵

So, in Australia, one is entitled to free speech provided that one does not harm an individual or society in general. As Oliver Wendell Holmes USA CJ, put it so succinctly, *“The most stringent protection of free speech would not protect a man falsely shouting fire in a theatre.”*⁶ The AVN is clearly harming individuals and society and is not protected by any right of free speech.

Indeed, by explicitly including “health education” in the Health Care Complaints Act, speech is clearly not protected here, as speech is necessarily a part of the education process.

6. WHAT FORM OF ADVICE DOES THE AVN GIVE?

The AVN says that its Mission Statement is:

*“The AVN, publisher of Informed Voice magazine, is dedicated to the idea that health can be achieved and maintained without the use of pharmaceutical drugs and vaccines.”*⁷

The AVN qualifies that by saying later that:

“Information on all health options should be freely available in order to enable truly informed choice on these issues.”

It is my complaint that the AVN, despite its claim to issue balanced information and advice on “all health options”, issues statements and advice that are clearly wrong, misleading, deceptive, biased, and a danger to public health. Nowhere in all my research into the AVN did I find any statement from the AVN supporting vaccination in any way. All AVN statements regarding vaccination that I found disparaged vaccination, except for mentions of “homeopathic vaccination.”

The AVN’s website offers books for sale which denigrate vaccines. Some are shown in Appendix 1. I could not find any AVN publication, or any publication recommended by the AVN, that supported vaccination.

The AVN's true intention is revealed by their advertisement on their website for T-shirts bearing their name with the logo:



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7. SOME EXAMPLES OF DANGEROUS STATEMENTS AND ADVICE.

7.1. Regarding the use of the MMR vaccine in Japan, the AVN says on their website: ⁹

“ Some countries such as Japan have stopped using the combination vaccine because of the increased risk. ”

Response 7.1.1. Japan. First, let us be clear. In April 1993, Japan stopped using the MMR vaccine, (five years before the Wakefield paper¹⁰ was published), following unsubstantiated reports that the anti-mumps component might be causing meningitis.¹¹ This was then an unsubstantiated perceived risk and the Japanese Government commissioned research to see if there was an actual risk. “Perceived Risk” is different to “Actual Risk.” The AVN fails to refer to later research, very widely reported, that showed that in Japan, the number of children with autism continued to rise after the MMR vaccine was replaced with single vaccines. Hideo Honda PhD of the Yokohama Rehabilitation Center concluded that the MMR vaccine cannot have caused autism in the many children with autism spectrum disorders in Japan who were born and grew up in the era when MMR was not available. “The findings are resoundingly negative,” Honda said in his report.¹² So, the perceived “increased risk” was found to be baseless, and for the AVN to say that *“Some countries such as Japan have stopped using the combination vaccine because of the increased risk ”* is selective and deceptive, and completely out of date.

So the AVN's statement here is demonstrably untrue.

7.1.2. Regarding the safety of the MMR vaccine, on 15 June 2009, Meryl Dorey issued an email asking for financial contributions to fund an advertisement *“in Copland Publishing magazines (Sydney's Child, Melbourne's Child, etc.) This publication is sent out to all clinics, surgeries and many other venues and is read by a huge number of new mums and mums-to-be all over Australia.”* The ad says *inter alia*:

“Court Again Concedes Vaccines Cause Autism

“....the (US) vaccine court has ruled vaccines caused Bailey's autism and ordered compensation for his family. (Bailey) Banks is the second case where the government

could not deny the overwhelming evidence showing vaccines caused a child's autism...."

Response 7. 1.2. A careful reading of the US Court judgement ¹³ shows that the AVN's interpretation of the judgement is not correct. The judgement says that in the case of Bailey Banks, the probability in his case alone was "50% plus a feather" that the vaccine caused some side effects. Proof beyond reasonable doubt was not required. The US Government has not conceded that there is a link at all, and indeed the Act under which this action was brought provides no-fault arbitration for vaccine injury claims.

And to put this matter to rest, the judgement said on page 19:

"....the Court is inclined to view Bailey's condition as accurately as the medical records will allow; that is, to find that Bailey more likely than not suffers from PDD, and not from autism."

So the AVN's statements here are demonstrably untrue.

7.1.3. Regarding the danger of measles mumps and rubella, the AVN says

"Unlike vaccination (which offers only temporary immunity), the natural occurrence of each of these diseases (measles mumps and rubella) (all non-threatening illnesses in early childhood) generally results in lifelong immunity.:¹⁴....Research also suggests that there is a connection between MMR vaccination and the development of autism, Crohn's Disease and Irritable Bowel Disease.

Response 7.1.3.1. The claim that measles mumps and rubella are all non-threatening diseases and the supposed dangers of MMR. Where do we begin? The number of downright wrong statements here are almost overwhelming.

Measles: For the so-called non-threatening disease of measles, the UK NHS has a different view, as shown in FIG1 below. See also the Australian Dept of Health's view in FIG 3 later.

Condition	Children affected after catching measles	Children affected after the first dose of MMR
Convulsions	1 in 200	1 in 1000
Meningitis or encephalitis	1 in 200 to 1 in 5000	Less than 1 in a million
SSPE	1 in 8000 for children under 2	0
Death	1 in 2500 to 1 in 5000 depending on age	0

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FIG1

Meryl Dorey said on television that in Australia *"right now there are 12 deaths a year from measles."* ¹⁶ (This of course contradicts her statement that measles is non-threatening.)

On the same program, Professor Peter McIntyre of The National Centre for Immunisation Research and Surveillance of Vaccine Preventable Diseases (NCIRS) said there has not been a death from measles in Australia in over 20 years. She is proved wrong by the statistics in FIG 3 below.

So the AVN’s statement here is demonstrably untrue.

Mumps: For the so-called non-threatening disease of mumps, consider this table of complications in FIG 2. They might not be deadly, but they are still nevertheless devastating to the sufferers. Note that none of these figures feature anywhere in the AVN publications, leading to the conclusion that the AVN is being deliberately selective.

2 Some complications of mumps infection ^{8,14,19-23}	
Complication	Frequency
Cerebrospinal fluid pleocytosis	50%
Orchitis/epididymo-orchitis*	Up to 30%
Meningitis	10%
Oophoritis†	5%
Pancreatitis	4%
Acute unilateral deafness	0.005%
Spontaneous abortion‡	27%

* In post-pubertal males. † In post-pubertal females. ‡ If infection occurs in first trimester.

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FIG 2

So the AVN’s statement here is demonstrably untrue.

Rubella: For the so-called non-threatening disease of rubella, the consequences of infection are well known. Rubella can cause congenital rubella syndrome in the newly born. The syndrome (CRS) follows intrauterine infection by Rubella virus and comprises cardiac, cerebral, ophthalmic and auditory defects. It may also cause prematurity, low birth weight, and neonatal thrombocytopenia, anaemia and hepatitis. The risk of major defects or organogenesis is highest for infection in the first trimester. CRS is the main reason a vaccine for rubella was developed. Many mothers who contract rubella within the first critical trimester either have a miscarriage or a still born baby. If the baby survives the infection, it can be born with severe heart disorders (PDA being the most common), blindness, deafness, or other life threatening organ disorders. The skin manifestations are called "blueberry muffin lesions." ¹⁸

So the AVN’s statement here is demonstrably untrue.

Response 7.1.3.2 Autism. For the AVN’s statement that “Research also suggests that there is a connection between MMR vaccination and the development of autism,...”the AVN is referring to the Wakefield study published in the Lancet. No other research has ever found that supposed link, and Wakefield’s paper has been thoroughly discredited and retracted by the Lancet and all of his co-authors. To refer to this, even obliquely, is incompetent or dishonest, or both.

So the AVN's statement here is demonstrably untrue.

Response 7.1.3.3. Crohn's Disease and IBS. For the AVN's statement that *"Research also suggests that there is a connection between MMR vaccination and the development of Crohn's Disease and Irritable Bowel Disease...."*

The UK NHS says of this supposed link between the two diseases and the MMR vaccine:

*"Research has been published suggesting a possible link between measles vaccine and Crohn's disease. This work has been rejected by the World Health Organization, and many other scientists and doctors in the field. Independent researchers looking at the original work that claimed a link between MMR and Crohn's have been unable to confirm the theory. No increase in cases of Crohn's disease was seen after the 1994 Measles/Rubella campaign in the UK, when millions of schoolchildren were vaccinated. The charitable support group, the National Association for Colitis and Crohn's (NACC), has reviewed the relevant published research, and fully supports the two dose MMR programme in the UK."*¹⁹

In 1998, the British Medical Journal published a study that looked for a link between measles vaccination and Crohn's disease.

It concluded:

'the theory of measles as a causative factor in the development of Crohn's disease cannot be upheld'.

The Editor of the British Medical Journal commented that the theory was 'dead'.²⁰

Again, for the AVN to say that *"Research also suggests that there is a connection between MMR vaccination and the development of autism, Crohn's Disease and Irritable Bowel Disease"* is incompetent or dishonest, or both.

So the AVN's statement here is demonstrably untrue.

7.2. Regarding the dangers of Pertussis (Whooping Cough) Meryl Dorey said on television:

*"You didn't die from it (whooping cough) 30 years ago and you're not going to die from it today".*²¹

Response 7.2.1. Now this is clearly wrong. See the Australian Dept of Health study "Vaccine Preventable Diseases and Vaccination Coverage in Australia 2003 to 2005" and the total deaths which are now largely preventable, in Fig 3 below. Particularly, look at the deaths from Pertussis, (and note the deaths both before and after vaccination became widely available).

Table 2. Number of deaths from diseases commonly vaccinated against, by decade, Australia, 1926 to 1995 and 1996 to 2004*

Period	Diphtheria	Pertussis	Tetanus	Poliomyelitis	Measles†	Population estimate (yearly average)
1926–1935	4,073	2,808	879	430	1,102	6,600,000
1936–1945	2,791	1,693	655	618	822	7,200,000
1946–1955	624	429	625	1,013	495	8,600,000
1956–1965	44	58	280	123	210	11,000,000
1966–1975	11	22	82	2	146	13,750,000
1976–1985	2	14	31	2	62	14,900,000
1986–1995	2	9	21	0	32	17,300,000
1996–2004	0	17	6	0	0	19,200,000

* Sources: Feery B. One hundred years of vaccination. *Public Health Bulletin* 1997;8:61–63; Feery B. Impact of immunisation on disease patterns in Australia. *Medical Journal of Australia* 1981;2:172–176. Deaths recorded for 1966–1975 and 1996–2004 updated with data provided by AIHW Mortality Database.

† Excludes deaths from subacute sclerosing panencephalitis.

■ Indicates decade in which community vaccination started for the disease.

FIG 3

The numbers above are for Australia, a healthy first-world country. Globally, in 1999 the estimated number of deaths for children under 15 years from Pertussis was between 295,000 and 390,000.²² People do die from Pertussis, and to claim that “you’re not going to die from it” is dishonest or incompetent, or both.

7.3 Regarding the incidence of Pertussis, Meryl Dorey wrote:

“.... This picture (a steady increase in the incidence of Pertussis) is duplicated in Australia and every other developed country where we see the majority of Pertussis cases are occurring in fully vaccinated individuals.”²³

Response 7.3.1 A glance at FIG 3 above shows the remarkable drop in Pertussis infections since the introduction of the vaccine, so it is a little unfair to denigrate it. If one is concerned with the rise in the incidence of infections in the last 20 years, one could of course point to the success of the AVN’s campaigns. However, Meryl Dorey is correct to say that Pertussis infection can occur in vaccinated individuals. What she leaves out is the fact that people require booster vaccinations.

I asked her to substantiate here claim that “the majority of pertussis cases are occurring in fully vaccinated individuals” by email on 3 July 2009 but never received a reply. I cannot find any research to validate that claim so it would be fair to say it is untrue.

So, her claims here are highly selective, deceptive and untrue.

7.4. Regarding the dangers of Pertussis and recommended treatment, Meryl Dorey went on to say at the same television event;

“we treated whooping cough homeopathically and none of us were sick for more than 2 weeks. My vaccinated children got it and my unvaccinated children got it. And none of us were sick for more than 2 weeks and it was nothing more than a bad cough”.²⁴

Response 7.4.1 I asked Meryl Dorey:

“Would you confirm your statement that whooping cough is not a fatal disease, please.

“And regarding your second statement, would you mind telling me;

- who diagnosed these illnesses on that occasion?

- Do you advocate homeopathy as a treatment for whooping cough?” ²⁵

I never received a reply. I believe that the “whooping cough” diagnosis was not made by a medically qualified doctor, but by Meryl Dorey herself, and the homeopathy made no difference to the progress of the disease. To hold this charade up as an example of responsible treatment is reckless.

So the AVN’s statement here is demonstrably untrue.

7.5. Regarding Diphtheria vaccination, the AVN says:

“Whilst there was a time in Australia when many children and adults died every year from this illness, better hygiene and nutrition in the early part of this century saw death rates drop substantially (well before mass use of the diphtheria vaccine). There has not been a case of diphtheria in Australia for many years.” ²⁶

Response 7.5.1 A quick glance at FIG 3 above shows that the death rate dropped after mass diphtheria vaccinations began. The AVN should be challenged to substantiate their claim that the drop was due to better “hygiene and nutrition.” This is an old canard that has been spread by the anti-vaccination movement for decades, and while these no doubt played a substantial part in the improvement of public health, there is no credible research that excludes vaccination.

The AVN is not above baseless fear campaigns, for example the AVN has said:

“All types of diphtheria vaccine which are licensed in Australia contain mercury, a known neuro-toxin (brain poison).” ²⁷ (This refers to the inclusion of thiomersal, a mercury compound, in some vaccines.)

Yet a mass of research shows, for example:

“... none of the epidemiological studies conducted in Europe and elsewhere support this assumption (i.e. the hypothesis that mercury contained in vaccines could be the cause of autism and other neurological developmental disorders.) Although any effort should be made to avoid useless exposure of vaccines to a potentially toxic compound, it should be emphasized that

1) public communication on this issue has led to a decrease in the hepatitis B vaccination coverage of children born to HBs Ag positive mothers in the US;

2) this issue was not really relevant in France where until 2002, apart from two hepatitis B vaccines, all childhood vaccines were thiomersal-free, and

3) in developing countries using multidose vaccine vials, moving to thiomersal-free vaccines in unidose presentations would represent such an incremental cost that millions of children would no more have access to vaccination.

Therefore the World Health Organisation still recommends the use of thiomersal-containing vaccines as part of the expanded programme of immunisation.”²⁸

So the AVN’s statement here is demonstrably untrue, and campaigns similar to the AVN’s have led to a decrease in life-saving vaccinations.

7.6. Regarding Bacterial Meningitis, Meryl Dorey said:

“When we look back at the history in Australia, we see that these bacterial meningitis infections have increased exponentially....since mass vaccination was introduced.....”²⁹

Response 7.6.1: Coinciding with the introduction of the national meningococcal C immunisation program in January 2003, the notification rate decreased by 39% while the hospitalisation rate decreased by 47%.³⁰

I asked Meryl Dorey to substantiate her statement, via email on 13 July 2009, but did not receive a reply.

So the AVN’s statement here is demonstrably untrue.

Meryl Dorey went on to say in the same interview:

“Why is that? Because vaccine by its very nature can suppress the immune system.”

Again, simply wrong. Vaccination is a method for improving the immune system.

So the AVN’s statement here is demonstrably untrue.

7.7. Regarding the safety of the Gardasil vaccine, Meryl Dorey said:

“The total number of Gardasil-related deaths is 47 since the vaccine was approved in 2006.”³¹

Response 7.7.1 Dorey gave no source as the basis of this information, except to quote a right-wing American organisation, “Judicial Watch”, who claim to have analysed FDA data. However, according the “Medical News” website³² a CDC spokesperson:

“said the agency has confirmed four deaths that occurred after the patients received Gardasil, but none of the deaths was linked directly to the vaccine. He said that there have been fewer complaints about adverse effects associated with Gardasil than there have been for other drugs.

“Medical News” went on:

“Several of the reports to FDA of deaths of girls and women who received Gardasil note that the patient had developed a blood clot. (CDC spokesman) Allen said that Gardasil is not known to increase risk of blood clots. He added that Judicial Watch's analysis does not prove that Gardasil causes death and that the reports of women who died after receiving the vaccine statistically are normal within the population.

“According to CQ HealthBeat, there is disagreement over the data in part because the reports of adverse events come from several sources, including health professionals and pharmaceutical companies, which are required to disclose potential problems with vaccines, including rumours and third-party information. The Judicial Watch analysis includes a report about a doctor who at a conference heard about two patients dying after receiving Gardasil. Another incident involved the death of a 17-year-old girl immediately after receiving the vaccine, which was reported to FDA by ‘a gynaecologist who was informed of the case from another gynaecologist.’ ”

So, Dorey’s claim that Gardasil is related to 47 deaths is a selective interpretation of a report from a right-wing organisation whose findings are based on gossip and anecdote and are disputed by both the FDA and the CDC, i.e. mainstream scientific opinion. Dorey failed to mention any of the caveats above.

The AVN have republished an article from “Natural News” that says:

“The European Medicines Agency (EMA) has reported that two young women died shortly after receiving Merck's Gardasil, a vaccine against several varieties of human papillomavirus (HPV). The EMA did not release the names or ages of the women who died, and said the cause of death was still unknown. It described their deaths as "sudden and unexpected.”³³

What the European Medicines Agency (EMA) actually say is that:

“In both cases, the cause of death could not be identified. No causal relationship has been established between the deaths of the young women and the administration of Gardasil.

On the basis of the currently available evidence, the EMA's Committee for Medicinal Products for Human Use (CHMP) is of the opinion that the benefits of Gardasil continue to outweigh its risks and that no changes to its product information are necessary.”³⁴

So the AVN’s statement here is demonstrably selective. I asked Meryl Dorey to explain this discrepancy by email on 13 July 2009, but did not receive a reply.

8. BUT WAIT! THERE'S MORE!

8.1. The parents of baby Dana McCaffery (who died of Pertussis this year) have written that they are outraged that without their knowledge, *"Meryl Dorey rang the Director of the North Coast Area Health Service Public Health Unit on 12 March 2009 seeking details on Dana's death and contended the department had misled the public."* (Is this the behaviour of a rational person?) They go on:

"Even after I told Meryl what happened to Dana at the (TV) debate, a few weeks afterwards I found an AVN blog with members making false claims that stated they had information she was sick from birth, immune-compromised from the HiB vaccine or died as a result of the antibiotics or medical treatment she received."

"Not only is no-one privy to this information, it is wrong and extremely distressing. In the latest Living Wisdom, Meryl got every fact wrong about Dana - her age, when she died, where she might have caught it, when the last death was and uses language to downplay the seriousness." ³⁵

So, Meryl Dorey is not above the most egregious invasions of privacy, she is quite capable of misrepresenting the facts to suit her agenda, while engaging in wild conspiracy theories.

8.2. At a seminar conducted by the AVN, ³⁶ six speakers took the stage to tell the audience that:

- Meningococcal disease is harmless and hardly kills anybody at all.
- Children can gain immunity from disease by picking up objects in the street and sucking on them, so vaccination is useless as well as harmful.
- The World Health Organisation and the Save The Children Fund "put Hitler and Stalin in the shade" with their deliberate policy of genocide by using vaccination to spread AIDS in third-world countries.
- Autism is caused by the measles, mumps and rubella vaccine. All of these diseases are less serious than the dangers of vaccination.
- Autism is caused by mercury in vaccines which do not contain mercury.
- All vaccinations are unnecessary as homeopathy can not only treat any disease but protect against all things for which vaccine protection is claimed.

So, the AVN's statements here are demonstrably untrue.

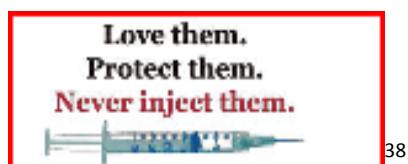
8.3. The AVN prescribes homeopathic and herbal treatments for diphtheria on their website, in an article written by a person who admits she has *"no qualifications whatsoever."* ³⁷ Diphtheria is a life-threatening illness, killing tens of thousands of Australians before vaccination was introduced. Is this rational behaviour? Is this responsible? Is this acceptable?

8.4. Another conspiracy theory. Finally, the AVN falls back on conspiracy theory again in Meryl Dorey's email of 15 June 2009, when she says:

"It is vital that we get this information out there. It will blow the roof off of the claims by our government, our medical community and others who want to continue the cover-up of this issue."

I could go on to list many more pages of disinformation issued by the AVN, but there must be a time to come to a stop and accept the overwhelming case that the AVN dispenses untrue information and unsound advice with the intent of dissuading people from vaccination.

The AVN's true intention is revealed by their advertisement on their website for T-shirts bearing their name with the following logo:



So their real intent is revealed here. It is not to promote informed choice, but to persuade all parents to "never inject them" with vaccines.

9. WHAT ARE THE EFFECTS OF THE AVN ANTI-VACCINATION CAMPAIGN?

Does it matter that the AVN are using selective and deceptive techniques and false information to dissuade parents from vaccinating children? Well, yes it does. The AVN is very active in the Australian community, publishing magazines and newsletters, conducting seminars, appearing on television and radio, lobbying parents, providing websites, and placing advertisements in newspapers. It purports to be a charity for fund-raising purposes, but its activities are not directed to relieving poverty but to spread their dogma that vaccines cause disease and should be avoided.

The AVN is based in northern NSW. 33% of children in that region are not fully vaccinated. This is not only a risk to these children but also to other unvaccinated children who are not protected by a "herd immunity".

For parents concerned for the well-being of their children, and not being exposed to the epidemics that our older generations were, the message is believed and acted upon, and consequently we are seeing the reappearance of diseases we thought were defeated and people are dying.

Paediatrician Chris Ingall and Professor Peter McIntyre of Immunisation Surveillance spoke on television of their fears that such epidemics as polio will return.

10. CONCLUSIONS AND RECOMMENDATIONS.

10.1. Summary. It is clear that the AVN, despite its claim to issue balanced information, issues statements and advice that are clearly wrong, selective, baseless, misleading, deceptive, biased, and a danger to public health, while engaging in bizarre conspiracy theories, fear campaigns and invasions of privacy. Nowhere in all my research into the AVN did I find any statement from the

AVN supporting vaccination in any way. All AVN statements regarding vaccination that I found disparaged vaccination, except for mentions of “homeopathic vaccination.”

If the AVN and Meryl Dorey were simply operating out of their area of expertise and making innocent errors, one would expect that the errors would fall roughly evenly between pro-vaccination and anti-vaccination arguments and “facts.” It is clear that this is not the case; every single statement that I subjected to scrutiny found the “error” falling into the anti-vaccination camp. So egregious and numerous are the incorrect statements that one is drawn to the inevitable conclusion that the mis-statements are deliberate.

As Justice Grey said in another case:

“Mistakes and misconceptions such as these appear to me by their nature unlikely to have been innocent. They are more consistent with a willingness on (his) part knowingly to misrepresent or manipulate or put a “spin” on the evidence so as to make it conform with his own preconceptions. In my judgment the nature of these misstatements and misjudgements by (him) is a further pointer towards the conclusion that he has deliberately skewed the evidence to bring it into line with his political beliefs.” ³⁹

Now that sums up my case far more eloquently than I could.

10.2. The AVN is in breach of Public Health (General) Regulation 2002, Section 3 para 2 in that Meryl Dorey, does not by her admission above have any qualifications except “having a brain”, nor any medical qualifications or experience as a doctor or epidemiologist, contrary to the Regulation which requires:

“(a) a health practitioner must maintain the necessary competence in his or her field of practice,
(b) a health practitioner must not provide health care of a type that is outside his or her experience or training,”

10.3. The AVN is in breach of NSW Public Health (General) Regulation 2002 Section 12, sub-paragraph (3) in that they claim that various vaccinations are ineffective and/or cause serious side-effects such as autism. The paragraph says that:

“(3) A health practitioner must not make claims, either directly or in advertising or promotional material, about the efficacy of treatment or services provided if those claims cannot be substantiated.”

10.4. The AVN is in breach of Public Health (General) Regulation 2002 Schedule 3 Section 7 paragraph 1, in that they attempt to dissuade members of the public from obtaining vaccinations from registered medical practitioners. This paragraph requires that:

“A health practitioner must not attempt to dissuade clients from seeking or continuing with treatment by a registered medical practitioner.”

10.5. I submit that:

- A. the AVN is engaging in activities that qualify it as a “health service provider”, and Meryl Dorey engages in activities which qualifies her as a “health practitioner”, and
- B. the AVN is subject to the Health Care Complaints Act, and
- C. the AVN is engaging in misleading and deceptive conduct with the intent of persuading parents not to vaccinate their children, is in breach of the Code of Conduct and the Regulation, and
- D. the failure to vaccinate children is a danger to individual and public health, and
- E. the AVN is not protected by any right of free speech, and
- F. the Health Care Complaints Commission has a legislated duty to investigate the activities of the AVN, and
- G. the legislation and precedents exist to silence them via a Prohibition Order, and
- H. the Health Care Complaints Commission should issue a Prohibition Order Pursuant to The Health Care Complaints Act 1993 Division 6A – “Action against unregistered health practitioners” in that under S41

“(b) it finds that the health practitioner has breached a code of conduct for unregistered health practitionersand

(c) it is of the opinion that the health practitioner poses a substantial risk to the health of members of the public.”

I. The Commission should, pursuant to S 94A of the Act, “Warnings about unsafe treatments or services” issue a public statement that the AVN poses a risk to public health and safety.



Ken McLeod

14 July 2009.

APPENDIX 1

SOME OF THE BOOKS FOR SALE ON THE AVN WEBSITE

Vaccine Safety Manual

[VSM]

Guide to Immunization Risks and Protection For Concerned Families and Health Practitioners

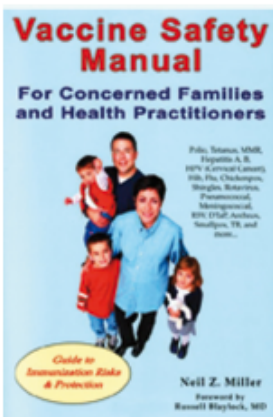
Neil Z Miller

The Vaccine Safety Manual is the latest book from this popular and well respected author. This complete guide to immunization risks and protection is a important addition to every families home library. It includes information on every major vaccine including the HPV, polio, tetanus, MMR, hepatitis A & B, Hib, chicken pox, shingles, rotavirus, pneumococcal, meningitis, RSV, DTaP, anthrax, smallpox, TB, and Flu vaccines.

All of the information is written in an easy to understand format and includes more than 1000 scientific citations and more than 90 graphs, charts and illustrations.

This is a must read for every parent, healthcare professional and policy maker. With the growing body of evidence that vaccination may be linked to chronic illness and autism it is imperative that parents educate themselves before making the vaccine decision.

AUD\$34.00



[Click to enlarge](#)

Fear of the Invisible

[FOTI]

Janine Roberts

How scared should we be of Viruses and Vaccines, HIV and AIDS?

Publisher: Impact Investigative Media Publications

Second Edition 2009

Pages: 299

157mm W x 235mm H x 20mm T

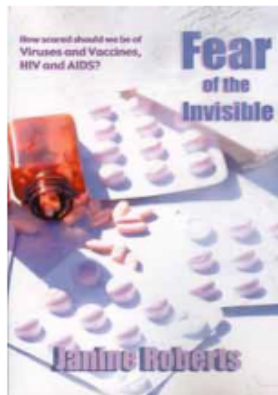
An investigative journey into a reckless and contaminated medical industry.

We have all been taught to fear viruses and yet scientists are now discovering that they are a fundamental part of life and are made by the millions in all healthy cells. It seems that we may have misjudged the virus and most of them maybe simple inert messages carried from cell to cell.

This is a very interesting and controversial book on diseases, vaccines and what Janine calls "vaccine plagues", the emerging plagues caused by medical intervention into previously healthy bodies. Janine exposes the impurity of vaccines and the fraudulent science which is behind may accepted medical treatments.

This book is highly recommended reading.

AUD\$42.00



[Click to enlarge](#)

Vaccine Damaged Children

[VDC]

Treatment, Prevention, Reasons

**Dr Isaac Golden PhD, D.Hom.,
N.D.,B.Ec(Hon)**

"My first experience with a vaccine damaged child was in the late 1970's with my own daughter. That is why I have never needed anyone to convince me that vaccine damage is a reality." Isaac Golden

Vaccine damage is a tragedy that is inflicted not only on the damaged child but also upon the whole family. This is a very positive book which may offer some hope.

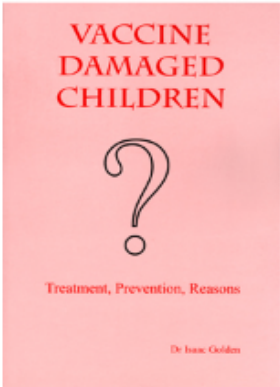
This book asks and answers four basic questions

- Does vaccination cause damage?
- What are the symptoms of vaccine damage?
- How can we prevent vaccine damage?
- How do we treat vaccine damage?

The answers to these questions are supported by many facts and figures and case examples.

Dr Golden is a world authority on homoeoprophylaxis- the use of homoeopathic medicines for specific disease prevention, and has undertaken the world's largest long-term study of parents using such a program.

AUD\$33.00



Click to enlarge

APPENDIX 2

NOTES AND REFERENCES

¹ <http://www.abc.net.au/tv/fora/stories/2009/06/26/2609568.htm>

² Posted by the AVN at <http://thenaturalhealthguide.com.au/reviews/the-avn-needs-your-help/>

³ Channel 7 "Sunday Night" program
<http://www.youtube.com/watch?v=UymvZefhKY&feature=related>

⁴ Jones v Toben [2009] FCA 354

⁵ Public Statement by Qld Minister for Tourism and Fair Trading Peter Lawlor, Thursday, April 23, 2009 "Unregistered health provider ordered to stop misleading cancer patients"
<http://statements.cabinet.qld.gov.au/MMS/StatementDisplaySingle.aspx?id=63436> accessed 13 July 2009

⁶ _ United States Supreme Court *Schenck v. United States* 1919.

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- ⁷ <http://avn.org.au/library/index.php/about-the-avn.html> accessed 16 June 2009
- ⁸ <http://avn.org.au/library/index.php/vaccination-information/> accessed 17 June 2009.
- ⁹ <http://avn.org.au/library/index.php/vaccination-information/mmr.html> accessed 3 June 2009
- ¹⁰ Gastroenterologist Andrew Wakefield claimed in a 1998 study published in “The Lancet” that MMR might trigger autism. The study was based on just 12 children and later retracted by all of its co-authors and The Lancet.
- ¹¹ “Autism rises despite MMR ban in Japan” Andy Coghlan NewScientist 3 March 2005
- ¹² Honda Hideo, Shimizu Y, Rutter M. “No effect of MMR withdrawal on the incidence of autism: a total population study.” *Journal of Child Psychology and Psychiatry* (2005).
- ¹³ United States Court of Federal Claims Office of Special Masters no. 02-0738V 20 July 2007
Banks vs Secretary of the Department of Health and Human Services. The action was brought pursuant to The National Childhood Vaccine Injury Act (NCVIA) of 1986 (42 U.S.C. §§ 300aa-1 to 300aa-34) which was enacted in the United States to reduce the potential financial liability of vaccine makers due to vaccine injury claims. The legislation was aimed at ensuring a stable market supply, and to provide cost-effective arbitration for vaccine injury claims. Under the NCVIA, the National Vaccine Injury Compensation Program (NVICP) was created to provide a federal no-fault system for compensating vaccine-related injuries by establishing a claim procedure involving the United States Court of Federal Claims.
- ¹⁴ <http://avn.org.au/library/index.php/vaccination-information/mmr.html> accessed 16 June 2009
- ¹⁵ <http://www.mmrthefacts.nhs.uk/library/sideeffects.php> accessed 16 June 2009
- ¹⁶ Channel 7 “Sunday Night” program
<http://www.youtube.com/watch?v=UymvZefhKY&feature=related>
- ¹⁷ “Mumps: a resurgent disease with protean manifestations” Sanjaya N Senanayake Medical Journal of Australia 2008; 189 (8): 456-459
- ¹⁸ ^Δ De Santis M, Cavaliere AF, Straface G, Caruso A (2006). . *Reprod. Toxicol.* **21** (4): 390–8. .
[http://linkinghub.elsevier.com/retrieve/pii/S0890-6238\(05\)00073-0](http://linkinghub.elsevier.com/retrieve/pii/S0890-6238(05)00073-0).
- ¹⁹ <http://www.mmrthefacts.nhs.uk/library/crohnsdisease.php> accessed 16 June 2009.
- ²⁰ <http://www.mmrthefacts.nhs.uk/library/bmj.php> accessed 16 June 2009 and Miller E, Waight P. Second “immunisation has not affected incidence in England.” *British Medical Journal*, 1998.
- ²¹ Channel 7 current affairs show, “Sunday Night”. <http://www.youtube.com/watch?v=N-63XHXxTM4>

²² Dr NS Crowcroft , C Stein, P Duclos, M Birmingham “How best to estimate the global burden of pertussis?” The Lancet, Infectious Diseases, Volume 3, Issue 7, Pages 413 - 418, July 2003
<http://www.thelancet.com/journals/laninf/article/PIIS1473309903006698/abstract>

²³ “Living Wisdom” magazine, Issue 3 2009 page 55

²⁴ Channel 7 current affairs show, “Sunday Night”. <http://www.youtube.com/watch?v=N-63XHXxTM4>

²⁵ Email 15 June 2009.

²⁶ <http://avn.org.au/library/index.php/vaccination-information/diphtheria.html> accessed 13 July 2009

²⁷ <http://avn.org.au/library/index.php/vaccination-information/diphtheria.html> accessed 13 July 2009

²⁸ Hessel L. Aventis Pasteur MSD. 8, rue Jones Salk-69367 Lyon. Published at National Library of Medicine
[http://www.ncbi.nlm.nih.gov/pubmed/15146581?ordinalpos=1&itool=EntrezSystem2.PEntrez.Pubmed.Pubmed_ResultsPanel.Pubmed_DiscoveryPanel.Pubmed_Discovery_RA&linkpos=2&log\\$=relatedreviews&logdbfrom=pubmed](http://www.ncbi.nlm.nih.gov/pubmed/15146581?ordinalpos=1&itool=EntrezSystem2.PEntrez.Pubmed.Pubmed_ResultsPanel.Pubmed_DiscoveryPanel.Pubmed_Discovery_RA&linkpos=2&log$=relatedreviews&logdbfrom=pubmed) accessed 13 July 2009.

²⁹ Channel 7 current affairs show, “Sunday Night”. <http://www.youtube.com/watch?v=N-63XHXxTM4>

³⁰ Aust Dept of Health And Aging “Vaccine Preventable Diseases and Vaccination Coverage in Australia, 2003 to 2005 Meningococcal disease”

³¹ Email Friday, 26 June 2009 11:47 AM

³² <http://www.medicalnewstoday.com/articles/84804.php>

³³ <http://avn.org.au/library/index.php/news-and-events/two-more-girls-die-after-getting-gardasil-cervical-cancer-vaccine.html> accessed 13 July 2009.

³⁴ Doc. Ref. EMEA/37479/2008
http://www.emea.europa.eu/humandocs/PDFs/EPAR/gardasil/Gardasil_press_release.pdf accessed 13 July 2009

³⁵ <http://scepticsbook.com/2009/06/18/toni-mccaffery-has-had-enough/> accessed 5 July 2009

³⁶ Thursday, 24 October, 2002, as reported by Peter Bowditch of his attendance at
<http://www.ratbags.com/rsoles/comment/inferno.htm>

³⁷ <http://avn.org.au/library/index.php/vaccination-information/diphtheria-article.html> The article was written by Hilary Baker, who describes herself as “freelance journalist and mother, New

Zealand.” She described herself in the *Thames Valley Gazette* of 31/5/1988 as “an independent researcher on non-immunisation”, and presented a video to a seminar, as reported in the Gazette, on how “the World Health Organisation in combination with the National Institute of Cancer in the US manufactured the AIDS virus.” She claims to have “written five papers on non-immunisation.” She admits she has “no qualifications whatsoever.” See http://www.whale.to/a/bmjtb.html#Hilary_Butler, accessed 16 July 2009.

³⁸ <http://avn.org.au/library/index.php/vaccination-information/> accessed 17 June 2009.

³⁹ Irving vs Lipstadt <http://www.hdot.org/en/trial/judgement/13.63> UK HIGH COURT OF JUSTICE 1996 -I- 1113 QUEEN’S BENCH DIVISION The Hon. Mr. Justice Gray