

July 2009



ONE CLICK ON SWINE FLU

Why The Dangerous And Useless Tamiflu Drug Is Being Peddled The Swine Flu Vaccine Exposed Common Sense Practical Medical Advice On Swine Flu Published

Let's all get real about Swine Flu. The hysteria generated by this illness is entirely contrived and is the disgraceful recession proof get out card of the pharmaceutical industry. It is invariably how governments mishandle 'pandemics' through fear marketing that causes the chaos, not the illness itself.

Stoked by the media and the sinister UK government lobby groups Sense About Science and the Science Media Centre, this hysterical campaign is now reaching obscenity levels and is damaging the residents of countries around the world

This propaganda campaign should come as no surprise to anyone bearing in mind the architect position of that [Fatal Joke](#), Professor David Salisbury, chairman of the WHO's Strategic Advisory Group of 'Experts' on immunisation (SAGE) and the UK government's vaccines director. Wherever Salisbury goes, promotion of fatal vaccines such as HPV Gardasil and Cervarix follow in his wake to the devastation of many.

The Tamiflu Scandal

The Swine Flu medication campaign structured by the UK Government and others is not working. Experts from Denmark, Japan, Hong Kong et al have announced that Tamiflu is rapidly becoming Swine Flu resistant. The effects of this drug can be horrendous. See [US reviews risks of Tamiflu after 12 children die](#), the Independent, 18 November 2005.

Why is the UK Department of Health (DoH) handing out Tamiflu like sweets to the electorate? Because the stocks held by the DoH are rapidly reaching their sell by date, with our political apparatchiks desperate to unload this drug on to the consumer as the evidence shows. Who gives a stuff about side effects and what this useless drug can do to people when profits are to be made?

Subsequent to socialising with a colleague, The Jobbing Doctor announced on the internet: *"He then told me why the Government were very keen for us to prescribe it to everyone who has a sniffle and a high temperature: you see, most of the stockpiled Tamiflu was for a previous flu scare, and it expires (passes its sell-by date) in the early part of this Autumn (2009) when it effectively and officially becomes useless (as opposed to being pretty useless anyway). This is*

why they are peddling it. Explains a lot, doesn't it!" See [We all love Tamiflu](#), The Jobbing Doctor, 13 July 2009.

The Swine Flu Vaccine

Concerns also rightly abound over the proposed Swine Flu vaccine, equally being hysterically hyped by the manufacturers to great profit, which is set to be trialled on the human population in the UK for only five days. See [Swine flu vaccine to be cleared after five-day trial](#), the Sunday Times, 12 July 2009. Over 50 comments were left on this article by the Sunday Times readers that were so pointed in relation to concerns regarding the safety of this vaccine that the Sunday Times removed them all from its website. Censorship in Britain to benefit the pharmaceutical industry rules OK.

The New England Journal of Medicine has announced that Swine Flu was created by a laboratory accident. See [Swine Flu - Lab Accident Caused 'Pandemic' Claims NEJM](#), Daily Telegraph, 30 June 2009.

It is therefore extremely ironic that the causation of this illness should be so extensively profited from by its architects, the pharmaceutical industry and these laboratories. Who can possibly forget Baxter filing a [Swine Flu Vaccine Patent](#) a year ahead of the outbreak? Who can equally forget [Baxter shipping live Bird Flu virus as vaccine to 18 countries](#) as announced in March 2009? Self interest is paramount for these vaccine manufacturers with the word responsibility not even beginning to be entered into the equation.

It has now been announced that both in Britain and the USA, the Swine Flu vaccine manufacturers have been afforded legal immunity from prosecution. This is because the last time a government embarked on a major vaccine campaign against Swine Flu in 1976, 40 million Americans were vaccinated against a pandemic that never materialized. Thousands filed claims contending they suffered side effects and people died from the vaccine. This time around, governments seek to protect the pharmaceutical industry at all costs. See [Legal Immunity For Swine Flu Vaccine Manufacturers - David Salisbury Questioned](#). The article entitled [The Art Of Endeavoring To Swine Flu Deceive](#) also provides excellent information in relation to this vaccine.

The Risible British Swine Flu Stats

The so-called Swine Flu statistics in Britain are ridiculous. Far from patients being laboratory tested or at least being seen by their doctor to ascertain if they actually have the illness or not, a great deal of telephone diagnosis is going on. The GPs do not want these people in their waiting rooms and neither do the hospitals. These risible Swine Flu stats are shortly to leap forward with a Call Centre being set up in Britain staffed by the unqualified to handle Swine Flu queries and dish out the aforementioned useless and dangerous Tamiflu drug.

To add to the British economy's woes, anyone who thinks that they have Swine Flu (whether they really do or not) or wants a holiday, merely has to telephone their employer and two weeks off will be granted without any demur or medical certificate. Whereas many are genuinely ill, the opportunity for swinging the holiday lead has never been missed by some and there is absolutely no reason to think that a complete character alteration has begun now.

Swine Flu Facts

Swine Flu is being duplicitously hyped as a 'pandemic' by the WHO with the aforementioned fatal joke, Professor David Salisbury, in charge of its immunisation policies. Swine Flu is in fact relatively mild for most and is not much different to any other flu virus except that it has taken hold in the summer months rather than the winter.

For those statistically few in number who have died from Swine Flu it is a tragedy for them and their families that should never be minimised. It is an equal tragedy for those who die from the usual flu virus variations every year - in America alone this is around 30,000 deaths per annum.

The fact that the vaccine manufacturers, the WHO and governments around the world are orchestrating this hysteria over Swine Flu to serve their own financial and political purposes is one of the most disgraceful propaganda campaigns ever witnessed by anyone. How extremely convenient that the serious (if not fatal) democracy damage done by all those MPs (and Lords) that effectively swindled the British taxpayer out of all that money via their expenses has been so effectively wiped off the front page by Swine Flu propaganda.

What To Do About Swine Flu

So what to do about Swine Flu with Tamiflu pronounced as dangerously useless and with the proposed vaccine suspected by all for very good reason?

Perhaps we should start with the basics of common sense, an item being avoided like the bubonic plague by the pharmaceutical industry and governments alike. Common sense does not make for profits.

Enter the eminently sensible Dr Sarah Myhill. Fortunately, not all doctors appear to have taken leave of their Swine Flu senses, prodded to do so by the pharmaceutical industry and governments.

Dr Sarah Myhill MB BS, Upper Weston, Llangunllo, Knighton, Powys, Wales, UK LD7 1SL

Tel: 01547550331

Fax: 01547550339

E-mail: office@doctormyhill.co.uk

Website: www.drmyhill.co.uk

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Dr Sarah Myhill

SWINE FLU

Titles in CAPITALS refer to my other information handouts – please, ask for a copy to be sent or emailed if you need it, or look for it on my website.

The interesting thing about all flu pandemics is that only about half of the population actually get flu. The question we should be asking is what is it about this half that stops them from getting flu because they are undoubtedly exposed to the flu virus? Clearly their defences against infection are good, so what is it about those people that make the difference.

VITAMIN D

Flu pandemics are much more virulent during the winter months than the summer months. Indeed it is already being predicted that swine flu will flare up in the Autumn. The reason for this is vitamin D. Vitamin D is the sunshine vitamin and so the more sunshine you can get without actually burning, the better your vitamin D levels. Indeed a recent paper in the Lancet confirmed that vitamin D is indeed highly protective against viral infection. Roughly speaking one hour of Mediterranean sunshine will produce 10,000iu of vitamin D. Most pills in shops provide only 400iu of vitamin D – furthermore, this is often as the inactive vitamin D2 rather than the active D3. I like people to have at least 2,000iu of vitamin D3 daily and for people who may be particularly susceptible, I recommend a once weekly dose of 50,000iu of vitamin D3.

HYPOCHLORHYDRIA – Low stomach acid

Swine flu is an enterovirus – that is to say it infects the gut. All viruses get into the body through the mouth. Those that are inhaled get stuck onto the sticky mucous lining the respiratory tract, coughed up and swallowed. That is to say all these bugs end up in the stomach and the stomach is the first line of defence against infection. The stomach should be an acid bath – those people with good acid stomachs therefore will kill the virus, or at least substantially reduce their numbers. This means that people with low stomach acid, either because they are naturally like that, or because they are taking acid blockers (such as proton pump inhibitors, H2 blockers, or antacids) will be more susceptible to infection with swine flu. A test that will give you some idea if you have low stomach acid is to swallow half a teaspoon of sodium bicarbonate in a glass of water. If you have an acid stomach the sodium bicarbonate will react with this, produce carbon dioxide and you will burp. If you suspect hypochlorhydria then this could be tested for by doing a salivary test, namely a salivary vascular endothelial growth factor - (see HYPOCHLORHYDRIA on website).

If you are hypochlorhydric, you can either acidify the stomach at mealtimes using betaine hydrochloride or, in these circumstances, use ascorbic acid. Ascorbic acid is vitamin C. It kills viruses very effectively because it is an acid and also because it is an ascorbate – see below.

VITAMIN C

Vitamin C kills all bacteria and viruses, but is remarkably non-toxic to human cells. Ascorbic acid is the best form because it acidifies the stomach and the ascorbate is also directly toxic. At the first sign of any cold or flu, I suggest taking 10 grammes (10,000mg) initially and then adjust the dose according to symptoms. The aim is to cause mild diarrhoea – the reason it causes diarrhoea is because it kills the friendly bacteria in the gut – that is to say once you get the diarrhoea, you know you have

got a therapeutic dose. You can then replace the bacteria in the gut using probiotics – (see PROBIOTICS and KEFIR on website).

TAKE REASONABLE HYGIENIC PRECAUTIONS

Not because this will stop you from getting an exposure, but because it will help reduce the initial viral load. This gives the immune system a bit more time to get up and running. My guess is that masks will be pretty useless and detract from the more important measure of hand washing. The virus is spread from the respiratory tract by runny noses, coughing and sneezing, the droplets stick onto furniture and fittings and are picked up by touching.

Allow inflammation. The body reacts against viruses with inflammation and the result of inflammation is either directly toxic to the virus, or helps to physically expel virus from the body. For example, viruses are very temperature sensitive – for the body to run a fever is a good thing – fever kills viruses (and bacteria). A good snotty nose helps to wash out virus from the nose and a hacking cough blasts the bugs from the lungs. Symptoms may be uncomfortable but should be welcomed as an appropriate way to get rid of virus. This is why I hate to see symptom-suppressing cold remedies such as paracetamol, antihistamines, alcohol, decongestants, cough mixtures which interfere with the body's natural mechanisms of killing and expelling virus. **SO DO NOT SUPPRESS SYMPTOMS – THEY ARE NATURE'S WAY OF EXPELLING INFECTIONS.**

Run a temperature – there is no doubt that people who tend to run cold all the time are more prone to picking up infections and indeed this is the basis of the age old adage to “wrap up well in cold weather or you will catch a chill”. It would be interesting to measure your basal temperature. Low temperature can be indicative of borderline hypothyroidism and this can certainly present with recurrent infections. Children are very good at running a temperature at the first sign of virus, but adults less good. At one stage Boots used to market a product called rhinotherm which blasted hot air into the nose – the idea is that you inhaled this at the first sign of a cold and for some people it got rid of the virus. I know some patients can get rid of a virus by giving themselves a temperature – i.e. using a hot bath to get themselves as hot as possible and then wrapping up in blankets with a hot water bottle to make themselves sweat it out. I know some athletes deliberately go running in order to induce a temperature, sweat out a virus, but I have to say this is extremely risky and not something I would recommend as it could trigger a flare of chronic fatigue syndrome (CFS)! The only exception to using paracetamol for fevers is in some children who tend to get fits if their temperature goes up too high. In this event paracetamol and tepid (have you ever had a fever and cold water splashed on you?) sponging should be used to prevent this happening. It is therefore doubly important in these children that micronutrients are used to improve the immune response.

Rest and warmth sound like common sense but are ignored by many. Rest allows the immune system to work unhampered whilst warmth kills bugs. Some people find a hot bath or a sauna produces an artificial fever and helps get rid of infection. So much CFS is triggered by the workaholic who continues to strive even when they are ill.

Zinc - 10mgs four times daily into the mouth kills microbes. Zinc is probably the most common deficiency resulting in poor immunity.

Consider a detox regime. There is no doubt that chemicals have immuno-suppressive effects – they also depress the bone marrow and this could explain borderline anaemia and low white cell counts. I often do fat biopsies on patients and invariably find raised levels of pesticides or volatile organic compounds – indeed I have yet to see a normal result – and all these chemicals cause immune

suppression. Increasingly I am coming to the view that we should all do detox regimes. First of all we should avoid chemicals as much as we possibly can, secondly take good micronutrients to improve the liver detoxification of chemicals and thirdly sweating regimes. Obviously the most physiological sweating regime is to take exercise, but impossible in CFS patients. Far infra red saunas are effective in reducing chemical loads, as demonstrated by doing fat biopsies before and after sweating regimes.

Think allergy – allergy to dairy products often presents with recurrent infections, especially tonsillitis. Sometimes allergy symptoms can present with symptoms of an acute cold – ie rhinitis and cough.

Think thyroid – hypothyroidism may present with a tendency to infection because the body runs cold and the immune system goes slow.

Avoid female sex hormones, which are immunosuppressive and increase susceptibility to viral infections

There are some very useful antiviral herbal preparations on the market such as colloidal silver and Echinacea, propolis 600mgs three times daily, lime tea etc. but it is really a case of trying as many things as you can until you find a combination that suits you.

Why Vitamin D is really important!

Skin contains a cholesterol derivative, 7-dehydrocholesterol. UVB radiation on skin breaks open one of the carbon rings in this molecule to form vitamin D. This has to be twice activated in the liver and kidney to make 1,25-dihydroxyvitamin D. This attaches to receptors on genes that control their expression, which turn protein production on or off. Vitamin D regulates the expression of more than 1,000 genes throughout the body. They include genes in macrophages, cells in the immune system that, among other things, attack and destroy viruses. Macrophages make antimicrobial peptides, ie ones own antibiotics. Like antibiotics, these peptides attack and destroy bacteria; but unlike antibiotics, they also attack and destroy viruses.

Interestingly with Swine flu what kills people is not the virus but their own immune system. Vitamin D also expresses genes that stop macrophages from overreacting to an infection and releasing too many inflammatory agents - cytokines - that can damage infected tissue. Vitamin D, for example, down regulates genes that produce interleukin-2 and interferon gamma, two cytokines that prime macrophages and cytotoxic T cells to attack the body's tissues. In the 1918-19 Spanish flu pandemic that killed 52 million worldwide, young healthy adults would wake up in the morning feeling well, start drowning in their own inflammation as the day wore on, and be dead by midnight. Autopsies showed complete destruction of the epithelial cells lining the respiratory tract resulting, researchers now know, from a macrophage-induced severe inflammatory reaction to the virus. In a terribly misguided way, these victims' own immune system attacked and killed them, not the virus, something in future pandemics vitamin D, in appropriate doses, can prevent.

A credible hypothesis that explains the seasonal nature of flu is that influenza is a vitamin D deficiency disease. Cannell and colleagues offer this hypothesis in "[Epidemic Influenza and Vitamin D](#)" (*Epidemiol Infect* 2006;134:1129-40). They quote Hippocrates (*circa* 400 B.C.), who said, "*Whoever wishes to investigate medicine properly should proceed thus: in the first place to consider the seasons*

of the year." Vitamin D levels in the blood fall to their lowest point during flu seasons. Unable to be protected by the body's own antibiotics (antimicrobial peptides) that this gene-expresser engineers, a person with a low vitamin D blood level is more vulnerable to contracting colds, influenza, and other respiratory infections (e.g., respiratory syncytial virus).

Studies show that children with rickets, a vitamin D-deficient skeletal disorder, suffer from frequent respiratory infections; and children exposed to sunlight are less likely to get a cold. Given vitamin D's wide-ranging effects on gene expression, other studies, for example, show that people diagnosed with cancer in the summer have an improved survival compared with those diagnosed in the winter (*Int J Cancer* 2006;119:1530-36).

This present outbreak of swine flu was predicted to cause a few cases, then return with a vengeance in the autumn. My guess is that a combination of a poor summer together with government advice to avoid sunshine, vitamin D levels in the population are low, at winter levels, so the epidemic has escalated up.

What about a vaccine?

A previous vaccine against swine flu turned out to be worse than the disease. An outbreak in the US in 1976 infected 200 soldiers at a military camp in New Jersey, of whom 12 were hospitalised and one died. But before it was over 40 million people had been vaccinated, 25 of whom died and 500 of whom developed Guillain-Barre syndrome, an inflammation of the nervous system which can cause paralysis and be fatal.

At this point I would not advise people to have a vaccination from swine flu for the following reasons:

- No trials have been done to see if the vaccine is effective.
- We have no idea about side effects – at present the virus appears to be producing mild symptoms and my educated guess is that if all the above precautions are observed, then the illness will stay mild. Indeed the manufacturers are refusing to provide any guarantees or indemnity in the event of side effects.
- Vaccinations are always a two edged sword – they have the ability to switch on the immune system. Ideally of course this should be against the virus, but vaccinations can certainly switch on chronic fatigue syndromes, allergies and probably autoimmunity.

Sit on the fence whilst the virus is relatively mild! The idea scenario would be to get your nutritional status perfect, get a dose of swine flu now, have a mild infection and then be immune for decades to come! That is the best possible form of vaccination! It is possible that in future epidemics the virus will mutate into something more virulent.

What about Tamiflu?

Again there is no evidence that this protects against death – it would be useful if it helped reduce viral load but this is also unproven. Side effects are also an unknown quantity. It only has a chance to be effective if given within 48 hours of the first symptom. Since it is now almost impossible to get without a doctor's prescription and instant access to doctors is difficult, one would not like to rely on Tamiflu! Again my educated guess is that all the above nutritional interventions will be highly protective and Tamiflu will be irrelevant.

So the basic principles are:

- Wash hands regularly
- Keep well rested – don't get a sleep deficit!
- Keep warm – viruses are heat sensitive
- Get your micronutrient status as good as possible. Especially think vitamin D, zinc and C.
- Check for hypochlorhydria – ascorbic acid (vit C) helps correct this!
- Do not symptom suppress! Allow a temperature. Aggressively attack viruses at the first symptom with heat, high dose vitamin C as ascorbic acid (swallowed) and magnesium ascorbate (dissolved in mouth) or whichever herbal preparations you find suit you.
- Detoxify as much as possible – including sweating regimes. Identify any allergies you may have – think dairy. Recurrent tonsillitis is typical of dairy allergy.
- Correct thyroid hormone abnormalities – for this you need to test a free T4 a T3 and a TSH
- If the symptoms of a virus do not improve after 3-4 days, then it is possible that a secondary bacterial infection has developed. A healthy body and immune system can deal with most bacterial infections, but call for professional help for less than healthy people such as the very young, old, smokers, diabetics, heart disease, people with a history of chest infection, immuno-suppressed and so on.

Dr Sarah Myhill, July 2009

Website: www.drmyhill.co.uk

- ENDS -

Please do not either telephone or email Dr Myhill unnecessarily - she is up to her eyes in it as the good doctors recognised as such by their patients always are.

One Click Group Director Jane Bryant commented: *"I have been quite ill with what I presume was Swine Flu with all the symptoms and a roaring temperature. Upon onset, I immediately gave my child, a severe ME/CFS sufferer, a combination of Vitamin C, D, Zinc and Selenium, another supplement recommended by sectors of the medical profession in contact with One Click. My very ill child sailed through this flu in four days. I equally applied the aforementioned regime to the builder resident in our home at that time. He did not contract this flu at all despite constant propinquity."*

This Swine Flu propaganda hype delivered by the pharmaceutical industry and governments is outrageous and entirely deceptive. Try to apply common sense and get on with your lives, despite how governments and the pharmaceutical industry are attempting to wreck them.

**The One Click Group
July 2009**

Related Links:

* [Legal Immunity For Swine Flu Vaccine Manufacturers - David Salisbury Questioned](#)

Mike Stobbe, The Associated Press/The One Click Group

* [US reviews risks of Tamiflu after 12 children die](#)

Jeremy Laurance, The Independent

* [We all love Tamiflu](#)

The Jobbing Doctor

* [Swine flu vaccine to be cleared after five-day trial](#)

Jon Ungoed-Thomas, Sunday Times

* [Swine Flu - Lab Accident Caused 'Pandemic' Claims NEJM](#)

John Bingham, Daily Telegraph

* [Baxter Files Swine Flu Vaccine Patent A Year Ahead Of Outbreak](#)

Lara, Health Advocate

* [Baxter - Live Bird Flu Virus Shipped To 18 Countries As Vaccine](#)

The Right Perspective - New York City

* [The Art Of Endeavoring To Swine Flu Deceive](#)

A. True Ott, PhD, ND, Vaccine Injury Coalition

* [SWINE FLU](#)

Patient Information

Dr Sarah Myhill