Vaccinations: From Childhood Diseases to the Flu?[*]

Daphné von Boch

Standard vaccinations recommended by the Standing Committee on Vaccination in Germany (STIKO): against rotavirus in the 6th week of life and in the 2nd and 3rd month of life; against diphtheria, tetanus, pertussis (whooping cough), polio, pneumococcus, Haemophilus influenzae and hepatitis B in the 2nd, 3rd, 4th and again between the 11th and 14th months of life and also several times later; against measles, mumps, rubella (German measles), varicella (chickenpox) and meningococcus (serotype C) between the 11th and 14th months of life and again several times later. (Each vaccination must be given several times to be effective.) In addition, the cervical cancer (HPV) vaccination is recommended for girls at the age of 12 and is also repeated several times. Thus girls receive altogether 63 doses of 14 different vaccines (boys slightly less) between birth and the age of fifteen, 36 of these doses before the 14th month of life. These standard recommendations are in fact routinely carried out on 97% of the children in Germany at their early detection examinations. In addition, the flu vaccine is recommended annually for adults beginning at age 60. [1] *The vaccine against tick-borne encephalitis is not part of this recommendation but is advertised and carried out during the whole year at most pharmacies.*

The subject of vaccination causes much emotion. In a recent documentary film[2] produced in Germany, where vaccination (except for measles) is presently optional but is actually carried out on 97% of all children, the parents in the film want to decide whether or not to vaccinate their child. They ask themselves, "How can we decide?" And in fact it is difficult, if only the body, the visible part of the human being, is considered. But nowadays the invisible part of the human being is often not considered. Hence half of reality is missing. Consequently it is no longer possible to understand the visible half of reality and to make the right decisions. This article attempts to give an answer to this question by also considering the invisible, spiritual part of the human being.

But first, a look at the visible part

What might be the consequence if a child is not vaccinated? Would the child be exposed to great dangers that it can endure only with difficulty or even with irreversible damage? To gain insight into this question, one can take a look at the older generation, which was hardly vaccinated.

The 60+ generation

Extensive vaccination against many diseases began around the years 1965 - 1970. Before this time, roughly between 1950 - 1965, vaccinations were only targeted at an epidemic and against a single disease (smallpox, polio). This means that people who are today 60 years old and older were not heavily vaccinated as children.

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The diseases which almost everyone went through at that time, and which are vaccinated against today, are first of all childhood diseases: measles, rubella and also mumps and varicella. Lasting complications were not experienced by the vast majority of people of that generation. Many of them also had pertussis. Certainly pneumococci or Haemophilus influenzae bacteria were involved in some of the cases of acute bronchitis they had. Yet basically they survived these illnesses too without harm. Therefore, from observation of the older generation it can already be said that some of the diseases that are vaccinated against today are relatively harmless in developed countries.

Very few people in the 60+ generation today who grew up in a developed country contracted tetanus or diphtheria. But people of that generation did contract polio, and some of them suffered permanent damage. That is why the extensive oral polio vaccination was very useful during the polio epidemic of the 1950s. However, it no longer makes sense today when polio is uncommon worldwide. The recommendation of vaccinating against diseases that are almost non-existent (tetanus, diphtheria, polio, rotavirus) is based on arguments similar to those for diphtheria. It is said that an infected person from a Third World country could meet and infect a child living in a developed country. This is a weak argument. The patient would first have to meet the child. Then the patient would have to be in an infectious stage. Then the child would have to be very weak and the diphtheria patient would ultimately have to come very close to the child.

There is a fairy tale by the Brothers Grimm called "Clever Elsie" that characterizes this way of thinking. Clever Elsie's parents seek a husband for her. This proves to be a difficult undertaking because she is the kind of person who "... sees the wind coming up in the street and hears the flies coughing." At last a man comes from far away, but he will not marry her unless she is really clever. During the visit Clever Elsie goes down to the cellar to get a jug of beer, and notices a pickaxe that a workman had left on the wall over the barrel. Now she thinks, "Oh dear! If I marry this man and we have a child, when it gets older and goes down to fetch a jug of beer, the pickaxe will fall on its head and kill it." And she cries and screams with all her might about this impending misfortune, as we are told in the fairy tale. This is how the argument about vaccinations goes. These diseases – even in the countries where they occur – are in fact quite rare. So, if one does not think overanxiously like Clever Elsie, but realistically, it becomes obvious that an everyday activity like riding a bicycle in normal traffic, for example, is much more dangerous for a child than contracting one of these diseases that are now so rare.

What about meningococcal, tick, hepatitis and cervical cancer vaccinations?

Meningococci are *one* of several bacteria which produce an inflammation of the meninges (the membranes of the brain). In addition, in Germany this vaccine protects against only *one* of five different types of meningococcal bacterial meningitis, and it is not even the most common one. The brain, which lies deep inside the head, is also very well protected – not only from the outside by solid bones, but also from the inside by the so-called "blood-brain barrier." Even if bacteria and viruses were in the blood, thanks to this barrier they could not easily reach the brain. To contract a meningococcal infection the body must be extremely weak, because only then does this barrier become porous. This danger exists, for example, in severely undernourished children. Then the therapy should consist not in vaccination, but in feeding. *This* is where all financial efforts should go. Meningococci are dangerous neither to children nor to adults in a good state of health and nutrition.

Tick-borne encephalitis vaccine (TBE) protects against only one of two diseases transmitted by ticks. It does not protect against the much more frequent Lyme disease. TBE is an inflammation of the brain itself. This disease is very rare. In its more serious form, it tends rather to affect adults over 40-50 years of age, not so often children. Patients get neurological disorders that rarely

cause lasting damage.[3] Furthermore, it is rather doubtful whether the vaccine against this disease works at all. In 1995 for example, the Social Insurance Company of Austrian Farmers reported that between 1984 and 1995, despite an increase in the vaccination rate, there was no significant reduction in TBE cases. In contrast, the vaccine itself is not always harmless. For example, it can trigger an inflammatory relapse in the case of a pre-existing rheumatic disease. Since TBE is really very rare and the vaccine is of questionable efficacy and also not quite harmless, it is actually enough for walkers in endemic areas to protect themselves by rubbing the skin of their arms and legs with natural tick repellents such as oil of lavandin (a plant similar to lavender), which is available in health food stores.

Hepatitis B is not very contagious. Contact with the hepatitis patient must be intimate (for example, sexual contact), because the virus has very little resistance to environmental influences (dehydration, cooling, etc.). Thus for an infection to spread by needle, for example, the needle must pass directly from one person to another. It will quickly cease being infectious in the air. For a baby the only danger is if the nursing mother herself has hepatitis B, as she could transmit the disease directly to the baby through her milk. However, this is an individual case and should be treated individually. It makes little sense to perform blanket vaccination on all babies for a disease they are not at risk of contracting because it is not very contagious.

The cervical cancer vaccine (HPV vaccine against human papillomavirus) is the first-ever vaccine against a cancer. Studies clearly show that it is a high-risk vaccine.[4] See below ("The additional, not well-known, effect of fever") for a discussion of the healing action of *fever* against cancer as an alternative to vaccination.

What can experience teach us?

A problem of our times is that people no longer trust what they themselves experience. In the past people said, "I don't see it, but I still believe it." The attitude today is: "I see it, but I still don't believe it." That is today's "progress," which makes it impossible for people to use their own judgment. When we can no longer trust our own experience, we are subject to an authority to make our decisions. If, on the other hand, we were to look around and *believe* what we observe, namely that the 60+ generation survived childhood and youth quite well with hardly any vaccinations, this alone could make it easier to decide whether or not to vaccinate our children. The problem is that it is not enough to observe, we also have to *understand* what we observe. What is missing today is the understanding that would enable us to trust what we see. This article is an attempt to make this understanding possible.

The media

The great influence of the media as a "pseudo-authority" makes the formation of judgments even more difficult. Their message is by no means suitable as a basis for judgment. This becomes obvious when, for example, one compares the reporting on vaccines with that on alcohol. Every year 74,000 people in Germany die as a result of alcohol consumption (including traffic accidents). Not only is the public poorly informed about this, but there is even abundant advertising *for* alcohol in the media. Yet if *one child* dies of measles, all the media call for compulsory vaccination. This type of reporting is anything but objective.

Does illness have any meaning at all?

Conventional medicine answers this question indirectly, but unambiguously through their goals and deeds with "no." Illness is regarded as meaningless and even dangerous, so that it must be avoided under all circumstances. Accordingly all diseases, from childhood diseases to cancer, should be eradicated one by one. This is the declared aim of the World Health Organization (WHO). Measles, for example, was to have been eradicated by 2010. Hence we are to have vaccinations against *all* diseases, including those that are largely harmless (children's diseases, pertussis, pneumococcus, Haemophilus influenzae), almost non-existent (diphtheria, tetanus, polio, rotavirus, meningococcus, tick-borne encephalitis), or not very contagious (hepatitis B).

What could be the meaning of a disease?

How does the WHO define healing, which is the natural positive end of a disease? Healing is defined as a "*Re*-stitutio ad integrum," meaning *re*-storation of health to the initial condition – that is, the condition before the disease. But if someone suffering for example from pneumonia were restored to their "initial condition," what would happen?... The person would have to become ill again! Because the initial condition must have been one of weakness, otherwise the patient would not have become ill in the first place. So what is true healing? … The creation of a s*tronger* state. And what, then, is the meaning of disease?... Strengthening! The meaning of all diseases is to strengthen the human being! Even if not all illnesses can heal us physically, still the meaning of disease lies in strengthening – if not on a physical level, then on the soul level.

How does strengthening take place? If healthy people stayed in bed day and night, they would not become stronger, but weaker. Strengthening takes place only through one thing: exertion. This is a law without exception. Disease produces an *inner* exertion to strengthen the body. Disease is indispensable for strengthening. This law applies not just to health. To acquire *any* capacity requires exertion. However, any exertion, any activity at all, entails a risk (though rare) of leading to damage. And here lies the problem. This "risk" is usually accepted as the price for acquiring a capacity. For instance in sports: children who want to learn to ski must practice – that is, exert themselves. Yet when one child takes a bad fall skiing, even if that child dies nobody thinks of prohibiting all skiing. In medicine, however, this is what is done. If one child dies of measles, all efforts are doubled to eradicate it. Hence the attempt to eradicate all diseases through vaccination, including the harmless, rare or only slightly contagious ones.

What is the meaning of *childhood* diseases?

The body of human beings is made up primarily of protein. In this protein the human being is "in*carn*ated." In Latin *caro* means "flesh," so to be incarnated means "to be in the flesh." Biochemically, flesh is principally protein.

The protein of each human body is different: it is individual. Just as our facial features are visibly completely individual on the outside, so our proteins are completely individual on the inside. There are more than seven billion people on earth – and just as many different body proteins. This can cause problems, for example with blood transfusions from one person to another. The body recognizes the transfused blood as foreign protein and *must* destroy it. Although the different blood types and the many subtypes are always considered, an acute destruction of the transfused blood can still sometimes happen because the two proteins are never completely the same. A reaction occurs in which the "self" puts up massive resistance to the "non-self," as it is referred

to in medicine. But what is the self? It is interesting that in our materialistic age such a non-material term is used in medicine. That is why it is not defined in any medical dictionary and assumed to be self-evident. The self or "I" is the spiritual core of the human being that builds up its own individual body, its protein, completely according to its own image. This image of the "I" is compiled according to wise karmic laws and is transmitted from the "I" down to the physical protein. Only then can the "I" live in the body and act in a way that corresponds to *itself*, to its unique individual mission.

The Brothers Grimm also have a fairy tale about this: "The Three Field Surgeons." Field surgeons were the surgeons of the time who went onto battlefields to treat the wounded. In this fairy tale, three skilled field surgeons come to an inn to spend the night. The innkeeper wants to test their skills. So, one field surgeon cuts off a hand, the next pricks out his eyes and the third takes out his heart, promising to put everything back into their bodies the next morning. Unfortunately, these organs are lost overnight, having been taken by a cat. Hence the next morning the first surgeon unknowingly receives the cut off hand of a thief, the second the eyes of the cat, and the third the heart of a pig. As they move on, the one with the pig's heart behaves like a pig, rooting about in the rubbish with his nose. The others try to hold him back, but to no avail. They go on and come in the evening to a new inn, where they find a man counting his money. Suddenly the field surgeon with the thief's hand snatches some of the money. No one notices except his two comrades. When they object, he replies: "What can I do? My hand twitches, and I must snatch it *whether I want to or not*" (italics DB). When night falls they go to sleep. Then the one with the cat's eyes suddenly sees mice running through the completely dark room and wakes up the other two. Now they realize that they have been cheated and return to the first inn. They receive a goodly sum from the innkeeper for the fraud, "... but they would rather have had their own proper organs," concludes the fairy tale.

This fairy tale gives a picture of what happens when a foreign protein gets into the body: it can overwhelm us, and we are compelled to do something "whether we want to or not." That is why an entire system, the immune system, is built so that no foreign protein can get into the body, or is destroyed if it does.

Each human being's body has its own individual protein. But this individual protein must first be built up. The newborn does not have it at birth. From whom does it have its body protein? From its mother, first and foremost. The father is undisputedly involved in the conception of the child. No father, no child. However, the male sperm cell is the smallest cell of the human body, which means that it has hardly any substance. It is also the only cell in the entire human body that has its *own* movement. The male sperm cell is a concentration of energy, but with hardly any substance. The father contributes to the conception of the child through force rather than substance. In contrast, the mother's egg cell (the ovum) is the largest cell of all, visible to the naked eye, as big as the head of a pin. And during pregnancy more maternal substance, including protein, is added through the blood into the developing body of the child. In this way, the child begins to build up its body largely with the mother's protein, which it initially uses as support.

The child is then born principally with maternal protein. Over the course of time, however, it must dissolve this protein and discard it. Only afterwards can it build up its *own* protein. And how does it dissolve the maternal protein? How do we dissolve anything – a cube of sugar, for example? With liquid, and preferably *warm* liquid. Liquid and heat dissolve.

And what are the childhood diseases? They are *those* diseases that are accompanied by high fever – over 102.2° F (39° C) – meaning with warmth; and with a rash. These are the two characteristics of all childhood diseases: fever and rash. Mumps and whooping cough are not childhood diseases in the strict sense of the word, even if they usually occur in childhood, because they

do not have high fever and rash. Childhood diseases must have high fever and rash: both are necessary to first dissolve the mother's protein and then discard it. In the event of a high fever "the child's flesh falls away," as the German expression has it, and the flesh that "falls away" is in fact the *maternal* protein. It is the *good* spirits of mankind that have given us the childhood diseases so that children can dissolve the protein from their mothers and excrete it. This is the meaning of childhood diseases.

That is why these diseases are essentially designed to heal without doing damage, and that is why they are largely harmless. People used to know this. Sayings like, "It is only a childhood disease," express this harmlessness. They are not only harmless, they are healing. A healing disease is not a contradiction. When childhood illnesses were still the norm, mothers who could observe well noticed that shortly before the onset of illness the child became grumpy – nothing suited it; the child did not feel "comfortable in its own skin." After a well-weathered childhood illness, with the shedding of part of the skin, it was again harmonious and content. The healing effect of the childhood disease was directly visible. With the foreign protein gone, new individual protein could now be built up and the child was again "one with itself."

Correct treatment of childhood diseases and other acute illnesses

Bed rest is extremely important for the treatment of all acute illness, including for adults. Fever (starting at 99.5° F or 37.5° C) indicates that bacteria and viruses have entered the blood from a local inflammation – for example, from the throat. This is dangerous because they could now spread to other organs, and this must be prevented at all costs. That is why the body now makes a strong effort to produce not only *local* warmth (local inflammation), but warmth *throughout* the body: fever. The patient must now rest physically and mentally. This means not only strict bed rest, but also no sensory stimuli (no TV, computer or smartphone; even the curtains should be closed). The patient should sleep or doze. All external activities must stop so that no energy is used for the outer world and all the strength can go inwards to overcome the illness. This is the most important measure in the treatment of any acute illness and must be implemented for three to four days in childhood illnesses. An additional period of three to four days of convalescence is necessary, during which time the child must remain in the house. After any strenuous physical exercise – and that is what childhood diseases and all other acute illnesses are – the body is exhausted and must recover. In all, then, rest must be maintained for about a week. After this time, a new strength unfolds and the child is literally "born anew." What is more, the resistance to a particular childhood disease usually lasts a lifetime. When a five-year-old child contracts measles, and encounters the measles virus again at the age of 90 – that is, 85 years later – the body will immediately recognize and destroy it.

During illness, the child should also be protected from the burden of food. No strength should be diverted to digestion. During this time the child is busy "digesting" the maternal protein, and therefore it is usually without appetite. This means that the child should receive only steamed vegetables (e.g. carrots, potatoes) with a little salt and butter (added after cooking), as well as cooked fruit (for example, apples). Warm herbal tea made from linden blossoms should be at the bedside if the fever is above 102.2° F (39° C), otherwise peppermint or chamomile. The child only needs to drink when thirsty.

The remedy Erysidoron 1 from the company Weleda can be used to support the patient (for both childhood diseases and all acute illnesses). It should be taken every hour for the first three days when the patient is awake (patients should not be specially woken for this). After that, five times a day for one more week is sufficient. Children under the age of five should get 5 drops, children over five and adults 10 drops. If the disease is more in the direction of a flu, then Salviathymol[1] (from the German company

1 Remedies mentioned in this article can be ordered most easily through the German pharmacy Westparkapotheke.com

Madaus) is better than Erysidoron 1. It should be taken in the same quantity as Erysidoron, in a cup of warm water, by sips. It is very important *not* to lower the fever with antipyretics and *not* to take the pain away (e.g. headache) with painkillers (analgesics) such as paracetamol, ibuprofen, Novalgin, aspirin, etc. Most painkillers are antipyretics as well and lower fever. If the fever rises above 104° F (40°C), calf compresses (room temperature) may be applied in order to reduce the temperature slightly. This does not force the fever down to 98.6° F (37°C) like an antipyretic-analgesic, which is the advantage of calf compresses. Cleansing the bowels also reduces fever (see "Why the fear of fever?").

When fever *remains* below 102.2° F (39° C) during the day (but *not* with a rising fever), an over-warming bath can be given. Before the night's rest the patient climbs into a pleasantly warm bath and then, within five minutes, the water temperature is raised to an almost unbearable level of heat. The child lies in this hot water for a further 10 minutes, adults for 15 minutes, adding in hot water as needed to keep the temperature high. The same technique can be used under the shower. Then the patient is dried and returned to bed with a hot-water bottle. This will cause the fever to rise above 102.2°F (39° C), which is the goal for children and adults who are essentially healthy.

On the third day, a mustard chest compress can be applied if the bronchial tubes are affected and the patient is coughing. To do this, take a bottle of spicy mustard (not sweet mustard) and apply it to the chest as thick as a finger and as wide as an open hand. Place a cloth on top and a hot-water bottle over this. After 10 minutes (for children) and 20 minutes (for adults), remove it all. A reddening of the skin is not only normal but desired. It brings blood and warmth to the vicinity of the lungs to liquify the mucus so it can be coughed up.

Are febrile seizures dangerous?

While the fever is rising, although the body temperature is already higher than normal, patients feel cold; they feel that their body temperature should be higher than it already is. This is why adults get shivering fits. Children are more sensitive than adults and can, although rarely, get stronger shivering fits known as febrile seizures.

In real febrile seizures, the child loses consciousness and cramps or twitches over the whole body, typically for less than five minutes. The cramps stops immediately when fever has reached the necessary level. With real febrile seizures the twitching affects the *whole* body and is *short-lived.* Real febrile seizures are very stressful for the parents, but harmless to the child. This was known in the past and no doctor was called for them. Nonetheless the child can be given a Fever and Teething suppository (Weleda) in case of a febrile seizure. If the cramps only affect *part* of the body or last *longer* than 15 minutes, they are no longer normal febrile seizures and the child must be medically checked to find the cause.

The irreplaceable function of fever

Fever is not only harmless, it is irreplaceable. Warmth, here as fever, dissolves. The maternal protein, which was the child's support in the beginning, must now be dissolved, and to that end the body uses fever.

If fever is not possible because the child can no longer get childhood diseases due to vaccination or because antipyretic-analgesic drugs have been given when the child has a fever, a small part of the mother's protein is nonetheless destroyed and excreted through normal breathing. Simply the breathing in of air causes a slight combustion when the oxygen gets into each cell, thus destroying some protein over time. This is why newborns, in spite of sufficient feeding, inevitably *lose* some weight in the first five days after birth just from breathing the oxygen in the air. Nevertheless, this slight degradation through breathing is not enough to destroy all the maternal protein. For this, the high fever of childhood diseases and other high fever diseases (above 102.2° F or 39° C) are required, and children should get plenty of them.

But what happens to the foreign maternal protein that is not degraded? Could it have a role in causing autoimmune diseases?

Autoimmune diseases have existed for about 40 years, since the time when vaccination of most of the population began to take effect. The numbers are increasing. They are explained by the medical profession as a defect in the immune system which prevents it from perceiving its own protein as "its own." It must then destroy this protein like any other foreign protein. This usually affects the protein of an organ, such as the liver or pancreas. Could it be, however, that the immune system is not sick, but that this protein is *really* foreign – that is, maternal protein that has remained in this organ and which the immune system has to fight against? Could it be that these so-called autoimmune diseases are not "auto-"immune diseases, but "mother-"immune diseases? This question must remain open, but should be considered.

Every human being – not just children – now and then needs to be thoroughly "cooked through" by fever. Protein is broken down in the process, and this is vitally important. The degraded protein residue can then be seen in the urine: it is cloudy. In childhood diseases the degraded protein is additionally excreted through the skin. But for this, it is necessary that the child has *high fever* (over 102.2° F or 39° C).

The microbiologist André Lwoff showed through his research two further functions of fever. High fever not only breaks down some body protein; it also breaks down bacteria and viruses, which consist of protein and are therefore heat-sensitive, so that they can no longer live or reproduce. In other words, fever itself prevents bacteria and viruses from thriving. In addition, Lwoff showed that fever is the alarm for the entire immune system. For example, the white blood cells then enter the bloodstream and are activated. In 1965 Lwoff received the Nobel Prize for these results, and in his acceptance speech he said that he hoped it would not take more than 10 years for these results to be put into practice. Unfortunately, more than 50 years have already passed since then, but these conclusions have not yet been put into practice. Fever is still routinely being lowered today.

Why the fear of fever?

This fear is a relic from the time of the great epidemics. The plague, cholera, typhoid fever and others were all accompanied by high fever. However, it is important to know that people did not die of the fever itself, but of the underlying disease. The fever was an attempt to cure it. In other words, people did not die *of* fever, but *in spite of* fever.

Fever *itself* is neither harmful nor fatal. This must be known. The problem with fever is the heart. With each increase of about two degrees Fahrenheit, for example from 98.5° to 100.5° F (37° to 38° C), the heart beats 10 times more per minute (thus, from a normal frequency of 70 it increases to 80 beats per minute). This means that with a fever of 104° F (40° C), the heart will beat 100 times per minute. It can become tired after beating for several days at such a high rate.

This is not a problem for children. They have young hearts that can take this effort with ease – provided, of course, that they were born with normal, healthy hearts. It is more difficult for older people. With age, all organs become weaker, not only the eyes and ears, but also the heart. If an elderly person (over 70 years old) with a healthy heart gets a fever over 102.2° F (39° C), it is still not a reason to give an antipyretic-analgesic, but the heart should be supported. This can be done with 10 drops of Camphora D1 or 20 drops of Cardiodoron (both from Weleda) every hour, if awake (do not wake the patient for this). If after three to four days the fever is still above 102.2° F (39° C), the bowel should be cleansed. This can be done, for example, by giving two teaspoons of magnesium sulphate (Epsom salts) dissolved in half a glass of water – one teaspoon for children under ten years. After the diarrhea, the bowel is freed from the half-degraded proteins that sustained the fever as they were reabsorbed through the intestine, and the fever declines. In all other basically healthy adults (under 70 years of age) there is still less reason to lower the fever. On the contrary, this would only cause damage (see below: "Additional, unknown effects of fever").

Why are there complications from childhood diseases?

Those who have followed the train of thought up to this point will understand that childhood diseases are designed by the good spirits of humanity in such a way that the child can overcome them without complications, without lasting damage, and then emerge from them stronger than before. As we have seen, the *normal* course of the childhood diseases is with high fever and rash. Possible *complications* are different for each childhood disease. The complications of measles, for example, are inflammation of the lungs or brain. Although such complications are rare, they can nevertheless occur in the following cases:

1. When children themselves are weak. This is the case, for example, with severe malnutrition, which is common in poor countries and in times of war. The child no longer has the strength to overcome the disease. What is actually the therapy? As said before, not vaccination but feeding.

2. When children do not keep to the necessary strict bed rest. Strength that is necessary for overcoming the illness is diverted from the body towards the outside.

3. When children do not get sufficient fever. This happens in any case with the administration of antipyretics-analgesics.

It was once common knowledge among mothers: When the childhood diseases cannot discharge outwards with rash, then they "turn inwards." For example, if a child with measles does not have the strength to produce a high fever over 102.2º F (39º C), or if the fever is lowered with medicines, then break-down products and residues of protein and measles viruses cannot be excreted through the skin. Only through elevated temperature (that is, high fever) can the I, the self, unfold its full efficacy. This enables it not only to "burn up" the non-self – that which is foreign – but also gives it the power to push it out to the outside. If the fever remains weak, this power is missing. However, foreign protein must absolutely be excreted. Therefore the body attempts excretion "towards the inside" through the lung mucosa: the child gets pneumonia. If this illness too runs its course with insufficient fever or if the fever is suppressed, the body makes a final, desperate attempt to isolate the foreign protein still more deeply: it is deposited in the connective tissue of the brain. Here, there is definitively no further possibility of excreting it. Therefore the body now seeks to dissolve it with a chronic inflammation: a chronic encephalitis arises. Out of a harmless disease, a serious one has arisen. Not through the illness itself, but through insufficient fever. What is the therapy? To allow fever (between 102.2 and 104° F (39° and 40° C) and under no circumstances to reduce it, but rather – if it is insufficient (below 102.2

F or 39º C) – to stimulate it with overwarming baths. If there is insufficient rash, a mustard compress creates a skin irritation that draws out the toxins again.

A Dutch doctor had this exact experience with children he was treating in Africa. He observed that the children, who kept a high fever and strong rash in spite of normal therapy with antipyretics-analgesics, against all expectation seldom had complications (pneumonia, encephalitis) and healed without damage. He recognized that fever and rash had been *necessary* to prevent the complications – that they are the attempt of the body to heal itself. At first he was shocked, because that meant *his* measures had caused the complications. Then he discontinued all therapy, including the antipyretics-analgesics. The complications decreased so much that he decided to send these crucial results to several medical journals in Holland. His article was repeatedly rejected. "It does not correspond with today's way of thinking," was the gist of the response from one of the journals. It would be more appropriate to change today's way of thinking to make *it* correspond to reality. Eventually the article was published in a conventional medical journal for tropical diseases, but without any effect on daily practice.[5]

Additional, unknown effects of fever

Heat dissolves. This effect extends not only to the foreign maternal protein in the child, not only to bacteria and viruses, but also to unrecognized foreign protein growing in the body itself. And this is cancer.

The curative action of fever against cancer has been known since the end of the 19th century. This insight originated in the observation that people who during their life repeatedly had illnesses with high fever (for example, childhood illnesses, pneumonia, local inflammations such as allergies, abscesses, nail bed inflammations, etc., and even repeated bee-stings among beekeepers) contracted cancer much less frequently. It was also observed that cases of "spontaneous" healing of cancer mostly occurred after diseases associated with high fever, for example malaria or erysipelas. This insight was then used successfully (!) to heal cancer with high fever by artificially infecting the cancer patient with febrile illnesses (Coley's toxins).[6] One aspect of this heat therapy is still used today in the form of hyperthermia treatment for cancer, although here the patient is given *external* heat. Naturally, the *self*-generated warmth of fever is much more effective. Mistletoe therapy is also based on this principle, not only generating internal warmth, but additionally producing a local inflammation at the point of injection. Similarly hyperthyroidism, which (when not suppressed) raises the basal temperature, is also known to be associated with lower incidence of cancer.

Yet another protein that is dissolved by fever is that which would otherwise be deposited in the arteries. Fever is also a good preventative against deposits in the arteries (arteriosclerosis), which might in time lead to such diseases as dementia, myocardial infarction, etc., depending on which artery is affected.

What is the meaning of the flu?

The young child needs childhood diseases to eliminate its mother's protein before it can build its own. It takes about 21 years for it to build up its own protein. Within 20 - 21 years the individual body is ready and can become an instrument for the "I" to realize its individual life task.

Perhaps it is no coincidence that many "auto"-immune diseases appear precisely in this age period, when the immune system can no longer tolerate any maternal foreign protein.

However, human beings should also continue to develop spiritually in the course of their lives. A 70-year-old person should be different than he or she was at 20. The physical protein must change in order to adapt to this soul and spiritual maturation, and that is the function of the flu. Flu or acute bronchitis is accompanied by some degree of fever. Although there is no rash, there is sufficient heat to dissolve and excrete enough of the old protein. After this, new protein can be built up, which is now adapted to the new developmental state of the "I". If the individual protein of a healthy person were to be examined over the course of life, it would even be possible to see these changes in the individual protein. It is the repeated occurrence of flu that is responsible for these changes. Flu has the same function in adults as childhood diseases have in children.

If this did not happen, people would retain a protein that is no longer suited to them. In a certain sense the individual would mummify. The protein in a mummy is preserved – it does not change anymore. The spiritual core, the "I", could no longer develop properly in this preserved body. In this case people would be in danger of acting in ways that no longer correspond to their individuality, as happened to the three army surgeons in the fairy tale who received organs from foreign sources. Such people would remain in the past, repeating old behavior patterns, because of protein that is no longer suited to them. They would then have increased difficulty developing new soul qualities – forgiveness, for example – in spite of their efforts to realize them, because the presence of the old protein stands in the way. Thus flu with fever, from twice a year to once every three years, is important in order for the whole person to be "cooked through." Going through a flu properly with strict bed rest brings about a real rejuvenation, an excretion of the old protein and then the building up of new protein adapted to the self.

This is why the flu must not be treated with antipyretics-analgesics (for example, for headache), but from 99.5° F (37.5° C) and above with strict bedrest for three to five days, overwarming baths, etc. as for all acute diseases (see above: "Correct treatment of childhood diseases and other acute illnesses"). 10 drops of Salviathymol in a cup of warm water, taken in sips and *swallowed*, will soothe the coughing and the pain in the throat.

What about people who do not get fevers?

Today many people seldom get a fever. This constitutional weakness can be changed by repeatedly increasing the body temperature naturally through movement. That is why walking (not jogging) counteracts this tendency: for example, walking 45 to 60 minutes a day or hiking 3 to 5 hours one day a week, preferably uphill. Walking not only warms the body, but also – unlike jogging – warms the soul as well, since one has time to experience things of beauty as they appear by the wayside. Heat production can be additionally supported with Ferrum phosphoricum D6 (Weleda), one tablet in the morning during the winter months. If fever arises, antipyretics and painkillers should not be taken; rather an overwarming bath should be given if fever remains below 102.2° F (39° C). The overwarming bath (or shower) can even be taken *before* fever appears. When a flu is starting, before fever appears, people feel fatigue, slight sore throat, and perhaps muscle pain. Here they can also take an overwarming bath as described under "Correct treatment of childhood diseases and other acute illnesses." In this way the heat of

the fever is anticipated, bacteria and viruses cannot thrive, the immune system is alarmed, and the next morning they may wake up feeling well again. Significantly, this method does *not* suppress the flu. When external warmth proves insufficient, the body will produce the necessary internal warmth in the form of fever.

In everyday life as well, the use of analgesics (painkillers) should be avoided for headache, backache, menstrual pain, etc., because they always lower the normal temperature at the same time. Instead, these complaints should be treated with natural or anthroposophical remedies. Advice can be found in the book *Home Remedies* by Otto Wolff, for example. And children should be allowed to get the childhood diseases and all the febrile illnesses that they will get time and again – without using antipyretics or analgesics.

Are vaccines *themselves* harmless?

Vaccines are presented as one of the greatest successes of modern medicine. We are told that many diseases are no longer dangerous today due to modern medicine, including vaccines. The experts know that this is not the case. The risk of death from measles and whooping cough, for example, decreased significantly long *before* the introduction of vaccines, as the following two graphs show.[7]

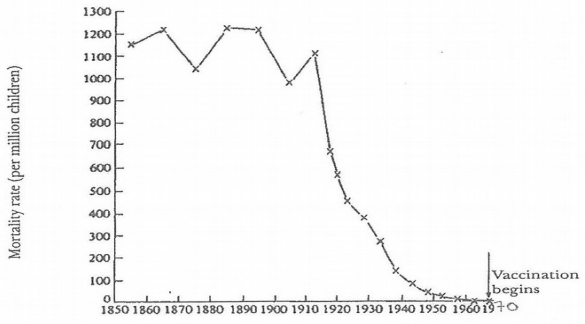

Fig. 5: Measles mortality rate for children under 15 in England and Wales. Source: Thomas McKeown, Die Bedeutung der Medizin, Frankfurt 1979.

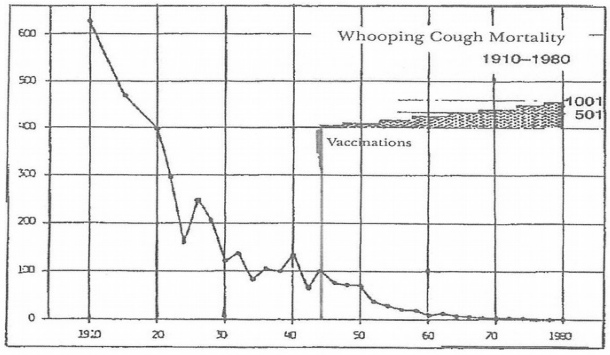

Fig. 2: Whooping cough mortality in Switzerland, 1910-80. Taken from Tönz, O. Keuchhustenimpfung. Therapeut. Umschau 40, S. 203 (1983)

These and many other studies with the same results were carried out by the authorities themselves. The facts are known. Nevertheless, they are presented differently. In reality, the disappearance of a disease (smallpox, for example) has been due not only to the vaccines but also to the improvement in general hygiene, as well as to the fact that each epidemic has its own autonomous course. This course is always self-limiting; it comes to a natural end. The plagues of the Middle Ages, for example, disappeared without any vaccines. Nevertheless, modern medicine presents smallpox as a disease that was eradicated *only* by vaccines. Yet the effects of introducing vaccines in medicine has not been as decisive for health in general as is claimed, at least not in a *positive* sense. The exception is the oral polio vaccine, which was a real help during the polio epidemic of the 1950s.

Furthermore, vaccines *themselves* are not as harmless as they are presented. The vaccine against smallpox was by no means harmless. Since then extensive literature has described the damage caused by this vaccine.[8] The results of the many studies that have been carried out indicate that one in every 4,000 children vaccinated got severe brain damage. This calculation does not even include the relatively high number of deaths resulting from the smallpox vaccine. The frequency of encephalitis caused by smallpox itself was much lower than that caused by the vaccine.

Even today vaccines are not completely safe. In the USA, for example, from 2004 to 2014 ninety-six deaths were reported in children who received the measles, mumps, rubella (MMR) vaccination, compared to 7 deaths from measles itself during the same time period (Vaccine Adverse Event Reporting System). There is also clear evidence of sudden (though infrequent) occurrence of autism shortly after administration of the measles, mumps, rubella-vaccine to children who previously had normal development.[9] This obvious connection between this MMR vaccine and the appearance of autism is not recognized by the medical profession – regardless of the short time period of a few hours to two weeks between vaccination and onset of the autism.

In practically everyone's sphere of acquaintance, one will hear of a child or adult here or there who was healthy until they received a vaccine – but no longer afterwards. They suffer from chronic fatigue, muscle pain, epileptic seizures and various other impairments, and many of these conditions are irreversible. Such occurrences are rare, but at least frequent enough that one hears directly or indirectly of someone who was affected.

A further issue is that of the "minor" brain damage a vaccination can produce, which is not taken into account at all. Developmental regression, the objective temporary loss of already acquired skills shortly after vaccination, clearly indicates slight brain damage. This is admittedly difficult for untrained parents to detect, especially in babies. This loss goes unnoticed in statistical analyses as well. However, such short-term developmental regression is a sign of minor brain damage and may appear later in the form of learning difficulties, among other symptoms. And these damages must inevitably be called "permanent" because the nervous system cannot completely regenerate.

Vaccination is more dangerous for babies than for adults. Babies in their first year of life are still slowly incarnating and do not yet have a properly developed immune system. Their bodies are not yet able to accurately recognize foreign proteins. This means that one can inject them with foreign protein with less danger of a life-threatening reaction against the foreign protein, because their body cannot yet recognize it as foreign. Sadly enough, for this very reason babies are vaccinated particularly *often*. No account is taken of what could happen in the long term with the unrecognized foreign proteins that have been inoculated into their bodies. After all, these foreign proteins in the vaccine belong to pathogens – *disease*-producing microorganisms – that have been more or less "inactivated." If even adults with fully developed immune systems can get complications from the vaccinations, what about babies? Also, in this first year of life the blood-brain barrier of the baby is still immature and therefore

more permeable. In addition, during this time the brain itself is completing its growth. What influence could these partially destroyed foreign proteins of disease-producing microorganisms have on a poorly protected, still developing brain?

The above-mentioned documentary film (see footnote 2) reports on a combination vaccination which was given before 2005 (Hexavac®). It contained six very common vaccines: diphtheria, tetanus, pertussis, polio, hepatitis B and Haemophilus influenzae. Within two weeks of vaccination some babies died. Their corpses were examined and one of the pathologists reports in the film about the brains of these babies, which were found to be harder than those of normal babies. This information was strictly suppressed by the officials. For this reason there is still no clarification about the cause of the hardening of the brains. In the end, the combination vaccination disappeared from the market, but with a false claim ("insufficient long-term effect").

Is it possible that some or all of these six vaccines have a slight tendency to cause hardening of the brain? When the vaccines are given in combination, this tendency would only be amplified and so become visible. This is precisely what has not been investigated in animal experiments. (In such experiments the very young animals would not be tortured, only vaccinated like almost every human baby today, and two weeks later slaughtered – just as many animals are slaughtered for food – but in this case to be able to examine their brains.) Could it be that some vaccines cause a hardening of the brain, especially in babies? Those affected in this way would then not be as badly damaged as those with minor brain damage, which has the effect of weakening intelligence. But they would still have a weakness.

Rudolf Steiner on vaccination

A little over 100 years ago, in 1917, Rudolf Steiner predicted that "… perhaps in a not too distant future … one will find … a vaccine by which the organism is so conditioned at the earliest possible age, if possible right at birth, that this human body will not come to the thought: there is a soul and a spirit."[10] People would only be able to think about the body and the physical world. Could this be the case here, due to this slight hardening of the brain? He repeats this point seven years later: "… The human being is unable to rise above a certain materialistic feeling. And that is actually the alarming thing about the smallpox vaccine."[11]

This would go in the same direction as vitamin D, which today is mistakenly advertised as a panacea and therefore frequently taken.[12]

In 1919 Rudolf Steiner wrote in a letter to Eliza von Moltke about how such a hardening of the brain manifests. He describes the way people reacted (or more accurately, did *not* react) to a lecture he had given, which dealt with the most urgent problem of *our* time as well: worldwide social coexistence. Rudolf Steiner experienced the difficulty people had in grasping the new thoughts he was presenting. "And *this* lack of 'ability to understand' among people: important things that I want them to understand, they simply *don't hear*. It is as if they were only capable of understanding things in the same phrases that they have been accustomed to hear for 30 years, right down to the structure of the sentence. *Hardened brains* (italics D.B.), paralyzed etheric body, empty astral body, completely dull 'I'. This is the signature of the people of the present."[13] The consequence of the hardening of the brain described here by Rudolf Steiner is really comprehensible to everyone. It consists in no longer being able to understand something new, for example no longer being able to understand how to solve the most important problems of our time. This is not only tragic for these people alone, but if it affects a sufficiently large number of people, it would be tragic for the development of the whole of *humanity*. Then there would be no more development, only decline. Is this tendency (which was already starting 100 years ago), and the inability to think spiritual thoughts, being reinforced by the vaccines?

Did Rudolf Steiner advocate vaccination?

When speaking of the difficulty of rising above a "certain materialistic feeling" after the smallpox vaccine (see above), Steiner indicates that children who receive an anthroposophical upbringing will not suffer the materialistic effect of the vaccination. He also gives an indication how people could protect themselves spiritually from infection without vaccination, through full consciousness that they are being approached by an "unjustified" spiritual entity against which they must now maintain themselves upright. The unjustified force will then not be able to penetrate into them unconsciously, and vaccination will not be necessary.

When one physician in the audience points out the difficulty of applying these suggestions where he lives, Steiner responds that then there is no other choice but to vaccinate: "A fanatical position against these things is not what we are striving for, rather we mean to do things differently overall, out of understanding."[14] What does this mean? It means that the important question is not vaccination itself, but what kind of worldview a person holds or grows up with. If a *spiritual* worldview is developed, then vaccinations may be given without harm or may even be omitted. Steiner is not against vaccination, but it is not the solution. The real solution to our problems today is the development of a spiritual worldview. This is what has to be supported.

Back to the beginning: does vaccination make *sense*?

We have now seen why the goal set by the WHO of eradicating all diseases through vaccination is ill-advised – especially when directed against diseases that are either harmless, almost non-existent, or not very contagious. The fact that humanity is no longer allowed to become ill actually makes us all progressively weaker and therefore more susceptible to illness. Today we are amid this decline in health. This is reflected in the annual increase in health insurance premiums, which are rising in large part because people are becoming increasingly ill. What is medicine's answer to this problem? To vaccinate the *whole* of humanity... to protect people who are already ill from further deterioration when they encounter a disease. But what would happen then? *All* of humanity would become ill. This cannot be the solution. The healthy should not be weakened, the ill must be strengthened.

Thus, when the benefits of vaccination are weighed against its risks, it becomes clear that the benefits are not very great. Of the diseases that vaccination protects against, some are either obviously beneficial (the childhood diseases measles, rubella, chickenpox; and influenza) or harmless (mumps, whooping cough, pneumococcus, Haemophilus influenzae). Some of them, while not harmless, are rare and only slightly contagious (meningococcus, tick-borne encephalitis/TBE). Others are not so rare, but only slightly contagious (hepatitis B), and yet others are extremely rare (diphtheria, tetanus, polio, rotavirus), or the vaccine itself is dangerous (cervical cancer vaccine).

It is like in the fairy tale "The Emperor's New Clothes" by Hans-Christian Andersen. In this tale, two swindlers receive a handsome sum of money from the emperor to make him a "beautiful suit." They tell the emperor that the suit is so "fine" that people who are unpardonably stupid cannot see it. Then they pretend to weave and sew, while in reality they are only working in air. Since the emperor and his ministers and subjects do not want to be considered stupid, they all pretend to see the suit. Vaccination is presented as one of the greatest successes of medicine, although it is officially known that these diseases are no longer dangerous (see the graphs). It costs the health insurance companies large sums of money, since the entirety of humanity is to be vaccinated. But the protection it provides is against diseases that for one reason or another are not really dangerous.

Yet when the risks of vaccination are considered, they turn out to be not so low when *those* risks that are ignored by the medical profession are also taken into account:

First, there are the *direct* damages caused by the vaccines themselves, which usually occur soon after vaccination in children and adults who until then were healthy. These include not only the gross, obvious damages, which are not acknowledged by the medical profession (autism, chronic fatigue, etc.), but also the minor brain damage that often goes unnoticed by parents. The open question that arises in the case of babies who have died with hardened brains must also be considered: whether some vaccines have a brain-hardening effect, particularly in babies.

Next, one must also consider the *indirect* damages of the long-term effects of vaccination. These include the consequences of deprivation of fever with its protein-dissolving action. The child cannot completely break down the maternal protein without fever. The question arises as to possible consequences (autoimmune diseases?). The lack of fever increases the tendency to cancer and arteriosclerotic diseases such as dementia. Attempting to prevent influenza by vaccine also hinders the regular renewal of a part of the body's protein, which brings its own consequences. The general physical weakening of humanity is due in part to preventing people from going through diseases with fever. For, as Rudolf Steiner tells us, "disease is the condition for health... This is precisely the result and gift of disease, since strength must be *acquired* by man. If we want strength and health, then we must accept its precondition, illness."[15]

Thus, when its benefits are weighed against its risks, does vaccination makes sense in the first place? When all of the facts cited above are taken into account, it becomes clear that this question must be answered in the negative. Of course, this applies *only* to children and adults who are essentially in good health and good nutritional condition. When a person is ill, the decision must be made on an individual basis.

An exception would be the occurrence of a genuine epidemic with a high risk of infection and danger of severe, permanent damage (for example, the polio epidemic of the 50s). But when such an epidemic arises, it is vital to identify and treat the underlying weakness that made the epidemic possible. In poor countries, for example, it is malnutrition. There, *feeding* should be the first priority instead of vaccination. Also, one important factor in the infectiousness of the polio epidemic was the consumption of sugar, with the subsequent hypoglycemia leading to the corresponding weakness. Placed on a complete and immediate sugar-free diet, children remained polio-free – without vaccination.[16]

A final word on health

Health is by no means simply a given, an innate condition. A great many things lie in the hands of each individual. Since it is important to have enough strength to overcome an illness when it strikes, a few of the most important fundamentals of healthy living will be mentioned here:

Walking has already been mentioned. It is also very important to sleep 8 to 9 hours a day. Any smoking undermines health – not only that of adults, but also and especially that of the developing baby in pregnant women and of nursing mothers. On the other hand, breast-feeding itself is extremely important for the strength of the baby.

As far as nutrition is concerned, it is well known that the consumption of alcohol leads not only to physical but also to mental decline. The effect of sugar is generally less well known. This is much more serious than the consequences of meat consumption,

for example. Sugar and anything that contains sugar, including honey (except *one teaspoon* a day), agave syrup, maple syrup, etc., should be reduced to once or twice a week. Even the natural sweetener stevia should be reduced to an absolute minimum. Food should be taken as it naturally tastes: unsweetened. (Further information on this subject can be found in the book *What Are We Really Eating?* by Otto Wolff.)

Today, unfortunately, caring for one's health must also include protecting oneself from the radiation present everywhere (Wi-Fi, mobile phones, etc.). These radiations should be reduced wherever possible by the use of cable connections. Routers and devices should be turned off at night.

Not protection, but strengthening

We have seen that the medical goal of eradicating all disease by vaccination (or other means) is not right. Without disease there is no strengthening and no health. The question should not be, "How do we get rid of disease?" but rather: "How can we prepare people in everyday life so that when disease strikes they are strong enough to meet it, and how can we support them during disease so that they emerge stronger from it?"

May the considerations in this article be comprehensible to the reader, and be of help in deciding whether or not to vaccinate.

About the author

Daphné von Boch was born in 1958 in Canada and has lived for many years in Basel, Switzerland. As an anthroposophic physician and psychologist, she worked for years in two rehabilitation clinics for anthroposophic and psychosomatic medicine, becoming the chief physician in the final years. Now (since 2018) she has a private practice in Germany. For many years she has been active teaching anthroposophic medicine to physicians principally in the East and Far East and republishing the books of Otto Wolff.

Translation by Peter Luborsky

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