

# [Darnetta fancher](https://assignbuster.com/darnetta-fancher/)

Darnetta Fancher Eng 102 3/12/13 What is Childhood Vaccination? When germs enter the body, the immune system recognizes them as foreign substances (antigens). The immune system then produces the right antibodies to fight the antigens. Vaccines contain weakened or dead versions of the antigens that cause diseases. This means that the antigens cannot produce the signs or symptoms of the disease, but they do stimulate the immune system to create antibodies. These antibodies help protect you if you are exposed to disease in the future. There's a lot of discussion and controversy around the childhood vaccine debate. The truth of the matter is that childhood vaccines can create significant side effects that can irreversibly change the child's quality of life. The best choice or decision to make is an informed one. But in order to make an informed choice or decision, parents need the proper or correct information. The mercury / vaccine controversy began in 1997, when Frank Pallone, a Democratic congressman from New Jersey, attached an amendment to an FDA reauthorization bill, requiring the FDA to " compile a list of drugs and foods that contain intentionally introduced mercury compounds and [to] provide a quantitative and qualitative analysis of the mercury compounds in the list." The bill later evolved into the landmark FDA Modernization Act of 1997 (FDAMA) and was signed into law on November 21, 1997. At high exposure levels, mercury causes neurotoxicity in humans, especially in fetuses and small infants whose brains are still developing. The major toxicity of mercury is manifested in the central nervous system. Forty years ago, when women at Minamata Bay, Japan, ate fish contaminated with methyl -mercury from pollutants, their children were exposed to high levels in utero and were born with developmental and neurologic disorders. Methyl -mercury poisoning also occurred in Iraq following consumption of seed grain that had been treated with a fungicide containing methyl -mercury. In both the Japanese and Iraqi episodes, exposures to methyl -mercury were high. Two population-based studies are often cited as the basis for calculations on the neurotoxicity of mercury in utero. In the first, a study from the Seychelles, infants were exposed to mercury in utero when their mothers ate a high daily consumption of methyl — mercury containing fish. The mothers had mean mercury levels in hair of 6. 8 ppm. No developmental defects were detected. A natural infection often provides more complete immunity than a series of vaccinations – but there's a price to pay for natural immunity. For example, a natural chickenpox (varicella) infection could lead to pneumonia. A natural polio infection could cause permanent paralysis. A natural mumps infection could lead to deafness. A natural Hib infection could result in permanent brain damage. Vaccination can help prevent these diseases and their potentially serious complications. The human newborn comes into the world with residual antibodies from the maternal blood stream which, in the absence of breast feeding, would provide overall immunologic protection for about six months, and for measles up to 12 months. For those who do choose or are mandated to vaccinate, why not to vaccinate at five or six months of age rather than compromise and endanger an evolutionary system already in place? Otherwise the newborn immune system is largely rudimentary, requiring a series of microbe challenges to become fully functional, a process requiring two or three years. Without these natural challenges the immune system remains relatively weak and vestigial. This may be the reason that babies are always putting things in their mouths as an instinctive evolutionary trait similar to mammals in the wild. " Vaccination today is used all around the world, and there are certain standards that must be observed so that all vaccines remain effective and pose a minimum risk of actually infecting the child. If the person to be vaccinated is not, or has not recently been sick, has a healthy immune system and is vaccinated with a quality product, the risk of having any unwanted consequences is less than 1%. The effectiveness of protection of one’s health as a result of immunization is many times higher, which, in my opinion, makes the risk justified. Therefore, it would only be right to end all debate by passing a binding country-wide law to make certain vaccines (against those diseases that are very widespread in minors, or that may cause very serious consequences for one’s health) obligatory. After all, when it comes to health, there is no place for speculation. Resources BOOKS Institute of Medicine Staff, et al. Immunization Safety Review: Multiple Immunizations and Immune Dysfunction. Washington, DC: National Academy Press, 2002. Kassianos, George C., et al. Immunization: Childhood and Travel Health. Oxford, UK: Blackwell Publishing Inc., 2001. Parents Guide to Childhood Immunization. Washington, DC: U. S. Government Publishing Office, 2001. Studor, Hans-Peter, et al. Vaccination: A Guide for Making Personal Choices. Edinburgh, Scotland: Floris Books, 2004. WEB SITES