Research indicates autism rates falling

Wednesday, March 8, 2006
TJ GREANEY ~ Southeast Missourian

The study supports a theory that a vaccine preservative is linked to the disorder, but health officials say the database used is not reliable.

New research supports a long suspected link between the use of mercury in childhood vaccinations and autism.

An article to be published in the Friday issue of the Journal of American Physicians shows a drop of 22 percent in the occurrences of autism when mercury, an ingredient in the vaccine preservative thimerosal, was removed from childhood vaccinations.

The study, conducted by father and son research partners David and Dr. Mark Geier, analyzes data from a Centers for Disease Control nationwide database known as the vaccine adverse events reporting system, VAERS, and a California study from the state's Department of Developmental Services.

The California data showed rates at an all-time high of 800 new autism cases in 2003, but the state saw a drop of 22 percent by the beginning of 2006. Thimerosal was removed from most vaccines in 2001, although some say it remained on shelves through 2002. The study also noted that thimerosal is still routinely added to influenza vaccines administered to infants and tetanus shots given to older children and adults.

Autism is usually officially diagnosed when a child is about 4 or 5 years old.

Missouri reportedly saw an 850 percent increase in cases of autism between 1991 and 2003. During this same time period the number of recommended childhood vaccinations rose to as high as 22 before the age of 6. Recent Missouri numbers were not immediately available.

The CDC disputes the Geiers' findings, saying the VAERS data is warped. "This is not a relevant database to this or any other scientific analysis," said director of media relations Glen Nowak. "Whether you're doing research on colds or autism this database is useless."

Nowak cited the fact that VAERS is a self-reporting database meaning it accepts duplicate records of adverse affects from sources as disperate as pharmaceutical manufacturers, physicians, parents and lawyers.

Nowak called the the California figures "inconclusive."
The Geiers said they eliminated duplicate reports from the data used. They noted in their study a potential conflict of interest as Dr. Geier has testified on behalf of plaintiffs in civil court.

David Geier said the CDC only distances itself from VAERS when it is convenient to do so, calling the list of more than 200,000 adverse events "the best resource we have."

"When they say the database is no good, really what they're saying is they don't like the results," said Geier.

Geier said the CDC could easily eliminate the use of thimerosal but chooses not to do so to artificially inflate autism rates, protecting themselves from liability.

"They seem to consistently choose thimerosal over the alternatives so the only conclusions we're left with is that they don't want levels of autism to drop. If autism really falls dramatically, there's going to be serious repercussions because the CDC is on the line in saying not one child was ever damaged by thimerosal."

Geier said the CDC is currently involved in increasing the number of childhood influenza shots to a course of six before a child reaches the age of five. These influenza shots would accumulate to 100 micrograms of mercury in a child's system, a level Geier called extremely dangerous.

Nowak said the CDC's research, including a 2004 study by the Institute of Medicine, shows no evidence that vaccines containing thimerosal are any more dangerous than vaccines without it.

However, the CDC did not study groups of children who had possible genetic deficiencies that prevent their bodies from excreting heavy metals. Many in the anti-thimerosal camp believe only a portion of the population has such deficiencies and that the increase in the immunization schedule exposed that genetic flaw.

News editor Bob Miller contributed to this report.