



A Vaccination, 1899

Anna Ancher, Oil on Canvas, Skagen, Denmark



Amplifying the Voice of Public Health in the face of Strongly Presented Public Opinion

British Columbia Immunization Forum 2020

March 3, 2020

Overview of talk

1. Introduction

2. We protect what we value

3. Metaphors for public health

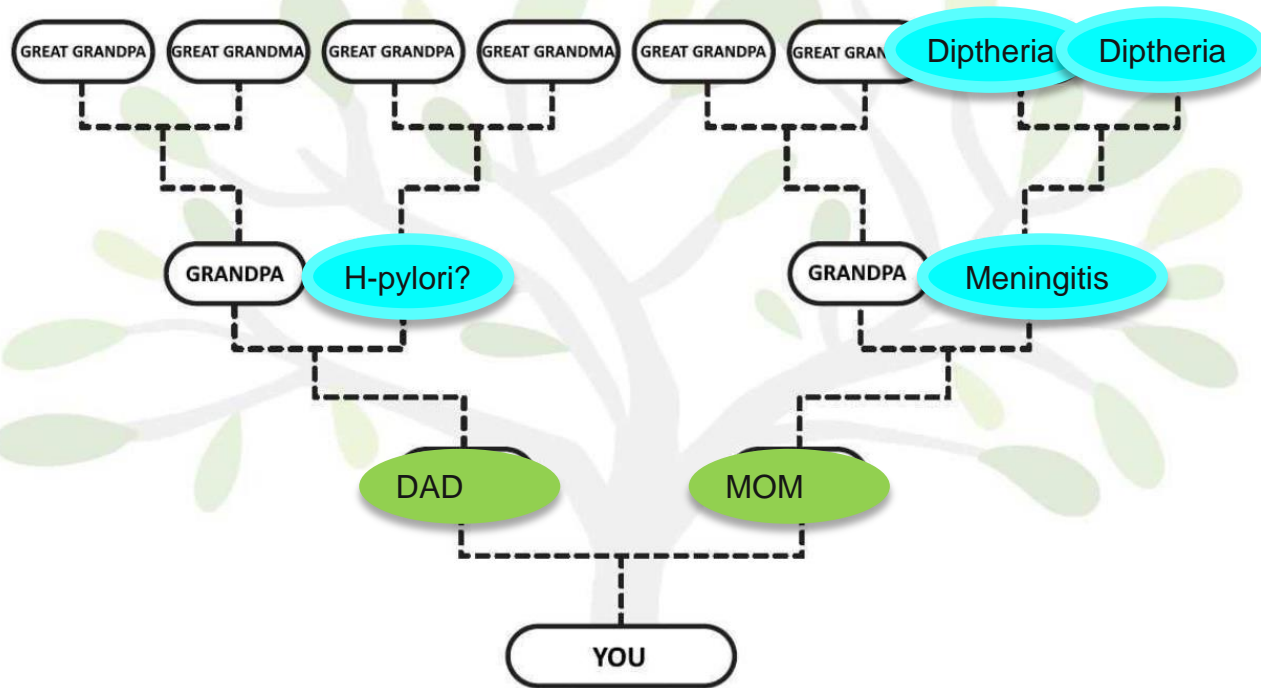
1. Grandmother
2. Valuable edifice
3. A health promotion enterprise

4. Origin of attacks

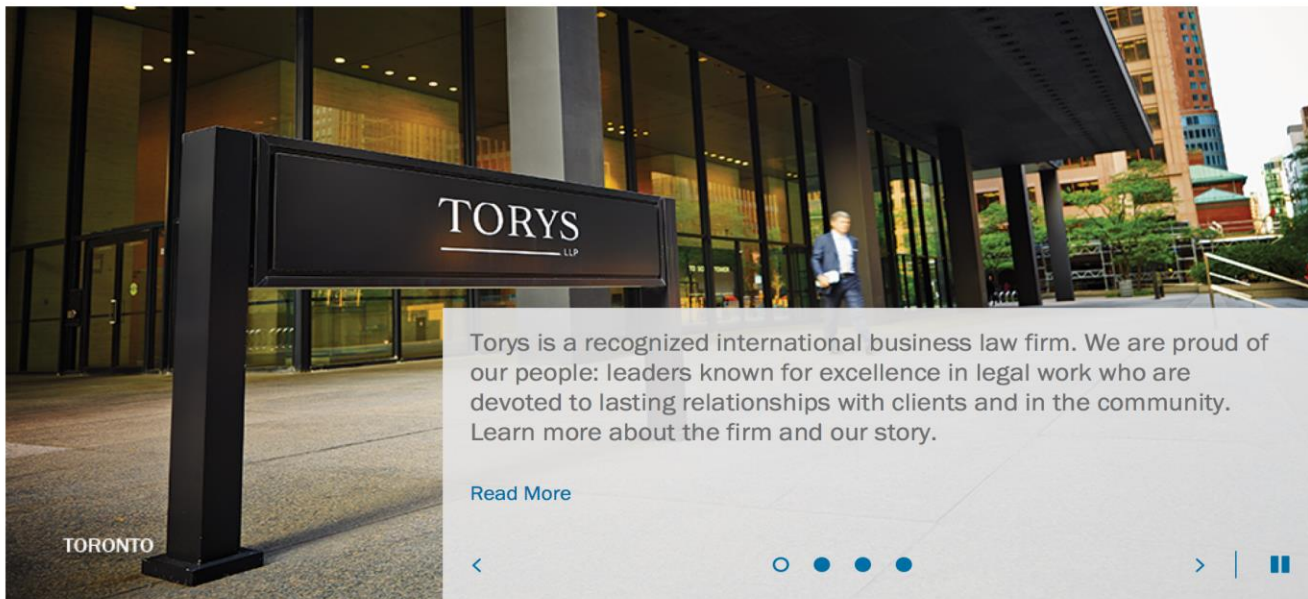
5. Examples of defending public health

1. Defending in-school vaccination
2. Protecting vaccination from false claims
3. Defending fluoridation

6. Conclusion







Torys is a recognized international business law firm. We are proud of our people: leaders known for excellence in legal work who are devoted to lasting relationships with clients and in the community. Learn more about the firm and our story.

[Read More](#)



Torys lawyers ranked
among the top in Canada
by Chambers Global 2015

Torys is proud to be recognized as a



Juliet Guichon

BA (Yale), BCL, MA (Oxon.), SJD (Toronto)

Called to the Bar of Ontario

Associate Professor

Cumming School of Medicine,

University of Calgary

The book cover features a soft, painterly illustration in shades of blue and white. It depicts a medical setting with three adults and a child. In the background, a man in a white lab coat and a woman in a white lab coat stand. In the foreground, a female nurse in blue scrubs holds a blue folder. A young child in a blue surgical cap and scrubs is lying down, holding a brown teddy bear. The overall mood is professional yet caring.

Ian Mitchell
Juliet Guichon

Ethics in Pediatrics

Achieving Excellence
When Helping Children

 Springer

Importance of defending
public health is
discussed in this book,
just published.

Overview of talk

1. Introduction
2. **We protect what we value**
3. Metaphors for public health
 1. Grandmother
 2. Valuable edifice
 3. A health promotion enterprise
4. Origin of attacks
5. Examples of defending public health
 1. Defending in-school vaccination
 2. Protecting vaccination from false claims
 3. Defending fluoridation
6. Conclusion

Typically society
defends what it values





Royal Canadian Mint

After Saudi Oil Drone Attack, Canada Touts Its Remoteness and Security

Catherine Ngai and Kevin Orland, Bloomberg News



Flames shoot from a flare at the Suncor Energy Inc. Millennium upgrader plant in this aerial photograph taken above the Athabasca oil sands near Fort McMurray, Alberta, Canada. , Bloomberg

(Bloomberg) -- Canada is counting on its geographical isolation as a key to protecting itself from attacks like the one this past weekend in Saudi Arabia that knocked about

VANCOUVER

How security at Vancouver events is changing



VANCOUVER

How security at Vancouver events is changing





Prime Minister Justin Trudeau, pictured June 20 in Ottawa. Democratic Institutions Minister Maryam Monsef will announce the names of new provincial members of the Senate Advisory Board in the 'coming days.' *The Hill Times* photograph by Jake Wright

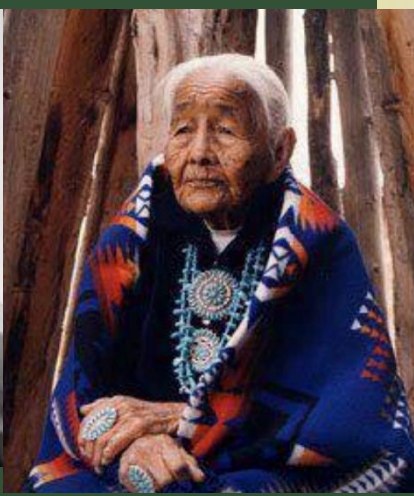


White House aide Keith Schiller, left, walks with President Donald Trump and two Secret Service agents across the South Lawn of the White House on June 12, 2017. 📷 (SUSAN WALSH/AP)

Public health is
valuable

Overview of talk

1. Introduction
2. We protect what we value
- 3. Metaphors for public health**
 - 1. Grandmother**
 2. Valuable edifice
 3. A health promotion enterprise
4. Examples of defending public health
 1. Defending in-school vaccination
 2. Protecting vaccination from false claims
 3. Defending fluoridation
5. Conclusion







An 82-year-old grandmother was attacked in her home, minutes after her grandson left. (YouCaring.com)



**GRANDMOTHER ATTACKED
MILWAUKEE**



Grandmother Fights Off River Otter in Rare Attack

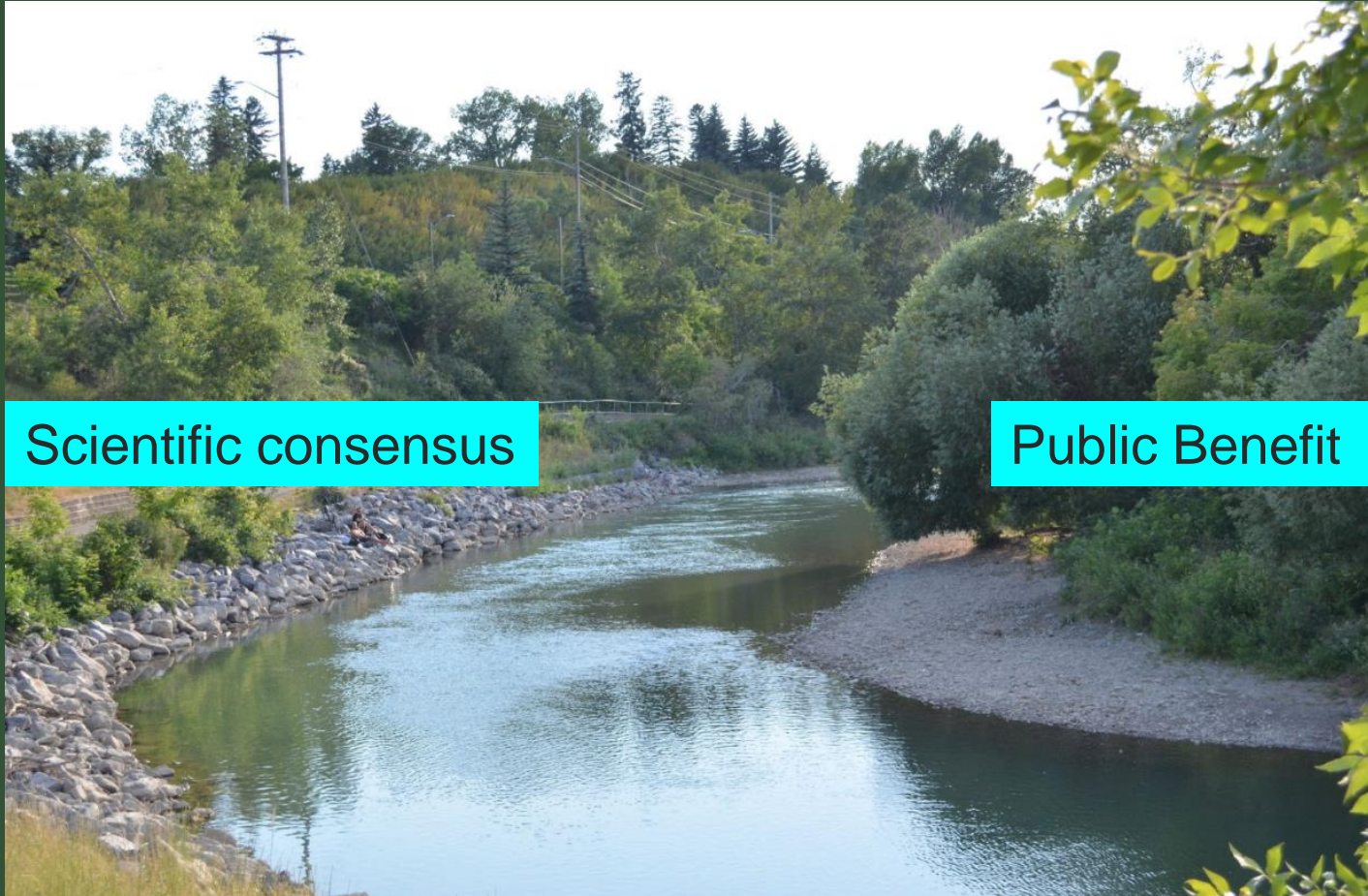
Lelani Grove was visiting the Pilchuck River in Washington state with her family when the attack occurred.

Overview of talk

1. Introduction
2. We protect what we value
3. Metaphors for public health
 1. Grandmother
 - 2. Valuable edifice**
 3. A health promotion enterprise
4. Examples of defending public health
 1. Defending in-school vaccination
 2. Protecting vaccination from false claims
 3. Defending fluoridation
5. Conclusion

Public health achieves disease prevention and promotion achieved by structures

- There is a type of edifice that ensures that a child is vaccinated.
- That edifice needs protection.



Scientific consensus

Public Benefit



Public Health Policy
or
Existing Practice

Children can benefit



But things can go wrong



Public health policy and practice
can be attacked by forces
beyond their control



Public Health has little defence



Overview of talk

1. Introduction
2. We protect what we value
3. Metaphors for public health
 1. Grandmother
 2. Valuable edifice
 - 3. A collaborative health promotion enterprise**
4. Origin of attacks
5. Examples of defending public health
 1. Defending In-school vaccine administration
 2. Protecting vaccination from false claims
 3. Defending fluoridation
6. Conclusion



Preventing
disease and
death

Who stops institutions going the wrong way?



Not preventing
disease and death
(promoting disease
and death)

TORONTO STAR

WEATHER: HIGH -8 C | PARTLY SUNNY | MAP 512 THURSDAY, FEBRUARY 5, 2015

STAR INVESTIGATION

A wonder drug's dark side

Hundreds of thousands of teen girls in Canada have safely taken **Gardasil**, a vaccine shown to prevent HPV. But a Star investigation has found that since 2008, at least **60 Canadians** experienced debilitating illnesses after inoculation. Patients and parents say the incidents point to the importance of **full disclosure** of risks.

DAVID KRAUER AND JESSIE MCGILL
VIRAL VACCINES

For the first time, Katie Krauer, 21, showed her third and final injection of the popular HPV vaccine. Gardasil pain had spread through the Whalley family body, including from her back to her knees to her hips. After her first dose, Natalie Krauer, 17, of London, Ontario, experienced symptoms of her first, her joints ached and her limbs twisted uncontrollably. Before getting the shots, both 15-year-old girls were told the vaccine had no signs of risk. And as they




We need systems to prevent institutions going in the wrong direction



Overview of talk

1. Introduction
2. We protect what we value
3. Metaphors for public health
 1. Grandmother
 2. Valuable edifice
 3. A health promotion collaborative enterprise
- 4. Origin and types of attacks**
5. Examples of defending public health
 1. Defending in-school vaccination
 2. Protecting vaccination from false claims
 3. Defending fluoridation
6. Conclusion

Statistics Canada 2012: Mental Health Survey



Statistics
Canada

Statistique
Canada

Search website

Subjects

Data

Analysis

Reference

Geography

Census

Surveys and statistical programs ▼

About StatCan

Canada.

Home → Publications → 82-619-M → Main page → Sections

Publications

Health state descriptions for Canadians

82-619-M
Number 4

Mental illnesses

Main Page

Note to reader

Summary table

Introduction

Sections

References

A personality disorder (PD) is characterized by a stable pattern of inner experience and behaviour that deviates significantly from the expectations of society, and can lead to marked impairments in social and occupational functioning. PDs are considered a major mental health problem because of their prevalence and the disability they produce.⁶⁹ Ultimately, individuals with a PD have difficulties with interpersonal relationships, and often demonstrate irritability, hostility, and fearfulness. Their personality traits (i.e., attitudes, thoughts, behaviours, temperament) are expressed inappropriately and become maladaptive. According to the DSM-IV,⁷ there are ten PDs that are distinctively diagnosed and are grouped into three clusters based on descriptive similarities: Cluster A includes Paranoid, Schizoid, and Schizotypal PDs—individuals with these disorders likely appear odd or eccentric; Cluster B includes Antisocial, Borderline, Histrionic, and Narcissistic PDs—individuals with these PDs often appear dramatic, emotional or unpredictable; Cluster C includes Avoidant, Dependent, and Obsessive-Compulsive PDs—individuals with these disorders tend to appear anxious or fearful.⁷ The functional limitations associated with all personality disorders are similar in terms of attribute levels, therefore only one health state is described for an individual diagnosed with an unspecified personality disorder.

PDs affect between 6% and 15% of the population.^{65,126} The most common of the PDs are obsessive-compulsive (with a prevalence rate of 7.7% according to DSM-IV criteria), avoidant (6.6%), paranoid (5.6%), borderline (5.4%), and schizotypal (5.2%).¹²⁶ PDs typically become recognizable by adolescence or early adulthood, although some individuals may not seek clinical attention until much later. It is possible for a PD to become exacerbated after the loss of a significant supporting person or situation.⁷ The course of a PD is relatively stable over time.

PDs affect between 6% and 15% of the population.^{125,126} The most common of the PDs are obsessive-compulsive (with a prevalence rate of 7.7% according to DSM-IV criteria), avoidant (6.6%), **paranoid (5.6%),** borderline (5.4%), and schizotypal (5.2%).¹²⁶ PDs typically become recognizable by adolescence or early adulthood, although some individuals may not seek clinical attention until much later. It is possible for a PD to become exacerbated after the loss of a significant supporting person or situation.⁷ The course of a PD is relatively stable over time.

Population of BC: 5.017 million 2019

- 5.6% = **280,952** people with paranoia
- 5.4% = **270,918** people with border line personality disorder

Essentially

- The attack on public health is by speech
- Defense must come from more and better speech
- Such speech must emphasize the expertise of public health

Examples of attack

- Examples of attacks
 - A person attacks a public health program
 - HPV vaccine, Fluoridation
 - A newspaper attacks a vaccine's safety
 - A university employs an antivaxxer
 - A judge rejects expert opinion that death was by bacterial infection (R. v. Stephan 2019)
- Defenders must address all attacks
- Defenders must “stand on guard for thee”



The Doctor
Luke Fildes

Overview of talk

1. Introduction
2. We protect what we value
3. Metaphors for public health
 1. Grandmother
 2. Valuable edifice
 3. A health promotion enterprise
4. Origin and Types of Attacks
- 5. Examples of defending public health**
 1. Defending in-school vaccination
 2. Protecting vaccination from false claims
 3. Defending fluoridation
6. Conclusion

Catholic school boards ban HPV vaccination program

Sep 26, 2008 | Full story: [Calgary Sun](#)

Thu, September 25, 2008 Calgary Catholic school trustees last night voted against offering the controversial human papillomavirus vaccine to Grade 5 girls.

HPV Vaccine Bans in Canadian Publicly Funded Catholic Schools: November 15, 2012



Needed knowledge of HPV infection, transmission and prevention

Eduardo Franco

Eduardo L. Franco, BSc, MPH, DrPH, PhD (Hon), OC, FRSC, FCAHS



Dr. Franco is James McGill Professor in the Departments of Oncology and Epidemiology & Biostatistics, Director, Division of Cancer Epidemiology, and Chairman, Department of Oncology, at McGill University's Faculty of Medicine, in Montreal, Canada. He was a faculty member at the Université du Québec (1989-94) and Senior Researcher and Head of the Epidemiology Unit, Ludwig Institute for Cancer Research, Sao Paulo, Brazil (1985-89).

He holds BSc (1975) and Licentiate (1976) degrees in biology from Universidade de Campinas, Brazil, and master's (MPH) and doctoral (DrPH) degrees in public health microbiology from the University of North Carolina at Chapel Hill (1981-84). He was a Guest Researcher at the U.S. Centers for Disease Control, in Atlanta (1980-81 and 1983-84), and a post-doctoral fellow in cancer epidemiology during 1984 at the International Agency for Research on Cancer in Lyon, France, at the U.S. National Cancer Institute (NCI) in Bethesda, and at

Louisiana State University, in New Orleans.

Eduardo Franco, McGill

Created a team - some team members
Total: approx. 250 people nationally



Accepted qualified walk-ons



Sought important information from covert sources



Teachers
Nurses

Created team logos: *For local effort*



www.hugyourkids.org

Vaccinating kids against HPV saves lives!



For national effort



HPV
CANADA

www.hugyourkids.org

HPV vaccine saves lives!

The advertisement features a purple sidebar on the left with the HPV Canada logo and website. The main image is a large landscape photo of a forested field with mountains in the background. Below the landscape photo is a row of six small photos: two women smiling, a woman lifting a child, a family with a baby, a close-up of a baby's face, and three children playing soccer.

We had clear goals in mind



Goals

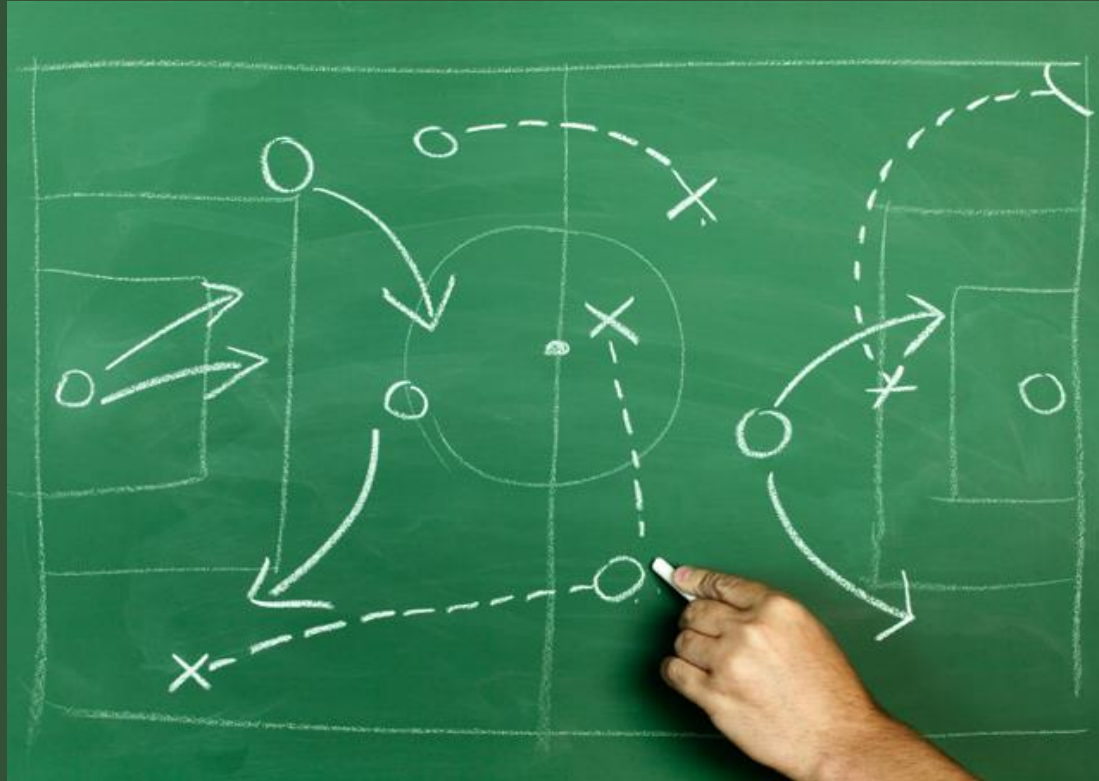
- Promote easy vaccine access for children
- Seek clear and correct information to encourage parental consent
- Help increase HPV vaccine uptake

Accepted that task is adversarial



- We had opponents
- Our aim was victory: high vaccine uptake!
- We adopted sportsmen like behaviour

Had a clear overall game plan:
escalating pressure



Opposition's moves determined what play we used

- In Alberta: Calgary, Medicine Hat, Leduc Halton Ontario particularly difficult

Used Media to Promote Education June 2012



inating kids against HPV



Promoted education by letters from experts to trustees



Letters and follow up in French and English

From: Marc Steben <Marc.Steben@cliniquea.ca>

Date: Thursday, January 16, 2014 4:33 AM

To: "mdupont@centreest.ca" <mdupont@centreest.ca>, "mdumont@centreest.ca" <mdumont@centreest.ca>

Subject: support for a school based vaccination program

<mailto:mdumont@centreest.ca>

Cher Monsieur Dumont

Je suis médecin conseil à l'institut national de santé publique du Québec et ex président du congrès mondial de recherche sur le vph

Je travaille à ouvrir un secrétariat mondial de prévention du vph à mon université

Je veux vous apporter mon support afin de vous aider à amener la vaccination contre le vph dans vos écoles

Il est clairement prouvé que la vaccination dans les écoles est la plus éthique permettant de rejoindre le plus de femmes

Il faut voir le cancer comme la forme la plus équitable de protéger les femmes contre plusieurs cancers tel que cancer du col, de la vulve, du vagin

Les programmes de dépistage ont des limites et la vaccination aide à protéger plus efficacement les femmes

Le cancer touche non seulement les femmes mais aussi leurs conjoints, leurs familles

Le cancer est non éthique et nous ne pouvons pas nous permettre de lésiner sur les moyens à prendre pour le combattre

Les vaccins contre le vph ont été prouvés efficaces et sécuritaires

n'hésitez pas à me soumettre vos questions ou insécurités vis à vis la prévention des cancers

Je quitte pour un mois pour donner des cours mais je suis disponible par courriel

Au plaisir

Marc

Marc Steben, M.D.

Directeur médical, Clinique A rue McGill

T : 514 787 0055 poste 407 | F : 514 787 0066







Calgary Dean of Medicine letter
evoked episcopal ire

Were prepared to play away
games despite challenges



Yellowknife





Does the HPV vaccine give implied permission to have sex?

- 1398 girls aged 11 - 12 years
 - 493 HPV vaccine-exposed; 905 HPV vaccine-unexposed
 - Followed for three years 2006/2007 - 2009/2010
- HPV vaccination in the recommended ages was not associated with increased sexual activity
- Bednarczyk, Nov, 2012

Burlington, Ontario



JAMES BOW PHOTOGRAPHER (2014); TRANSIT TORONTO COLLECTION (2014)

Leduc, Alberta







Vaccinating kids against HPV saves lives!



Home HPV101

Calgary-Main

Contact Us

Documents /

Correspondence

Media Coverage of
Calgary Debate

Media Record of
Our Public Appeal
to School Trustees

Where to get the
FREE HPV Vaccine
in Calgary

Where to **PAY** to
get the HPV
Vaccine in Calgary

Useful Links

Calgary

Yellowknife

Grande Prairie

Timeline

On November 26, 2012 we, as Canadians, congratulated the



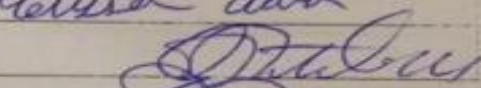
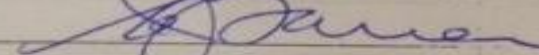
Calgary Catholic School District Board for permitting eligible children to receive the HPV vaccine in school. This is traditionally the least costly and most effective venue for vaccination of school aged children.

The school trustees' 2012 vote followed advocacy for children by HPV Calgary.

On September 24, 2008, Trustees of the Calgary Catholic School District decided to **prevent** the administration of the HPV vaccine available in schools under their jurisdiction. At least nine other Alberta Catholic School Boards did the same.

Trustees of the Catholic school system in Edmonton, however,

Accepted every opportunity to communicate
with public

| CBC  North Radio-Canada | | | |
|--|---|---|--|
| VISITORS / VISITEURS | | | |
| <u>DATE</u> | <u>PRINT NAME</u> <u>NOM IMPRIME</u> | <u>SIGNATURE</u> | <u>PURPOSE OF VISIT</u> <u>BUT DE LA VISITE</u> |
| 15 May 13 | Thomas McDermott |  | |
| 15 May 13 | Melissa Clark | Melissa Clark | |
| 15 May 13 | Iain Mitchell |  | interview |
| " " | Andrew Farnier |  | interview |
| " " " | Juliet Guichon | Juliet Guichon | interview |
| | | | |
| | | | |
| | | | |
| | | | |

Radio



Television





Print



TIME

Subscribe

HEALTH

Canada Bishops Ban HPV Vaccine For Catholic School Girls

An advocacy group is fighting a ban on HPV vaccinations for girls in Calgary's Catholic school system set out by Bishop Frederick Henry and other bishops who believe the vaccine promotes promiscuity.

By Megan Gibson @MeganJGibson | June 28, 2012 | [Add a Comment](#)

[f Share](#)

[Tweet](#)

491

[g+1](#)

67

[in Share](#)

[Pin it](#)

[Read Later](#)

Every year, millions of Canadian children are given vaccinations at school to help combat any number of conditions. But the female students in Calgary's Catholic school system will be receiving one less shot than their public school counterparts. In 2008, a group of bishops led by Bishop Frederick Henry deemed that providing the human papillomavirus (HPV) vaccination — which guards girls against the four strands of HPV most associated with cervical cancer — to fifth and ninth-grade girls could be viewed as a



Judith Schaechter/ Getty Images

A University of Miami pediatrician, Judith L. Schaechter, M.D., gives an HPV vaccination to a 13-year-old girl in her

Adopted clear messaging

Vaccination

Does not cause

Promiscuity

INTERNET CAN BE DANGEROUS



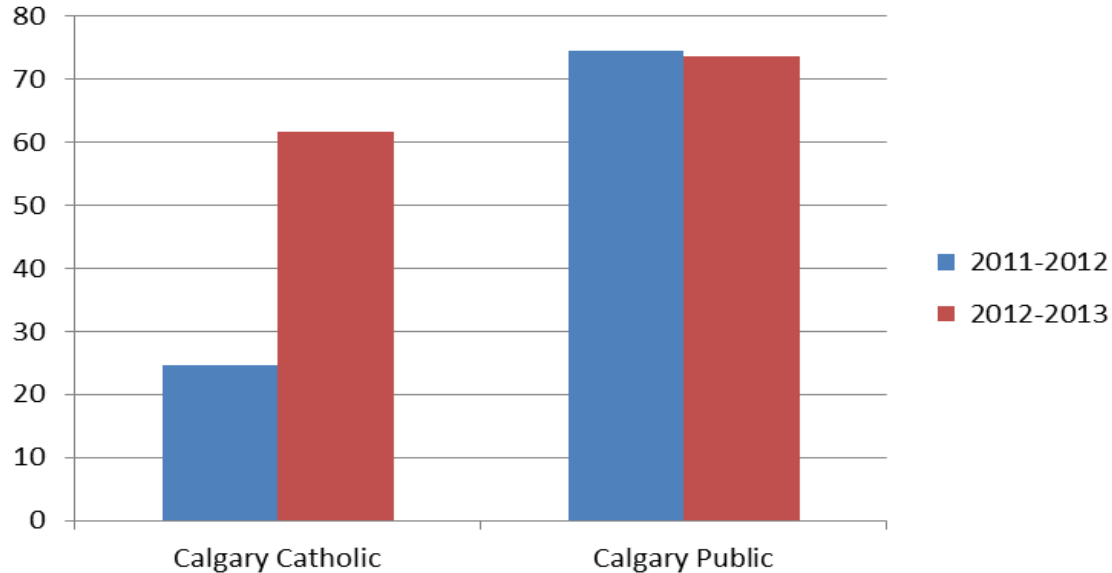
Challenges, but ultimate success

- Politics, bureaucracy and self interest were challenges
- But by May 2014 all publicly funded Canadian school doors were open to the HPV vaccine

Successes showed worth of effort

Pre-post ban: 3-dose grade 5 vaccine uptake

Vaccine
Uptake



Overview of talk

1. Introduction
2. We protect what we value
3. Metaphors for public health
 1. Grandmother
 2. Valuable edifice
 3. A health promotion enterprise
4. Examples of defending public health
 1. Defending in-school vaccination
 2. **Protecting vaccination from false claims**
 3. Defending fluoridation
5. Conclusion

> STAR INVESTIGATION

A wonder drug's dark side

Hundreds of thousands of teen girls in Canada have safely taken **Gardasil**, a vaccine shown to prevent HPV. But a Star investigation has found that since 2008, at least **60 Canadians** experienced debilitating illnesses after inoculation. Patients and parents say the incidents point to the importance of **full disclosure** of risks

DAVID BRUSER AND JESSE MCLEAN
STAFF REPORTERS

By the time Kaitlyn Armstrong received her third and final injection of the popular HPV vaccine Gardasil, pain had spread through the Whitby teen's body, migrating from her back to her knees to her hips.

After her first dose, Natalie Kenzie of London developed egg-size lumps on the soles of her feet, her joints swelled and her limbs twitched uncontrollably.

Before getting the shots, both 13-year-old girls were told the vaccine had no significant risks. And as they struggled to learn what ailed them, and began to believe Gardasil played a role, doctors dismissed their concerns.

Hundreds of thousands of teenage girls in Canada have received the vaccine's three doses, the vast majority without incident.

Regulators, including Health Canada and the FDA in the United States, cite comprehensive clinical trials and other data that show the vaccine's well-studied safety and efficacy.

But since 2008 at least 60 girls and women in Canada have convulsed or developed disabling joint and muscle pain and other debilitating conditions after receiving Gardasil.

One needed a wheelchair, another a feeding tube. A 14-year-old Quebec girl, Annabelle Morin, died two weeks after receiving the second injection of the vaccine.

It was 7:30 p.m. on the night of Dec. 9, 2008, when her mother, Linda, found her in the tub, her head underwater and turned to the side.

The paramedics lifted Annabelle's body on to a stretcher. "I put a blanket on her, saying, 'She's going to freeze,'" Linda recalled. "I did not know she was already dead."

The Quebec coroner's office said the cause of death was drowning, yet also said that any role Gardasil might have played should be further investigated.

In the cases discussed in this article, it is the opinion of a patient or doctor that a particular drug has caused a side effect.

There is no conclusive evidence showing the vaccine caused a death or illness.

Like Kenzie and Armstrong, many of the girls say the vaccine was pushed on them by school officials, nurses or doctors who understated the risks, sometimes



RANDY RISLING/TORONTO STAR

Kaitlyn Armstrong says the nurses giving her the HPV vaccine Gardasil ignored her when she said she was allergic to metal.

claiming zero significant side effects despite the existence of a list of rare but serious vaccine-related reactions published by the drug's maker.

The Star has found the girls' concerns are not isolated, that in Canada important safety information about the vaccine has not been communicated to many young patients and their parents.

As part of its ongoing investigation into drug safety, the newspaper analyzed side-effect reports from a Health Canada data-

base, and interviewed regulators, a doctor closely involved in the vaccine's clinical trial and, in 12 cases, young women and parents who believe the vaccine caused considerable suffering.

Some of the girls have, after several years, made partial recoveries and are trying to live normal lives. Others are still bouncing from doctor to doctor, looking for answers.

GARDASIL continued on A10

> WHAT IS GARDASIL?

> A vaccine delivered in a series of shots. The \$400-\$500 cost paid by province. Public health nurses administer the inoculations in schools.

> Approved in more than 130 countries, the vaccine protects against strains of human papillomavirus (HPV) that cause 70 per cent of cervical cancer cases. Roughly 400 Canadian women die of cervical cancer each year.

Message

Rules

FW: Toronto Star anti-HPV vaccine article

6, 2015 at 10:03 AM

You replied to this message on 2015-02-06, 10:08 AM.

Show Reply

You forwarded this message on 2015-03-12, 11:20 AM.

Show Forward

From: William Navarre [<mailto:william.navarre@utoronto.ca>]
Sent: Friday, February 06, 2015 11:48 AM
To: McGeer, Dr. Allison; Nahuel Fittipaldi; George Broukhanski; Muller, Matthew - St. Michael's Hospital; Poutanen, Susan; Scott Gray-Owen; Catherine OBrien; vivek.goel@utoronto.ca
Subject: Toronto Star anti-HPV vaccine article

Dear Colleagues,

Perhaps yesterday you read an article that appeared simultaneously in the Toronto Star and Toronto Metro (free newspaper on subways) entitled “The Dark Side of the HPV Vaccine”. The Star website also includes a very provocative video.

Both the video and article are extremely slanted in their presentation and the reporting can only serve to reduce HPV vaccination rates. The video has scary music, scary anecdotes, and is clearly out to stir up a controversy and make public health professionals look like they are in the pockets of “big pharma”, etc. The major criticism, that patients aren’t informed of risks, is conflated with an unsupported attack on the effectiveness of the vaccine itself (the “dark side” of Gardasil). Supportive stats are thrown into the background and diminished compared to extensive interviews with potential vaccine victims. I find the reporting to also be quite odd given that other articles in the same papers take great joy at slamming parents who don’t vaccinate their kids for measles. Also an article today on “Why the flu shot is still your best bet against infection”.

The fact this newspaper is talking out of both sides of its mouth also only serves to confuse the public and reduce overall immunization rates.

I’m writing to ask -

1. Is there a response underway already to this report from anybody you know? I worry people in Health Canada, etc, will be accused of “bias” and may not have the autonomy to speak out. Professors in academic settings have far more latitude to make a clear statement.
2. If not can you help dig up some people to come up with a clear and effective response to this video? I say “effective” because it may take more than a simple letter to the editor to really make the point clear that this kind of reporting won’t go unnoticed.

Thanks. I know you are all extremely busy and may not have time to take this on (I certainly am maxed out) but at the same time I just want to make sure this doesn’t fly without a serious and very public criticism of the approach the Star took on this occasion.

Link to article and video: <http://www.thestar.com/news/canada/2015/02/05/hpv-vaccine-gardasil-has-a-dark-side-star-investigation-finds.html>

Thanks,

William Wiley Navarre, Ph.D., Associate Professor
Associate Chair and Undergraduate Coordinator
University of Toronto - Department of Molecular Genetics

From: |
Date: Friday, February 6, 2015 at 11:03 AM
To: [Julia Guichon <guichon@ucalgary.ca>](mailto:guichon@ucalgary.ca)
Subject: FW: Toronto Star anti-HPV vaccine article

HELPI

From: William Navarre [<mailto:william.navarre@utoronto.ca>]
Sent: Friday, February 06, 2015 11:48 AM
To: McGeer, Dr. Allison; Nahuel Fittipaldi; George Broukhanski; Muller, Matthew - St. Michael's Hospital; Poutanen, Susan; Scott Gray-Owen; Catherine OBrien; vivek.goel@utoronto.ca
Subject: Toronto Star anti-HPV vaccine article

Dear Colleagues,

Perhaps yesterday you read an article that appeared simultaneously in the Toronto Star and Toronto Metro (free newspaper on subways) entitled "The Dark Side of the HPV Vaccine". The Star website also includes a very provocative video.

Both the video and article are extremely slanted in their presentation and the reporting can only serve to reduce HPV vaccination rates. The video has scary music, scary anecdotes, and is clearly out to stir up a controversy and make public health professionals look like they are in the pockets of "big pharma", etc. The major criticism, that patients aren't informed of risks, is conflated with an unsupported attack on the effectiveness of the vaccine itself (the "dark side" of Gardasil). Supportive stats are thrown into the background and diminished compared to extensive interviews with potential vaccine victims. I find the reporting to also be quite odd given that other articles in the same papers take great joy at slamming parents who don't vaccinate their kids for measles. Also an article today on "Why the flu shot is still your best bet against infection".

The fact this newspaper is talking out of both sides of its mouth also only serves to confuse the public and reduce overall immunization rates.

I'm writing to ask -

1. Is there a response underway already to this report from anybody you know? I worry people in Health Canada, etc, will be accused of "bias" and may not have the autonomy to speak out. Professors in academic settings have far more latitude to make a clear statement.
2. If not can you help dig up some people to come up with a clear and effective response to this video? I say "effective" because it may take more than a simple letter to the editor to really make the point clear



[How the Toronto Star massively botched a story about ... - Vox](http://www.vox.com/2015/2/10/8009973/toronto-star-hpv-vaccine)
www.vox.com/2015/2/10/8009973/toronto-star-hpv-vaccine ▼

Feb 21, 2015 - If there was ever a textbook case in how to botch a health story, the **Toronto Star's** investigation into the "dark side of the **HPV** vaccine" is it.

['We failed' in presentation of HPV vaccine story, Star ...](http://globalnews.ca/.../toronto-star-did-not-give-proper-weight-to-science-in-h...)
globalnews.ca/.../toronto-star-did-not-give-proper-weight-to-science-in-h... ▼

Feb 11, 2015 - The **Toronto Star** has courted controversy by reporting on the **HPV** vaccine. Now, an editor at the paper says that the article did not give enough ...

[The Toronto Star's HPV Reporting is a Disaster - Canadaland](http://canadalandshow.com/article/toronto-stars-hpv-reporting-disaster)
canadalandshow.com/article/toronto-stars-hpv-reporting-disaster ▼

Feb 10, 2015 - Last week, the **Toronto Star** published an investigation under the headline **HPV** vaccine Gardasil has a dark side. In the piece, reporters David ...

[Toronto Star's Head of Investigations Stands by HPV Story ...](http://canadalandshow.com/.../toronto-stars-head-investigations-stands-hpv-sto...)
canadalandshow.com/.../toronto-stars-head-investigations-stands-hpv-sto... ▼

Feb 12, 2015 - Kevin Donovan, the **Toronto Star's** Investigative Editor, defends the paper's **HPV** vaccine reporting in a statement provided to CANADALAND.

[The Toronto Star's gift to the antivaccine movement ...](https://sciencebasedpharmacy.wordpress.com/.../the-toronto-stars-gift-to-...)
<https://sciencebasedpharmacy.wordpress.com/.../the-toronto-stars-gift-to-...> ▼

Feb 10, 2015 - Last Thursday, the **Toronto Star** ran a front-page story on the Gardasil ... Text from Star's Website: **HPV** vaccine Gardasil has a dark side, Star ...

oped@thestar.ca

Opinion response to:

1. <http://www.thestar.com/news/canada/2015/02/05/hpv-vaccine-gardasil-has-a-dark-side-star-investigation-finds.html>
2. <http://www.thestar.com/opinion/editorials/2015/02/05/make-sure-girls-and-parents-know-any-risk-with-hpv-vaccine-editorial.html>

The HPV vaccine was created to prevent an infection that causes cancer. That is pretty exciting. After all, Terry Fox's arduous marathon a day was to raise money for a cancer cure. Did he even imagine that we would have a vaccine to prevent cancer?

Given the power of HPV vaccine to prevent disease and death, a long Toronto Star article suggesting that the HPV vaccine causes harm ought to have been based on evidence. Unfortunately it was not. Instead, the sensationalized Star article smeared the vaccine with guilt by association, and the paper ran an [editorial](#) endorsing the nonsense.

The Star story states that some people became sick and even died after being vaccinated against HPV infection. Yet, after HPV vaccination, some people might have won a major scholarship or the lottery. Does this mean the vaccine caused the award or the win? Hardly.

Just because one event follows another does not mean that the first event caused the second – to use scientific terms, correlation is not causation. By confusing the two, the Star article deliberately confuses readers. It suggests that we should doubt both the scientific evidence and the recommendations of the Public Health Agency of Canada, The Society of Obstetricians and Gynecologists of Canada (SOGC), the National Advisory Committee on Immunization (NACI), and the Canadian Cancer Society.

This confusion would be funny if it were not serious. But HPV infection can have very serious consequences.

HPV infection [causes](#) nearly all cervical cancers, and cancers of the vulva, vagina, penis, anus, and throat. Two strains ("types") of HPV, called HPV16 and HPV18, are responsible for about 70% of cervical cancers and an even higher proportion of the other HPV-associated cancers. Two other HPV types, HPV6 and HPV11, cause about 90% of genital warts. The vaccine smeared by the Star's article, Gardasil, prevents infection by these four strains of HPV.

In 2008, approximately 610,000 cases of cancer worldwide were attributable to HPV.

HPV infections in Canada annually result in 85,000 physician consultations for genital wart infections, 1,450 newly diagnosed cases of cervical cancer and 106,000 patients with cervical lesions that require expensive, painful treatment that can cause infertility and premature birth. In Canada, 380 women die from cervical cancer every year, many of them in the prime of life. HPV infections are a very real threat to the health of Canadians.

All of us must take very seriously the potential complications of any drug or vaccine. Gardasil was licensed only after its safety was studied in clinical trials with more than 29,000 persons. After licensing, reported side effects are collected in a vaccine safety database. Researchers studied that database after more than half a million doses of Gardasil had been administered. The only - and very rare - serious side effect of HPV vaccines that they identified was allergic reactions. Public health officials who continue to monitor these databases have not found evidence of any other serious side effects.

The Star presented the stories of people who have suffered. But the cause of their suffering has not been established. Approximately 169 million doses of the HPV vaccine have been administered worldwide. In any given large population, there will be illness and death. This is a statistical fact. To attribute devastating, but natural, occurrences to a vaccine requires evidence of causation, of which the Star article had none.

The Star's article is of the sort that, quite frankly, causes despair among scientists. Scientists' work is subject to rigorous peer review and detailed discussion of uncertainty and potential biases.

Journalists, however, are held to different standards, one of which is to be engaging. Who couldn't be engaged by an article in which young women are depicted as haunted by the specter of a multinational pharmaceutical company surreptitiously working to cause them serious harm and death?

Clearly the women and their families have suffered greatly. The Toronto Star article is engaging and dramatic. Yet study after study shows that there is no link between the kinds of events the Star reported and the vaccine. In fact, wrongly attributing blame to the vaccine might discourage doctors from looking for the causes of the serious events that affected the young women.

When such articles appear, we all lose. Pseudoscience and misinformation create only damage. We hope Star readers will continue to rely on evidence-based public health recommendations to protect all our children from cancer.

Juliet Gulichon, of the University of Calgary, has been honoured by the Canadian Medical Association and Canadian Public Health Association for HPV vaccine related work. Dr. Rupert Kaul is a Professor in the Departments of Medicine and Immunology, and the Head of the Division of Infectious Diseases at the University of Toronto. This response is endorsed by 47 specialists in infectious disease, public health or related health sciences.

Co-authors – in alphabetical order (N=48)

[David L. Beach, MD, MS, FRCPC, CMAJ](#)
Consultant, Infectious Diseases and Internal Medicine, University Health Network, Toronto
Assistant Professor, Department of Medicine, University of Toronto

| | | | |
|--|---|--|---|
| <p>this press release</p> <p>Opinion response to:</p> | | | |
| <p>1. http://www.theglobeandmail.com/health/healthcare/2015/05/26/star-articles-are-a-dish-out-of-science/article.html</p> <p>2. http://www.theglobeandmail.com/health/healthcare/2015/05/26/star-articles-are-a-dish-out-of-science/article.html</p> | <p>All of us must take very seriously the potential complications of any drug or vaccine. Gerstel has lowered only after it safety was studied in clinical trials with more than 30,000 patients. After licensing, reported side effects are collected in a vaccine safety database. Researchers suspect that database after more than half a million doses of Gardasil have been administered. The only – and very rare – serious side effect of HPV vaccine that they identified was allergic reactions. Public health officials who continue to monitor these databases have not found evidence of any other serious side effects.</p> | <p>Wivian Brown MDCM, CCPC, FCFP, CCPC, NCCP Associate Professor, Department of Family & Community Medicine, University of Toronto Board Member, Immunize Canada</p> <p>John H. Brunell, PhD Pilsbush Chair in Cell Biology Senior Scientist, Cell Biology Program, The Hospital for Sick Children Professor, Dept. of Molecular Genetics and Institute of Molecular Sciences, University of Toronto</p> <p>Sumit Chakrabarti, MD PhD Consultant, Infectious Diseases and Internal medicine, Tytilin health partners Lecturer, Department of Medicine, University of Toronto</p> | <p>Im M. Gennill, MD, CCPC, FCFP, CCPC, FRCPC Medical Officer of Health, Ontario, Frontenac Lennox and Addington Public Health Unit, Ontario</p> <p>Kevin Gough, MD, FRCPC, MSc Head, Division of Infectious Diseases, Medical Director, HIV Service St. Michael's Hospital, University of Toronto</p> <p>Scott Gray-Down, PhD Professor, Department of Molecular Genetics, University of Toronto</p> <p>Serge Grynstein, PhD Senior Scientist, Program in Cell Biology, Hospital for Sick Children Professor of Biochemistry, University of Toronto</p> |
| <p>The HPV vaccine was created to prevent an infection that causes cancer. That is pretty exciting. After all, Terry Fox's armband meant a time was came when cancer was a curable disease. Did he even imagine that we would have a vaccine to prevent cancer?</p> <p>Given the power of HPV vaccine to prevent disease and death, a long Toronto Star article suggesting that the HPV vaccine causes harm ought to have been based on evidence. It was not. It was not. Instead, the sensationalized Star article smeared the vaccine with guilt by association, and the paper ran an editorial endorsing the nonsense.</p> | <p>The Star article's take on the fact that, quite frankly, causes despair among scientists. Scientists' work is subject to rigorous peer review and detailed discussions of uncertainty and potential biases. Journals, however, are held to different standards, one of which is to be engaging. Who doesn't want to engage an infection in which young women are depicted as frustrated by the specter of a multinational pharmaceutical company surreptitiously working to cause them serious harm and death?</p> | <p>W. David Celis, MSc, MD, FRCPC Professor Microbiology/Immunology, Schulich School of Medicine and Dentistry, Western U and MCH Chatham-Kent</p> <p>Bryan Colston, MD, PhD Infectious Diseases Specialist, Toronto</p> <p>Nick Denham, MD, FRCPC, MSc Scientist, Evaluative Clinical Sciences, Sunnybrook Research Institute Assistant Professor, Department of Medicine, University of Toronto</p> | <p>David S. Guttman, PhD Director, Centre for the Analysis of Genome Evolution & Function, Professor and Associate Chair, Research, Department of Cell & Systems Biology, University of Toronto</p> <p>Kevin Han, MD, FRCPC Director, S&L Laboratories, Sandra Roman Centre for Global Health, UHN Toronto General Hospital, Professor of Medicine, University of Toronto</p> <p>Kevin Katz, MD, CM, MSc, FRCPC Medical Director, Infection Prevention and Control, North York General Hospital Associate Professor, Department of Laboratory Medicine and Pathobiology, University of Toronto</p> |
| <p>The Star story slates and some people became sick and even died after being vaccinated against HPV infection. Yet, after HPV vaccination, some people might have had a major scholarship or the victory. Does this mean the vaccine caused the award or the win? Hardly!</p> <p>Just because one person became sick or even died after being vaccinated against the second sex is not evidence. By confining the two, the Star article deliberately confuses readers. It suggests that we should doubt both the scientific evidence and the recommendations of the Public Health Agency of Canada, the Society of Obstetrics and Gynecologists of Canada (SOGC), the National Advisory Committee on Immunization (NACI), and the Canadian Cancer Society.</p> | <p>Clearly women and their families have suffered greatly. The Toronto Star article is engaging and dramatic. Yet still after study shows that there is no link between the kinds of events the Star reported and the vaccine. In fact, wrongly attributing blame to the vaccine might discourage doctors from looking for the causes of the serious events that affected the young women.</p> | <p>Axel Edwards, PhD Barbour Chair of Medical Research at the University of Toronto Professor, Department of Medical Biophysics, University of Toronto</p> <p>Alex W. Emminger, PhD Assistant Professor, Department of Molecular Genetics, University of Toronto</p> <p>Garrel Evans, MD, FRCPC Chair, Division of Infectious Diseases and Professor, Departments of Medicine, Biomedical & Molecular Sciences, and Pathology & Molecular Medicine at Queen's University</p> | <p>Jamone Lee, MD, FRCPC, MSc Associate Scientist, Evaluative Clinical Sciences, Sunnybrook Research Institute Assistant Professor, Department of Medicine, University of Toronto</p> <p>Jin Liu, Ph.D. Professor, Department of Molecular Genetics, University of Toronto</p> <p>Mark Lewis, MD, FRCPC, MSc Professor, Infectious Diseases, Professor Departments of Pathology and Molecular Medicine, McMaster University</p> |
| <p>HPV infection causes nearly all cervical cancers, and cancers of the vulva, vagina, penis, anus, and throat. Two strains (Types 16 and 18) of HPV, called HPV16 and HPV18, are responsible for about 70% of cervical cancers and an even higher proportion of the other HPV-associated cancers. The other HPV types, HPV16 and HPV18, cause about 80% of genital warts. The vaccine smeared by the Star article, Gardasil, prevents infection by these four strains of HPV.</p> | <p><i>Juliet Gough, of the University of Victoria, has been honoured by the Canadian Medical Association and Canadian Public Health Association for HPV vaccine research work. Dr. Rupert Gough is a Professor in the Departments of Medicine and Immunology, and is the Division of Infectious Diseases at the University of Toronto. This response is endorsed by 47 specialists in infectious disease, public health or related health science</i></p> | <p>I. George Panayiotou Associate Dean Research, Faculty of Medicine, Departments of Medicine and Physiology, University of Toronto</p> <p>David Papan, MD, MPH, FRCPC Professor, Dalla Lana School of Public Health, University of Toronto</p> <p>David T. Fropinger, PhD Professor, Department of Molecular Genetics, University of Toronto Research Chair in Molecular Virology</p> | <p>Christopher Macdonald, MD, MSc, FRCPC Medical Officer of Health and CEO, Middlesex-London Health Unit, Ontario Assistant Professor, Department of Epidemiology and Biostatistics, McMaster University</p> <p>Ann K. Maloney, MD, MSc, FRCPC Medical Officer of Health and CEO, Middlesex-London Health Unit, Ontario Assistant Professor, University of Toronto</p> <p>Loisel Manette, MD, FRCPC, FRCPC</p> |
| <p>In 2008, approximately 61,000 cases of cancer worldwide were attributable to HPV.</p> <p>HPV infections in Canada annually result in 86,000 physician consultations for genital warts infections, 1,100 throat dysplasia cases of cervical cancer and 108,000 deaths with cervical lesions that require expensive, painful treatment that can cause infertility and premature death. In Canada, 30 women die from cervical cancer every year, many of them in the prime of life. HPV infections are a very real threat to the health of Canadians.</p> | <p>Co-authors – in alphabetical order (29=48)</p> <p>Naeel I. Bogdan, MD, MSc, FRCPC, OTM&H Assistant Professor, Department of Medicine, University of Toronto Assistant Professor, Department of Medicine, University of Toronto</p> | <p>Paul Ruminato, MD, CM, MPH Medical Officer of Health and CEO, Eastern Ontario Health Unit, Ontario</p> <p>Alex A. Shrivastava, MD, MSc, FRCPC Assistant Professor of Medicine, University of Toronto, Infectious Diseases Consultant, University Health Network</p> <p>Andrew Simer, MD, FRCPC Microbiology in Chief, Sunnybrook Health Sciences Centre Professor, Department of Laboratory Medicine and Pathobiology, University of Toronto</p> | <p>Stefania Ronzoni, MD Department of Obstetrics, Mount Sinai Hospital, University of Toronto</p> <p>Linda Taggart, MD, FRCPC, MPH Infectious Diseases Physician, St. Michael's Hospital, University of Toronto</p> <p>Maya Yarmouk, MD, FRCPC Medical Director, Infectious Diseases Consultant, Sunnybrook Health Sciences Centre Associate Professor, Department of Laboratory Medicine and Pathobiology, University of Toronto</p> <p>Tania L. Wells, PhD Senior Fellow Chair in Human Immunology, University of Toronto</p> <p>Yoonhee Yoo, MD, FRCPC Medical Microbiologist, Hospital for Sick Children Assistant Professor, Department of Laboratory Medicine and Pathobiology, University of Toronto</p> |
| <p>Professor Emerita, Division of Infectious Diseases, Department of Medicine, McMaster University</p> <p>Janine McCreedy, MD, FRCPC Infectious Diseases Consultant, Toronto East General Hospital</p> <p>Birely McNeil, MD, FRCPC Clinical Scientist, Canadian Centre for Vaccinology, W&K Health Centre and Capital Health, Halifax, Professor of Medicine, Dalhousie University</p> | | | |
| <p>Sharmista Mahowood, MD, FRCPC, PhD Infectious Diseases Physician and Epidemiologist, St. Michael's Hospital, University of Toronto Assistant Professor, Department of Medicine, University of Toronto</p> <p>Kelle Murphy, MD, FRCSC Internal-Family Medicine Specialist, Mount Sinai Hospital, Toronto Associate Professor, Department of Obstetrics and Gynecology, University of Toronto</p> | | | |
| <p>Nanette Ooun, MD, FRCPC Medical Head, Infectious Field Medicine, University of Toronto Associate Professor, Department of Obstetrics and Gynecology, University of Toronto</p> <p>Mario Ostrowski, MD, FRCPC Professor, Department of Medicine, University of Toronto Infectious disease consultant, St. Michael's Hospital</p> | | | |
| <p>Andrew Morris, MD SM FRCPC Director, Adolescent Development Program, Mount Sinai Hospital University Health Network Associate Professor, Department of Medicine, University of Toronto</p> <p>Matthew Muller, MD, FRCPC, PhD Medical Director, Infection Prevention and Control, St. Michael's Hospital Assistant Professor, Department of Medicine, University of Toronto</p> | | | |

thestar.com

COMMENTARY

Opinion / Commentary

Science shows HPV vaccine has no dark side

To attribute rare devastating occurrences to a vaccine requires evidence of causation, which the Star didn't have in its article on Gardasil.



Tweet

1,327



+1

23



reddit this!



Given the power of HPV vaccine to prevent disease and death, a long Toronto Star article that appears to suggest that the HPV vaccine causes harm is troubling and disappointing, write Juliet Guichon and Dr. Rupert Kaul.

By: Juliet Guichon Dr. Rupert Kaul Published on Wed Feb 11 2015

The HPV vaccine was created to prevent an infection that causes cancer. That is pretty exciting. After all, Terry Fox's arduous marathon a day was to raise money for a cancer cure. Did he even imagine that we would have a vaccine to prevent cancer?

Given the power of HPV vaccine to prevent disease and death, a long [Toronto Star article](#) that appears to suggest that the HPV vaccine causes harm is troubling and disappointing. Although the article states in the fifth paragraph that "there is no conclusive evidence showing the vaccine caused a death or illness," its litany of horror stories and its innuendo give the incorrect impression that the vaccine caused the harm.

Very unfortunately, this article may well lead readers to doubt both the scientific evidence and the recommendations of the Public Health Agency of Canada, the Society of Obstetricians and Gynecologists of Canada, the National Advisory Committee on Immunization, and the Canadian Cancer Society about vaccination.

The Star story states that some people became sick and even died after being vaccinated against HPV infection. Yet, after HPV vaccination, some people might have won a major scholarship or the lottery. Does this mean the vaccine caused the award or the

69 Signatures

optimales en santé, Centre de recherche du CHU de Québec. Professeur titulaire, Département de médecine sociale et préventive, Faculté de médecine. Université Laval, Médecin-conseil, Institut national de santé publique du Québec

57. Dr. Catherine Dubé MD, MSc, FRCPC, Gastroenterologist and Clinical Lead for Ontario's Colorectal cancer screening program, University of Ottawa.

58. Dr. Alaa Rostom MD, MSc, FRCPC, Chief, Division of Gastroenterology, University of Ottawa.

59. Wendy Vaudry MD, CM, FRCPC, Professor, Department of Paediatrics, Division of Infectious Diseases, University of Alberta

60. Anne Pham-Huy MD, FRCPC, Assistant Professor, University of Ottawa, Program Director, Pediatric Infectious Diseases Training Program, Division of Pediatric Infectious Diseases, Children's Hospital of Eastern Ontario (CHEO)

61. Jonathan B Kronick, Chief of Education, The Learning Institute, The Hospital for Sick Children, Professor of Pediatrics, Division of Clinical and Metabolic Genetics, University of Toronto

62. Dr. Robert Strang, Chief Medical Officer of Health, Department of Health and Wellness, Halifax, Nova Scotia

63. Chris Kaposy, Ph.D., Assistant Professor of Health Care Ethics, Faculty of Medicine, Memorial University of Newfoundland

64. Shaun Morris, MD, MPH, FRCPC, FAAP, Clinician-Scientist Division of Infectious Diseases, Hospital for Sick Children, Assistant Professor, Department of Pediatrics, University of Toronto

65. Audrey Steenbeek PhD, Associate Professor and Assistant Director of Graduate Programs, Dalhousie School of Nursing & Dept. of Community Health & Epidemiology, Halifax, NS

66. Shannon MacDonald, PhD, RN, Post-Doctoral Fellow, University of Calgary Department of Paediatrics; Adjunct Assistant Professor, University of Alberta Faculty of Nursing

67. Morley D. Hollenberg, D. Phil., MD, FRSC, Professor, Department of Physiology & Pharmacology and Department of Medicine, University of Calgary Cumming School of Medicine

68. Jordan Tustin CPHI(C) MHSc, Assistant Professor and Epidemiologist,

School of Occupational and Public Health, Ryerson University, Toronto

69. Jeff Kwong, MD MSc CCFP FRCPC, Associate Professor, Dept. of Family & Community Medicine, Dalla Lana School of Public Health, University of Toronto

Followed up by request for retraction

Canadian Alliance to Support Immunization

February 18, 2015

Mr. John D. Cruickshank
Publisher
Toronto Star Newspapers Limited
1 Yonge Street
Toronto, ON M5E 1E6

Dear Mr. Cruickshank,

On behalf of the Canadian Alliance to Support Immunization (CASI), we write to thank you for the opportunity provided by your editors to address misunderstandings created by the front page story February 5, 2015 "[HPV vaccine Gardasil has a dark side investigation finds](#)" and its accompanying colour photographs and on line video. Many CASI members authored or endorsed the article that the Star published February 11, "[Science shows that the HPV vaccine has no dark side](#)".

Thank you also for amending the headline of the original article so that it now reads, "Families seek more transparency on HPV vaccine", and for inserting in the original article these qualifications:

"This article has come under global criticism by the medical and public health communities for not making clear the scientific evidence of the safety of the HPV vaccine Gardasil. There is no scientific medical evidence of any "dark side" of this vaccine."

Public Editor's column: [The Toronto Star acknowledges it failed in not giving proper weight to evidence-based science in this article.](#)

Editor's Note-February 13, 2015: The original headline on this story has been edited to reflect a better description of the story's content.

READ REBUTTAL OP-ED:
[Doctors say the HPV vaccine is proven safe](#)

We appreciate also your candid statement to the CBC: "[We failed.' Toronto Star publisher says the paper's HPV vaccine article let down readers.](#)"

Nevertheless, the Star's original [article](#) remains on your website with its colour photographs, and the video remains accessible there with young women speaking and music playing in the background, all of which continues to suggest

women suffered.

There is almost certainly harming the public's confidence in vaccination and a stark contrast to the myriad of evidence-based recommendations made by national medical bodies.

We write respectfully request:

Immediately retract the article and video, and remove them from the Star website;

Work with our organization to create guidelines that might prevent future media vaccine attacks that are not based on reliable scientific evidence; and

Publish a "news investigation" of 6 cases of vaccine-preventable diseases that occurred in unimmunized children, in which at least one person died. The Star should state the evidence-based likelihood that vaccination would have prevented the illness or death. The article ought to be accompanied by the patient or family member's story and photos, along with an on-line version with video with sad music. We will help the Star find the cases so that it might interview those involved.

The third request stems from our acceptance that volumes of peer-reviewed research including meta-analyses often cannot compete with the power of anecdote, and that it is important to attempt to put the Star's readership in the position it would have been had the original article not been published.

We look forward to hearing from you at PubHealthInfor@gmail.com by February 22, 2015.

Thank you very much.

Yours sincerely,

1. Juliet Guichon BA, MA BCL SJD, University of Calgary, Assistant Professor, Cumming School of Medicine
2. Rupert Kaul is a Professor in the Departments of Medicine and Immunology, and the Head of the Division of Infectious Diseases at the University of Toronto.
3. David Scheifele OC MD, Professor of Pediatrics, UBC and Director, Vaccine Evaluation Center, BC Children's Hospital, Vancouver

News

A note from the publisher



Tweet

965



11



reddit this!

Published on Fri Feb 20 2015

On Feb. 5, the Toronto Star published a Page 1 article with the headline “A wonder drug’s dark side” beneath a “Star investigation” label.

The article focused on several young women who had grown sick sometime after taking the anti-papillomavirus vaccine Gardasil.

The story included the caveat that none of these instances had been conclusively linked to the vaccine.

However, the weight of the photographs, video, headlines and anecdotes led many readers to conclude the Star believed its investigation had found a direct connection between a large variety of ailments and the vaccine.

Some doctors and public health officials were troubled by the story treatment and by the lack of reference to the many studies which conclude the risks of Gardasil are low.

All major studies conducted after widespread inoculations began in 2006 have concluded the risks posed by Gardasil are no greater than those identified in the trial period before the vaccine was licensed and accepted for widespread use.

These include a study by researchers from the U.S. Centers for Disease Control and the U.S. Food and Drug Administration and an analysis of Gardasil safety issues in 37 countries by the World Health Organization's Collaborating Centre for International Drug Monitoring, published in 2011. As well, an abstract from a Canadian study of the results of several million inoculations between 2006 and 2010 was presented to American Public Health Association meetings in 2013.

The Star story also drew responses from health researchers who praised the Star's attempts to sift through data in which the red flag of an undiscovered side-effect might be found.

No drug is absolutely safe for all people in all conditions of health. Now that tens of millions of young women have taken the vaccine, it is conceivable that very rare reactions may emerge that weren't identified earlier.

All vaccines, including Gardasil, have side-effects. The better known they are, the more safely the vaccine can be deployed.

This is what the article sought to achieve as well as to note that acknowledged risks are not being properly communicated.

We remain committed to this line of reporting. However, we have concluded that in this case our story treatment led to confusion between anecdotes and evidence.

For that reason, the Gardasil story package of Feb. 5 will be removed from our website.

False Claims

1. Toronto Star
2. **University of Toronto anthropology**



University of Toronto instructor and speaker boosts 'alternative vaccines'

CANADIAN WEEKS

Globe and Mail Update (includes correction)

Published Saturday, Feb. 28 2015, 10:40 AM EST

Last updated Saturday, Feb. 28 2015, 10:43 AM EST

388 comments



2K



2K



300



7



11



Print /
License



A homeopath who promotes ineffective "alternative vaccines" and counsels patients about the dangers of immunization is an instructor at the University of Toronto and a headline speaker at a university-sponsored conference on non-traditional health care on Saturday.

The university is facing intense criticism from public health experts who question why it is aligning itself with an anti-vaccine advocate and sponsoring a conference focusing on alternative health care, homeopathy and unproven complementary therapies.

MORE RELATED TO THIS STORY

- Queen's anti-vaccine instructor will no longer teach Health 102 course
- Harper unveils foreign vaccination funding, chides anti-vaxxers
- Queen's instructor assailed for anti-vaccine teaching granted leave

On Saturday, Ms. Landau-Halpern is slated to speak at the Population Health and Policy Conference at the Scarborough campus. The event – sponsored by the University of Toronto International Health Program, a non-profit student organization, the anthropology/health studies department, and others – also features a naturopath who claims to treat cancer, heart disease and fibromyalgia with vitamin injections.

In an e-mailed response to an interview request, Ms. Landau-Halpern said she was unavailable to comment on Friday. She added: "I in no way consider myself to be an expert on what follows is a nuanced and individualized approach to vaccination."

Blackburn-Evans, director of media relations at U of T, said the university encourages faculty and students to engage in "controversial topics in their research and scholarship" and that the school is "committed to the principles and policies of academic freedom and freedom of speech." Conference organizers did not respond to a request for comment by late Friday.

Earlier this month, Queen's University in Kingston, Ont., was at the centre of controversy after students complained a health instructor included anti-vaccine information in course material. The instructor is on leave and will no longer teach the course.

Across Canada, more academic institutions are offering alternative health courses. The problem is that alternatives to evidence-based medicine are not rooted in science, says Timothy Caulfield, Canada Research Chair in health law and policy at the University of Alberta's School of Public Health. He worries about the consequences of holding events such as U of T's alternative health conference. "It's problematic when a university, an institution, lends credibility to these kinds of presentations with its name and support," he said. "Having University of Toronto's name next to their names on these [promotional] posters legitimizes their position and can be used to legitimize their unscientific views."

Dr. Freedhoff said he understands the importance of freedom of expression, especially on a university campus, but adds, "there really has to be a line that gets drawn somewhere."

Editor's Note: An earlier version of this story incorrectly stated Yoni Freedhoff is a professor at the University of Toronto. Dr. Freedhoff is an assistant professor at the University of Ottawa. This version has been updated



Canadian Alliance to Support Immunization
Alliance Canadienne pour l'Immunisation

March 1, 2015

Meric Gertler, PhD, FRSC, FAcSS, MCIP
President
University of Toronto
27 King's College Circle,
Toronto, Ontario, M5S 1A1

Dear President Gertler,

Thank you very much for your long and distinguished service to the University of Toronto.

As you know, the University of Toronto is "committed to being an internationally significant research university, with undergraduate, graduate and professional programs of excellent quality." We are concerned about the quality of one of the University's undergraduate courses and respectfully request that you inquire into this matter.

We refer to the course titled, "Alternative Health: Practice and Theory, HLTD04H3-S, Special Topics in Health". We have examined only the syllabus, which, on its face, raises a number of concerns. A significant concern is its presentation of vaccine safety and efficacy; we draw your attention to Week 9 (the week after next), the reading for which is pasted below:

Week 9 March 12
Vaccination – the King of Controversy

38. Anthony B. Schryvers, Ph.D., M.D., Professor, Department of Microbiology, Immunology and Infectious Diseases, Faculty of Medicine
39. James R. Smiley, Professor, Dept. of Medical Microbiology & immunology, University of Alberta, Canada Research Chair in Molecular Virology
40. Marc Steben, M.D Medical advisor, Sexually Transmitted Disease Unit, Québec national public health institute
41. Dr. Robert Strang, Chief Medical Officer of Health, Department of Health and Wellness, Halifax, Nova Scotia
42. Jordan Tustin, HBSoc Biology, BASc Public Health, CPHI (C)- Certified Public Health Inspector (Canada), MHSoc Epidemiology, PhD candidate Epidemiology
43. Mary Vearncombe, MD, FRCPC, Medical Director, Infection Prevention and Control, Sunnybrook Health Sciences Centre, University of Toronto
44. Brian J Ward MSc, DTM&H, MDCM, Professor of Medicine & Microbiology, McGill University
45. Tania Watts, Ph.D. Professor and Sanofi Pasteur in Human Immunology, University of Toronto

Cc. Trevor Young, MD, PhD, FRCPC, FCAHS Dean, Faculty of Medicine and Vice Provost, Relations with Health Care Institutions University of Toronto;
ltrevor.young@utoronto.ca

Howard Hu M.D., M.P.H., Sc.D., Dean and Professor of Environmental Health, Epidemiology, and Global Health, Dalla Lana School of Public Health,
<dean.dlsph@utoronto.ca>

[Home](#) [News](#) [Opinion](#) [Business](#) [Investing](#) [Sports](#) [Life](#) [Arts](#) [Tech](#)[Health & Fitness](#)[Food & Wine](#)[Fashion & Beauty](#)[Parenting](#)[Relationships](#)[Health](#)[Fitness](#)[Ask a Health Expert](#)[Home](#) » [Life](#) » [Health & Fitness](#) » [Health](#)

U of T investigates instructor over anti-vaccine course materials

CARLY WEEKS

The Globe and Mail

Published Tuesday, Mar. 03 2015, 9:19 PM EST

Last updated Tuesday, Mar. 03 2015, 9:21 PM EST

67 comments



289



171



116



2



8+1

0

Print /
License

AA

The University of Toronto has launched an investigation to determine whether an instructor is presenting inaccurate, biased information about vaccines and other health-related issues to students.

The Canadian Alliance to Support Immunization, a coalition of doctors and public health experts, has urged the University of Toronto's health policy president Meric Gertler this week urging him to scrutinize the alternative health course taught by homeopath Beth Landau-Halpern, which includes a video interview with disgraced anti-vaccine researcher Andrew Wakefield as required viewing. And on Tuesday, Howard Hu and Trevor Young, the deans of U of T's Dalla Lana School of Public Health and its faculty of medicine, wrote an open letter stating that vaccine hesitancy and refusal is contributing to a rise in outbreaks of preventable diseases.

MORE RELATED TO THIS STORY

- University of Toronto instructor and speaker boosts 'alternative vaccines'
- Queen's anti-vaccine instructor will no longer teach Health 102

Overview of talk

1. Introduction
2. We protect what we value
3. Metaphors for public health
 1. Grandmother
 2. Valuable edifice
 3. A health promotion enterprise
4. Examples of defending public health
 1. Defending in-school vaccination
 2. Protecting vaccination from false claims
 3. **Defending fluoridation**
5. Conclusion

Defending Fluoridation

Dental decay:

- Infectious disease

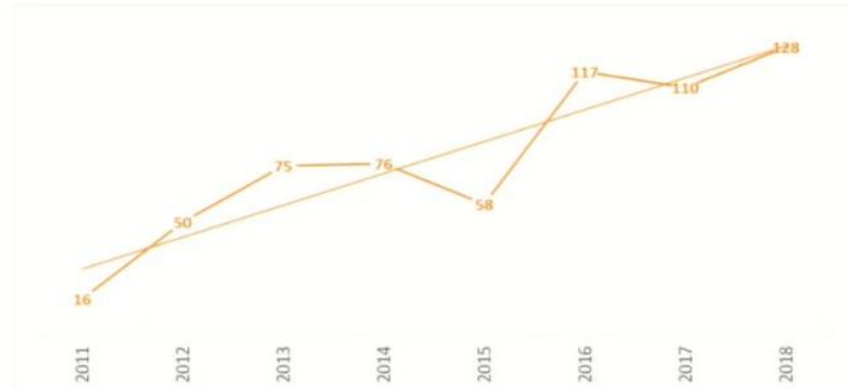
- Most common disease of childhood

Calgarians vote for fluoridation in two plebiscites, 1989 and 1998

10 Calgary city councilors voted to cease fluoridation against medical advice, Feb 2011

APTP Clinic Referrals for Dental Infections have increased EIGHT times

700% increase in dental infections needing IV antibiotics at ACH



Flouride removed from Calgary water




Strategy

- Started defending fluoridation in July 2017
- Amplify the voice of public health
- Quieten the voice of non-experts




DR. BOB DICKSON
SAFE WATER CALGARY

Calgarians for Kids' Health



FLUORIDATE FOR HEALTH!

Calgarians for Kids' Health





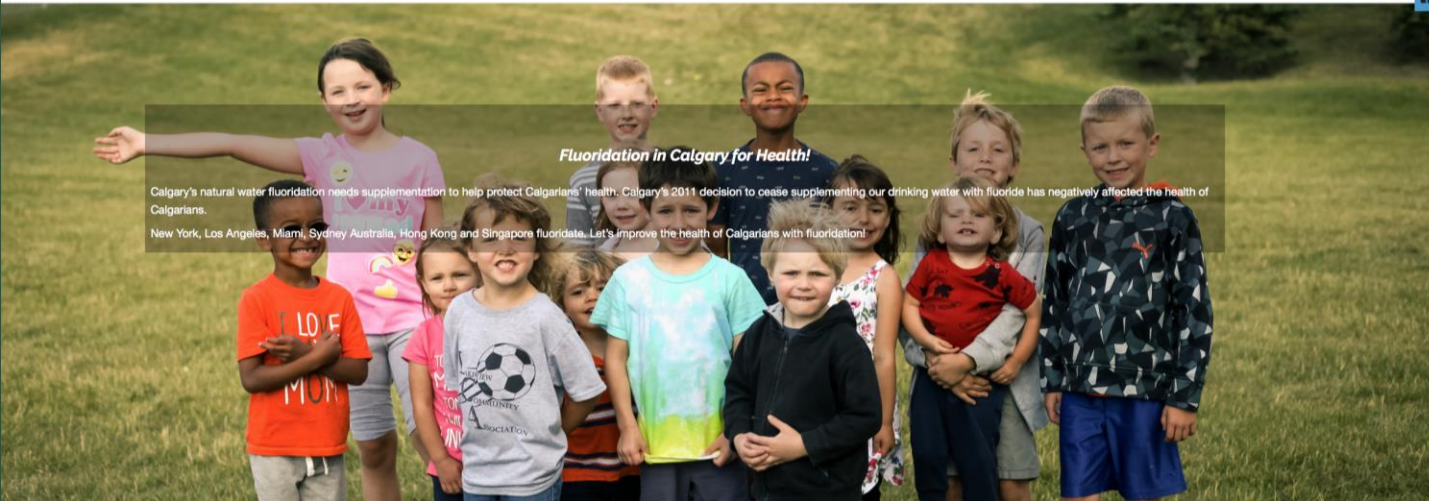
Calgarians for Kids' Health

INDEPENDENT, GRASSROOTS, CARING

HOME ABOUT US ENDORSEMENTS ▼ FLUORIDE FACTS ▼ NEWS COVERAGE ELECTION CANDIDATES' POSITIONS

CONTACT US [DONATE](#)





Fluoridation in Calgary for Health!

Calgary's natural water fluoridation needs supplementation to help protect Calgarians' health. Calgary's 2011 decision to cease supplementing our drinking water with fluoride has negatively affected the health of Calgarians.

New York, Los Angeles, Miami, Sydney Australia, Hong Kong and Singapore fluoridate. Let's improve the health of Calgarians with fluoridation!

Media advisory



MEDIA ADVISORY

September 22, 2017

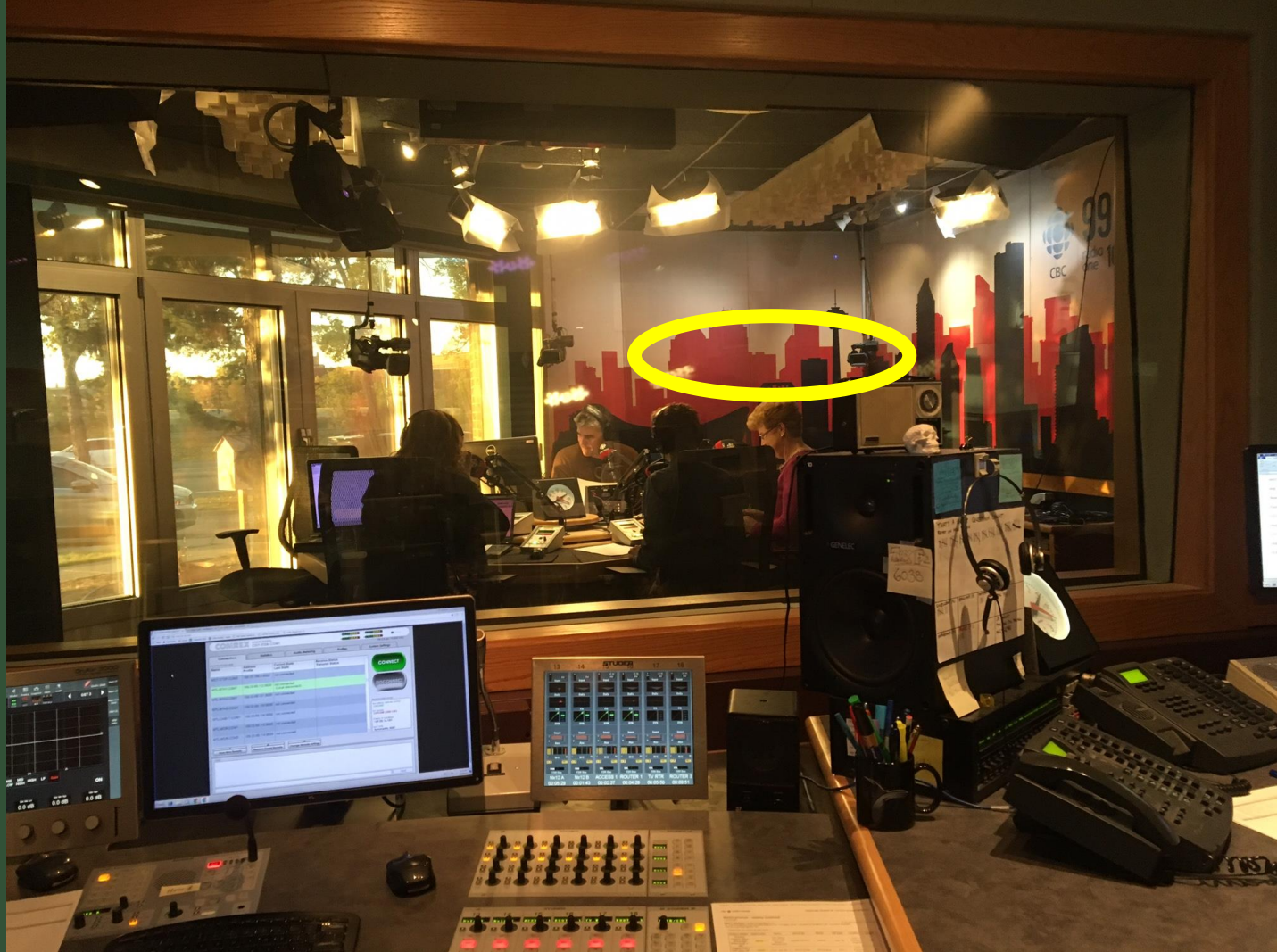
Calgary dentists, orthodontist, doctors, parents and grandparents call on City Council candidates to pledge to reinstate fluoridation

(Calgary, AB) Journalists are invited to a news conference **Monday, September 25 at 10 a.m. at the Parkdale Community Hall, 3512 - 5th Avenue N.W.**

A concerned citizens' group is urging Calgary mayoralty and City Council candidates to pledge to reinstate community water fluoridation to help protect children, seniors and other citizens against dental decay. Fluoridation was approved by plebiscite in 1989, instituted in 1991 and approved again in a 1998 plebiscite.

This group of dental and pediatric specialists, parents and grandparents is alarmed by the decreasing oral health of many Calgarians since our fluoridation programme was





















Citizen group wants water fluoridation to be election issue in Calgary

Calgarians For Kids Health wants voters to add fluoride to the city's water in 1988, or to remove it in 2011.

News Posted: Sep 25, 2017 2:23 PM MT | Last Updated: Sep 25, 2017 5:12 PM



Members of the group Calgarians For Kids Health speak to reporters on Monday. The group is hoping to make an election issue on the question of whether fluoride should be put back into the city's drinking supply. (Dave Will/CBC)

417 shares



Facebook



Twitter



Reddit

A Calgary citizens group is working to make putting fluoride back in the city's drinking water a civic election issue.

Members of Calgarians For Kids Health — which they say is made up of dental and pediatric specialists, along with everyday parents and grandparents — are asking candidates running in the Oct. 16 vote to pledge to re-introduce fluoride into the water supply should they be elected.

Stay Connected with CBC News



Mobile



Facebook Podcasts



Podcasts



Twitter



Alerts



Newsletter

ADVERTISEMENT

ONTARIO TOYOTA DEALERS

Real people. Great cars.

**HEAD IN BEFORE
THEY CLEAR OUT.**

Weather

Severe weather warnings or watches in effect for:

[Airdrie](#) [Bow Island](#) [Bow Valley \(Provincial Park\)](#) [Brooks](#) [Calgary Crowsnest](#) [Calgary \(Olympic Park\)](#) [Canmore](#) [Cardston](#) [Clareholm](#) [Cochrane](#) [Drumheller](#) [Esther](#) [High River](#) [Kananaskis \(Nakiska Ridgetop\)](#) [Lethbridge](#) [Medicine Hat](#) [Milk River](#) [Okotoks](#) [Onefour](#) [Pincher Creek](#) [Stavely](#) [Strathmore](#) [Suffield](#) [Sundre](#) [Taber](#) [Three](#)

Opinion: Children's teeth are paying the price for the cancellation of fluoridation in Calgary

CALGARY HERALD Updated: June 22, 2018



Three Calgary dental specialists say the condition of children's teeth has deteriorated since fluoridation of water stopped in 2011. *CALWP*



By June Dabbagh, Leigh Harfield, Wendy Street-Wadey and Juliet Guichon

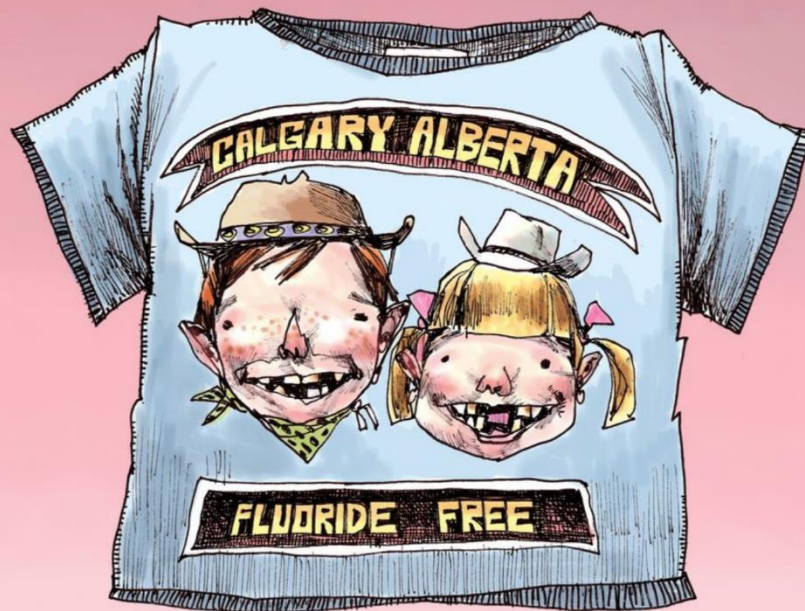


As the school year draws to an end, it is time to consider how Calgary has been treating its children lately. In one respect, the answer is not well at all.

Calgary city council decided in 2011 to cease adjusting the fluoride levels in Calgary

2018 SOUVENIR SUGGESTION...

LARTER ... CALGARY HERALD.



John Larter editorial cartoon /CALGARY

Calgary Herald, June 2018

The Tooth



About
Water Fluoridation

Ask The Experts:

Saturday, October 27th

Knox United Church 11 am to 1 pm

Doors open 10 am to 2 pm

Free Dental Screening For Kids

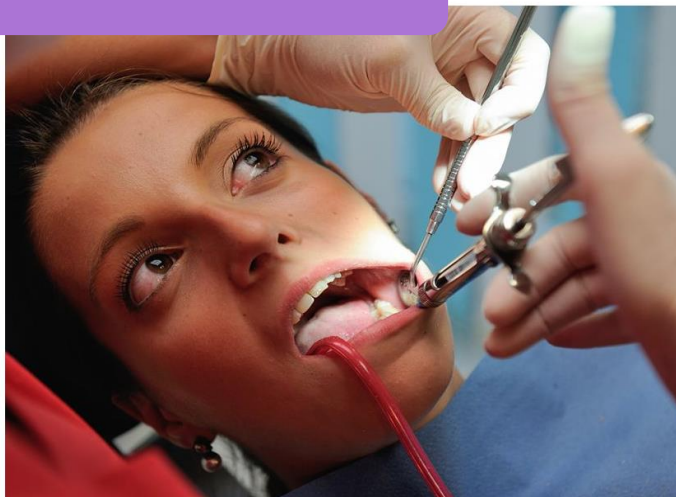
www.fluoridation.care



CALGARIANS FOR KIDS' HEALTH

Opinion: It was a mistake to drop fluoridation in Calgary, so bring it back

CALGARY HERALD Updated: January 22, 2019



Bring back fluoridation of Calgary's water as soon as possible, says a group of health professionals. *GETTY IMAGES*



SHARE



ADJUST

Calgary Coun. Jeromy Farkas was right to say fluoridation should be reinstated. But we don't need another plebiscite to know what Calgarians want. Two fluoridation plebiscites, in 1989 and 1998, established that Calgary wants fluoridation.

For 20 years (1991-2011), people now aged eight to 28, benefited from strong teeth, good oral health and no harm.



CBC

MENU ▾

news

Top Stories

Local

The National

Opinion

World

Canada

Calgary

Calgary city council to weigh fluoride study

Coun. Diane Colley-Urquhart will bring back motion defeated two years ago

Scott Dippel · CBC News · Posted Feb 23, 2019 10:10 AM MT Last Updated: February 24

If at first you don't succeed, Coun. Diane Colley-Urquhart says — try, try again.

In 2016, the veteran Calgary city councillor failed to convince her colleagues to take a look at the impacts of the city's decision to stop water fluoridation.

During Monday's council meeting, she will bring forward the exact same motion to see if her colleagues want to revisit the fluoride issue.

MEGHAN POTKINS, CALGARY HERALD Updated: February 26, 2019

DRIVING



Calgary City council is again considering fluoride in Calgary's tap water after studies show more cavities in Calgary children. *GAVIN YOUNG / POSTMEDIA*

City council voted decisively Monday to revisit the issue of fluoride in Calgary's drinking water, even as elected members acknowledged the risk of reopening a longstanding public debate that has attracted

JUST

Council voted 13-2 to review new evidence on the merits of fluoridation gathered by the University of Calgary's O'Brien Institute for Public Health in a report that will be presented at city hall in June.

PRINT

to reopen the topic of fluoridation — three years after a similar move was rejected in a 10-4 vote.

The veteran councillor said she expects that a future public hearing on the matter could last for "days" based on the intense public reaction she received to her [notice of motion](#) that prompted Monday's debate.

Held Dental Screening Event June 2019





[Show this thread](#)



Meghan Potkins  @mpotkins · Oct 29, 2019



Med student Emily Cooley shares a story about her recent anesthesiology rotation where she confronted child patients undergoing dental surgery due to complications from tooth decay. Says physicians rarely get political, but says there are "consequences" to denying fluoridation.



 4

 6

 9

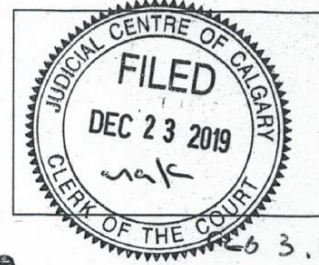


[Show this thread](#)



cpsa

COLLEGE OF PHYSICIANS
& SURGEONS OF ALBERTA



COURT FILE NUMBER

1901- 18479

COURT

COURT OF QUEEN'S BENCH OF
ALBERTA

JUDICIAL CENTRE

CALGARY

APPLICANT

DR. ROBERT C. DICKSON

RESPONDENTS

COLLEGE OF PHYSICIANS &
SURGEONS OF ALBERTA
(COMPLAINTS REVIEW
COMMITTEE)

DOCUMENT

AFFIDAVIT

ADDRESS FOR SERVICE AND
CONTACT INFORMATION OF
PARTY FILING THIS DOCUMENT

BENNETT JONES LLP
4500 Bankers Hall East
855 - 2nd Street SW
Calgary, AB T2P 4K7

Attention: Matthew J. Macdonald/Jaspreet K.
Singh
Telephone No.: (403) 298-3664
Fax No.: (403) 265-7219
Client File No.: 000052.09908

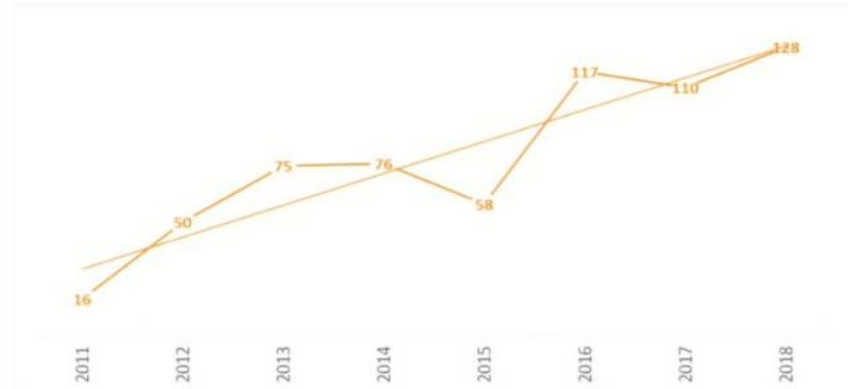
ENTERED DEC 25 2019

Investigation

15. I provided my written response to the College on October 8, 2019 in accordance with the requested deadline in their letter of September 10, 2019. Preparing my written response required a significant amount of time, effort, and emotional energy.
16. Mr. Macdonald has advised me, and I do verily believe, that the investigation may require me to undergo an interview, provide further written responses as requested by the College through the investigation, or both.
17. The prospect of being under investigation by the College is very distressing for me. Although I was unaware of the Complaint until it was dismissed, I was very relieved when the Complaints Director dismissed it in February 2019. The Complaint and associated process, including the preparation of an initial written response and the prospect of an interview or another written response, has caused me not only inconvenience, but also stress and mental harm.
18. Furthermore, I am particularly concerned that being under investigation by the College for my participation in the water fluoridation debate negatively affects the exercise of my freedom of expression and participation in the public policy debate on fluoridated water at a particularly critical time in the public policy debate. Recently, the issue of fluoridation of Calgary's water supply is at the forefront of Calgary's public policy issues, reaching the height of debate as key information is being assessed and decisions made. I recognize that

APTP Clinic Referrals for Dental Infections have increased EIGHT times

700% increase in dental infections needing IV antibiotics at ACH



Flouride removed from Calgary water



Battle continues

- Advocated continuously
- Matter has gone to city water engineering for cost estimate
- Will go to finance committee June 1
- Stay tuned ...

Overview of talk

1. Introduction
2. We protect what we value
3. Metaphors for public health
 1. Grandmother
 2. Valuable edifice
 3. A health promotion enterprise
4. Examples of defending public health
 1. Defending in-school vaccination
 2. Protecting vaccination from false claims
 3. Defending fluoridation
- 5. Conclusion**

**PREVENT
DISEASE**

Governments should fund not just offence but defence



Because government must expect that this can happen



An 82
after



Defenders must monitor and work against people moving toward the wrong goal



Not preventing
disease and death
(promoting disease
and death)



TORONTO STAR

WEATHER: HIGH -8 C | PARTLY SUNNY | MAP 512 THURSDAY, FEBRUARY 5, 2015

> STAR INVESTIGATION

A wonder drug's dark side

Hundreds of thousands of teen girls in Canada have safely taken **Gardasil**, a vaccine shown to prevent HPV. But a Star investigation has found that since 2008, at least **60 Canadians** experienced debilitating illnesses after inoculation. Patients and parents say the incidents point to the importance of **full disclosure** of risks

DAVID RUSHER AND JESSIE MCLEAN
Two women
Bryndis Marie Kelly, 21, a nursing student, received her third and final injection of the popular HPV vaccine Gardasil just last week. Kelly had spent the last 10 days in bed, struggling to get up. Kelly's mother, who had just moved from her back to her knees to her hips. After her first dose, Kelly's body felt numb and she had trouble walking. Kelly's mother, who had just moved from her back to her knees to her hips. After her first dose, Kelly's body felt numb and she had trouble walking. Kelly's mother, who had just moved from her back to her knees to her hips. After her first dose, Kelly's body felt numb and she had trouble walking.







Thank you



Questions?





“Edward Jenner performing the first Smallpox Vaccination”
Gaston Melingue oil on canvas, 1879