

Written Public Comments

**IACC Full Committee
Meeting**

December 12, 2008

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Note: Personally Identifiable Information (PII) has been redacted in this document

Donna Young

November 22, 2008

Subject: Your Charter and Duties

<http://iacc.hhs.gov/about/charter.shtml>[1]

Being able to listen in on the Conference was a rewarding experience, and has raised even more concerns to my already natural interest in birth and research. The public, the lay persons should not be ignored by such conferences, that one does not need to have a medical degree to share our concerns, or be noted of them, in any form, written letters, or by email connections.

I was busy after [PII redacted] spoke first, so I did not get to hear the rest of five -minute speeches. And what about my email asking of four-questions to be asked of all parents concerned about probable contributing causes of autism, cerebral palsy (CP), and more, all internal disorders, and the increase of children brain tumors, and a variety of blood cancers or disorders, as well. Medical interventions, preventable, as being unnatural are:

1. Flat on the back birth positions, often resulting in pulling and pushing on the baby, for a vaginal birth; and sometimes, a baby born by a cesarean (c-section) is also damaged by pulling or twisting from the womb.
2. Injections that may be causing distress and the increase of c-sections now being 1 in 4 births. The use of any drugs, however given, during the labor period, to delay or advance labor to cause the mother to birth for the convenience of a busy doctor, or c-section team, or a busy hospital nursing staff.
3. Early cord clamping "before" the placenta is expelled, and not hurried by the use of drugs, an abortion drug, Pitocin/Oxytocin, etc.;
4. Right to have the child tested or the test results of medically caused anemic conditions as a result of a doctor's choice of early umbilical cord clamping.

Causing Anemic conditions, testable: The medical team assesses the child, instantly, as to sex, size, probable weight, length, when they or the head doctor (for all births, c)-sections or vaginal, for premature or full term babies, determine that child who is going to be early or instantly cord clamped, be it a single or multiple birth. And, the nurses are waiting, eagerly to assist in the clamping and the cutting off the cord, in most instances. So if they are not reporting child endangering are they an accessory before or after the fact of causing a testable anemic condition. And is this a criminal charge of silence, a conspiracy of silence to the medical professional organizations.

The nurses know better of probable causes of the weaker child, likely to need revival, down the hall. This is to the evidence of a nurse sharing my concerns of weaker children back in year 1999, when I began my research in more detail, of causes of learning and behavior problematic children, boys and girls.

Many hospitals do not revive the weaker infant, on the untied cord, and often minutes are precious as to lack of oxygenated blood as to the degree of internal injuries to first the brain, central nervous system, to the heart valves, and muscle, causing heart shrinkage, and lung damages, and weakening to all internal

organs, likely causing early onset of diabetic disorders, kidney problems, liver, spleen, etc, and to cells, even to the outer skin surfaces of the child, being likely the last to suffer of oxygen blood deprivation and dehydration, weaken them, also in future reproduction or premature death of them.

My Comments:

There seemed a persuasion evident, to protect the drug companies, on the possibility that their vaccinations, or vaccination, contributes to brain assault injury. This is possible because one does not know if a live virus or a dead virus is being used, that is being injected right into the blood stream, that feeds the heart, the lungs, and the brain, on the return by the veins with valves in them, the arteries (no valves in them, are feeding the rest of the body, before the blood is returning.

So, does the committee know the facts about vaccinations? Do vaccination go just underneath the skin or are they being injected in either the artery or the vein.

Many parents state it was just after such and such vaccination, that they then noted a difference in their child, or took them to the hospital. But how many vaccinations had they received prior to that one vaccination, and what was in each of the vaccination as to heavy metals, like Thimersol, or mercury, going by many names. They stated the weight of the evidence was no harm by any of the "stuff" in the vaccination.

They were then confused of other medical interventions that may contribute and be a common factor, as you tried to bring to their attention, supported by a Canadian, in the sent emails, you having a copy. They stated letters, to be shared . . . but I did not hear of my concerns to the committee of the four questions that ought to be asked of any parents joining an autism group, or were attending any of this meeting or future one, that the four questions identify medical interventions that are preventable.

1.), autistic children seem to have more problems with the law, and 2.) probable cause, lack of oxygenated blood by early cord clamping. Common Concerns going back to birth processes and unnecessary medical interventions:

[PII redacted] birth story was similar to mine, that included a delay in revival of the child who the mother was not aware of was or was not breathing. Her child was instantly clamped and cut from the lifeline, the umbilical cord. This causes subtle to serious brain disorders, and heart shrinkage, leading to even heart problems, the heart caused to shrink. Holes in the heart and heart murmurs are alleged a consequence of early cord clamping, according to [PII redacted], at www.cordclamp.com.

Any one may ask [PII redacted], at www.medicalveritas.com for a free copy of the April 2005 issue of the peer-reviewed Medical Veritas, a birth forum on medical interventions, preventable. Further reference and research are available in my article, Donna Young, please ask [PII redacted] for a free release of the three birth stories, at that above URL, for his contact number, or call him at: [PII redacted]. He has references to evidence that vaccinations are involved in internal disorders, leading or contributing to autism spectrum disorders. But some babies were not injected, knowingly, or alleged by some parents with autistic babies, so another medical expert, [PII redacted] of Michigan, alleges all babies with ASD, not in car accidents or drowning victims, or other known accidents, after birth, are likely the victims of too soon early umbilical cord clamping. That the doctors knew of the dangers since 1801, so he uses long-ago references of false teachings by his own association, he is a member of American Congress of Obstetricians and Gynecologists (ACOG). They refused to go public of the dangers of harvesting any one

infant by allowing their doctors, for false reasons, to impose early or instant umbilical cord clamping. Almost all c-section births are instantly cord clamped, with further risk of damage by draining the baby's blood back into the placenta and clamping the cord, within an inch or two of the belly button. The placenta blood is sought for selling purposes, under the markets of industry, trade, and commerce.

Conflict of Interests:

The seeking of human tissue is for profits, it is big business, with cord blood banks giving shares to all those who may have a conflict of interest on this issue, promoting stem cells, obtained from the child's wrongfully deprived placenta blood. So conflict of interest may involve experts that guide the decisions of IACC, which I do hope that is never proved or investigated and found true, as to this recent public conference. No conflict of interest or interest in stem cell corporations should be disclosed, or interest in shares of any drug corporation offering vaccinations, should be a duty of disclosure, of conflict of interests.

My story has the most charts, policies and references, with comments. I do not accept all references as good for the human race, so I share my concerns, with comments. I encourage this.

Note: Medical Veritas, as to complaints of one [PII redacted], took down the birth stories they have taken from public access, for [PII redacted]'s threats, apparently and his personal reasons. But, I believe [PII redacted], on request, will send you possible the whole book, and/or the first birth forum.

Others have been published since 2005. What was shared in the first birth forum of unnecessary medical interventions:

Harmful positioning of our body in birth:

One, [PII redacted], mentioned the position of birth, harming her child, pulled and put pressure on, [PII redacted] has a video of the birth care, and the injury to her child's arm. This is evidence she may release if you, as a nurse (doctor), ask her, and use them at the next committee meeting of birth injury. I believe her child may yet suffer from anemic conditions, and his medical records and results of any tests, may indicate he was immediate cord clamped, and anemic thereafter. [PII redacted] stored her child's blood, paid to do that, for the tiny amount of stem cells. She then never used them, after her child's arm did not heal as was expected. Likely, an anemic condition prevented proper or early healing. He then suffered on-going pain and operations, and yet on-going pain of stretching his injured arm.

Risk of the pregnant mother receiving an injection:

[PII redacted] accepted an injection prior to her child's birth, and her son is autistic, and she has other children, one normal and one not too bad but is somewhat autistic. Another mother, a friend of my brother, has an semi-Downs and autistic child, challenged, a special child, they call her. She too, and as a nurse, accepted an injection for fear of measles. The blood can be tested if one is exposed to measles. Another lady, who was even offered an abortion, too, feared for her fetus, but did not accept an injection, and her baby was born just fine, even though the mother had been exposed to children who had measles. Fear factors cause medical interventions without adequate sharing of consequences of the risk if we do accept any kind of injection while pregnant. WE may be hoped to be experimented on, not knowing we are being followed for the results to the infant's after birth results.

In [PII redacted]'s situation, she thinks the lyme disease in her area, may be a factor, but again, how soon

were all her babies' umbilical cord clamped, some sooner and some later, most likely, to the degree of damage to the human cells: brain cells, and other parts of the development of the body, by a weakened immune system, lowered white cells, that fight infection, lower platelets that clot the blood, lowered red cells to carry oxygen, lowered total fluid, plasma. Then there are the missing and/or lowered amount of nutrients, helpful and beneficial gases, such as removing of wastes and toxins and the helpful enzymes that help the cells function faster or better; and of course the hormones, that may determine the development of emotions and desires to fit the sex organs, as the child develops. When did homosexuality begin to increase, but likely after immediate umbilical cord clamping was in policies, set by ACOG, Bulletin 216, November 1995, but the practice of instant cord clamping was being taught at some university and private and public hospitals dealing with child birth, and yet continues, to this very day, secretly, not shared prior to the mother going into labor, long before the baby is due. Why is this secret of this alleged criminal policy going on, if not to harvest the baby's placenta of wrongfully deprived whole blood with oxygen and essential nutrients, in it?

Then there is my own birth story. I, too, like many birthing mothers today, I am blindly trusting in nurses alleged to be following doctors' orders in the offering of drugs, Demerol, a morphine, not told the truth about it, that it delays labor, not dealing with the pain.

The delay of labor delays the onset of increased pain, but is done for the advantage of a busy doctor, delivering another child, elsewhere. This is a medical intervention to deliberate delay the progression of natural labor and the birth of the child, and for many hours, in some instances, as was true of my birth experience.

Injections, and false reasons they are given, or misleading information, and not shared prior and long before the baby's birth arrival expected date:

Then who knows what I was injected with, to advance the labor, high on the operating table, defenseless, as most women are, for the doctors possibly pulling and twisting out the child, and doing early clamping, forcing an anemic condition, fearing, most likely, the side effects of a now drugged and sleepy child. My child was not crying, as he was likely suffering from morphine, and I did not know if I had a living child, him not crying, until, as the article reveals (I can swear it true under Oath), he swat swatted on the bum...then he began to cry, was he breathing before that. I don't know, only the nurse, her name not known to me, knows that side of the story, 1965, for the doctor is now deceased. The College of Physicians and Surgeons, when I began my inquiries back in 1998, would not give me the doctors forwarding address, or mail my letter to him, of questions. Why not?

So we must continue to investigate on such committees of the various medical interventions, but to start to specifically identify them with articles, that the speaker, [PII redacted] and [PII redacted] can present, how long ago did the medical professional group know or ought to have known the risk of causing weaker children by trapping up to 60 percent total blood volume in the placenta, causing a testable anemic condition. This is to any child early umbilical cord clamping is imposed on, and with the same internal injuries as stated by a medical researcher, as alleged by [PII redacted], published in the American Science magazine, as stated.

The facts of knowledge is likely in the first edition of the Lippincott Manual of Nurses Practice, as it appears in the 7th edition, page 1161: I personally read the same information, as 60 percent more blood goes into the infant if the umbilical cord is not clamped while pulsating. That is a duty and an obligation to train the medical doctors and nurses, police, firemen, medics (as first emergency responders to any early birth in the home, on the street or elsewhere), of ethical practice, leave the cord

alone, as the blood in the placenta, going into the baby, is a benefit to the infant or infants.

An Alleged Deliberate Disregard of the truth by medical experts and committees:

If the members on any medical investigative board continue to refuse articles and documents to be heard, publically, and conceal and cover up, it may be a criminal offense, as to wanton disregard of truth of means of prevention of unnecessary medical interventions. Those that are known to be testable, soon after birth, such as the anemic conditions, testable, and found true, many months after the birth (See SOGC Policy number 71, December 1998 that may be policy number 79, but the year is correct).

Visual evidence is a gasping child, breathing out or grunting child, breathing inward for breath for lack of oxygenated blood, or the means to release of the buildup of toxins, like carbon dioxide).

Measurable fact is the amount of blood to be syringed out or drained out of the placenta to be practically used. Harvesting the baby's blood in his/her own private organ is often done by no informed consent by the legal guardians of the child, the natural father and mother, who have a duty to guard their baby, if they were aware of the unnecessary medical interventions going on. And the secret of gaining the placenta blood for use of stem cells, as the committee was looking at, as a hopeful cure of all forms of internal disorders, including that of autism.

There is hope, but so far, there is no cure of the already damaged brain cells, or already damaged nerve connections, or dehydrated cells of the brain and nervous system. These cells were created for life, and to last 100 years, if not damaged prematurely. The placenta is sent for harvesting, the reason it is being detached for cosmetic reasons, concealing the benefit of income to the public or private labs operating on the hospital's grounds. The hospital administration favors income from such received human tissue, said to offset costs in selling the placenta blood, or membranes to various private corporations, including research and cosmetic businesses.

The law permits third party liabilities, so those allowing the false protocols, policies, and procedures of preventable medical interference of a natural birth, or natural allowance of the placenta blood, can identify with such groups.

Who can make the charges, of criminal interventions, known long ago, since 1801, and prior to that time period of dangerous of too soon umbilical cord tying, hand-squeezing or clamping? Any nurse can, any researcher can, and person can, whether they have a degree in medicine or not, but most credibility is to one or a committee doing medical investigation on prevention of costly damages to citizens, and the cost of recovery paid by medical plans, for the needy, and supported by the taxpayers.

Stem Cells:

Most stem cells are being harvested, unknowingly in some situations, from the placenta. The only way stem cells in a large of enough collection to do experiments with must then by weakening another's child by early umbilical cord clamping. All Cord Blood Banks encourage the faster the umbilical cord clamping for reasons of gaining the most whole blood from which the alleged stem cells are extracted. No one has actually seen a placenta blood stem cell, why not? I cannot obtain an education slide from Ward's Science Laboratory services, why not? Or any other private lab that sells slides for educational purposes, why not?

I noted this committee members were in favor of research being acceptable of using stem cells for autistic children. They were not aware that to use placenta blood for stem cells is weakening another's child, and this may be considered aiding and abetting child endangering, a criminal assault and battery

charge, and premeditated to seek another's helpless child's blood.

Future Victims of Autism disorders, a variety of them, a spectrum of disorders that now include multiple sclerosis, diabetic, cerebral palsy (CP), organ disorders for children with autism.

The victims are 4-million babies born in the United States of America alone, and under 500,000 thousand babies born in Canada and millions of infants born internationally, will be the next members of this autism group. This is because of the false policies, protocols, and procedures, taught by the expert groups are not being stopped. The only way to stop the false teachings is by a Lay of Information, involving each Attorney General of each State, to go after the corporations, societies, associations, and colleges of such organized medical groups, who conceal, it is money they are after, by the internal injuries that are preventable, if the medical interventions are investigated in a criminal court of law, as is the duty to report unnecessary medical interventions, causing harm to any one newborn citizen of any Nation. It is an international criminal assault, battery on children, and a human rights violation and a Constitutional violation in most countries, which may include the USA, if they signed no discrimination to the youth, of any kind.

What if an early clamped umbilical cord results in any child's death?

First Degree Murder, should be taken for any premeditated intent of early or instant cord clamping, with no informed consent of the guardians of the child, the natural parents. If the parents sought to store any child's blood in a private or public umbilical cord blood bank, they may be charged as an accessory to a crime, before and after the fact, for allowing any minor, a newborn infant to be put in harm's way. The duty is owed to the newborn citizen of any Nation.

Harvesting the placenta or the deceased infant:

If the child dies, the medical researchers are alleging a natural death, confirmed by the collusion of many coroners. Then, they may all be seeking all forms of human tissue, with or without parental consent, not just the blood and the placenta tissues.

They are doing research on each race and color, for deoxyribonucleic acid (DNA) and ribonucleic acid (RNA), genetic information.

Philosophies that deprive the individual of informed consent:

This form of imposed medical protocols may be a form of communistic control over human tissue. This no consent must stop.

All medical conferences have the best means to research articles, of how long ago doctors knew they weakened any one's child by imposing any form of blood blocking, causing anemic conditions, and by not wrapping the child, as the first duty, caused hypothermia to set in, to cause the cord to appear not pulsating, going prematurely white. The cord, should not be clamped while pulsating, red, and firm. The placenta should be delivered and the parents asked and informed of the risk of cosmetic clamping and cutting the cord and placenta from their infant. This was not a general practice to informed parents delivery their own infants in the privacy of their own home. The last President to be born by natural means was President Garfield (1831-1881, died by assassination).

No one was ever charged of any criminal offense if they allowed and followed natural and primal birth processes, to-day called, Lotus Birth. (See Dr. Sarah Jane Buckley's articles available on the internet). However, doctors who impose medical interventions, not sharing the risk factors involved, and their organizations, ought to be criminal charged, for the concealing is seeking the human tissue, for selling. One collected unit of stem cells, sells for \$30,000.00 United States of America dollars, the going rate, and the transplant of such alleged cells, costs another \$150,000.00 for an alleged experimental transplant. Only the very rich or the very poor, can have such procedures done.

Corrections and Apologies are to be Sought:

With a criminal application to the organizations involved, who do not go to jail, but may be fined, they must have this in order for any disciplinary actions to include apologies for risk taking of any one newborn child.

Those that were involved in publishing the false procedures have some liability as to Third Party Liability, including the medical authors, and those doing peer-reviewing of articles published.

Empirical Science Facts:

Here is what criminal, civil, or constitutional courts base their decisions on of empirical science facts, that which is visual, testable, and measurable. Stop the early umbilical hand-squeezing, tying or clamping, and probable causes linked to all forms of internal disorders, will likely cease to exist, or to decline. I wish a written emailed reply by the committee of IACC as to their conference, November 21, 2008.

Thank you for your cooperation at your earliest convenience.

Yours truly,
Donna Young
Birth Researcher since 1998
Mailing address: [PII redacted]

Note: Personally Identifiable Information (PII) has been redacted in this document

Donna Young

December 02, 2008

Subject: Information Request for the IACC under the Children's Health Act of 2000

Thank you for referring my concerns to your Investigative and Prevention Committee, or Executives from input from a member of the public. I am a Canadian volunteer birth researcher, since 1998. I supported and do share the concerns of [PII redacted] contact is: [PII redacted].

I am sharing that Third Parties can be named in what may be a felony of false medical policies, of a conspiracy of silence or medical cover-ups. The false teachings were being knowingly put into practice and the false teachings and printings of the bulletins, as stated by [PII redacted], led by medical experts, members of American Congress of Obstetricians and Gynecologists (ACOG).

Financial Accountability:

There is a means, I am suggesting, to have them all, one and all, make a financial means of paying back society, for the destroyed children, many now adults. This will be by most of the societies' members of the medical colleges, one and all.

The math calculations are below, that are reasonable, and would likely stand up in a court of law, civil, criminal, and constitutional.

Exemptions, who would not pay, as a member of a medical association:

Only those members of a society, for profit or not, who went public of the false medical teachings, and standards of care, would be exempt of any penalty of financial contributions to victimized children, and many now are adults, with subtle to serious impairments.

How long would the other members pay a felony fine, of willful blindness, turning a blind eye, to what was visual, measurable, and testable?

The victims often compromised with lower enjoyment of life and had to struggle for their means of a living, would be compensated by the suggested fine that would go on, for the rest of their victim's life, monthly payments. They payments do not exceed \$416.667 per victim.

I also share the concerns of others of side effects of injections to any minor, by way of vaccinations, and so many of them, even before they enter a public or private school. The medical organizations, drug corporations, and the instructors of those delivering the newborn citizens may all be contributing to the compromising their child's brain with live diseases, that enter the brain. The brain is now weakened and the cells injured by lack of volume and pressure and nutrients to the brain and central nervous system. The weakening of animals and the human infant was knowingly stated in the past research, shared by [PII redacted], the injuries resulting from early umbilical cord clamping.

This is testable and measurable of the facts the missing placenta blood was depriving the baby of nutrients, and natural immunities in the whole blood. Weaker infants then are continuously injected with more heavy metals, (Thimersol, mercury) that may be yet tested and found in some of the vaccinations, and also the various live viruses. Multiple vaccinations, on one day, may be imposed all in one day, resulting in the child's death, some alleged then to be Sudden Infant Death Syndrome (SIDS). (Reference may be found of the Yurko Incident, and many others who had children either die or become sick, may be read at this reference medical journal, www.medicalveritas.com (Medical Veritas (truths)).

There is implied legal accountability and responsibility to report this as a crime against the person, as a criminal charge, as there is only one standard of care: Do no harm. A standard of care that may be challenged as harmful must be allowed in the criminal courts, for a hearing and all sides heard by a Court, by a Judge, or Judge and a Jury, as a felony. Doctors do know better, or ought to, and they work with the drug companies, and in the testing of vaccinations. They have organizations that can be added as a Third Party to a felony, as a corporation, their training institutions, colleges, and organized medical societies. Corporations or societies, as an identity, do not go to jail, but they can be fined, in a criminal court, to assist in caring of the damaged infants.

How Much to Fine an Organizations, to be paid by all members?

I would suggest starting in each city, where a trial can try the Corporation involved, in negligence, at one billion dollars. If ACOG, that set up the false teachings of early umbilical cord clamping were to be fine, per State or City, their members would share in the one-billion dollars, as follows: An set amount, per damaged child, would be fair at \$416.667 monthly x 12 months - \$5000.00 annual fine, times possible 20,000 compromised or impaired children (subtle to serious) = \$100,000,000.00 or one-hundred million dollars x 10 year payment penalty = \$1,000,000,000.00 or (one Billion Dollars, USA and Canadian mathematics).

Having the means for members of ACOG to pay for at least 12 children, that amounts to 12 x \$5000.00 = \$60,000.00. That is a reasonable fine for each of the members of ACOG to pay towards at least 12 damaged children, releasing the cost to the taxpayers and other businesses, in higher medical and education costs. On the average, it is estimated that these members make, per year, in Canada, \$500,000.00, and likely much more in the United States of America, and other nations. They would not be able to file bankruptcy, as they have adequate income for their own personal needs, and business expenses. It would likely be a tax write-off, off the net income earnings.

ACOG, spread the false teachings to other medical groups, who had an implied duty to report false standards of care set in Bulletins, policies, and protocols, and procedures. The duty to report the false teachings extends then to groups seeking tax money to pay on-going created damaged children, such would be the likely case of the directors of IACC, if they do not take seriously preventable contributing factors. They may not have to pay up to 12 children, per city, they are operating in, but they may have to pay for a lesser number, even one child, as per their earning power, and assets.

Empirical Science, to deal with felonies, which can be known by tests, measured facts, and visual: The false spreading would involve Registered Nurses (RNs), Obstetric nurses, Licensed Practical Nurses (LPN)s, family doctors, and surgeons, or anyone assisting in the child's birth, like justice officials, and first responders, police, firemen, and medics. All would be participant in concealing how much blood they trapped in the placenta by concealing they did not document the time when they clamped, tied off, or hand-squeezed off the umbilical cord, weakening any one infant. Therefore, Third Parties to

implementing a known false and harmful trend would be held equally accountable, per city, they live in. It would be regarded as a felony, by means of empirical science, that which is visual, testable, and measurable.

All an issue to be considered is to have a contributing factor, when did the parents then observe a difference in their children's abilities. Contributing factors are probable causes that can be avoided, particularly, if the child is first tested and found anemic. Any anemic child should not be receive live viruses and germs injected directly into their blood stream, that by passes the means of checks and balances on live viruses found in those vaccinations. The throat is the first means of offering antibacterial fighting enzymes; the stomach is another, then if the child has adequate white cells, they will fight more germs, and viruses, naturally. But an anemic child is weaker and cannot deal with stuff injected, when they are anemic.

How to Check for Anemic Conditions, from a few hours after birth, and thereafter.

A mere prick of the body for a drop of blood will reveal if the child for that environment, or altitude, as sufficient red cells to carry oxygen to all cells, and to remove waste products, and gases, like carbon dioxide. The drop of blood will also reveal the germ fighters, the white cells, if they are adequate, or found in excess, fighting diseases present; and the platelets clot the blood, so they can be checked if adequate, as well as sufficient volume and pressure of the fluid of the blood, may be check, the plasma. An anemic child will likely be missing enzymes and hormones.

Anemic conditions may be found present after the birth of the child, by early umbilical cord clamping, which [PII redacted], PhD, RN was attempting to educate the panel of IACC of the truth of this matter. The early umbilical cord clamping weakens the child, trapping more of the placenta blood in the child's placenta, that otherwise ought to have been inside the baby. The lungs take a lot of blood so the placenta blood is not extra or surplus blood, but blood that goes into the expanding lungs. This prevents lung problems, as well as the placenta is maintaining constant pressure and volume to the heart, and to the pumping of the blood to the brain, where it stays constant to all cells, in all parts of the brain, and to the central nervous system.

Many of these autistic children may not have been vaccinated from a few hours after birth, like the Hepatitis B, shot, and thereafter with multiple injections that may have contained heavy metals that may cause minor strokes by blocking of the blood flow, but if a Questionnaire was given to all Autism Groups, for asking this question, "Do you know how quick the umbilical cord was hand-squeezed, clamped or tied off?" the natural father if in the birth room, or the birthing mother, will not likely know. This is a medical secret of the arts, intended to harvest the trapped blood inside the baby's placenta, to be later taken for reselling it for stem cell collection. The blood is taken from opening the umbilical cord, at the mother's side, and draining the placenta blood into a prepared plastic bag. The plastic bag is prepared with Heparin, that prevents the placenta blood from clotting for up to 36 hours. It is being sent for profit, to cord blood banks. The cord blood banks are called that name, not that it is just a tad of blood, but because the blood was taken from the umbilical cord. The name cord blood suggest only blood a little bit of blood is taken from the cord, only. Not so. This is intended deception.

How Much Blood is taken from the placenta and the cord:

The Lippincott Manual of Nursing Practice, which is doubtful that [PII redacted], studied from as an RN, states on page 1161, of the 7th edition (likely found in that same chapter in editions 1 and 2), that "...up to 60 percent more blood goes into the infant if the umbilical cord is not clamped off while pulsating." That gives you the measurable amount of blood trapped in the placenta, weakening any child this is imposed on, of how much blood deprived them. This deprived blood weakened them, and they were not likely then tested for a medically caused anemic condition, before they were quickly injected with Hepatitis B, a sexually transmitted disease. That disease had every opportunity to enter the baby's now weakened brain, damaged by not having enough volume and pressure maintained to all cells.

Why was the brain subjected to deprivation of oxygenated blood, as [PII redacted], RN, attempted to explain. The early clamping prevented the oxygen blood from being kept in the brain, even if the baby got that blood during his/her birth. This is because I have read that there are not blood valves in the blood vessels lead to and from the brain. The blood flows back to other parts of the body, the brain cells, logically, then would shrink.

Lungs Shrink along with the Brain Cells:

[PII redacted] and [PII redacted], of Michigan, United States of America, can offer information on the full report of the doctors knowing that the heart shrinks from not enough blood maintained in them, the pressure and volume cut off by the choice of medical interruption of the inflow (as well as the outflow of toxins) of the blood into the baby's expanding lungs. There is actually a Scandinavian film titled "First Breath." The baby needs more than just one breathing incident before the placenta's umbilical cord to the baby is clamped off. The baby needs to have all the blood that nature intended them to have, the baby deciding this for his/her own individual needs, and as to the altitude they are being born in. If the baby is kept wrapped head to toe, the placenta blood, almost all of it, goes into the baby's body, as long as it not clamped off, by the medical choices of the persons aiding that birth. Seldom do such babies have lung, or brain disorders, and can weather better the up and downs of viruses they may be exposed to, having then a healthier immune system of all the components of blood. They are not distressed to lose their Inteferon germ fighters too soon from all cells. The weakened baby has likely released Inteferon into the blood stream to attack or hope to attack viruses injected, so they are almost like an acquired immune deficiency syndrome (AIDS) victim child, living now with a low immune system.

Weakened infants:

Many of the weakened infants, blocked off of normal pressure and volume to the brain cells, will have damaged brain cells, so they will have a brain lesion or tumor noted sooner, as the tumor enlarges, for visibility on X-rays. But they are not likely to live into their 30's, many dying by the time they are out of Senior High School. They may never play a part in contributing back to society as a taxpayer, by a premature death. They were just a liability on society, in most of their growing years. Other children never get to the stage of being a contributing taxpayer, always a liability, needing others to maintain them.

There will come a day, these children will just be sought for organ transplant, at various stages of their life for experimental transplants, of the better organs not damaged by early umbilical cord clamping, and the viruses injected into their body.

Thank you for the information requested, and please forward my concerns how to stop any form of ASD, from happening in the first place, by prevention and helping to reeducate the parents, not to harvesting

future babies for the present day victims. To seek another's baby's blood will weaken that baby and create a new victim of other internal problems, now associated and included with ASD.

I am a birth researcher, volunteer, on birth issues since 1998. I often use the web site of [PII redacted], on the dangers of any early umbilical cord clamping, at www.cordclamp.com

My own site is: www.lotusbirth.com

My Petition for the Canadian Babies, to be equally protected can be found at:

www.thepetitionsite.com/takeaction/102580814

[PII redacted] has given out her web URL, on this subject of prevention of brain injury by early umbilical cord clamping as:

www.conradsimon.org/IACCfor21nov2008.pdf

[PII redacted] URL ought to be shared at your web site for information and references on PREVENTION of the medical contribution of future victims of ASD. Thank you for forwarding my concerns to your Board that organizes research that must include prevention of contributing medical factors that we can individually choose to stop, or can ask for a criminal investigation of willful blindness of medical doctors imposing the clamping tool, as a weapon.

When may the umbilical cord be clamped for all births, premature, full term, vaginal birth, or an operative cesarean (c-section) birth? The clamping tool, or hand-squeezing or tying off the cord is only to be done if the cord tore, such would be the case of a dropped baby; or, a surgeon, acting too quickly, cuts into the cord. No other reason justify their excuse clamping off the cord is a benefit to either the mother or the newborn infant, or infants, as the pretended fear factors are not present when the medical person or team choose, of their own according to do early umbilical cord clamping.

Criminal Assault, battery, and perhaps causing a wrongful death, either manslaughter or first degree murder.

The medical persons, and possibly the educators, and some of the authors and publishers knew better not to ever instruct in early umbilical cord clamping. The publications stating the weakening of any infant done, has been known since 1801, as stated by [PII redacted], at www.cordclamp.com

Wanton Disregard for truth:

Some justice officials have stated that there is no wanton intent, or criminal intent done by instructions of policies. I disagree for the evidence is visual, measurable, and testable, as stated above. Visual is a gasping and grunting child, as a result of too little volume of blood and its nutrients inside the baby, by the choice of the medical team imposing, and imposing as an element of surprise, early umbilical cord clamping. The premises where the baby is being born, or aided, is also a tool, to weakened that child, and the directors or owners of that premises where the assault is taking place, have Third Party Liabilities, as their premises should not be allowing known measurable harm to the new born child. The institutions were allowing evidence to be destroyed by taking away the placenta and the cord, and concealing how much blood their private or public lab had taken the placenta contents and practically

used it. This would be for plasma extraction, and seeking red cells, (immature red cells, that may be alleged the stem cells); white cells, and platelets, and also for specific hormones of the sex of the child, and specific enzymes. Even diseases known or genetic information is sought from the tissues of the placenta, cord, and membranes, seeking information per the color, race, or blood type and even the sex of the child. All this is done secretly, and concealed, and not shared to the trusting new parents, or even to the older parents, in another child's birth.

This is wanton disregard of truth, weaker infants, early cord clamped. I am not saying most or any of the babies die of early clamping, but they can be tested and found anemic, so the direct withdrawing of the evidence, makes this issue willful blindness by those that are ignoring the issue, and what is posted of alarm and warning to the parents of tomorrow, not to allow any early cord clamping, except for the two reasons stated.

Conflict of Interest:

There may be a certain number of parents, or those on the committee that have a direct or indirect conflict of interest in drug corporations or publications, or vaccination corporations that may block this information on Prevention From being known, along with other three concerns I have shared, in contributing medical factors. Or they are embarrassed for not discovering or relating medical contributing factors, easily corrected, for going on for some many centuries.

The other contributing factors are imposing flat on the back birth positions on the mother of known tail bone closing the birth canal up to 30 percent more. This is preventable for all vaginal birth, having the mother in a safer location, other than on a high operating table for a vaginal birth, like on a low mat, or birthing in warm water, while on her side, leaning forward, or squat sitting, supported, leaning forward, never leaning backward. The flat on the back position, makes birth more difficult, creates the risk of greater tearing, and risks the baby being pulled and pushed and manually twisted from the birth canal. These all add to the risk of causing spine and neck injuries, and the early clamping cuts off the flow of blood to the central nervous system, and such birth injures they do not healing faster, or fully. The child then has multiple internal injuries to adding more serious complications to autism spectrum disorders. The cutting off the flow of oxygenated blood to the pancreas, results in earlier onset of diabetic conditions.

Predisposition to Genetic Disorders:

All early umbilical cord clamping will risk any child to any predisposition of genetic disorders whether that is cancer or mental disorders, will come on the child sooner, then if the child had full placenta blood infusion, strengthening the child, that the predisposition may never happen, provided, after birth, they get adequate nutrition and tender loving care (TLC) expected from any loving parent, to enrich their lives of their children with learning opportunities and enthusiasm to learn. This is for all children to have such TLC

Thank you for referring my concerns to your Investigative Committee from input from a member of the public, a Canadian volunteer birth researcher. Please send a signed reply to my mailing address, at your earliest convenience.

Thank you.
Yours truly,
Donna Young,
[PII redacted]

Lyn Redwood

December 08, 2008

Subject: Proposed draft edits to the Strategic Plan regarding vaccine research

We discussed at the November 21 IACC meeting proposed edits to the draft plan submitted by the Office of Autism Research Coordination (OARC) based on recommendations from the Implementation Workgroup as well as the 148 emails received during the public comment period. The specific change discussed that I would like to bring to your attention was Point 3-2 under the heading "What do we know" in Q3 regarding vaccine research. The edits proposed followed the sentence "Numerous epidemiological studies have found no relationship between ASD and vaccines containing the mercury based preservative thimerosal (Immunization Safety Review Committee 2004)." The proposed edits from OARC followed in blue *"These data, as well as subsequent research indicate that the link between autism and vaccines is unsupported by the research literature."* The footnote to this newly proposed language based the edit on seven public comments received during the RFI process. Two of the seven were received from the "Immunization Action Coalition (IAC)" an organization supported by the pharmaceutical industry, more specifically, vaccine manufacturers and "Voices for Vaccines", a newly formed organization that shares board members with IAC. In addition, none of the seven public comments referenced contain such statements, nor do they cite or discuss relevant scientific literature that could support such a broad conclusive statement. Therefore, the proposed edit could not have been logically based on the RFI. In addition, no such data that could support a "no link" conclusion were submitted to or reviewed by IACC or by the various workgroups. The statement has no support in the RFI or the literature and must therefore be deleted.

In contrast to the seven comments claiming "no link" and seeking to censor further research, 48 public comments received out of 148 (almost 1/3) supported the inclusion of vaccine-specific research in the strategic plan. Several comments cite specific studies and documents which undermine the conclusions of the 2004 Immunization Safety Review (ISR) Committee Report for reasons of poor methodology and study design. The ISR report relied on population-based epidemiologic studies. Causal relationships between autism and vaccinations cannot be proved or rejected based on evidence from population-based epidemiologic studies. Such studies, by definition, are not designed to prove causality; they can only show statistical associations. Therefore, the committee's conclusion that the "body of epidemiologic evidence favors rejection of a causal relationship..." has questionable scientific meaning. The committee admits in the report that population-based studies would not be able to detect subpopulations that could be genetically more vulnerable to mercury at lower doses than normal. The majority of children without the genetic susceptibility would simply "dilute out" the minority of susceptible children. Crucial limitations and qualifications can be found on pages 11, 31, 127, 135, and 143 of the report.

Several studies and reports cast doubt on the 2004 findings and on any "no link" conclusion. For example, HHS filed a report with Congress in 2006, *"Thimerosal Exposure in Pediatric Vaccines,"* signed by Dr. Zerhouni. This report was completed at the request of Congress who tasked NIEHS and the CDC to work with independent researchers to assess the viability of using the Vaccine Safety Datalink (VSD) a CDC constructed database, to identify any association between thimerosal exposure in pediatric vaccines and increased rates of autism. The VSD database was used in the epidemiology study by CDC which was heavily relied upon as evidence against a thimerosal-autism association in the 2004 ISR report. In the October 2006 HHS report the expert panel "identified several serious problems that were judged to reduce the usefulness of an ecologic study design using the VSD to address the potential association

between thimerosal and the risk of AD/ASD.” These included uncertainties in case ascertainment, exposure categories, heterogeneity of business practices within the HMOs and inability to link the records of the child to the mother. In addition, Verstraeten who was the lead author of the published CDC VSD study, filed a letter in Pediatrics following release under FOIA of drafts, early VSD data, and emails showing that the inclusion/exclusion protocols had been altered after briefing the original findings to a point where statistically significant associations between ADD/ADHD, speech and language delays, tics, neurodevelopmental delays in general and autism were now below significance. He retracted any “no causation” interpretation of the study, explaining: *“The article does not state that we found evidence against an association, as a negative study would. It does state, on the contrary, that additional study is recommended, which is the conclusion to which a neutral study must come... A neutral study carries a very distinct message: the investigators could neither confirm nor exclude an association, and therefore more study is required... The bottom line is and has always been the same: an association between thimerosal and neurological outcomes could neither be confirmed nor refuted, and therefore, more study is required.”* (Pediatrics, 2004)

The most recent analysis of CDC’s own VSD data, performed by Dr. Heather Young, George Washington University School of Public Health and Health Services, Department of Epidemiology and Biostatistics, further demonstrates why the proposed added statement is inaccurate. Dr. Young studied the possible associations between neurodevelopmental disorders (NDs) and exposure to mercury (Hg) from Thimerosal-containing vaccines (TCVs) by examining the automated Vaccine Safety Datalink (VSD). A total of 278,624 subjects were studied and the prevalence rate of medically diagnosed International Classification of Disease, 9th revision (ICD-9) specific NDs and control outcomes were calculated. Poisson regression analysis was used to model the association between the prevalence of outcomes and Hg doses from TCVs. Consistent significantly increased rate ratios were observed for autism, autism spectrum disorders, tics, attention deficit disorder, and emotional disturbances with mercury exposure from TCVs. By contrast, none of the control outcomes had significantly increased rate ratios with Hg exposure from TCVs. (Young, 2008)

A study published earlier this year noted continued increases in autism reported to California’s Developmental Services System despite reduction of thimerosal in vaccines. (Schechter, 2008) Thimerosal containing vaccines were slowly phased out, a process that took several years and was not complete until 2003. At the same time that thimerosal was being reduced in vaccines a new recommendation was made by CDC in 2001 that pregnant women, infants and children receive influenza vaccine which continues to be manufactured with thimerosal (90% of the vaccine produced contains 25 mcg ethyl mercury) and exposure is now occurring at an even earlier and more sensitive period of infant development. In addition, the California investigation did not control for immigration and the fact that children in the database may have been exposed to thimerosal in other countries or prenatally from flu vaccine or Rho-D immune globulin products routinely administered to RH negative women during pregnancy which represents approximately 12% of the population. Moreover, changes in the average date of diagnosis prompted by an aggressive movement toward earlier screening affecting the percentage of any given birth cohort to achieve an ASD diagnosis endpoint were not controlled for. Based on the lack of individual exposure data and the limitations with ecological studies in general the authors state “We have not attempted to analyze whether thimerosal is a cause or modifier of autism in a specific subgroup or child.” (Schechter, 2008)

Based on this data, I would like to ask that item 3-2 be reopened for discussion by the committee and that the draft language proposed by me as an alternative be reconsidered in an effort to provide a more balanced discussion of the issue. I had requested ten minutes on the agenda to provide a more thorough

briefing on the science to demonstrate that the autism-vaccine link is a matter that remains controversial in the scientific literature and therefore must be resolved through focused research under the Plan, but was told time was not available. As an alternative, I have provided a second document which is a summary of supportive science regarding thimerosal in vaccines as well as mercury and autism for the committee's consideration. During the last meeting it was also very unclear at times exactly what edits were being voted upon. It would be most helpful, in this regard, to present on a single spreadsheet with the original draft Plan text, the OARC proposed edits, and the proposed edits by IACC members in the third column.

Thank you very much for your time and consideration,

Lyn Redwood, RN, MSN

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Katie Wright

December 12, 2008

Subject: too much Cindy Lawler!!!

I have been listening to the IACC conference today and am horrified that Cindy Lawler has monopolized the debate with useless discussions. Please give attendees time limits!! This is especially important if they are on the phone and cannot read the room's reaction to their endless chatter. Ms. Lawler feels it necessary to continually express what she does not know, i.e., her unfamiliarity with the autism explosion among Somali immigrants. Parading one's ignorance as a rationale, not to investigate, is a useless endeavor. Maybe Ms. Lawler should have familiarized herself with the facts PRIOR to the conference, not waste this precious time.

Sincerely,

Katie Wright

Board Member National Autism Association, SafeMinds New York, New York