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Chapter 1 – Have You or Your Children Been Damaged by Vaccines?

I would imagine that everyone has heard the sound of a crying baby. It is usually a simple distress call, “I need a diaper change ... I am hungry ... I need to be burped ... I want to be cuddled and rocked for a while.”

There is another kind of cry that now comes from babies, which is quite different. You may not have heard such a cry or maybe if you have, you didn't recognize it. This kind of cry is an extremely high pitched scream. This cry is an ear piercing shrill shriek that sounds like the baby is having its bowels cut with knives or having its skin torn from its body.

This is not a normal cry for the usual forms of parental attention --- it is a plea for protection and deliverance from a sinister menace. This shriek is the sound of uncontrolled terror and pain.

The cause is commonly an adverse reaction to a vaccine. Once you have heard this kind of scream your heart will never be the same, because you realize that something is terribly wrong and you can't fix it by changing a diaper or giving milk.

This book is about vaccine damage and recovering from vaccine related illnesses. This first chapter will help you recognize the symptoms of vaccine damage in your children, in yourself, and in friends and family members. Subsequent chapters will discuss various options that can be used to heal the damage that vaccines and other toxins have caused.

Children are at the highest risk for vaccine damage, because they will typically be given 69 doses of vaccines by the time they are 18 years old.
Vaccine Reactions are NOT a Normal Part of Life

There are many signs of adverse reactions to vaccines, but unless you have learned to recognize them, it is easy to just overlook them or to assume that it’s just the way kids are today.

In fact this is one of the great myths propagated among parents of childbearing years. Doctors now give the label of “normal” to situations that were once considered to be extremely unusual or abnormal.

Believe it or not, babies used to be easy to manage with the exception perhaps of when they were sick. Blood curdling screams were very rare. Crying for hour after hour with no apparent cause, being listless, failing to grow and mature on schedule were unusual. Today when these kinds of symptoms happen, parents are just told that your son or daughter will grow out of it --- you don’t have to worry.

My heart breaks when I see a 4 year old child who didn’t “grow out of it.” I have observed many young children who are in the 3 to 5 year range who still can’t put words together to speak an intelligible sentence. Their articulation of words is so indistinct that no one, not even their mothers, can figure out what they are saying.

They are probably somewhere on the Autism spectrum, but they have not been diagnosed yet. The Autism spectrum prevalence rate used to be 1 out of 10,000 children. Today it is 1 out of 50 children. Attention deficit disorders (ADD), hyperactivity and specific learning disabilities are so prevalent that most parents just think such conditions are normal.

Conditions such as allergies, asthma, eczema, inability to digest food, and seizures were very unusual 50 years ago. These conditions and many others are not a normal part of child development. But we are being led to believe they are the “new normal.”

It hasn’t always been this way!
keep your teeth clean
Fifty years ago, public schools did not have pharmaceutical drug dispensaries, because children didn't need pharmaceutical drugs. There were cough medicines and antibiotics, but we took those when we were really sick -- literally too sick to go to school.

No one needed drugs like Ritalin, because we were able to sit and focus. Yes, there were a small number of children with low IQ, and they needed special education classes; but the rest of us didn’t need more than what a single teacher could provide in the regular classroom. We didn’t need pharmaceutical medications in order to learn.

It was an age where there were very few drugs targeted toward children; and there were a very small number of vaccines. It was an age where communicable childhood diseases were part of growing up. It was an age where our immune systems grew stronger every time we experienced a childhood disease.
Vaccine use has become a Way of Life for most Americans

Things have changed a lot since the 1960s. The standard of care in the United States now involves a very aggressive vaccination schedule during the first six years of life.

During the first year, the US Centers for Disease Control (CDC) recommends babies receive 19 doses of vaccines for 9 different diseases. The first vaccine (Hepatitis B) is to be given during the first 12 hours after birth. Most of the vaccines are given in groupings during the same visit to the doctor. This commonly happens at 2 months, 4 months, 6 months, and shortly after the child’s first birthday. [1]

A total of 39 doses of vaccines are to be given before age six. [2]
There is no debate that vaccines cause harm. In fact they cause so much harm that the pharmaceutical companies threatened to stop producing vaccines unless the United States government indemnified them against being sued for adverse reactions.

In 1986, the US government caved in to the threats of the pharmaceutical industry and passed the National Childhood Vaccine Injury Act. We now have a federal program – a vaccine court --- that reviews cases of potential vaccine damage and provides cash damages to people whose injuries fall into certain narrow categories of harm. The cash settlements that are made come from the US government, funded by a tax on each dose of vaccine. Vaccine manufacturers do not incur any liability, they don’t admit having caused harm, and they keep on inventing new vaccines without any concern about being financially responsible for the lives that are destroyed by their products. [3]
One of the biggest problems associated with vaccine use is the word “coincidence.” If for example, you were to take your 6 month old child to the typical pediatrician for a checkup, you would be told that it is time for certain vaccines. If you agree, then your child will receive several vaccines at the same time, which is the standard practice.

You would be devastated during your drive home if you saw your baby suddenly become very agitated, spike a fever, or suddenly have a seizure. If you turned your car around and immediately returned to the typical doctor’s office, the staff would probably tell you that the symptoms you are witnessing were unrelated to the vaccine that was just given. You would be told it was coincidence and you should just go home and it will pass. The words “coincidence” or “unrelated event” are the medical systems way of saying “let’s not talk about adverse reactions to vaccines, everything will be OK, just go home and it will pass.”

For thousands of children, the vaccine reactions do not pass. They don’t grow out of it. Their development is arrested and reversed. They lose the ability to speak complete sentences. Some lose all verbal communication. Some stop walking and need to be returned to diapers. Some have persistent seizures, repetitive behaviors, self-wounding behaviors, violent and angry outbursts, uncontrolled hyperactivity, inability to learn anything new, inability to eat or digest food, etc. Some suddenly die from respiratory failure. Some get progressively more and more damaged until they fall into a coma and then die. [4, 5] The list of adverse reactions is actually much longer as will be explained.
Some Doctors are willing to Say – “Wait a Minute!”

Despite the fact that the Centers for Disease Control and the pharmaceutical industry advocate for universal vaccination, there are a few doctors and researchers who are willing to say, “Wait a minute! These vaccines are dangerous!” Some are advocating for the use of fewer vaccines. Some advocate for safer vaccines, and some advocate for a different vaccination schedule. Some are so concerned about vaccine damage that they are calling for the elimination of all vaccines. [6, 7, 8, 9]

I will not be making the case to prove that vaccines can produce harm, because that has been well documented [10, 11] and the US government admits this fact.

My goal is to help people recognize adverse reactions to vaccines that are occurring in children and adults. If an adverse reaction does occur, it should be a serious warning to stop and evaluate the situation. It is possible for children or adults to experience a mild vaccine reaction, and then find that the next vaccination pushes them into a major disability or illness. This can happen because vaccine damage is cumulative. [12]
Early Vaccine Damage may not be Noticed

It is quite possible that children and adults can be having adverse reactions to vaccines without anyone recognizing the situation as being potentially life threatening. The result is that more and more vaccines are taken until there is a tipping point in their health where infants, children, teens, and adults become disabled or die.

Adverse responses to vaccination can damage the immune system, cause brain damage, cause paralysis, and contribute to the formation of numerous other modern chronic diseases. The vaccine injured community is composed of people, young and old, who are suffering from a spectrum of chronic illness and disabilities, including learning disabilities and developmental delays, attention deficit hyperactivity disorder (ADHD), autism, seizure disorders, mental retardation, diabetes, asthma, inflammatory bowel disease (IBD), rheumatoid arthritis, multiple sclerosis and other kinds of neuroimmune and autoimmune dysfunction. [13]

We are speaking about the lives of real people – not statistics. Adults continue to suffer from the damage they received from childhood vaccines. Newborn babies have died after getting seven vaccines in one day. Thousands of US soldiers became disabled after getting one or more anthrax vaccinations. People living in nursing homes can become crippled from flu vaccine or can die from pneumonia that started immediately after they received the flu vaccine. All this represents real suffering and real harm.
The Vaccine Business is a Fear Business

There are dozens of websites designed to tell us all the horrible things that will happen to us if we don't take every vaccine available. The reason for taking each vaccine is carefully explained. We are kindly told the reason we need each vaccine is that the disease has horrible symptoms and can cause death.

What we are not told is that taking the vaccine can cause horrible symptoms and can cause death, sometimes more frequently than the disease. In some cases the horrible symptoms that people experience after taking vaccines are the symptoms of the disease itself, because they actually develop the disease they were supposedly immunized against.

For other people, the various components of the vaccine such as adjuvants, preservatives, and emulsifiers can do even greater harm than the bacteria or viruses that are in the vaccines.

We are also subjected to pressure from the medical system to be sure that we and our children take all vaccines. We are told that failure to do this will put the whole country into jeopardy. The only way we can all be safe is for everyone to take vaccines. Those who object are called stupid, selfish, reckless, and disrespectful. They say that no one has the right to endanger the safety of others by refusing to take vaccines. [14]
Recognizing Adverse Vaccine Reaction

I realize that many who read this have already discontinued taking vaccines, because you are convinced that the potential harm is much greater than the possible benefit. However, even if you haven’t had a vaccine in a long while, or you are still taking them, they could be part of what is causing some of your health problems today. The combination of previous vaccine exposure with current challenges to your immune system and nervous system can produce serious illness. If you can spot potential vaccine reactions in your family and in your friends, then you can give them a warning, which might just save their lives. So, let’s take a look at some steps that you might wish to take to monitor the health of your children, yourself, and your family and friends.

The National Vaccine Information Center Provides the following information to help us be aware of vaccine reactions. They state:

If you or your child experiences any of the symptoms listed below in the hours, days or weeks following vaccination, it should be reported to the Vaccine Adverse Event Reporting System (VAERS). Some vaccine reaction symptoms include:

- Pronounced swelling, redness, heat or hardness at the site of the injection;
- Body rash or hives;
- Shock/collapse;
- High pitched screaming or persistent crying for hours;
- Extreme sleepiness or long periods of unresponsiveness;
- Twitching or jerking of the body, arm, leg or head;
- Crossing of eyes;
- Weakness or paralysis of any part of the body;
- Loss of ability to roll over, sit up or stand up;
- Loss of eye contact or awareness or social withdrawal;
- Head banging or onset of repetitive movements (flapping, rubbing, rocking, spinning);
- High fever (over 103 F)
- Vision or hearing loss;
- Restlessness, hyperactivity or inability to concentrate;
- Sleep disturbances that change wake/sleep pattern;
- Joint pain or muscle weakness;
- Disabling fatigue;
- Loss of memory;
- Onset of chronic ear or respiratory infections;
- Violent or persistent diarrhea or chronic constipation;
- Breathing problems (asthma);
- Excessive bleeding (thrombocytopenia) or anemia.
There are other symptoms, which may indicate that you or your child has suffered a vaccine reaction. Not all symptoms that occur following vaccination are caused by the vaccine(s) recently received, but it cannot be automatically concluded that symptoms which do occur are NOT related to the vaccine. Therefore, it is important for your doctor to write down all serious health problems that occur after vaccination in the permanent medical record and to report ALL serious symptoms or dramatic change in physical, mental or emotional behavior that does occur following vaccination to the Vaccine Adverse Event Reporting System (VAERS). It is also important that re-vaccination does not continue until it has been determined that the serious health problem which developed after vaccination was not causally related to the vaccination(s). Continued vaccination in the presence of serious health deterioration could lead to further vaccine injury or death. [15]
What causes a Vaccine Reaction?

Vaccines are a complex combination of harmful substances that are designed to cause a stress reaction in the body. It is hoped that the reaction will cause modifications to the immune system, which will protect the person from becoming infected by a communicable disease. As a result, adverse reactions to vaccines can be caused by any of the components in a vaccine or by a combination of the components.

Some say that adverse reactions are caused by the bacteria or viruses (whether living or inactivated) that are in the vaccine. Some say that it is the mercury preservative (Thimerosal), which produces vaccine damage. Mercury is implicated in a wide number of neurological diseases, immune system suppression, and digestive system impairments.

Others say it is Polysorbate 80, which is used as an emulsifier and an excipient. Polysorbate 80 has been showed to cause infertility and cancer.

Some are convinced that damage is caused by aluminum, which is an adjuvant added to vaccines to stimulate the immune system’s response to the bacteria or virus in the vaccine. Aluminum is a poison that can cause bone, bone marrow, and brain degeneration. Aluminum reduces the negative electrical charge in the blood, which causes blood cells to clump up when they try to pass through the very tiny vessels of the capillary beds.

Formaldehyde (embalming fluid) is used in vaccines to kill live bacteria and viruses. It is a carcinogen. Finally, vaccines are known to contain mycoplasma, which are tiny infectious
agents that can invade cells and damage mitochondrial activity. All these factors can cause reactions and produce severe and disabling illness and even death.

Now let’s add to this a whole host of other environmental and health related factors, which weaken our health and suppress our immune systems and endocrine systems. For example, pesticide exposure in air, water, and food, genetically modified materials found in GMO food, all manner of food additives such as synthetic coloring, artificial flavors, excitotoxins, and preservatives can place the human body under great stress and make a vaccine reaction more likely. To this list, we can add various residues found in our water supply from pharmaceutical drugs, aluminum residue from water treatment, chlorine, fluoride, and numerous other chemical toxins.

Let’s also consider our general health. Some of us have histories of illness, immune system suppression, cancer, diabetes, or heart disease. Some people take pharmaceutical drugs with various black box health warnings.

When all of the factors that I have listed are combined, the result is that some people will have serious and life threatening reactions when they are exposed to vaccines.

*We don’t know who will have a reaction or how severe it will be.* We also don’t know when the reaction will occur. One person may not experience noticeable problems with vaccines, while his next door neighbor may become paralyzed with Guillain-Barré syndrome after taking the same vaccine.
What are Some of the Earliest Warning Signs of Vaccine Damage?

There are a set of early warning signs that continue to go unnoticed, because they don’t cause dysfunction or pain. These were identified by Dr. Andrew Moulden MD, PhD in the first decade of the twenty-first century.

Before I discuss these warning signs, I want to mention Dr. Moulden’s training. His PhD was in Clinical-Experimental Neuropsychology. His clinical work was devoted to detecting acquired brain injuries. After his PhD, he pursued a Medical degree to further understand brain and behavioral disorders from a medical frame of reference. His training during medical school was in Clinical Neurology. His medical residency training was in Psychiatry/Neuropsychiatry. He devoted himself to studying neurobehavioral changes associated with immune system hyperstimulation, neurodevelopmental disorders, and
ultimately to the explanation of how vaccinations can be the common environmental trigger for several brain and behavioral disorders. Dr. Moulden died in November of 2013. [16]

Dr. Moulden observed certain clinical indicators of stroke in children and adults after they received vaccines. Infants who once had perfectly symmetrical facial features suddenly developed asymmetric features, which were the same types of changes that appear when an adult has a stroke. A stroke is caused by impaired blood flow to a part of the brain, which deprives cells of oxygen and causes cells to die.

Dr. Moulden observed that the normal alignment of the eyes would change after vaccination. Suddenly, one of the eyes would turn slightly inward or sometimes outward when compared to the other eye. He saw that one corner of the mouth would droop downward when the person smiled. He saw that there would be a loss of muscle tone in the area of one of the cheeks where it is nearest the nose and the upper lip.

Sometimes these changes were temporary and sometimes they were permanent. Because of his training in brain physiology and acquired brain injury, he knew that these visual signs were signs of mini-strokes, which were associated with damage to specific cranial nerves in the brain. These nerves control the muscles of the face. People may not have been aware of having a mini-stroke, because the brain does not have a pain response to impaired blood flow, nevertheless their brains were being damaged.

There are several causes for strokes, which include blood clots, vascular thrombosis, vascular swelling, and the sludging of blood in the capillary beds of the brain. Strokes from blood clots and thrombosis, when they occur in larger blood vessels can be found through imaging technology. However, the last cause of these mini-strokes, blood sludging, occurs in the smallest blood vessels in the body, which are too small to be viewed by current imaging technology.

When blood sludges, it is unable to flow smoothly through the capillaries. Basically the blood flow stops and the cells in the affected area will begin to die due to lack of oxygen. This happens in areas known as capillary beds, which are the smallest vessels in the vascular system. They are so small that red blood cells have to squeeze through the vessels single file.

There are 12 cranial nerves in the brain. Dr. Moulden found that if the sludging occurs in the area of the seventh cranial nerve in the brain, then that nerve will weaken and there will be a drop in the corner of the mouth when a person smiles. If the sludging is in the area of the third, fourth, or sixth cranial nerve, then the alignment of the eyes will be affected. In some cases one eye will focus in a slight upward direction, which causes a person to tilt the head slightly to bring about a level focus to his vision.
There can also be slight asymmetric movement of the eyelids when a person blinks. The changes in the eyelids can only be seen with ultra-slow video playback. The eyelids normally close and open in perfect harmony. Sometimes when there is a mini-stroke, the eyelids will open and close at slightly different rates. This cannot be seen with the naked eye, because eye blinks are so rapid.

If the impaired blood flow occurs in the region of the brain that controls respiration, then breathing can be impaired, and in some cases can be completely stopped. If this happens, then sudden death from respiratory arrest will occur.

The technical name for these mini-strokes is a transient ischemic attack (TIA). A TIA can actually occur anywhere in the body where the very small capillary blood vessels are located. However, when they occur in the brain, then the evidence of the stroke can be seen in the composition of the face.

I will quote Dr. Moulden as he explained the situation we are facing with vaccine damage. The following remarks were given in a 2009 interview. He stated:

Science is only a manmade truth-seeking tool. It is fallible. It is a statistical, probabilistic mathematical model. It has limitations. Wielded for profit – truth can become lost.

Scientific methods, design, and analyses can just as soon hide the truth as they can discover truth, or create “truth.”...

Science cannot replace God-given tools of common sense and observation we all have. You do not need statistical probabilistic mathematical models, wielded by experts, to deny what you can see with your very own eyes.

If you place your hand on a hot stove element, you will be burned. If you do not experience pain and you cannot see the burn, then you will not learn that touching hot stove elements is harmful.

All vaccines have been causing “burns” to body and brain. The brain has no pain receptors. You will not feel any pain. You can, however, see the footprints of these “burns” immediate and delayed, from each vaccination. The evidence was before our eyes all along. We simply did not appreciate what these “burns” meant let alone that they were emerging after each vaccination. The “burns” are largely to internal organ systems. We can ALL now see the damaging effects of these “burns” with our own eyes.

As a physician, it is my sworn duty to cause no harm. As a human being, it is my duty to watch over my fellow beings. As an educator, it is my responsibility to teach awareness and understanding. As a scientist, it is my duty to separate cause from coincidence. As
a Christian, it is my value to do unto others, as I would have others do unto myself. As a 
man, it is my responsibility to stand up to power, with truth and understanding, when 
those that wield power are in error.

My statements are not the words of a zealot. These are the words of integrity, couched 
with understanding, that has the potential to reside in every one of you.

Seek, and you shall find. Knock and the door shall be opened unto you. I have sought. I 
have knocked. The door has been opened. I have found the truths I was seeking. The 
answers have not come from my own understandings. The answers are simply self-
evident (res ipsa loquitur) the thing speaks for itself.

All vaccinations cause brain damage, disease, chronic illness, aging, and death (res 
veritas loquitur) the truth speaks for itself. If you do not seek, if you do not knock, if you 
do not look, if you trust your own understandings, then (caveat emptor) – buyer beware. [17]
Spotting Early Warning Signs of Vaccine Damage

If you begin to closely examine the faces of children and adults as you go through your daily life, you will begin to see the exact signs that Dr. Moulden described. You don't need to say anything to anyone, just take a close look at the corners of the mouth, the alignment of the eyes, and the cheeks. You will begin to see the types of asymmetric characteristics that Dr. Moulden described.

For members of your family, you may wish to compare their current appearance with photographs that were taken before they received vaccines. When you see what Dr. Moulden described, you are most likely seeing the results of vaccine damage.

Sometimes this type of damage can be caused by other factors such as infectious diseases which can also cause a TIA in part of the brain. Sometimes exposure to toxic environmental contamination can produce TIAs. The truth is that the chemical soup that is in our air, our water, and in our food is all contributing to the destruction of our health. When we add in vaccines, then many people are pushed into serious degenerative diseases.

Young people are most at risk, because they are typically receiving such high numbers of vaccine doses. But, even with senior adults, the damage is evident. Dementia is at epidemic levels, yet very few are asking why we are seeing this change. It is not aging that causes dementia.
Preventing Damage to the Brain and Other Organs

The best way to prevent brain damage from vaccines is to avoid taking vaccines. When this strategy is combined with drinking clean water, breathing clean air, and eating whole food that is not contaminated with pesticides and genetically modified residue, then we are reducing our risks for modern diseases.
Healing From Vaccine Damage

Dr. Moulden and many other researchers have been working for many years to bring healing to those who have been injured by vaccines and toxic exposure to environmental agents. Dr. Moulden was convinced that vaccine damage to the brain could be healed, because even though there has been damage to certain brain structures, the brain has the ability to establish new neurological connections in various ways.

Future articles will examine some of the treatments that are being used to help people with vaccine damage. There is hope and all is not lost when a child or adult experiences vaccine related damage. The road back to health may be long and difficult, but for many people there will be opportunities for restoration of health.
I will close this chapter with a few final remarks from Dr. Moulden. He stated:

We [doctors] are selling you vaccines, for profit, which are causing illnesses and death. We then sell you symptom based pharmaceutical products, for profit, to treat the damages and disorders we have caused.

Remarkably, I can now say that the vaccine damages extend to the realm of cancers in addition to varied autoimmune and neurodevelopmental disorders.

All vaccinations are causing “silent” brain and organ damage in exactly the same way that wild polio virus caused paralysis and respiratory failure and how other infectious “plagues” of days gone by, have crippled, maimed, paralyzed, and killed. This is now proven. The damages are additive and summative with each vaccination given. The organ, tissue, and brain damages have been clinically silent – until now.

God heals, and the doctor collects the fee. We have reached a time in history that we must return to paying fees to the master physician. The medical sciences, [with] their dogma and discourse, have clearly led us a stray. [18]

You may wish to watch the 6 hour video presentation prepared by Dr. Moulden to learn more about the causes and symptoms of vaccine damage. It is available on YouTube in three volumes.

Tolerance Lost
Chapter 2 – Dr. Andrew Moulden: Every Vaccine Produces Harm

Moulden – A Search for Life and Truth

Canadian physician Dr. Andrew Moulden provided clear scientific evidence to prove that every dose of vaccine given to a child or an adult produces harm. The truth that he uncovered was rejected by the conventional medical system and the pharmaceutical industry. Nevertheless, his warning and his message to America remains as a solid legacy of the man who stood up against the pharmaceutical industry and their program to vaccinate every person on the Earth.

Dr Moulden died unexpectedly in November of 2013 at age 49.

Because of the strong opposition from the medical/pharmaceutical industry concerning Dr. Moulden's research, I became concerned that the name of this brilliant researcher and his life’s work had nearly been deleted from the internet. His reputation was being disparaged, and his message of warning and hope was being distorted and buried without a tombstone.

I prepared a series of articles as a tribute to a great physician and as a memorial to a courageous individual who was not afraid to speak the truth about medical corruption and a flawed healthcare system that does more to harm health than it does to cure disease.

This is the first in a series of four articles about Dr. Moulden -- the man, the physician, and the powerful advocate for ending all vaccine use. In future articles, I will summarize his detailed scientific evidence, which shows how vaccine damage occurs. I will explain the common mechanisms behind vaccine damage and how vaccines harm the health of everyone who receives them regardless of whether or not they notice any adverse reactions at the time they take the shots.

Dr. Moulden stated:

What we have done to each other [with vaccines] has produced the most profound damage to humankind by humankind in the history of humanity. And the reason why we got here is partly because of:

1. Our arrogance in thinking that we know everything. In physiology and medicine we do not know everything!
2. [Our greed] to advance our own self-interest to make money, to sell products and to advance corporate alliances. Commercialization has overtaken the fundamental human value of “do unto others as you would have others do unto
“you.” When society turns toward this human value, then we would all be working together for the greater good of each other. [However, other values have become more important] I don't care whose feet I step on or how I get there as long as my American dream is realized. I don't care who has to pay for it on the way of getting there. [1]
Dr. Moulden’s Credibility

Was Dr. Moulden a crackpot as some sources claim, or was he a brilliant physician and researcher? This series of articles will set the record straight, and summarize the contribution that his work has made to medical knowledge.

When I evaluate the credibility of people who are unknown to me, I begin by seeking answers to a few basic questions. For example: Is this person offering opinion, or can he or she back up the claims with valid science? Does he have educational credentials? Are there other physicians and scientists who support his or her beliefs and recommendations? Is this person controlled by the pharmaceutical industry, allopathic medical associations, or the US FDA (US Food and Drug Administration)? And finally, what do Quackwatch and their friends have to say about the person?

Dr. Moulden had a PhD in Clinical Psychology and Neuropsychology. He had a master’s degree in child development, and was also a medical doctor. [2] His work was respected by other researchers who don’t march to the drumbeat of the pharmaceutical companies. Dr. Moulden was a threat to the pharmaceutical industry, and their Quackwatch family of 21 related websites treated him as an enemy. [3, 4]
Dr. Moulden resigned from his medical practice in 2007 to travel throughout North America delivering the message that every dose of any and all vaccine types causes harm to those who receive it. He stated:

As many know, I officially quit my medical career in 2007. I did this in order to travel around North America to do research into vaccine safety and to present my research on vaccine safety across Canada and the United States. I only spoke the truth. I was not well received. [5]

During those years, he showed that many cases of Shaken Baby Syndrome were actually vaccine-related damage. His testimony freed many parents from false accusations that they had abused their infants.
In 2010 Dr. Moulden disappeared from public view. He stated:

In 2010-11 I returned to my PhD training to complete a full year accredited Clinical Neuropsychology internship at the Baycrest Center for Geriatric Care in Toronto. During this time I also taught a University course on Health Medicine at York University in Toronto. I stopped talking about my research and vaccines. The Public Health Department advocated that I NOT be allowed to return to clinical medicine as they were incensed by the message (truth) of my lectures and teaching prior to ‘disappearing.’ The only way I was allowed to return to organized medicine to work with medical patients was if I signed a contract drawn up by the public health department which states: 1) I am mentally ill and therefore my research and teachings on vaccine safety were delusional. 2) I am not allowed, whatsoever, to speak or present my research or views on vaccine safety, in public, at all, as a condition of being allowed to return to clinical medicine, receiving a medical license, and for maintaining that license. [6]

Even before Dr. Moulden retreated from public view, a group of professional character assassins went to work to destroy his reputation in any way possible. They published lies and deceptions on the internet and did everything possible to bring him down. After he retreated, his websites were hacked and access to his teachings was largely destroyed. Yes, there were even death threats.
The death of Andrew Moulden is shrouded in mystery. Some sources say he had a heart attack and others say he committed suicide.

A colleague of Dr. Moulden who wishes to remain anonymous reported to Health Impact News that he/she had contact with him two weeks before he died in 2013. Dr. Moulden told our source and a small number of trusted colleagues in October of 2013 that he was about to break his silence and would be releasing new information that would be a major challenge to the vaccine business of the pharmaceutical industry. He was ready to come back. Even though he had been silent, he had never stopped his research.

Then, two weeks later, Dr. Moulden suddenly died.

Dr. Moulden was about to release a body of research and treatments, which could have destroyed the vaccine model of disease management, destroyed a major source of funding for the pharmaceutical industry, and also seriously damaged the foundation of the germ theory of disease.
In another case of vaccine damage cover-up, Dr. Garth Nicolson received death threats. He was part of a research team that became aware of biological warfare testing that was done on prisoners in Texas. The biological warfare agents later showed up in vaccines that were given to US service personnel during the Persian Gulf Wars. The result was thousands of cases of Gulf War Syndrome and vaccine-related deaths.

Professor Emeritus Garth L. Nicolson, PhD, is the President, Chief Scientific Officer and Research Professor of Molecular Pathology at the Institute for Molecular Medicine in Huntington Beach, California, and has taught in medical schools in the US and Australia. He is one of the most often cited scientists in America today.

Dr. Nicolson explained what happened to him when he and others learned about the Texas prison experiments and the vaccine damage that occurred among US troops in the Gulf War. He stated:

We were actually forced to leave Texas. I was an endowed full professor and department chair at the University of Texas and I literally had to leave Texas because it became too dangerous. Several of my colleagues died. My boss was shot in the back of the head in his office, because he was going to blow the whistle on the prison testing experiments. So, it became very dangerous. [7]
Preserving Dr. Moulden’s Legacy

The powers who wish to suppress the work of Dr. Moulden have done a very good job of erasing most all of the information that was once available on the internet. Before it all disappears, I would like to take the time to summarize some of his teachings.

In this article, and in those that follow, I will condense the key points from the 6 hour video series called “Tolerance Lost.” At the moment, this is still available on YouTube.com. The information was given in three videos, which are presented on YouTube in 51 segments.

If you want to hear Dr. Moulden explain his findings, then I highly recommend spending the time watching his videos. The images of vascular and brain physiology are very instructive as are the numerous photos of children, Gulf War veterans, and other adults who display visible signs of vaccine damage.

Listen to Dr. Moulden in his own words give evidence to the mechanisms that cause vaccine damage in “Tolerance Lost.” See the evidence of vaccine damage in the faces of children. Link here.

Listen to a presentation from Dr. Moulden that summarizes key principles of his Research. Link here.

I have also used various other resources for preparing this summary. There are a few transcripts of interviews given by Dr. Moulden and three chapters from an unfinished book [8] that are still available on the internet. Text was collected and summarized from all of these sources.

In some cases I needed to do additional research to fill in the details that were not fully explained by Dr. Moulden in these resources. My independent research also confirmed the facts of blood physiology and neurological functioning that Dr. Moulden described.
How the Germ Theory of Disease Produced the Vaccine Era

Most people, myself included, were taught that every disease has a single cause. Thus, if we want to prevent that disease, then all we need to do is eradicate the cause of the disease. Once we do this, then the disease will disappear from the face of the Earth.

According to this theory, if there is a disease, then there must be a single cause, which could be a bacteria, virus, parasite, or some type of environmental exposure. We might not understand the process of how a microbe could cause illness or death; we only need to be reasonably confident that the microbe is associated with the disease. In other words, germs cause disease and we can stop the spread of infectious diseases through the use of vaccines, which are supposed to give the body immunity against experiencing disease. In theory, vaccines create a situation in the human body where exposure to a disease causing pathogen no longer triggers the disease.

The vaccine era that started in earnest in the middle of the 1800s was a direct outgrowth of the belief in the germ theory of disease. The vaccine movement took a giant leap forward in the late 1950s after the so-called polio epidemic supposedly threatened the lives of thousands. The high visibility of the epidemic in the media produced great fear, which made Americans eager to take the polio shot and eat the vaccine-laced sugar cubes as soon as they became available.

We were told that we should be proud of the dedicated researchers and their American ingenuity which led to the creation of the first polio vaccine in the 1950s. Whether or not the polio vaccine was effective and whether it actually caused more deaths than would have been caused by the wild polio virus is still hotly argued. But one thing is clear, the marketing of that vaccine caused Americans to become believers in the supposed health preserving power of vaccines.

Dr. Moulden Rejected the Theory that Modern Diseases are Caused by a Single Agent
Dr. Moulden challenged the single cause germ theory of disease. He, along with a select group of other physicians and scientists, recognize that we can no longer think in terms of a single germ causing a single disease. The modern epidemic of syndromes and diseases that began to afflict us in the last half of the twentieth century, and continues to afflict us today, are the product of multiple causes that work together to bring about disability, disease, and death. The multiple causes produce multiple illnesses and syndromes.

Many, in fact most all, physicians and scientists still cling to the single cause single disease way of thinking. The pharmaceutical industry develops its drugs in the same way. Every problem, every illness, every disease can be treated by a specific substance of their creation. Of course their treatments rarely cure disease, they just treat symptoms. When the symptoms disappear, then the problem is resolved as far as they are concerned.

Dr. Moulden rejected this way of thinking, because he knew that it was failing to cure people from what ailed them. It was based on flawed and ineffective medical science. He chose not to stay within the confines of mainstream medical thinking, but insisted on getting out of the box and looking deeper than most anyone else was willing to look. People who get out of the box are always criticized, attacked, and threatened by the established order, especially when a person clearly has more training and expertise than those who are doing the criticizing.

Dr. Moulden had a PhD and a medical degree. His education focused on brain functioning and psychological/behavioral responses to brain dysfunction. He could see what other people didn’t see, because few people had his background or his tenacity to look beyond conventional medical diagnosis and treatment. He pulled together different aspects of
science to create a comprehensive model of disease, which could explain numerous modern diseases.
Dr. Moulden Could not Ignore the Fact that Vaccines were the Greatest Threat to Human Health

Based on his training and clinical experience, Dr. Moulden could not ignore the fact that vaccines were the greatest threat to human health in the twentieth and twenty-first centuries. He could not ignore it, because it was literally staring him in the eyes as he looked at the faces of his patients. He could see the evidence of cranial nerve damage caused by vaccines when he observed the abnormal facial expressions and movements of the eyes of those who had been exposed to vaccines.

Dr. Moulden was convinced that the widespread use of large numbers of vaccines did not mark the beginning of a new age of disease-free living; rather they introduced a new era of universal sickness.

Vaccine Damage does not Produce just a Single Symptom

Vaccine damage does not produce just a single symptom; rather the reactions are many and varied. Additionally vaccine reactions can occur shortly after receiving the injection or they can occur years later. Often, the reactions only become noticeable after many doses of different vaccines have been given. The variability in reactions and the unpredictable time frame for reaction gives the pharmaceutical industry and the medical establishment that they control, the statistical confidence to assert that vaccines do not produce harm. If they don’t see a large number of adverse reactions of a single type within a specific short time period, then they conclude that harm was not produced.

The U.S. is #1 in Number of Vaccines Injected into Babies Prior to Age 1

We are told that vaccines are so safe, that a child could receive 10,000 vaccines and not have an adverse reaction, yet the pharmaceutical industry has never done twenty-year longitudinal studies to even measure what happens to children who receive 69 or more
doses of vaccine during the first 18 years of life. They have not done it and they will not do it, because they know that vaccine damage would be revealed. They also will never compare the health history of vaccinated children with unvaccinated children. It is estimated that one million children in the US have not received any vaccinations. So, it would be easy to compare vaccinated and unvaccinated children. But if this was done, the results would prove that vaccines do in fact cause illness, disability, and death.

Dr. Moulden was convinced beyond a shadow of a doubt that vaccines do cause harm. He saw the evidence of disability, lifelong suffering, and premature death. Those of us who are willing to think outside of the box that has been created by the pharmaceutical industry accept the fact that vaccine damage represents a broad spectrum of conditions and syndromes, which can be traced back to vaccine use and exposure to various environmental toxins.

**Damage from Vaccines and from Environmental Exposures**

Dr. Moulden understood that vaccines were a serious problem, but he also recognized that numerous environmental factors could also cause modern diseases.

The combination of vaccine use, pesticide exposure, chemicals in food, toxic chemicals in the water and air, to name a few, are all working together to destroy our health, damage our fertility, and decrease the world population. He also understood that poor nutrition increased the severity of vaccine reactions.
Primary Mechanisms in Vaccines that Cause Harm

Dr. Moulden identified two primary mechanisms that explain how vaccines and environmental toxins cause the numerous neurodevelopmental diseases that have spread through the United States, Canada, and other so-called developed countries. The two components are M.A.S.S. and zeta potential. These will be discussed in detail in the next articles. At this time I just want to introduce you to M.A.S.S. (Moulden Anoxia Spectrum Syndromes).

The damage to human health that occurs from vaccines and environmental toxins interferes with normal blood flow and triggers extreme immune system reactions. The result is oxygen deprivation at the microvascular (capillary) level. The capillaries are the smallest blood vessels in the body. It is estimated that the human body has 600,000 miles of capillaries. When blood flow is stopped and oxygen is no longer available to cells in certain highly sensitive areas, then cellular damage and normal body functioning will be damaged. When this happens in the brain and the digestive system, autism and other neurodevelopmental conditions can develop. Essentially, vaccines, certain environmental toxins, and poor nutrition can create conditions in which tiny strokes occur in microvascular regions of the body.

Let’s start by defining the words that are in the acronym M.A.S.S.
The letter M indicates that Dr. Moulden developed the principles that explain Anoxia Spectrum Syndromes.

Anoxia

Anoxia is a condition in which the supply of oxygen to a group of cells or to an organ is absent. Anoxia is the result of restricted blood flow. Blood clots, inflamed blood vessels, and coagulated blood can slow or stop blood flow to certain areas of the body. When the blood flow is very sluggish, the flow can easily be stopped altogether or may momentarily reverse its direction. In this situation, oxygen cannot be delivered to cells and they begin to die. Cells literally can suffocate to death without oxygen. This is a key process for understanding how vaccine damage occurs.

Syndrome

A syndrome is different from a disease, because it implies multiple causes and multiple symptoms. We tend to think of learning disabilities, autism, Alzheimer’s, irritable bowel disease, Crohn’s disease, colitis, food allergies, shaken baby syndrome, sudden infant death, idiopathic seizure disorders, Gulf War syndrome, Gardasil adverse reactions, schizophrenia, Tourette’s syndrome, chronic fatigue syndrome, fibromyalgia, expressive aphasia, impaired speech skills, attention deficit disorders, silent ischemic strokes, blood clots, idiopathic thrombocytopenia purpura, Parkinson's disease, and other modern neurodevelopment disorders as being individual diseases that must have individual causes. However, if we step out of the box of conventional germ theory, where every disease has one cause, then it is possible to begin seeing illness and the recovery from illness in a very different way. Doctor Moulden brought these modern conditions together under the term MASS, because he could see that there were common mechanisms at work in all of them.

Spectrum

Spectrum indicates that we are talking about a syndrome that ranges in severity or intensity. The symptoms of MASS can range from mild to severe. The disability from MASS can range from unnoticeable to death. The word spectrum also applies to syndromes across all age groups. The syndrome can involve babies in utero, infants, children, and adults of all ages.

Exposure to the triggers of MASS also follow a spectrum. In some people, a small trigger produces a significant set of disabling symptoms. With other people, high amounts of exposure may only cause minimal changes in a person’s health at that point in time. However, the exposure to the triggers of MASS are cumulative, and it is common to reach a point after repeated exposures to one or more illness triggers where minimal exposure produces severe symptoms of disease. In some situations a point will be reached where the next exposure may become life threatening and may lead to death.
Triggers for MASS Reaction

Image from YouTube.

The MASS reaction involves excessive immune system stimulation, causing immunological hypersensitivity.

This condition is most commonly triggered by the insertion of foreign substances into the body that were never intended to be put there. Vaccines with their viruses, bacteria, adjuvants, preservatives, and unintended residual biological contaminants introduce many foreign substances into the body. The entire package of ingredients in vaccines, whether intended or unintended, will trigger an immune response.

Vaccine manufacturers intend to produce an immune system response in order to achieve “immunity.” However, Dr. Moulden showed us that this immune system response has serious consequences, which threaten health and life itself. Technically, this reaction is called excessive non-specific immune hyperstimulation. This reaction produces definite harm in addition to whatever temporary small benefit (if any) that might be produced by the vaccine.

There are many triggers for the MASS reaction. In terms of vaccines, the triggers include biological agents such as living or dead bacteria and viruses or portions thereof. Vaccines also contain residue of the media that was used to culture the viruses or bacteria, for example, human fetal tissue, cells from monkey organs, mouse brains, and calves blood. They contain toxins such as latex, gluten, soy, peanut oil, MSG, formaldehyde, and various preservatives. Metals such as mercury (Thimerosal) and aluminum are particularly harmful. [9]
Regardless of the trigger, the response of the immune system is the same. However, the visible symptoms of the damage that results from hyperstimulation of the immune system will vary considerably from person to person. These reactions have been classified as different modern diseases even though the cause for all of them is related to immune system hyperstimulation.

This makes perfect sense when you consider that inorganic particles such as asbestos, prions (non-living proteins), heavy metals, and coal dust, for example, can all cause disease, cancer, disorders, and death. Yet none of these are germs. Clearly, it is something the body does in response to these foreign entities that is causing disease and not “germs and infectious diseases” in and of themselves.

MASS is a generic physiological response. It does not matter that the infectious disease agents in a vaccine have been weakened, killed, or attenuated before they are placed in a syringe and injected into the body. The key point is that something foreign to the body has been injected into it, and the body is reacting in such a way that modern diseases result. The cure and prevention of human disease is to be found in understanding the body’s generic MASS response to foreign materials that enter the body.

Dr. Moulden made it clear at numerous points that vaccines are not the only trigger for autism and other modern diseases. Vaccinations can be a direct cause of autism spectrum disorder in young children. However, vaccines given to mothers who are nursing their young children can lead to autism in their children as well. This means that a child does not need to be vaccinated to be damaged by vaccines.
Dr. Moulden was trying to draw together all of the groups that are working hard to find solutions for their specific illness of interest, so that they could work together to stop vaccine use. He understood that the autism group, the sudden infant death group, the shaken baby syndrome group, the Gardasil group, the Gulf War Syndrome group, the attention deficit disorder group, the gastrointestinal problem group, etc., all need to be working together, because all of these illnesses are on the same continuum of illness. The symptoms of the illnesses may be different, but the mechanism that causes all of these modern syndromes and diseases is the same.

Dr. Moulden stated:

You are all in the same continuum. You all need to be fighting and coming together and working together to change this system that is causing these damages to you. [10]
My Own Experiences with Modern Diseases

Over the years, I have examined numerous books and have read through many websites that discuss modern diseases. Some of these resources still cling to the germ model of disease. Thus, they are still looking for a single cause and a single treatment. I have personally had the experience of saying, “Oh, I have that problem and I have that symptom, so maybe I should try the recommended solution.” As a result, I have taken lots of supplements and have followed other recommendations to see if they would have any effect on my health. Most of the time there has been little benefit. However, I do believe that the recommendations did work for some people, so what was the problem with me?

Perhaps my symptom really didn’t match the single cause that was being targeted by the product recommendation. When we cling to the notion that each symptom has a single cause and a single solution, we waste a lot of time and a lot of money trying to fix ourselves and those we love.

I have also worked with other resources that assembled sets of symptoms for certain illnesses. When I have compared the list of symptoms that were identified for different modern diseases, the lists were very similar. How can so many modern diseases have very similar symptoms? When I started comparing lists of probable causes or triggers of modern illness, once again the lists for different modern illnesses began to look very similar. This was disconcerting. How could several different illnesses have similar symptoms and similar causes and yet be called different diseases?

Dr. Moulden explained what I was observing. He took the analysis of modern diseases and went the next step. He recognized that there are a comprehensive set of triggers for modern neurodevelopmental diseases, and that nearly all of these diseases are caused by the same triggers. Thus, he understood that multiple disease triggers can work together to cause various diseases and he was able to describe the process through which all of these diseases develop. The mechanisms of modern neurodevelopmental diseases are MASS and zeta.
These remarks were contained in a eulogy that Dr. Moulden wrote when his father died in 2003. The eulogy wove together events in his father’s life with his own struggles and
expressed his love and gratitude for the influence of his father on his life. Dr. Moulden stated:

As I continued to express and expound my concerns that the childhood vaccines were causally linked to autism and neurodevelopmental disorders, it came to a point that the regulatory powers in my professional life were convinced that there indeed was something wrong with me and that I must be in need of treatment to “get straight.” In essence, the College of Physicians and some of my colleagues, some of whom I have never met personally, to this day, asserted “Dr. Moulden is mentally unstable and in need of treatment” - he must be ‘MAD.’ I am -- I was -- I continue to be MAD. I AM DAM MAD, and I have scientific proof of cause and effect on vaccine induced autism at the 99.99th percentile level of statistical confidence. That makes me MAD, in temperament, not insanity.

Despite my unwavering belief in vaccine-induced brain damages (I could measure and see it), the College of Physicians and Surgeons own independent assessors could find nothing wrong with my mental faculties other than being 'stressed.' I was stressed. We are causing harm...nobody seems to care. Nobody wants to rock the boat. I just want the truth to be known so parents can make informed decisions and children and infants are no longer killed or harmed. Despite the College of Medicine's own independent psychiatric assessors (there have been several) finding that I was sane, the College was not satisfied with this and pushed for a diagnosis of some form of mental instability as only such a label would justify how I was not fitting into their dogmatic world of compartmentalized beliefs and preventative medicine panacea - one size fits all global vaccines.

Indeed, the College of Medicine went as far as stating, “Dr. Moulden must have pharmacological treatment for his delusional disorder in order for him to continue his medical practice and receive licensure.” My own lawyers took a strong stand on my behalf. In the end, it was easier to simply go along with the College and its “requests” rather than subject myself to time lost from career and training. I also learned to shut my mouth on issues of vaccination and autism. Although effectively silenced, it did not shut my curiosity, and I have continued to research my autism-vaccine model, “behind-the-scenes”, and fully intend to continue doing so provided the evidence suggests this is the right course... such is life, my father recognized this, I recognized this, and news worthy events, around-the-world, indicate, in many ways, the system is sicker than the individual.

I think I would rather change the system, to help the individual, rather than change the individual, to help myself. Ron [his father] agreed with this philosophy and in many ways lived by it.
I promised Dad that I would press on with my research until I found the absolute undeniable truth - whatever that would be before I die with the purpose of using our life histories as a backdrop for challenging science over faith, humanity over inhumanity, truth over deception, and unravel the mystery behind one of the causes of autism and schizophrenia. But dad knew what I was really up to, I was searching for proof of the existence of GOD - in medicine, by studying the brain - my secret, something hidden, from all, but my father, and our FATHER. If I ever shared this goal, I would have been deemed crazy, and all my real scientific work would be invalidated by association - another delusion I guess. [11]

Comment on this chapter at VaccineImpact.com
Chapter 3 – Dr. Andrew Moulden: Every Vaccine Produces Microvascular Damage

Dr. Andrew Moulden recognized that every dose of vaccine given to a person produced microvascular damage whether or not the person was aware of the damage or had debilitating symptoms at the time the vaccines were given. He courageously stepped out of the conventional box of medical diagnosis and treatment, and gave us a new way to look at modern neurodevelopmental illnesses and syndromes.

This ebook is intended to preserve the work of Dr. Moulden, who unexpectedly died in November of 2013. I want to acknowledge the contribution of this forward-thinking pioneer who worked to explain the truth about vaccine damage.

As a physician and PhD researcher, Moulden raised strong public objection to vaccine use, because he could literally see evidence of vaccine damage in the expressions of the human face. Each dose of a vaccine causes tiny strokes in the brain and in other organs of the body, which bring about a wide range of unexpected health conditions.

Dr. Moulden saw that the rapid rise in modern neurodevelopmental diseases such as autism, Alzheimer’s, and numerous other syndromes were actually caused by the same process. He saw the current epidemic of these modern diseases as having a single origin. The notion of single diseases with single causes had to be put aside, because that model could not adequately explain what we are facing in the world today.
How Vaccines and Toxins are Producing a Syndrome of Closely Related Illnesses

Dr. Moulden understood that vaccines and toxins (in the air, in our water, in our homes, and in our food) were producing a syndrome of closely related illnesses. He said that it was time to begin thinking in terms of multiple causes for a syndrome that had multiple sets of symptoms.

Multiple factors can work together to trigger a single type of reaction in the body, which can then produce various sets of symptoms. Even though there were different sets of symptoms and different disease names given to each one, they were actually all part of a spectrum of diseases that he called **Moulden Anoxia Spectrum Syndromes**.

Learning disabilities, autism, Alzheimer’s, irritable bowel disease, Crohn’s disease, colitis, food allergies, shaken baby syndrome, sudden infant death, idiopathic seizure disorders, Gulf War syndrome, Gardasil adverse reactions, schizophrenia, Tourette’s syndrome, chronic fatigue syndrome, fibromyalgia, expressive aphasia, impaired speech skills, attention deficit disorders, silent ischemic strokes, blood clots, idiopathic thrombocytopenia purpura, Parkinson's disease, and other modern neurodevelopmental disorders are closely related in many ways, and are part of a larger syndrome.
Opposition from Allopathic Medicine

If we step out of the box of conventional germ theory in which every disease has one cause, just as Dr. Moulden did, then it is possible to begin seeing this whole set of illnesses as a single syndrome. This also means that treating the underlying cause of the entire spectrum of illnesses that make up the syndrome can be thought of in a unified manner.

Dr. Moulden was looking deeply into the causes of modern syndromes and diseases. He was developing treatments that had the potential for curing modern illnesses such as autism, Alzheimer’s, learning disabilities, chronic fatigue, Gulf War Syndrome, etc.

His non-pharmaceutical cures were inexpensive. This provoked the pharmaceutical industry and the associations of allopathic physicians to react strongly against him and his research. He was seeing something important, and the dominant parts of the healthcare system did not want people to find out about it.
Zeta Potential and Colloidal Chemistry: Uncovering a Nearly Forgotten Science


Physicians no longer receive education about zeta potential and colloidal chemistry, yet it was doctors who were the main researchers in this field through the mid-1940s. This medical knowledge eventually fell through the cracks. However, with the help of Dr. Frank Hartman, Andrew Moulden was able to apply it to the understanding of vaccine damage.

In a statement made by Dr. Hartman in the Tolerance Lost video series, he explained that Zeta potential and colloidal chemistry are essential for understanding the activity of blood. Colloidal chemistry is a very well documented science, but there are very few people in this branch of science who are physicians or who are researching health.

Medical researchers could be using this science to look at the causes of illness and to find solutions that actually cure diseases. It opened the door for Dr. Moulden so that he could go beyond the use of pharmaceutical drugs for treating the symptoms of disease, and search for real cures.

This chapter will discuss Zeta potential and colloidal chemistry. These concepts will help us understand how vaccines cause damage and illness. In the previous chapter I provided
biographical information about Dr. Andrew Moulden, the man and his life. I discussed why
the germ theory of illness alone is not able to explain the epidemic of modern
neurodevelopmental illnesses that plague us today. I described the attack on Dr. Moulden's
credibility and how the medical system silenced him.
Zeta Potential and Vaccine Damage

Zeta Potential is the first of two key mechanisms, which Dr. Moulden used to describe the process that results in vaccine damage. The next chapter will describe the second mechanism, which is Moulden Anoxia Spectrum Syndromes (MASS). The last chapter will describe the techniques that can be used to detect vaccine damage by evaluating the functioning of the cranial nerves.

I am summarizing Dr. Moulden's teaching with the hope that it will help a new generation of people wake up to the widespread occurrence of vaccine damage and vaccine related illnesses. I will be relying on the Tolerance Lost video series that Dr. Moulden produced in 2009. In it, he graphically describes the problem that we face in the vaccine age and encourages us to preserve our health by avoiding vaccine use. I have also used a few transcripts from interviews and have relied on information from three chapters of an unfinished book that he was writing.

This ebook is written as a summary of Dr. Moulden's work. Thus, I will not be using quotations. If you wish to have additional information and wish to see the hundreds of photos that are available to illustrate this information, then please watch the Tolerance Lost video series on YouTube. Transcripts of the videos are also available on line.

Listen to Dr. Moulden in his own words give evidence to the mechanisms that cause vaccine damage in “Tolerance Lost.” See the evidence of vaccine damage in the faces of children. Link here.

Listen to a presentation from Dr. Moulden that summarizes key principles of his Research. Link here.

Tolerance Lost Transcripts
Blood Physiology and the Vascular System: Understanding How Modern Neurodevelopmental Diseases Develop

In order for me to describe the key principles of Dr. Moulden's understanding of how modern neurodevelopmental diseases develop, it is necessary to have basic familiarity with blood physiology and the structure of the vascular system that carries blood throughout the body. I will provide the necessary information about blood flow, blood clotting, and the damage that results from stroke and oxygen deprivation, to help us to understand the epidemic of neurodevelopmental disorders that we are seeing all around us today.

This will not be a highly scientific presentation, because only a basic understanding of this information is needed to understand what Dr. Moulden taught.
Blood vessels are like one way streets. They are tubular in shape and blood is intended to flow in only one direction. It flows from the heart through large vessels called arteries. The arteries carry oxygen-rich blood that is red in color.

The arteries divide over and over again and become very small. Eventually they reach the smallest tubes, which are called capillaries. The capillaries are so small that they cannot be seen with the human eye. Even though capillaries account for 95% of the blood vessels in the entire body, they only contain 5% of the circulating blood at any given time.

While the blood is in the capillaries, it gives up oxygen and collects carbon dioxide and other waste products.

**There are 600,000 miles of capillaries in the human body.**

When the blood comes out of the capillaries it collects in larger vessels called veins. The blood is now blue in color, because it gave up its oxygen in the capillaries. The veins merge together to form larger and larger vessels as they carry the blue blood toward the lungs and heart.
When there is a blood clot or other type of blockage in an artery or in a capillary, then the blood stops moving forward in that location. The result is that the cells and tissues in the area that should be receiving oxygen-rich blood begin to suffocate. All cells require a constant flow of fresh blood to stay alive. If the interruption of blood flow and the subsequent lack of oxygen are prolonged, then cells begin to die.

An animation of a typical human red blood cell cycle in the circulatory system. This animation occurs at real time (20 seconds of cycle) and shows the red blood cell deform as it enters capillaries, as well as changing color as it alternates in states of oxygenation along the circulatory system. Source: [Wikimedia](https://commons.wikimedia.org/wiki/File:RBCCycle20sec.png)

**Ischemia and Strokes**

The technical name for lack of oxygen in a group of cells is called ischemia. When ischemia happens in the brain, it is called a stroke. A stroke is most commonly thought of as happening in the brain, but a stroke can happen in any organ of the body.

A heart attack involves blockage of a blood vessel that supplies oxygen to the heart. Ischemia in the heart is a stroke to the heart. It is a serious life threatening condition.

Ischemia in the bowel is also a stroke. Strokes can happen in the blood supply to the large intestine or the small intestine. A stroke to the bowel is mesenteric ischemia.

Ischemia can occur in the kidneys, liver, skin, and anywhere in the body. Every part of the human body requires blood flow and a constant supply of oxygen to maintain life. Without oxygen we cannot maintain health and wellness. **When the brain is deprived of oxygen even for a few minutes we become unconscious and the brain begins to die after 4 minutes.**

**Watershed areas of the Brain and Body**
Watershed areas are very tiny sections of tissue (group of cells) that are only served by a single set of blood vessels (capillaries). In other tissue areas, there may be several blood vessels that supply oxygen-rich red blood directly to the same cells. There also can be collateral blood vessels that move between small areas of tissue. In these tissues with multiple sources of oxygen-rich blood, there can be a stroke (blockage) to one blood vessel, but the section of tissue is not harmed, because oxygen-rich blood can reach the cells through alternative routes.
In the situation of a watershed area, there is only one pipeline of oxygen-rich blood to the area. If the pipeline gets blocked, then there is absolutely no other way for the cells in that area to obtain oxygen. The result is that the cells begin to die unless the blood flow is restored quickly. Eventually, the whole watershed area could die.

Watershed areas may literally have a bend or kink in the capillaries where the blood changes direction and begins its return journey to the heart and lungs. This is seen at the tips of the toes and fingers. It is seen at the tip of the nose and the tips of the ears. The watershed areas are vulnerable areas. Frostbite is common in each of these watershed areas, because the blood flow in the capillaries is very sensitive, and it is easy to disturb.

Watershed areas are also present in the brain and in other organs. These are highly sensitive areas. In the brain, watershed areas are often in areas that control critical processes.

An example of watershed damage in the brain is seen in transcortical motor aphasia, which involves the area of the brain that enables us to produce speech. A person with this type of watershed damage may be able to understand speech, but he will have lost the ability to form speech once there has been brain damage.

We call this type of damage a stroke when we see it in elderly persons.

However this same watershed damage, when it appears in a young child is not called a stroke, but is simply labeled an autism spectrum disorder.

Regardless of whether the person is young or old, transcortical motor aphasia is always caused by a stroke and cellular death in a specific watershed area of the brain.
**Description of Blood**

There are many components of human blood. However, to understand Dr. Moulden’s teaching, we only need to have basic knowledge of the most common aspects of blood physiology.

## COMPOSITION OF THE BLOOD

![Blood vessel diagram](image)

- **Plasma**
  - The majority of our blood is made up of an electrically charged watery substance called plasma. Various types of cells are suspended in the watery plasma. The blood cells are carried along in the plasma from one part of the body to the next. If there is a high negative electrical charge in the plasma, then the cells that are suspended in the water will repel one another. Blood cells are intended to repel each other and to move freely without touching one another. Blood with a healthy high negative electrical charge will enable cells in the plasma to flow freely without clumping together. The blood cells flow freely because they have a negative electrical charge that enables them to repel one another and stay separate.

- **Laminar Blood Flow**
  - Freely flowing blood is called laminar flow. Blood that has an inadequate electrical charge will have blood cells that clump and stick together. The clumping of blood cells slows down blood flow and results in blood sludging in which laminar flow has been lost.

- **Red Blood Cells**
The most common cells in the blood are red blood cells. During their journey through the body, they carry oxygen to the capillaries and they carry away carbon dioxide. Some of the capillaries are so small that red blood cells must squeeze to pass through them. In the capillaries, red blood cells must pass through the vessels in a single file stream.

**White Blood Cells**

White blood cells are part of the immune system, which is intended to destroy invading pathogens such as viruses and bacteria. Most white blood cells are much larger than red blood cells, and they can only pass through larger capillaries. White blood cells are approximately twice as large as red blood cells, though they vary in size depending on the cell type. Under normal circumstances, approximately 1% of the cells that are floating in the blood stream are white blood cells. When the body is threatened by foreign substances or pathogens, then large numbers of white blood cells are released into the blood stream.

When a person receives a vaccine, white blood cells are released as part of the immune system response to the injection of foreign material into the body.

If there are too many white blood cells in circulation, then they can block the opening to large numbers of the smallest capillaries, which are not large enough for them to pass through. When this happens, oxygen delivery can be impaired to watershed areas.
Platelets

Platelets are a third type of cell. They help with clotting when there is damage to tissues, and blood begins to leak out of the blood vessels. Platelets are about one fifth of the size of red blood cells.
Historically, Dr. Rudolf Virchow has been given credit for discovering pulmonary embolisms or blood clots, which form in the veins of the leg and pass into the lung where they cause damage. Dr. Virchow’s understanding of blood flow, blood clotting, and damage to blood flow is very critical for understanding human disease.

Virchow’s Triad, as it is now called, is the beginning point for understanding the entire epidemic of neurodevelopmental disorders that are the consequence of vaccinations. Dr. Moulden’s work is an extension of this triad.
Virchow's triad - [Wikimedia](https://commons.wikimedia.org/wiki/File:Virchows_Triad.png).

Dr. Virchow described three processes that impair the supply of blood to the cells of the body. These processes result in the formation of blood clots and/or blood sludging. Blood clots are blockages in blood vessels, which can be thought of as plugs in a pipe. Blood sludging can be thought of as a problem of coagulation. Blood sludging slows down the flow of blood, which can also cause cell starvation, because the rate of flow is too low to support healthy cellular respiration.

Dr. Virchow died in 1902 and since that time additional mechanisms of blood clotting and sludging have been discovered. However, the beginning point for understanding blood flow and how it is impaired rests on Virchow’s Triad. Two additional mechanisms that impair blood flow were described by Dr. Hartman and Dr. Moulden. These new mechanisms called Zeta and MASS will be discussed after Virchow’s Triad. Zeta and MASS are the keys to understanding Dr. Moulden’s model of modern illness.

Each of the three factors in Virchow’s Triad increases the tendency to form blood clots. The clots formed may be large or microscopic. If blood clots occupy greater than 75% of the inside diameter of a blood vessel, then oxygen delivery is impaired and the risk for stroke is increased.

Ischemic stroke is a generic term which connotes oxygen demand exceeding oxygen supply. It can happen ANYWHERE in the body and not just the brain.

1. How Vaccines and Toxins Alter Normal Blood Flow
Alterations in normal blood flow refers to several situations. These include turbulence in blood flow, stasis (low forward blood flow and pooling), blocked flow (clots), and varicose veins. Normal blood flow is called *laminar flow*.

![Laminar Flow Diagram](image1)

Dr. Moulden found that laminar blood flow was altered by vaccinations, infectious diseases, toxins, heavy metals, food additives, and drugs to which a person is immunologically hypersensitive.

Stasis is an alteration in normal blood flow. It describes a condition where blood pools in the blood vessels and clots can form.

A classic example of this happens when a person sits during a plane flight for a long time. When we do this, the vessels to the back of the leg can be blocked off, which prevents normal blood flow up from the legs. A blood clot can form at the location of the compressed blood vessels. Sometimes when people leave the plane at the end of their flight, a clot will break off from the compressed area and will go into the lungs and form a pulmonary embolism (plug). This type of large blood clot can be life threatening.

![Blood Clot Diagram](image2)

Stasis can occur in large blood vessels such as those in the legs. It can be in medium to large vessels like the carotid arteries that carry blood up the neck to the brain, or it can happen in the capillaries, which are the tiniest of all blood vessels.
Stasis is a normal occurrence in our bodies. It happens during every day of our lives. In fact, it commonly occurs in the smallest blood vessels in every part of the body many times a day.

Since these clots are the result of the body’s normal functioning, the body has the means to remove the impairments so the blood can keep flowing smoothly. Blood clotting is part of the mechanism that the body uses to bring about healing to damaged tissue.

2. Damage to the Inner Layer of Cells in our Blood Vessels

Damage to the inner layer of cells in our blood vessels also causes impaired blood flow. The innermost layer of cells inside of blood vessels is called the vascular endothelium. This thin layer of cells lines all the blood vessels throughout the body.

Under a microscope, we can see that the vascular endothelium consists of tiny cells that are tightly packed together similar to the scales on a fish. They line up side by side and form a complete tube through which the blood flows. The capillary tubes are somewhat flexible, and can stretch as red blood cells pass through them.

Injuries and/or trauma to the endothelium can be caused by damage to the vessels arising from stress, hypertension, ischemia, toxins, metabolic derailments, and immune system responses to foreign substances that are in the blood, in tissue, or in the blood vessel walls themselves. Vaccines can cause endothelial damage.

When there is an injury to the inside lining of blood vessel walls, we call that endothelial damage or damage to the vascular endothelium. When the vascular endothelium is damaged, this can lead to clotting or coagulation in that area.

3. How Vaccines and Toxins Cause "Sludging" in the Blood

The third way that clots can develop and tissues can become starved for oxygen involves changes in the constitution of the blood. The blood can develop a tendency to clot even when there are no alterations in blood flow, and when there is no endothelial damage to the lining of blood vessels. Blood that has an abnormal tendency to clot means the blood has become hypercoagulable. This means there is too much clotting going on in the blood and in the body.

Many factors can cause the blood to become hypercoagulable. Possible risk factors include: hyperviscosity, deficiency of antithrombin III, deficiency of proteins C & S, kidney and liver impairment, effects of severe trauma, changes in estrogen levels, disseminated cancer, late pregnancy and delivery, race, age, smoking, obesity, diabetes, use of birth control pills in girls, and heavy metal ion exchanges that lower zeta potential in the blood. (Zeta potential will be discussed shortly.)
Another term that Dr. Moulden used to describe hypercoagulable blood is sludging of the blood. Sludging of the blood can be caused by vaccines and various environmental factors. We can decrease blood sludging by reducing our environmental exposure to toxins and by changing our lifestyle.
This diagram shows a graph of the potential difference as a function of distance from the surface of a particle suspended in a dispersion medium. Source: Wikimedia

The weakening of zeta potential in the blood also causes strokes. Zeta is an electrical charge that exists around all particles in the blood. The negative electrical fields cause particles, substances, and cells in the blood to repel one another.

As an example, if you take the negative ends of two magnets and try to push them together, they will repel each other. In the same way, if all blood cells have a high negative charge, then they will repel one another and move freely through the blood vessels without touching one another. This independent movement of cells in the blood is a mark of health. When the strong negative electrical charge on blood cells is lost, then the cells start clumping together. This is seen when the electrical charge is very low or neutral. This leads to poor health and disease.

If an infant is born without having been exposed to the toxins and diseases of this world, then the baby’s blood cells will not stick together, because the normal high negative
electrical charge on blood cells will keep them all separated. The cells will move freely as they were designed to move. They move in a suspended state, which is called colloidal suspension.

When there is proper colloidal suspension, blood cells move smoothly through the smallest blood vessels. The blood flow is laminar – it flows without restriction.

As soon as the electrostatic charge around these particles in the blood drops toward neutral, then the particles start clumping together. This forms clots and concretions of particles. It’s hard to move concretions through small pipes that were designed to only allow one red blood cell to pass through at a time.


In chemistry and physics we call this electrical charge “valence.” It is the outer electrical charge around particles. From the point of view of human health and wellness, it is extremely important to avoid the blood sludging problem, because it causes serious health problems. It is important for cells in the blood to have more of a negative electrical charge and not a positive charge.

**Blood with High Negative Charge is Desired**

Blood with a positive charge leads to clumping and coagulation. Blood with a high negative charge causes dispersion, keeps things apart and prevents clumping and coagulation.

For example, the dust particles that are floating in the air of a room on a bright sunny day are held up in the air and enabled to float by their high negative charge. It is this negative charge that keeps them suspended in the air and keeps them from coming together. The
molecules, particles, suspensoids, and cells inside of the blood will act like dust in the air when they have a negative charge.

The red blood cells carry the electrical charge that is life. The red blood cells are the main carrier. The amino acids, protein, trace minerals, metals, and minerals don't go into solution like sugar and water. They are held in suspension as minute colloids (tiny particles) [1], which start at a size of one micron and go down to as small as six angstroms.

(A micron is one millionth of a meter. An angstrom is much smaller than a micron. Six angstroms was the smallest particle size that could be measured in 2009.)

The following chart shows how zeta potential affects the blood and how it affects human health. A high negative charge is associated with laminar blood flow and overall general good health.

<table>
<thead>
<tr>
<th>STABILITY (effects on blood)</th>
<th>AVERAGE ZETA POTENTIAL (in millivolts)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extreme to very good stability</td>
<td>-100 to -60 mv.</td>
</tr>
<tr>
<td>Reasonable stability</td>
<td>-60 to -40 mv.</td>
</tr>
<tr>
<td>Moderate stability</td>
<td>-40 to -30 mv.</td>
</tr>
<tr>
<td>Threshold of light dispersion</td>
<td>-30 to -15 mv.</td>
</tr>
<tr>
<td>Threshold of Agglomeration</td>
<td>-15 to -10 mv.</td>
</tr>
<tr>
<td>Strong agglomeration and precipitation</td>
<td>-5 to +5 mv. [2]</td>
</tr>
</tbody>
</table>
Loss of Negative Charge in Blood Leads to Sludging of the Blood, Hypoxia and Strokes

When the red blood cells start losing zeta potential they start to form rouleau. This means that the negative electrical charge around them, which had been keeping cells separated from one another, has decreased and the cells are sticking together. The term “rouleau” describes a situation in which red blood cells clump up or stack up like coins. When rouleau is present, smoothly moving laminar blood flow is compromised. The result is sludging of the blood, hypoxia (low oxygen supply) and strokes. These clumps of cells are not able to pass through most capillaries, because they’re too big, especially at points where the blood vessels turn and change directions – especially at a 90 degree turn.

Rouleau is visible under darkfield live blood microscopic examination.

Unfortunately, the US FDA has banned the use of darkfield live blood analysis for diagnostic purposes. This means that they don’t want anyone to do before-and-after comparisons of the blood to see what happens after vaccines are taken.

Damage to Digestive System Leaves the Body in a State of Perpetual Infection

One of the areas in the body that is hard hit by reduced zeta potential is the gastrointestinal tract. Reduced capillary flow in the digestive system results in damaged digestion, diseased tissue and numerous abnormal digestive syndromes and diseases.

The reduced flow of blood means that white blood cells cannot get to certain areas and eradicate viruses and bacteria that your body needs to destroy, such as measles, mumps, and rubella. The consequence is that the body cannot eliminate these infectious diseases from the digestive tract. This leaves the body in a state of perpetual infection. The body can’t get rid of these infectious diseases, because the impaired blood flow prevents the immune system from reaching the pathogens to destroy them.

If blood flow is blocked to an area, then the white blood cells cannot reach the pathogens that have taken up residence in that area even if the number of white blood cells is elevated.

Vaccines are the Straw that Breaks the Camel's Back When it Comes to the Destruction of Zeta Potential
Vaccines are the straw that breaks the camel's back when it comes to the destruction of zeta potential. Vaccines contain everything in one package that is needed to reduce zeta potential in the blood and set up conditions in the body where all manner of modern diseases can develop.

Vaccines contain a combination of infectious pathogens, aluminum, mercury, aborted fetal tissue, genetic materials from animals such as monkeys, preservatives, formaldehyde, and numerous other toxic substances. The ingredients in vaccines can cause clumping of blood cells, impaired blood flow, ischemia, cell death, and impaired immune system functioning without any other type of exposure.
Vaccines contain everything that is needed to destroy laminar blood flow, cause clotting and sludging of the blood, deprive cells of oxygen, bring about cellular death, cause neurological damage, cause organ system damage, and lead to severe disability and death.
Vaccines and environmental contamination expose people to aluminum. The accumulation of aluminum in the body has a strong harmful effect on zeta potential. Aluminum accumulates in the body and tends to reduce zeta potential as we age. 4 parts per million of aluminum in human blood can cause blood to coagulate. [3]

Thus, vaccination of the elderly, or those with hypercoagulable states, may reduce zeta potential to the tipping point where even an emotional upset can trigger a microvascular clot in the brain (stroke) – or a heart attack.

The next chapter will provide additional information about the harmful effects of aluminum in the context of Moulden Anoxia Spectrum Syndrome.
Conclusion: Vaccines Reduce Negative Zeta Potential

Zeta potential can be used as an indicator of health. High negative zeta in the range of -100 millivolts to -60 millivolts is associated with strong colloidal suspensions. Blood cells and other colloidal particles are widely separated and do not clump together. This provides for laminar blood flow, in which there is reduced likelihood of blood sludging and blood clotting. Sludging and clotting can be caused by other factors, but when negative zeta is high, then one major factor for sludging and clotting is greatly reduced and overall health will be high.

When vaccines are given or when other environmental toxins are brought into the body, then negative zeta falls. Repeated exposure to vaccines and environmental toxins will over time push down negative zeta toward the positive range. If the zeta falls to the range of -30 millivolts to -15 millivolts, then the cells and particles in blood start coming close to one another. If the zeta is in the range of -15 millivolts to -10 millivolts, then blood clumping and sludging is already occurring.

If a vaccine is taken at this point, then it has the potential of driving down zeta toward neutral, where intense blood sludging is possible. This can lead to microvascular strokes and anoxia in which certain watershed areas of the body can become starved for oxygen.

Each time a vaccine is taken, it reduces negative zeta potential. Since good health is associated with a relatively wide range of negative zeta, a single dose of vaccine may not produce immediate or noticeable harm, as long as negative zeta remains in the high range. But aluminum collects in the body and is not easily excreted, which means that aluminum from vaccines continues to push down zeta toward the point where harm can occur.

Vaccine damage is not predictable. Many factors determine the impact on zeta and the severity of damage that will be caused by taking vaccines. We do not have a formula to estimate how much damage to zeta will be produced by a single dose of vaccine. We know that the aluminum in vaccines is a powerful agent, which draws down zeta toward neutral.

In the next chapter I will discuss the second key to understanding how vaccine damage occurs. It will discuss Moulden Anoxia Spectrum Syndromes (MASS), and explain how Zeta and MASS work together to bring about illness. Finally, the last chapter will discuss the system of noninvasive methods that can be used by anyone to identify when vaccine damage has occurred.

Comment on this chapter at VaccineImpact.com
Chapter 4 – Dr. Moulden’s New Medical Discovery: Moulden Anoxia Spectrum Syndromes (MASS)

Dr. Andrew Moulden tried to explain the mechanisms that were causing damage to people who were taking vaccines. He made a strong case to prove that numerous modern neurodevelopmental illnesses are the result of microvascular damage and impaired blood flow. The ministrokes that result from vaccine use and exposure to toxins in the environment and food cause the same type of reactions in the body, and cause a wide range of illnesses.

He dared to say that the germ theory of disease and genetic models could not explain the causes of the epidemic rise in modern diseases such as autism spectrum disorder; Alzheimer’s disease; learning disabilities; attention deficit and hyperactivity disorders; chronic fatigue; fibromyalgia; Gulf War Syndrome; sudden death in infants, teens and adults; Parkinson’s disease; and various other conditions of nerve palsy and paralysis that we see all around us.

He rightly understood that we are now living in an age when multiple factors combine to create conditions in which modern neurodevelopmental diseases can occur. It is not just the vaccines and the toxins in our environment and food that challenge healthy normal human functioning, but it is also the condition of the body itself -- especially the nutritional status and gut flora, which determines whether the reaction to vaccines and environmental toxins will be minimal, moderate, or severe.

Zeta potential was shown by Dr Moulden to be an important factor in determining whether vaccines and other toxins will produce severe health reactions.
The germ theory of disease tries to explain that diseases are caused by germs. It tries to isolate and condense everything down to a single chain of events that lead to a disease. Exposure to pathogen “A” causes disease “B”, with symptom “C”, which can be treated with pharmaceutical drug “D” or prevented with vaccine “E.” This might work in a test tube or in an isolated laboratory setting full of mice or rats, but in the real world in which we now live, it fails to identify realistic levels of possible harm or to give us cures for common illnesses.

Of course, germs are involved in some illnesses, but Dr. Moulden found that germs are not necessarily the direct cause of illness, rather they cause a reaction in the body, which causes illness. It is this reaction that was at the center of Dr. Moulden’s model of illness. Pathogens can sometimes establish themselves in areas where there is on-going microvascular damage and ischemia, because this damage is preventing white blood cells from reaching the pathogens. Infections get established because of a weakness in the body -- the existence of an area that the immune system cannot effectively reach.
Research by Pharmaceutical Companies does not Evaluate Interactions with Thousands of Toxins in the Environment

Dr. Moulden explained that the thousands of chemicals in our water, air, and food, are limiting the value of experiments that test for the safety of individual substances. Research studies conducted by pharmaceutical companies and chemical companies, used to gain approval of new drugs and chemical compounds, do not evaluate the interactions of their new products with the thousands of toxins that are already in the environment and in factory manufactured food. They just try to show the potential safety of their new patent, as if animals and people were not being exposed to other toxic substances. Thus, their experiments do not detect harmful effects as they occur in real life.

Dr. Moulden was quick to point out that the pharmaceutical industry does not identify harmful reactions to their products, because they aren't attempting to measure the factors that are clear indications of damage. If you don't know what to look for, then you don't have to worry about finding evidence of harm. If you use research methods that were designed to show statistical safety for groups of animals or people, then you will not find the real harm that is experienced by individual subjects.

Researchers do double blind control group experiments. They do not evaluate the potential harm or effectiveness of the new product within the context of other vaccines and thousands of other chemicals to which people are already being exposed. They also do not use a “within subjects design” to measure health and symptoms before and after giving vaccines for each person tested. They make a serious error when they assume that if a new product doesn’t produce harm when it is tested in isolation that it will not produce harm when it is used along with other toxins.

Simply put, scientists do not have the capability to simultaneously analyze the interaction of thousands of toxic chemicals, drugs, and vaccines. Thus they conduct unrealistic experiments, which are incapable of identifying the actual harm that comes from the combination of drugs, vaccines, pesticides, and other chemicals that people are exposed to every day.
Drug companies and chemical companies are now turning to genetic abnormalities to explain why people get sick. They want us to believe that it is not their toxic products that are harming people, rather, it is our genetic make-up, which is the problem. Their products are not the problem, we are the problem.

Dr. Moulden did not accept genetics as the cause of modern neurodevelopmental diseases. He also did not accept germs as being the cause of these illnesses. His work clearly showed that it was the introduction of foreign substances into the human body through vaccines and other environmental chemicals, which were causing the exponential growth in modern diseases since the middle of the twentieth century.
In the previous chapter I discussed zeta potential and how the electrical charge in the blood needs to be strongly negative to avoid the clumping together of blood cells. We saw that when zeta falls toward neutral, blood cells no longer repel each other and will start sticking together. This creates a situation in which the blood flow becomes sluggish.

Blood sludging slows down the flow of blood through capillaries and may completely block blood flow. When this happens, oxygen is no longer available to watershed areas that are served by a single network of capillaries. The result is ministrokes, which can occur anywhere in the body. Sometimes these strokes resolve themselves in a day or so; at other times the damage is permanent.

Vaccines, environmental chemicals, and various food additives used in commercially produced food all have the ability to reduce zeta potential to the point where blood sludging and ministrokes can occur. These ministrokes are the cause of modern neurodevelopmental illnesses and syndromes.

Low negative zeta levels in blood, however, are not the only cause of microvascular blockage and ministrokes. We must also consider Moulden Anoxia Spectrum Syndromes.
Listen to Dr. Moulden in his own words give evidence to the mechanisms that cause vaccine damage in “Tolerance Lost.” See the evidence of vaccine damage in the faces of children. Link [here](#).

Listen to a presentation from Dr. Moulden that summarizes key principles of his Research. Link [here](#).
Moulden Anoxia Spectrum Syndromes (MASS) - A New Medical Discovery Developed by Dr. Moulden

MASS (Moulden Anoxia Spectrum Syndromes) is a new medical discovery developed by Dr. Moulden. It shows that there are situations in which blood clotting and sludging does not follow the three classic clotting pathways described in Virchow’s Triad. MASS is closely linked to zeta potential. It is common for MASS and weakened zeta potential to occur together; but they are two distinct processes.

The MASS reaction is technically called excessive non-specific immune hyperstimulation. It is marked by an unusually high level of white blood cells in the blood, which causes blood sludging and blood clotting at the microvascular level of the capillaries. The consequence is ministrokes, which damage normal neurological and organ functioning. Even though weak negative zeta and MASS both cause microvascular circulation problems and ministrokes, the mechanisms are very different.

Excessive non-specific immune hyperstimulation causes large numbers of white blood cells to be released into the blood stream. This contributes to blood sludging and clotting, because white blood cells are twice as large as red blood cells, and they cannot pass through the smallest capillaries. The result is that the excess white blood cells plug up watershed areas in capillary beds.

The presence of large numbers of white blood cells at the openings of capillaries prevents red blood cells from passing into the capillaries. They clog up the entry points for the smallest capillaries and cause ischemia.

Blood Clot Diagram

When there is endothelial damage to the inner lining of blood vessels, then the white blood cells tend to cling to the walls of blood vessels and roll along the walls of the blood vessels instead of freely flowing along with the plasma. This reduces laminar blood flow in the smaller blood vessels and adds to the sludging problem.
When there is a normal level of white blood cells, there will still be occasional blockages during the typical day. However the body is able to deal with these and prevent harm. When the number of white blood cells is elevated, then the number of capillary blockages will be increased.

In situations of vascular inflammation, which is also part of the MASS reaction, some capillaries will functionally be closed off. The inner area of the capillaries becomes so occluded that not even red blood cells can pass through them, which starves the cells in that area of oxygen.
The MASS response does not follow classic steps in the clotting cascade. The damage caused by MASS is transient, recurrent, and cumulative. MASS responses vary greatly from person to person, and MASS responses can be quite different in the same person at different points in time. The MASS process is recurrent and clinically silent until major damage begins to appear.

MASS causes hypoxia (low oxygen), anoxia (no oxygen), ischemia (low oxygen from low blood flow), and stroke (oxygen demand exceeding oxygen supply). These types of reactions cause human disease, chronic illness, disorders, death, vaccine induced autism-spectrum disorders, sudden infant death syndrome, and multi-organ disease and functional impairments. MASS is an overarching principle that stretches across numerous modern diseases compromising human health and wellness, and contributing to morbidity and mortality.
What Causes MASS Reaction?

Defining the words Anoxia, Spectrum, and Syndromes that are in the acronym M.A.S.S will help describe the process.

Anoxia

Anoxia is a condition in which the supply of oxygen to a group of cells or to an organ is absent. Anoxia is the result of restricted blood flow. When the blood flow is very sluggish, the flow can easily be stopped altogether or may even reverse its direction. In this situation, oxygen cannot be delivered to cells and they begin to die. They literally suffocate to death.

Dying or dead cells in specific cranial nerve pathways can be observed in the human face, because damage to these nerves produces muscular palsy, which alters the expression and impairs the movement of the eyes, eyelids, and mouth.

Syndrome

A syndrome is different from a disease, because it implies multiple causes and multiple symptoms. We tend to think of learning disabilities, autism, Alzheimer’s, irritable bowel disease, Crohn’s disease, colitis, food allergies, shaken baby syndrome, sudden infant death, idiopathic seizure disorders, Gulf War syndrome, Gardasil adverse reactions, schizophrenia, Tourette’s syndrome, chronic fatigue syndrome, fibromyalgia, expressive aphasia, impaired speech skills, attention deficit disorders, silent ischemic strokes, blood clots, idiopathic thrombocytopenia purpura, Parkinson’s disease, and other modern neurodevelopment disorders as being individual diseases that must have individual causes.

However, if we step out of the box of conventional germ theory, where every disease has one cause, then it is possible to begin seeing illness and the recovery from illness in a very different way. Doctor Moulden brought the above modern conditions together under the term MASS, because he could see that there were common mechanisms at work in all of them.

Spectrum

Spectrum indicates that we are talking about a syndrome that ranges in severity or intensity. The symptoms of the syndrome can range from mild to severe. The disability from the syndrome can range from unnoticeable to death. The word spectrum also applies to syndromes across all age groups. The syndrome can involve babies in utero, infants, children, and adults of all ages.

Exposure to the triggers of the syndrome also follow a spectrum. In some people, a small trigger produces a significant set of disabling symptoms, and with other people, high
amounts of exposure may only cause minimal changes in a person’s health at that point in
time. However, the exposure to the triggers of MASS are cumulative, and it is common to
reach a point after repeated exposures to one or more triggers where minimal exposure
produces severe symptoms of disease. In some situations a point will be reached where
the next exposure triggers paralysis, respiratory failure, and death.

There are many triggers for the MASS reaction. The triggers include numerous substances,
toxins, metals such as mercury and aluminum, particulates, living or dead bacteria/viruses
or portions thereof. Regardless of the trigger, the response of the body is the same.
Vaccines Trigger a MASS Response Causing Numerous Neurodevelopmental Diseases

MASS is a generic physiological response. It does not matter that the infectious disease agents in a vaccine have been weakened, killed, or attenuated before they are placed in a syringe and injected into the body. The key point is that something foreign to the body has been injected into it, and the body is reacting in such a way that modern neurodevelopmental diseases result. The cure and prevention of human disease can be found in understanding the body’s generic MASS response to foreign materials that enter the body.

Dr. Moulden stated that the cure and prevention of disease will not be accomplished by injecting foreign entities into the body as prophylaxis. Rather it will be the avoidance of exposure to foreign entities such as vaccines and environmental toxins that will prevent most modern diseases. Vaccines will not prevent disease, because they trigger a MASS response, which causes numerous modern neurodevelopmental diseases.

Dr. Moulden made it clear at numerous points that vaccines are not the only trigger for autism and other modern diseases. Vaccinations can be a direct cause of autism spectrum disorders in young children. However, vaccines given to mothers who are nursing their young children can lead to autism as well. This means that a child does not need to be vaccinated to be damaged by vaccines.
Wild Viruses Can Trigger a MASS Reaction

The MASS reaction also can be triggered by exposure to wild viruses. As a result, the symptoms and causes of death for children exposed to wild viruses can be identical to the symptoms experienced by children who receive vaccines. Both groups of children can have the same cranial nerve damage and the same MASS reactions and the same changes in zeta.

The problem for the pharmaceutical industry and the US FDA is that the numbers of unvaccinated children who have these reactions when exposed to wild viruses is tiny in comparison to the large number of vaccinated children who are being harmed by vaccine reactions on a daily basis. Thus, they irrationally blame the unvaccinated population when their vaccines fail and vaccinated people develop the diseases that the vaccines failed to prevent.
The MASS Response is a Normal Process

MASS should not be thought of as a destructive process, which needs to be treated by a drug. It is actually a normal part of the healing process that is part of all tissue repairs. The reason that MASS causes modern diseases is that virulent organisms and toxic substances trigger an over-zealous healing process known as excessive non-specific immune hyperstimulation.

The key pathological characteristics of MASS at the cellular level are hypoxia and lactic acidosis. Hypoxia is a lack of oxygen, and lactic acidosis is the excessive concentration of lactic acid. Oxygen deprivation and lactic acid build-up happen whenever there are disruptions to normal blood circulation in the capillary beds. This condition damages cells in small focal areas that depend upon capillary blood flow to stay alive.

It is not infectious diseases and germs that have been causing modern syndromes and disorders, it has been the body’s own non-specific cell-mediated (white blood cell) immune response to foreign substances entering the body that is causing disease, disorders, and the global epidemic of autism and other neurodevelopmental disorders. Vaccines and toxic substances in our food, water, and air all trigger a MASS reaction. Constant and repetitive exposures produce cumulative responses that worsen over time.
The MASS reaction may not occur immediately after vaccination. The US government’s vaccine court expects that a vaccine reaction will occur within three days of receiving a vaccine. Most physicians deny vaccines reactions even when they occur within a few hours of vaccination. However, vaccine reactions can happen several weeks, several months or even many years later.

Sudden Infant Death Syndrome (SIDS) is the consequence of a MASS reaction. We now know that 70% of infants that die from SIDS do so within three weeks of receiving pertussis vaccine. [1, 2]

Dr. Moulden explained that in the case of the anthrax vaccine, women who took this series of vaccines were warned not to become pregnant until 18 months have passed from the time of their last anthrax vaccine dose. They are warned that their children could be born without arms and legs if pregnancy occurs earlier.

There can be skin reactions at the vaccination injection site caused by the aluminum in vaccines. These reactions can occur immediately after vaccination and can continue for seven or eight years. In some cases, skin reactions may not appear until one to six years later. [3, 4]
Aluminum is persistent in the body, and when it is combined with other MASS triggers, reactions can occur long after vaccination. These delayed reactions are not recognized as adverse reactions to vaccination by most of the medical establishment, because the reaction time is not predictable.
Dr. Moulden identified aluminum as being one of the most dangerous factors leading to the MASS reaction. The use of aluminum salts to stabilize vaccines exacerbates the effect of vaccines by a multiple of 6,000 times. Thus, aluminum is one of the most powerful agents for stimulating a MASS reaction.

There are over one million references in various databases citing the harmful health effects of aluminum, yet aluminum is one of the most common ingredients in vaccines. Dr. Hartman, a researcher in the area of zeta and aluminum, explains why aluminum is used so freely. He stated:

Aluminum has been exempted from testing for safety by the FDA under a convoluted logic wherein it is classified as GRAS (Generally Regarded As Safe). It has never been tested by the FDA on its safety and there are NO restrictions whatever on the amount or use of aluminum.

Aluminum toxicity is a widespread problem in all forms of life, including humans, animals, fish, plants and trees, and causes widespread degradation of the environment and
health. Over 7,000 reference articles on aluminum toxicity existed in various data bases as of 1936, (today, there are more than a million) all recognizing the toxicity.

There are over 2,000 references in the National Library of Medicine on adverse effects of aluminum.

Aluminum toxicity has been recognized in many settings where exposure is heavy or prolonged, where renal function is limited, or where a previously accumulated bone burden is released in stress or illness. Toxicity may include: encephalopathy (stuttering, gait disturbance, myoclonic jerks, seizures, coma, abnormal EEG) osteomalacia or aplastic bone disease (associated with painful spontaneous fractures, hypercalcemia, tumorous calcinosis) proximal myopathy, increased risk of infection, increased left ventricular mass and decreased myocardial function, microcytic anemia with very high levels, sudden death. [5]
Combination of Zeta and MASS Causes Blood Clotting

The MASS reaction can be triggered even before the zeta potential has fallen to dangerous levels. However, lowered zeta potential eventually emerges even if it only appears at the microcirculation level of the capillaries. The end result from either cause will be clotting within the tiny blood vessels and impaired oxygen delivery to cells and tissue.

Several factors come together to cause localized anoxia in capillary beds. When zeta potential is low, then cells clump together and restrict blood flow. When there is endothelial damage to capillary walls, then blood clots may form, which can restrict or completely block blood flow.

The presence of endothelial damage or toxic substances in the body will cause white blood cells to roll along the walls of blood vessels instead of moving freely with the plasma. This also slows blood flow. Excessive numbers of white blood cells will block capillaries and prevent red blood cells from entering.

Any of these mechanisms can cause problems by themselves, but when they combine as they do in a MASS reaction, then serious consequences will result. When the combination of these mechanisms occur in watershed areas, then serious harm can be caused, because blockages in these capillaries are more critical for sustaining health and life.

When the MASS reaction occurs in the respiratory center of the brainstem, then a child will stop breathing and die even though there are no other abnormalities in his or her health status.
Preventing the MASS Reaction: Avoid Putting Foreign Substances into the Body

The bottom line is that if we wish to prevent the triggering of a MASS reaction, then we must avoid putting foreign substances into the body. We need to avoid putting foreign things such as vaccines, environmental toxins, chemical food additives, glyphosate and other pesticides, genetically modified organisms, mercury, lead, arsenic, and anything else that would change the clotting potential in the body. We must avoid injecting, eating, drinking, breathing, or smelling substances that can evoke a MASS reaction or damage zeta potential if we want to be healthy and live long lives. We must help our children avoid these exposures if we want to provide an opportunity for our children to have normal development and become functional adults who are capable of reproducing and raising families.

In the next chapter, I will describe Dr. Moulden’s non-invasive system for identifying vaccine related damage. Most of the tests can be done at home without any special equipment.

Comment on this chapter at VaccineImpact.com
Chapter 5 – Dr. Andrew Moulden: Learning to Identify Vaccine Damage

Dr. Andrew Moulden wanted every parent in the world to know about the harmful effects of vaccines. His desire was that everyone would reject the use of vaccines after examining the evidence of the harm they cause.

The evidence about vaccine damage that I gathered from Dr. Moulden’s teachings and shared in the previous three chapters was stunning.

It clearly showed the harm that results from vaccine use. The benefits are negligible and the risks are great.

 Regardless of where you currently stand on vaccine use, the information in this chapter will be eye-opening. Once you learn how to spot the symptoms of vaccine damage in the faces of children and adults, your life will never be the same. You will be like Dr. Moulden – you will look into the face of boys and girls and see undeniable evidence of vaccine damage and you will mourn and grieve over the lives that are being damaged.

Even though national marketing programs have convinced most parents and physicians that vaccines are safe and necessary to protect the lives of their children and all Americans, there are an ever increasing number of parents who have learned the truth about vaccines. These parents have done the research and are going against the politically correct approach to vaccine use. They no longer take vaccines themselves and are preventing their children from receiving additional vaccines.
Dr. Moulden’s research was intended to explain the harm that comes from vaccine use. Not just some vaccine use, but all vaccine use.

Perhaps the greatest part of his legacy was the system that he used to monitor and measure early stages of vaccine damage. Many parents stopped vaccine use without needing proof of damage. Other parents only begin to question the harmful effects of vaccines after they see symptoms of illness and dysfunction in their children.

As you know now, Dr. Moulden was working hard to present the truth about vaccine damage. He was also working to develop treatments that could restore health to damaged children. His first video series was called Tolerance Lost, and it described the problem and its cause. The second video series was called Tolerance Found, and was to describe the steps that parents and physicians could take to reverse the damage. Unfortunately, political pressure from the Canadian College of Physicians effectively silenced him before he could bring forth his second video series and share the details about treatment.

Listen to Dr. Moulden in his own words give evidence to the mechanisms that cause vaccine damage in “Tolerance Lost.” See the evidence of vaccine damage in the faces of children. Link here.

Listen to a presentation from Dr. Moulden that summarizes key principles of his Research. Link here.
I introduced the concept of microvascular watershed areas in the previous section on blood cells and blood flow. Watershed areas are very small areas of tissue (groups of cells) that are served by a single blood vessel which supplies the blood flow to the capillary bed. The capillaries are so small that they can only be seen with a microscope. They are so small that red blood cells must squeeze themselves through them in a single file row.

Watershed areas are very vulnerable, because they do not have collateral capillary blood flow. Thus, when blood flow through these single pathways is stopped because of blood sludging, white blood cell blockage, or inflammation of the blood vessel, then damage begins to occur to the cells in that area. Cells suffocate and die for lack of oxygen.

The damage to watershed areas can be temporary, lasting a day or two, but it can also be permanent.

There are watershed areas throughout the body. We may not be aware of the effects on most of these areas when damage occurs, but damage is quite noticeable when it involves certain cranial nerves that descend from the brain and activate the muscles of the face. Damage to these nerves actually changes the facial expression in ways that can only be caused by cranial nerve damage.
Damage to Cranial Nerves in Watershed Areas

There are 12 cranial nerves. Four of these nerves provide visible evidence of watershed damage. The third, fourth, sixth, and seventh cranial nerves contain watershed areas that are easily damaged when blood flow is restricted or cut off to those specific nerves.

The damage that results from oxygen starvation can be seen in the parts of the human face that are controlled by the third, fourth, sixth, and seventh cranial nerves. Most of the time the damage only weakens the nerves and limits their ability to control certain muscles. There will not usually be complete paralysis, which would result in unresponsive muscles. Instead, there will be a weakened ability to use muscles or a weakened ability of the muscles to respond quickly.

Palsy: Weakness in Muscles Caused by Nerve Damage

Weakness in muscles caused by nerve damage is called palsy. Another way to describe palsy is to call the condition partial paralysis.

Palsy is most commonly seen on one side of the face or the other, which is why it is very noticeable when a person knows how to monitor the facial expressions. If the mouth is
involved, then one corner of the mouth will appear to sag when compared to the other. If palsy occurs in the eyes, there will be a slightly different alignment in the movement and gaze of the eyes, because the muscles that control one eye are weaker than the other. Sometimes one eye will be misaligned when compared to the other and will appear to be looking upward or downward. The blinking of the eyelids may have a different rate of opening and closing. All these symptoms are signs of neurological damage to the cranial nerves.

When blood flow is blocked and oxygen availability is cut off to any portion of a nerve track, then palsy can occur. The nerve tracks come down from the motor areas at the top of the brain. They pass down through the middle part of the brain and then move into the face where they control the muscles. If there is a lack of blood supply to any part of the nerve track, then the nervous system input to this area of the face will be lost, and the muscles will be impaired.

The impairment can range from weak and subtle palsy to profound paralysis. The impairment can be acute as when the nerve is damaged and then later is able to regain normal functioning, or the impairment can become permanent.

**Stroke: Evidence in Facial Muscles**
Palsy in the face is evidence of a stroke that is occurring in the brain. When the stroke is temporary, it is called a transient ischemic attack or TIA - Transient meaning temporary, Ischemic meaning lack of oxygen, Attack meaning stroke. As a result, there can be a temporary blockage of blood flow through certain blood vessels. A TIA can cause clinical symptoms when the blockage happens in a critical location, otherwise it might go unnoticed.

The blockage of blood flow from a TIA is temporary and will usually be corrected in 24 to 48 hours. Even if they have a short duration, they are still strokes. Once the clot or blood sludging has been cleared from the blood vessel, and the blood flow and oxygenation to the area is restored, then normal functions in the area will return.

Classic examples of stroke include: complete paralysis of one half of the body or a hand, the drop in the corner of the mouth, an eye turning inward from its normal orientation, numbness in the face, or loss of speech. If this is a transient ischemic attack, then the stroke process that blocked the blood flow will be restored and the symptoms will disappear and normal activity will return. If the blockage cannot be cleared, then the brain damage becomes permanent and the symptoms of the brain damage will remain.

Recovery from Palsy and Stroke

There are many common symptoms among modern neurodevelopmental diseases, but there will be differences in the degree of disability and the extent of recovery. Some infants and children will recover everything, some will recover moderate functioning, some will recover very little. Some people will recover language and some will not have any language. Some can repeat words and sentences and some cannot. Some have sensory problems, some don't. Some people have psychosis, others do not.

The entire range of behavior, social skills, emotional processing, sensory processing, cognition, memory, and intention can all be damaged by strokes. Damage can be quite variable. It can range from minor in specific areas of the body, to major system-wide damage involving impairments to many areas of functioning.

Detecting Strokes with Imaging Technology not Always Possible

Blockages at the microvascular level do not show up with current imaging technology. Even when there are strokes in the small arteries, which lead to capillaries, the blockages may be undetectable. So, instead of using high tech instrumentation to find evidence of microvascular strokes, we must use our eyes to look at the consequence of the strokes that appear in the activity of the human face. It’s all visible if you know what you are seeing.

Visual Evidence of Damage to the Seventh Cranial Nerve
The seventh cranial nerve primarily controls the lower half of the face. Commonly, palsy to this nerve will cause a weakness in the corner of the mouth. One corner will have a slight downward droop. This will become very noticeable when the person smiles. In a normal smile, we would see both corners of the mouth rise upward. However when there is palsy to the seventh cranial nerve, one corner will be unable to rise in unison with the other.

Specifically, the area of the brain that is being damaged when there is drooping in the side corners of the mouth is called the posterior internal capsule. In addition to causing a drop in the corner of the mouth, it can take away the wrinkles on the top of the forehead, and affect the blinking of the eyelids.

The impairment that results from damage to the seventh cranial nerve usually occurs without detectable evidence from medical imaging scans. CT scans, MRI scans, angiogram,
and any other tool that was in use in 2009 could not detect strokes taking place at the microvascular level such as in capillaries.

Blockages can be seen in larger blood vessels, but not in capillaries that are equal in size or even smaller than the diameter of red blood cells. If you arranged a single row of red blood cells and stretched them across the head of a pin, then it would take 133 or more red blood cells to go from one edge of the pin head to the other. If you did this, you would be unable to see the line of cells, because they are far smaller than what anyone can see without a microscope.

A red blood cell is 6 to 8 µm (micrometers) in width – each micrometer being one millionth of a meter. Remember, some capillaries are so small that even red blood cells have to squeeze through them.

**Loss of Symmetry in Face Shows Sign of Stroke**

When physicians look for evidence of a stroke, they look for symmetry and the lack of symmetry in the entire face. Lack of symmetry is an indication of a stroke.

If an adult man or woman suddenly develops a drop in the corner of the mouth today, and it wasn’t there yesterday, then this is a clear indication of a stroke to the seventh cranial nerve. Neurologists, family physicians, and other doctors are all trained to recognize this type of symptom. When they see this, they would know to get the person admitted to the hospital, because they need treatment for a stroke.

But why does this same stroke symptom get ignored when it appears in children? If this reaction happens to a child after taking a vaccine, then it is reasonable to assume the vaccine caused the stroke, however, doctors seem not to notice such symptoms when they occur in children.

**Facial Droop: Common in Autism**

In addition to the seventh cranial nerve controlling the corners of the mouth, it also controls the area of the cheek between the corner of the nose and the upper lip. This area becomes flat. The natural rounded curve of the cheek is lost. The bulk and tone disappears on one side, but the other remains normal. This is also called a facial droop. The sides of the face do not move symmetrically any more. The folds and angles of the nasal labial folds become asymmetrical. We often see this type of symptom in children with autism spectrum disorders.
The bottom line is that whenever there is a drop in the corner of the mouth or the flattening of the nasal labial fold, there is damage to the seventh cranial nerve, and damage to the brain is occurring. This sign of a stroke does not communicate the degree of damage, it only that it is occurring. The face is just a window into the brain and the whole body --- it is an indication of what is happening in the entire blood supply for the entire body.

**Local and System-wide Damage in the Body Represented**

When we see seventh cranial nerve damage, we can be sure that the damage is not isolated to the seventh cranial nerve – the damage is happening everywhere.

The blood is being sludged up in multiple areas of the body, which is causing ischemia, damage to tissue, functional disorders, and disease. This is not genetic. It is acquired. The drop in the corner of the mouth is the result of low zeta potential and the MASS process. People with autism spectrum disorders, neurodevelopmental disorders, ADHD, and those who are having adverse effects from vaccines such as hepatitis, flu, anthrax, Gardasil, DPT, MMR, etc. are having a generic response. The body is reacting to having foreign matter put into it.

**Damage to the Sixth, Fourth, and Third Cranial Nerves**
There are three cranial nerves that control the movement of the eyes. They control the muscle groups that move the eyes left and right, up and down, and diagonally.

**Sixth and Third Cranial Nerves**

The sixth cranial nerve controls the muscles on the outer corners of both eyes. The third cranial nerve controls the muscles on the inner corner of both eyes by the nose. Together, these two nerves trigger the muscles to move the eyes to the left and to the right.

These two nerves must work together to move the eyes. If a person looks to the right, then the sixth cranial nerve on the outside of the right eye tells the muscles to pull that eye to the right. At the same time this is happening, the third cranial nerve causes the muscles at the inner corner of the left eye to pull the left eye to the right.

**Common First Sign of Vaccine Damage**

Palsy to the muscles of the eyes controlled by the sixth cranial nerve is often the first sign of vaccine damage. It is important to realize that the six cranial nerve is located in a vascular watershed area in the brainstem. This means that if blood flow is reduced through the brainstem coming off the basal artery, then the vessels furthest from that flow source are the first ones to dry up like a river bed during a drought. So, blood sludging in this area...
Weakness in the sixth cranial nerve can appear within a few hours or days after vaccination. Normally, the eyes move in perfect unison when a person looks to the right or left, but when there is damage to the sixth cranial nerve, then one eye will lag behind the other as they move.

When there is damage to the sixth cranial nerve, then there will be palsy on the outer side of the eye. This will cause the muscles on that side of the eye to be overly relaxed. This will enable the muscles controlled by the third cranial nerve to pull the eye slightly toward the nose, when compared to the other eye, which is not experiencing palsy.

**Life Threatening Damage to the Area of the Sixth Cranial Nerve - Sudden Infant Death After Vaccine Exposure**

More serious damage is occurring when there is palsy to the outer corner of both eyes. In this situation, weakness to the outside corners of both eyes causes the eyes to rest in a misaligned position.

Both eyes will appear to deviate in an inward direction toward the nose. This means that the palsy has affected the sixth cranial nerve on both sides of the face. This situation is more times than not ischemia in the brain.
The oxygen deprivation happens without pain, thus it is silent. The deviations in normal eye movement are a subtle neurological sign of damage in process.

In cases of sudden infant death, we realize that the controls for the left and right movements of the eye are right beside the centers in the brainstem that control automatic respiration. This section of the brain tells our lungs to breathe. As a result, when strokes occur in this area, they might start silently as evidenced by one eye turning inward.

If the restriction in blood flow to this tiny area continues and expands to include both eyes (greater damage), and then the blockage expands to include the respiration center, then sudden death can occur. Sometimes death of this type can happen during sleep without the neurological features when a stroke to the tiny capillaries in the respiration center takes place. However, a stroke to the sixth cranial nerve can be a serious warning regarding the possibility of sudden death for an infant or a person of any age.

An important case that illustrates this pattern of respiratory failure was seen in a baby who became seriously ill within 4 hours of receiving the MMR vaccine. The parents of baby M realized that he was having a serious problem. His condition continued to deteriorate even after several visits to the doctor. He was hospitalized after seizures, and went into respiratory failure while hospitalized. He was put on a ventilator to keep him alive. When he was in the hospital doctors did a cerebral profusion scan to evaluate blood flow in the brain. The scan showed normal vital signs, normal blood pressure, normal heart rate, etc. but there was no blood flow through the brain.

When the blood supply can’t move through the brain, the functioning of the brainstem is destroyed. This prevents a person from remaining alert and awake, and it takes out the brainstem area for respiration, which will ultimately bring death. His family and his physicians watched him slowly die while the respirator did his breathing for him. Basically they were watching his brain as he went through the stages of sudden infant death after vaccine exposure. [1]

Fourth Cranial Nerve Vertical Gaze in Vaccine Injured and Gulf War Vets
The fourth cranial nerve controls movement of the eyes as they look downward and inward towards the nose. This nerve is activated when we look down towards the floor to the left or to the right. There are twelve tendons that attach to the eyeball. They are the points where muscles pull the eye one way or another. If a nerve that controls the muscles linked to a tendon is damaged, then the normal contraction in that direction is lost and weakness results. In the case of the fourth cranial nerve, if there is damage to the nerve on one side, then the eye will not look straight ahead, but will look slightly upward in comparison to the other eye. This is called a fourth cranial nerve vertical gaze.

A fourth cranial nerve vertical gaze can be seen in children who have been injured by vaccines and in some Gulf War veterans. This damage causes the eyes to see into the world at slightly different horizontal planes. The consequence of this condition is that people will tilt their head so that the eyes are in the identical horizontal plain.

People unconsciously compensate for this fourth cranial nerve weakness without being aware of the problem. They will tilt the head to the left or right depending on the eye that is affected by the palsy. Sometimes they tuck the chin slightly as they look forward to put the eyes into the same horizontal plane.

If people do not make these compensations, then they might have double vision. Even if there is not double vision, the slightly different sensory input from the two eyes would confuse the brain, which is expecting to receive input from the same horizontal plane. The human brain is not designed to see two different images even if they are only slightly different.
There are several ways to test for damage to cranial nerves. Many have been known for a long time and are routinely used by neurologists. Dr. Moulden’s research added a new test to the set of assessment tools.

**Watching Eye Movements**

Neurologists test the eye movements by asking a person to follow his finger as he moves it in front of the person’s eyes. The neurologist asks the person to look to the left, and then to look up and down. He then asks the person to look to the right, and repeats the up and down movement. Basically the person is instructed to move the gaze of the eyes in an “H” pattern. This moves the eyes through all cardinal gazes.

Are the eyes moving together as the gaze changes from one direction to another? Can they go through all the different ranges of gaze or are there some that are not possible to accomplish? When a person tries to go through all the gazes of the "H" pattern, he will need to use all of the three cranial nerves that control the movements of the eyes. An inability to move in one of the directions will indicate palsy. Uneven movements where the eyes are able to move, but do so at a different rate of speed indicates palsy. Where there is palsy, there is neurological damage.

If there is palsy in one of the cranial nerves to the eyes, such as the third cranial nerve, then the eyes will no longer be perfectly yoked together. The yoke is broken. If there is damage to the third cranial nerve and a person looks to the right, then the right eye will move normally, but the left eye will be sluggish and will lag behind. This produces a momentary disruption in visual perception even if the person isn't aware of it.

We were created to have binocular vision in which the eyes move together in perfect unity. This is quite different from some animals that have eyes on the sides of their heads. Lizards can look in different directions at the same time. If we tried to do this, then it would confuse the brain. Everything would look blurry and it wouldn't make sense to us.

Sometimes there is a noticeable misalignment of the eyes that is very visible when the eyes are viewed from the front while they are at rest. At other times the palsy becomes more evident when the eyes move. The situation where one eye lags behind the other when they move is not always easy to see.

A video recording of eye movements can reveal palsy. Simply record the eye movements as the person moves the eyes through the “H” pattern, then replay the video at a very slow speed to reveal any problems.
It will be helpful to make a video before vaccine use and another one afterward to look for possible vaccine damage if a person still wishes to use vaccines. Sometimes family photos and videos of children that were taken before neurological damage will quickly reveal the differences in facial expression and eye movement.

**Measuring Electrical Activity in Muscles of the Face**

Another before-and-after test that can be done to reveal vaccine damage involves the placement of electrodes on the corners of the cheeks and the corners of the forehead. This will measure impedance and muscle activity. If this is done before vaccination and then again two or three days after vaccination, then there will be different results.

There will be a significant difference in the degree of muscular contraction and background electrical noise in these areas for many people. These differences can appear even if there are no visible symptoms. The damage is silent, but the electrodes are able to record the cessations of neurological activity, which is being caused by ischemia to the brain. This is the MASS reaction to the vaccine.

**Evaluating the Blinking of the Eyelids**

Evidence of cranial nerve ischemic stroke is also visible in the blinking of the eyes. Changes in eye blinking activity is a new tool for examining the signs of neurological damage.

In the absence of neurological damage, the eyelids will be yoked together and will close and open at the exact same rate. However, when there is palsy to one of the cranial nerves that control movement of the eyelids, then the opening and closing will not be in unison. One eyelid will lag behind the other as they move.

The eyelids blink extremely fast, and it is not possible to evaluate their movement with standard visual observation. The normal length of an eye blink is 300 to 400 milliseconds, but the eyes can blink even faster in some situations. As a result, it is necessary to prepare a video recording of eye blinking and to replay the video very slowly and examine the movement frame by frame. The eyes automatically blink every 2 to ten seconds. Thus, it is not necessary to do a long recording. Children’s eyes normally blink less frequently than adults.

If there is palsy to the fifth or seventh cranial nerve, then the eyelid that lags behind the other during an eye blink is the side that is affected by the palsy. It can no longer keep up with the normal functioning eyelid.

This test cannot be faked. It is true that we can voluntarily decide to blink, and we can intentionally blink the eyes slowly and make one eyelid move slower than the other. However, what is being described here is involuntary eyelid blinks. We cannot intentionally
cause a different rate of movement in the unconscious blinking of our eyelid when an eye blink only lasts one third of a second or less. A true involuntary eye blink can be stimulated by touching the cornea of the eye with a wisp of cotton.

Differential rates of involuntary eyelid blinking are a physiological and clinical sign that ischemia is occurring from a MASS reaction and/or the zeta potential has been weakened. Once the vascular supply has been damaged, then the individual is uniquely susceptible to anything that would cause further immune hyperstimulation or decreasing zeta potential.

The next exposure to a vaccine or to environmental toxins will likely cause an even greater MASS reaction and greater loss of zeta potential. This will increase the likelihood of sludging and less blood flow to the vascular areas that have been previously damaged.

The analysis of eyelid blinking is a new reflex for the examination of neurological integrity. Physicians can tap a hammer on a patient’s knee and watch the leg jerk. The jerking of the leg cannot be intentionally created, because it is a function of neurological stimulation. A person cannot fake this leg movement when the hammer hits the nerve, because it is an automatic response. The same is true for involuntary eye blinking.

If the palsy to the nerves that control blinking is substantial, then a person might not be able to close one of his eyelids.

**Recommendations for Healing Vaccine Damage**

Dr. Moulden was just as interested in preventing vaccine damage as he was in helping to heal those who experienced damage. I was unable to discover much about the therapies that he was developing, because this information has already been removed from the internet. I do know that the beginning point for his therapies is first to eliminate the triggers for MASS reactions and reductions in zeta potential.

This means to discontinue the use of vaccines, and to eliminate the introduction of foreign substances into the body. Thus, clean air, clean water, and clean food are essential. Environmental toxins in air, water, and food can trigger MASS and zeta reactions, which can lead to microvascular strokes.

This means that we must turn away from using pesticides and chemicals in the home. This means discontinuing the use of toxic cleaning products, air fresheners, perfume, scented laundry products, scented candles, and anything else that pollutes the air with toxins. This means only consuming clean water.

Municipal water that contains chlorine, fluoride, residual pharmaceutical drugs, agricultural chemicals, etc. is a trigger to microvascular strokes. Municipal water that is flocculated with
aluminum as part of the cleaning process must be avoided. Bottled water sold in plastic is also unsafe.

Food that contains chemical residue or chemicals that were intentionally added for manufacturing purposes must be avoided. Food that contains pesticide residue, preservatives, stabilizers, artificial flavorings and colorings, MSG and other excitotoxins, GMOs, added hormones, and other toxic substances must be avoided.

Mercury is a highly toxic substance that effects MASS reactions and zeta. Thus, we should be concerned about mercury that is used in dental fillings, mercury in food, and mercury in vaccines.

Dr. Moulden didn’t mention electromagnetic radiation, cell phone radiation or other kinds of radio frequency pollution, but we do know that these affect human health.

In practice, we need to help our families and everyone else by providing a clean environment in our homes, cars, and especially our kitchens. Organic food and grass-fed animal products will need to be emphasized. We now know that even organic products can contain residual levels of chemical toxins and still meet USDA (Department of Agriculture) limits. We can no longer assume that USDA certified organic means pure and pesticide free.

Dr. Moulden was doing considerable research into how negative zeta can be restored in the blood. He had developed a process for establishing a high negative charge in distilled water. He found that the consumption of this type of water would help restore negative zeta in the blood, which would reduce sludging and clotting of the blood, and which would help people heal from vaccine damage. Unfortunately, information about the process that he used to prepare this type of water could not be located at this time.

I did review the research of prominent scientists who are working with zeta and water. The good news is that their work may result in the development of important therapies for people who have experienced vaccine damage. They are looking at ways to restore negative zeta potential in the blood when it has been compromised.

Questions and Answers

Why doesn’t everyone have the same reaction to exposure to vaccines and environmental toxins?

Dr. Moulden provided information about two identical twin boys from Atlantic Canada. Both came from the same placenta and they shared the same blood supply during prenatal development. When they were born, one developed autism features and the other developed learning disabilities and language problems. This shows us that the variation in
the development of modern neurodevelopmental illnesses is not genetic but is more related to the experience of MASS reactions and zeta changes. The variation from individual to individual is a function more of a process that goes on within the individual than it is a function of genes or life in the prenatal environment. Once these children were born, it was no longer possible to assume that they were not subjected to slightly different exposures even when they were kept in the same home.

Why does one person experience damage to the sixth cranial nerve of the eyes, when another experiences damage to the seventh cranial nerve of the mouth and cheek?

Dr. Moulden indicated that substances, viruses, bacteria, or their byproducts have an affinity to influence certain areas of the body. Different groups of cells within the broader classification of the brain will be susceptible to being influenced by specific bugs, specific viruses, specific toxins, specific foreign proteins, etc. This means that the exposure to certain foreign substances will tend to have an effect on certain locations and to not have strong influence on others. This sets up certain tissues to be damaged by the ischemic process that is caused by MASS and by zeta.

Since there are now thousands of foreign substances that can potentially trigger a MASS reaction and damage zeta potential, it is no longer possible to predict a specific reaction to a single foreign entity when it is introduced into the body. In fact, a person might even have a different reaction to the same toxin at different points in his or her life. Our overall health, recent toxic exposure, and nutritional status at any point in time will affect how we react to a specific toxin.

Dr. Moulden stated that nutrition plays a very critical role in the degree to which a person can handle the toxins that are put into the body. He noted that the negative health reactions of people who take vaccines in Africa are not the same as in North America. The poorer quality diet in Africa makes them more susceptible to adverse reactions.

Do animals experience a MASS reaction and damage to zeta levels when they receive vaccines?

The reactions experienced by children and adults when they receive vaccinations are also experienced by companion pets and livestock when they are vaccinated. Vaccines are not safe for humans and they are not safe for animals. The reactions in the human body, relative to MASS and zeta, also happen in horses, dogs, cats, ferrets, cattle, dairy cows, poultry, etc.

Conclusion: Dr. Moulden's Work Must be Studied and Continued to Understand Vaccine Damage
Dr. Andrew Moulden was dedicated to revealing the truth about vaccine related illness and death. There is no doubt that vaccines cause harm to everyone who uses them. Dr. Moulden’s research into zeta potential and MASS reactions revealed the mechanisms through which damage occurs.

He showed the close relationship between a wide range of modern neurodevelopmental diseases. He explains how numerous illnesses can have multiple triggers and how these illnesses are actually part of a common syndrome with a continuum of presenting symptoms. He showed how learning disabilities, autism, Alzheimer’s, irritable bowel disease, Crohn’s disease, colitis, food allergies, shaken baby syndrome, sudden infant death, idiopathic seizure disorders, Gulf War syndrome, Gardasil adverse reactions, schizophrenia, Tourette’s syndrome, chronic fatigue syndrome, fibromyalgia, expressive aphasia, impaired speech skills, attention deficit disorders, silent ischemic strokes, blood clots, idiopathic thrombocytopenia purpura, Parkinson’s disease, and other modern neurodevelopmental disorders are all connected.
His research was able to show that the modern epidemic of illnesses such as those in the preceding list do not represent a genetic problem, or a problem with pathogens such as viruses. Rather these illnesses are caused by the body’s normal reaction to foreign substances that are brought into the body. This reaction is called excessive non-specific immune hyperstimulation.

Vaccines are one of the largest triggers of excessive non-specific immune hyperstimulation, which ultimately leads to blood sludging, clotting, and loss of negative zeta. The combined effect of all these factors produces illness, disability, and death.

Dr. Moulden challenged the whole western based germ theory model of disease. He did not believe that antibiotics and vaccines were the solution to the epidemic rise of twentieth and twenty-first century modern illnesses. Instead of seeing vaccines as a hope for relief from disease, he, like many other forward thinking researchers, understood that vaccines were a major cause of the illnesses that we now face.

He also saw that it was not just the vaccines that were introducing foreign substances into our bodies, but it was also our exposure to pesticides and numerous other chemicals that was bringing down our health. He recognized that poor nutrition has a direct effect upon the amount of vaccine damage that people experience. The poorer the nutrition, the greater the amount of damage from vaccines.

My hope in preparing these articles is that other physicians and researchers would be inspired to take a serious look at the work of Dr. Moulden so that they could continue it. I am also hoping that parents will take a serious look at the hazards of vaccine use for their children, and would exclude their children and themselves from using vaccines.

I look forward to the day when we value human life to such an extent that we will proceed with great caution when considering the arbitrary use of biological and chemical concoctions to prevent illness and bring about healing. The human body is not a machine, which can be adjusted to meet the design standards of human engineers. Human life is not a software program that can be rewritten at will to meet the financial needs of corporations. The human body and human life is a creation of God, and as such, it requires great care and protection from what man through his greed for money and power is trying to do to it.

Dr. Moulden was engaged in a life-long search for truth. May we carefully discern the difference between the information provided by medical marketing firms, and the true principles that sustain human life. May we cherish life and not assume that illness and disability are normal. May we, as Dr. Moulden did, not be satisfied with a medical care system that fails to deliver health. May we reject a medical system that is driven by the fear of illness, and which is organized to make money at the expense of human suffering. Let us not forget the source of true healing that exists in the grace of God.
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Chapter 1 Resources


[18] IBID.
Chapter 2 Resources


[6] IBID.


Chapter 3 Resources


Chapter 4 Resources


