

# Unvaccinated children are healthier than vaccinated

Ivo Zvardon

Posted Feb 23, 2025

There has been a lot of discussions, lately, about the benefits or drawbacks of children's vaccination.

Many people realized during the Covid pandemic that they had been lied to or misled by their health authorities and governments, with regards to the dangerous Covid-19 mRNA vaccines. Another factor is the dramatic increase of autoimmune and neurological diseases in children, especially in developed countries, with many scientists pointing out to vaccines as the main culprit.

This result is a higher level of skepticism towards vaccines in general. Unfortunately, this leads more and more into a dividing of society, between the so-called Pro-vax and the Anti-vax groups. In my opinion, this approach is wrong, and the best way to assess the problem of whether to vaccinate or not is to analyze the results of independent scientific studies.

This article is therefore intended especially to whoever is considering a vaccine for their child.

Thankfully, some independent studies have already been conducted, comparing children that got the vaccines, with those that did not.

These are 5 independent studies, comparing **Vaccinated versus Unvaccinated** populations. They do not consider a specific vaccine – they compare individuals that are unvaccinated versus those who are vaccinated (fully or partly), according to recommendations of the CDC (Center for Disease Control and Prevention) child vaccination schedule, or, in the case of the Dutch study, the Dutch vaccination program.

I find those studies interesting and important, and I encourage everybody to read the whole studies – links below. It is as well important to understand how those studies were performed and what do the outcomes say. However, for those who lack time, here is a little résumé of the outcomes from each study.

***-Pilot comparative study on the health of vaccinated and unvaccinated 6 to 12-year-old U.S. children (Anthony R Mawson, Brian D Ray, Azad R Bhuiyan, Binu Jacob, 2017).*** <https://www.oatext.com/pdf/JTS-3-186.pdf>

Sample of 666 children, age 6-12 years. 261 children unvaccinated, 405 children fully or partially vaccinated. Outcome:

Vaccinated children were:

-3,2 x less likely to get chicken pox (7,9 children in vaccinated group vs 25,3 in unvaccinated group)

-3,3 x less likely to get pertussis (2,5 vs 8,4).

But Vaccinated children were as well:

-4,2 x more likely to be diagnosed with ADHD (4,2 in vaccinated group vs 1 in unvaccinated group)

-4,2 x more likely to be diagnosed with ASD (Autism Spectrum Disorder) (4,2 vs 1 )

-5,2 x more likely to be diagnosed with Learning Disability (5,7 vs 1,2 )

-3,7 x more likely to be diagnosed with any neurodevelopmental disorder (NDD)

-2,9 x more likely to get eczema (9,5 vs 3,6 )

-26 x more likely to be diagnosed with allergic rhinitis (10,4 vs 0,4 )

For the partially vaccinated children, the values were, for most of the conditions, between those of vaccinated and those of unvaccinated children.

Interestingly, as other similar studies have shown, boys were more likely to be diagnosed with one of those conditions (2x more likely to get allergies, 4x more likely to be diagnosed with Autism, and 2x more likely to be diagnosed with any neurodevelopmental disorder) compared to girls.

**-Analysis of health outcomes in vaccinated and unvaccinated children: Developmental delays, asthma, ear infections and gastrointestinal disorders (Brian S Hooker and Neil Z Miller, 2020).**

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7268563/>

Study published in the prestigious SAGE Medicine Magazine. The authors compared 2047 vaccinated vs unvaccinated children of min. age 3 years and max. age 12,5 years, born after 2005 - children vaccinated during their 1<sup>st</sup> year versus children that were not vaccinated during their 1<sup>st</sup> year. The authors used data from 3 pediatric practices in the United States. Results:

Compared to unvaccinated children, vaccinated children were:

-2,1 x more likely to be diagnosed with developmental delays (10,4 vs 5,1 )

-3,7 x more likely to be diagnosed with asthma (5,6 vs 1,5 )

-1,5 x more likely to be diagnosed with an ear infection (25,9 vs 17 )

-2,9 x more likely to be diagnosed with a gastrointestinal disorder (6,5 vs 2,2 )

**-The Dutch Association for Conscientious Vaccination (NVKP), Netherlands, published their own study about the outcomes of 312 fully vaccinated versus 231 unvaccinated children. Partially vaccinated children or children not following the Dutch Vaccination Program were excluded.**

<https://www.nvkp.nl/ziekten-en-vaccins/overzicht/enquete-2006/>

Compared to unvaccinated children, vaccinated children had (average incidence):

-2,7 x more ear infections (167: 62)

-11 x more aggressive behavior (57:5)

-7 x more convulsions/collapse (21:3)

-2 x more visits to their GP (143:65)

**-Preterm birth, vaccination and neurodevelopmental disorders: A cross-sectional study of 6- to 12-year old vaccinated and unvaccinated children (Mawson et al.2017)**

<https://oatext.com/Preterm-birth-vaccination-and-neurodevelopmental-disorders-a-cross-sectional-study-of-6-to-12-year-old-vaccinated-and-unvaccinated-children.php>

Compared to unvaccinated children, vaccinated children had:

-2,7 x higher odds of neurological disabilities (NDD)

-14,5 x higher odds of neurological disabilities, when born preterm

**-Comparison of percentage of US children with eczema, asthma, food allergy, ADHD, developmental disabilities and delay, speech disorders, birth defects, and autism among vaccinated versus unvaccinated (Joe Garner, The Control Group, 2021).**

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There are more independent studies of vaccinated versus unvaccinated children, mostly with similar, disturbing outcomes. I highly encourage reading them. **Just to name a few:**

**MMR vaccines:**

*-Odds of Autism with MMR vaccine, comparing children vaccinated before 36 months of age to those vaccinated after 36 months of age (DeStefano et al.2004).*

*-Odds of Autism with MMR vaccine before and after 36 months of Age (Hooker 2018)*

*-Relative Risk of Crohn's disease and ulcerative colitis after measles vaccine (Thompson et al.1995)*

*-Diabetes incidence per 100 000 children vaccinated with all 3 recommended Polio vaccinated or unvaccinated (Classen 2008)*

**HPV vaccines:**

*-Odds ratios for neurological disorders after HPV vaccine (Yaju et al.2019)*

*-Odds ratio for asthma diagnosis after HPV vaccine for vaccinated and unvaccinated (Geier et al.2019)*

**Flu vaccines:**

*-Odds ratio for narcolepsy diagnosis after Pandemrix flu shot (miller et al.2013)*

*-Rate of Narcolepsy in Sweden before and after the use of the Swine flu vaccine (Szakacs et al.2013)*

*-Rate of Narcolepsy in Finland before and after the use of the Swine flu vaccine (Partinen et al.2012)*

*-Relative risk of Guillain-Barré syndrome following the seasonal flu shot (Lasky et al.1998)*

-Rate ratio of Guillain-Barré syndrome following the H1N1 flu shot (Wise et al 2012)

-Hazard ratios for acute respiratory infection for vaccinated versus unvaccinated children (Rikin et al.2018)

-Vaccinated vs unvaccinated relative risk of non-flu infections (Cowling et al.2012)

### **Hepatitis B vaccines:**

-Odds ratios for liver problems in Hepatitis B vaccinated versus unvaccinated children (Fisher et al.1999)

-Incidence of Type 1 diabetes in New Zealand children before and after the introduction of the Hepatitis B vaccine (Classen et al.1997)

-Multiple Sclerosis in patients receiving Hepatitis B vaccine versus no Hepatitis B vaccine (Herman et al.2004)

### **Covid-19 mRNA vaccines:**

-Risk of cardiac adverse events following mRNA Covid-19 vaccination (Kim et al.2021)

-Increased risk of Myocarditis in adolescents after the BNT162b2 Covid-19 vaccine (Lai et al.2022)

-Increased risk for Myocarditis in males 16 to 24 years following the 2<sup>nd</sup> BNT162b2 and mRNA-1273 Covid-19 vaccines (Karlstad et al.2022)

-Risk of Myocarditis in men after the 1<sup>st</sup>, 2<sup>nd</sup>, or 3<sup>rd</sup> mRNA-1273 Covid-19 vaccine (Patone et al.2022)

-Increased risk of Myocarditis within 7 days of mRNA Covid-19 vaccines (Simone et al.2022)

-Increased odds of Carditis after the Pfizer BNT162b2 Covid-19 vaccine (Lai et al.2022)

-Increased risk of Myocarditis after the Pfizer BNT162b2 Covid-19 vaccine (Mevorach et al.2021)

Similarly, I encourage the reader to analyze studies of side effect of specific vaccines.

Considering the outcomes of these independent studies, we should rightly doubt the so-called scientific studies financed primarily or partly by the vaccine producers, with procedures tailor-made to generate a positive outcome for the vaccine. A sad fact is that no real placebo trials are being required to be performed by the vaccine manufacturers. The medicinal science defines a placebo as an inert, usually salty, solution. Pharma companies use another, usually older, vaccine for the control group. Since inert placebo has always been a gold standard in medicine, one may find it very bizarre (although understandable, considering the pharma lobby), that this approach is allowed by the health authorities.

Moreover, no long-term side effect studies are being performed by the producers. In most cases, the studies last only a few weeks, then the study is terminated. Therefore, the side effects of the vaccine in the long-term are not known.

Lastly, the law allows the pharmaceutical companies to not be liable of the damages caused by their vaccines (In the U.S. Congressional law H.R.5546 – National Childhood Vaccine Injury Act of 1986, which eliminated liability of pharma companies over the vaccine injuries).

In view of the disturbing results from the above-mentioned and other independent studies, it is clear that the reassuring of our health regulators, and as well recommendations from our governments, are not based on relevant scientific data.

These flaws are rather alarming and considering the rise of autoimmune and neurological diseases in developed countries it becomes obvious that vaccines undoubtedly do contribute to the problem.

We should address our governments and health authorities with the urge to investigate the safety of the vaccines that are being pushed to the market and administered to our children. We need to ensure having properly tested, safe vaccines, for the sake of this generation and those to come.

Do not hesitate to contact me, and thank you for reading,

Ivo Zvardon