

# General Safety Guidelines-Vaccinations

## Healing the New Childhood Epidemics Autism, ADHD, Asthma and Allergies

by Kenneth Bock

- 1 Administer vaccinations only to abundantly healthy children. Postpone the vaccinations if your child is ill, has a fever, was ill within the past week or two, or appears to possibly be coming down with an illness. Any condition that compromises immunity can lead to adverse reactions.
- 2 Be certain your child is not receiving one of the older varieties of vaccinations that contain thimerosal. This is now unlikely to occur, but it has happened. The best way to check on the contents of the vaccine is to look at the package insert that comes with the vaccine. Also, do not give your child a flu vaccination that contains thimerosal, as many do. The risks outweigh the benefits. Furthermore, if you should happen to be traveling or living abroad at the time of the vaccination, be especially vigilant about not receiving a vaccine containing thimerosal, because many vaccines with thimerosal were sold abroad after their use was discontinued in America.
- 3 If your child is old enough to take supplements, and has no history of reactions to supplements, give him or her vitamins C and A, zinc and transfer factor. Start the supplements one to two weeks before the vaccination. Also give them on the day of the vaccination and for two weeks after. At a minimum, give them the day after. Dosage should be appropriate to age, size, and other indications. Be especially sure not to give an excess of vitamin A. Vitamin A should preferably be given as cod liver oil.
- 4 Try to have all vaccinations administered one at a time, in single-dose vials. This will reduce the risk of overwhelming the immune system.
- 5 After the immunization is given, monitor your child carefully for adverse reactions, such as symptoms of a minor illness. If these symptoms occur, contact your doctor immediately, and be especially proactive about helping your child overcome the symptoms, with rest, extra fluids, a healthy diet, and moderate intake of supplements. The symptoms could be an indication that your child is responding unfavorably to the vaccination.
- 6 If your child appears to have an adverse reaction to a vaccination, be very cautious about administering further vaccinations. It may be wise to postpone the vaccination until your child is older, and has a more developed immune system.
- 7 If your child is experiencing a notable allergic response at the time of the vaccination, such as seasonal allergy, postpone the vaccination until allergic symptoms have cleared.
- 8 Do not agree to administration of the hepatitis-B shot on your child's day of birth, or shortly thereafter. This vaccination is appropriate on the day of birth only when the mother is hepatitis-B-positive.
- 9 Do not have your child vaccinated with vaccines that contain substances that you suspect your child may be allergic to, such as yeast in the hepatitis-B vaccination.
- 10 If possible, breast feed your infant, to confer added immunity.
- 11 Make sure your child's diet is healthy and rich in nutrients before, during, and after all vaccinations.

## Proposed Schedule of Vaccinations

### Hepatitis-B

- **First dose:** shortly before starting day care. If your child does not attend day care, postpone the vaccination until the year before kindergarten.
- **Second dose:** one to two months after the first dose.
- **Third dose:** four to six months after the second.

## Proposed Schedule of Vaccinations (continued)

### **HIB (Haemophilus influenzae; IPV (Polio); DTaP (Diphtheria, tetanus, pertussis)**

**HIB:** first dose at four months old.

**IPV:** first dose at four months old.

**DTaP:** first dose at five months old.

**HIB:** second dose at six months.

**IPV:** second dose at six months.

**DTaP:** second dose at seven months.

**HIB:** third dose at eight months.

**DTaP:** third dose at nine months.

**HIB:** fourth dose at seventeen months.

**IPV:** third dose at seventeen months.

**DTaP:** fourth dose at eighteen months.

**DTaP:** booster at four to five years old.

**IPV:** booster at four to five years old.

### **Pneumococcal**

One dose, at two years old.

### **Varicella (chicken Pox)**

One dose, at four to five years old, if mandated by law, and if your child does not show evidence of immunity to chicken pox on a blood test.

### **MMR (measles, mumps, rubella)**

Vaccinations should be given separately, rather than in one combined injection.

**Measles:** at fifteen months old.

**Rubella:** six to twelve months after measles.

**Mumps:** six to twelve months after rubella.

**Boosters, given separately:** at age four to five. Check titers of measles, mumps, and rubella prior to receiving boosters, and if they show evidence of immunity, you do not need to receive a booster.