

Sample Student Research Paper

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The H1N1 Vaccine: Are We Getting All the Information?

Should we trust someone who has failed us in the past? In previous years, governments failed thousands of people by administering a lethal vaccine for a hyped up flu pandemic that never materialized (Too Little, Too Late). The risks and benefits of the most recent flu virus vaccine, the H1N1 vaccine, are currently up for debate by the public, health organizations, and the government. Both the health organizations and the government strongly believe that the benefits of the vaccine greatly outweigh the risks, whereas not all of the public is convinced. It is a distinct possibility that the H1N1 vaccine is a major risk to the public's health. The risks of the H1N1 vaccine include the possible toxicity of the components of the vaccine, the lack of long term testing for the vaccine, and that those administering and producing the vaccine (such as health organizations and the government) may be doing so for their own personal benefit and not the public's health.

The H1N1 flu virus first showed up in early April of 2009 in Mexico and the United States (Ho and Cummins). It is a new strain of influenza that in the past has only affected pigs. Because it is new to the human population, people have little to no natural immunity, which is in part why the H1N1 is cause for concern (What you need to Know). Although it is a new virus, it is transmitted in the same way as the seasonal flu, through sneezing, coughing, and occasionally through coming into contact with items contaminated with the virus (Vaccine Information Statement).

The World Health Organization (WHO) has deemed the spread of this virus as a pandemic (Wente), but an examination of the numbers so far has revealed that it may turn out to be just another health scare blown out of proportion by the media. Research shows that up to 20 percent of the population contracts the seasonal flu virus in a typical year, averaging in approximately 36,000 deaths (About the Flu). The WHO, as of November 8th, 2009, cites that approximately 6,260 people worldwide have died so far after contracting the H1N1 virus (Pandemic). As Dr. Gerry Preddy, senior medical officer of health with Alberta Health Services commented, “it’s unfortunate when anyone dies. Even during seasonal influenza, when we get to this level of activity, we do see deaths” (Fitzpatrick). This statement could lead some to believe that although regrettable, it is not unexpected. Some general information from the Centre for Disease Control and Prevention (CDC) states that “as of September 2009, more than 99% of circulating influenza viruses in the United States are 2009 H1N1” (Influenza Diagnostic Testing). This would suggest that the seasonal flu has been eclipsed by the H1N1 virus and the death toll will be only marginally higher than a typical seasonal flu year.

The H1N1 vaccine is produced in the same way as yearly seasonal flu vaccines, by injecting the virus into fertilized chicken eggs, letting it replicate, extracting it, and purifying it. There are two types of the H1N1 vaccine currently circulating in Canada, one of which is adjuvanted, and one that is not. The adjuvant vaccine has the same ingredients as the regular vaccine, but it also contains a mixture of chemicals that are designed to boost the individual’s immune system response to the vaccine (Ho and Cummins). According to the Public Health Agency of Canada the vaccine is completely safe and the best way to protect yourself and those around you

from contracting this virus. As with most medications and immunizations, some people may experience side effects but the public has been assured that they are usually minimal and are greatly outweighed by the benefits of getting the vaccine (Backgrounder: Vaccine Myths).

While you cannot become infected with the flu virus from receiving the vaccine, there are other, potentially more dangerous threats that the public should be aware of. One of the ingredients contained in the H1N1 vaccine is called thimerosal. It is a chemical which the government claims to be harmless. However, other sources have deemed it to be “a deadly preservative 50 times more toxic than mercury” (Ho and Cummins). When taken in high doses this chemical has been known to cause various neurological and immune system dysfunctions. Even though the PHAC dismisses these toxic ingredients as minimal and safe, how can we know for sure?

Another negative aspect of this being a new strain of the flu virus, is the unfortunate fact that there has been little time to test the vaccine properly. It is because of this lack of long term testing that the public should be cautioned against taking the vaccine. Although they are administering this vaccine around the world, they are still running tests and clinical trial in order to seek out any problems that may occur in the population after immunization. The WHO is advising “all countries administering pandemic vaccines to conduct intensive monitoring for safety and report serious adverse events” (Safety of Pandemic).

Furthermore, the public should be very cautious when deciding whether to get the vaccine considering that the vaccination experts are dominated by the vaccine makers who will profit the most. In 2001, a law was passed that in the event of a health emergency all drug companies,

health officials and anyone administering experimental vaccines to the public were to be protected from legal responsibility if someone is harmed from the vaccine (Ho and Cummins). These are the main groups that are urging the public to get the vaccine. With little or no consequences for their actions, these organizations are a less than trustworthy source for public health advice.

While some people believe the benefits of getting the H1N1 vaccine far outweigh the risks, careful research shows that this clearly is not the case. Though there may be a possibility of contracting the virus, statistics show that the number of people affected is no higher than the yearly average affected by the seasonal flu. The virus is showing itself to be much milder than in the beginning of the outbreak, therefore it may not turn out to be the terrifying infection it was originally thought to be. The fact is that there are real and serious health risks in receiving the H1N1 vaccine. It is no surprise that vaccine makers and those administering the vaccine are being aggressive because they have nothing to lose and so much to gain. With media overkill on the H1N1 and the word pandemic frequently being used it is understandable that people are scared. However, the public needs only to look at past mistakes such as the unnecessary inoculations and resulting problems that occurred with the 1976 Flu Vaccine and the fear mongering associated with the Avian Flu to realize that they should educate themselves in order to stop history from repeating itself.

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