

Infants and children's Inability to Metabolize Vaccine Ingredients: A case for Senator Boyer

Twenty-one years ago, Dr. Yolande Lucire, psychiatrist, Australia, began to notice alarmingly high hospital admission and suicide rates among patients treated with antidepressant medications and antipsychotics. Since then she has accumulated damning statistics on suicide, homicide and hospitalization rates among patients and more recently it has become clear that a large percentage of people being treated with psychiatric, antidepressants, cancer drugs, etc. can't metabolize these medications because of common genetic variations. (www.SSRISTories.net - suicides, homicides). [Her study published in the summer of 2011](#) is not only an academic victory but the homicidal speak of their experiences in their own words on how they were moved to kill their loved ones.

In layman's terms the liver is the major detox mechanism of the body. It is the seat of the superfamily of enzymes called Cytochrome P450. This superfamily of enzymes transforms toxins, drugs, medications and vaccine excipients into substances that the body can excrete via the kidneys.

CYP2D6 (cytochrome P450 2D6) acts on one-fourth (1/4) of all prescription drugs, including the selective serotonin reuptake inhibitors (SSRI), tricyclic antidepressants (TCA), betablockers, opiates, neuroleptics, antiarrhythmics and a variety of toxic plant substances.

Up to 15% of the population has a slow or fast acting form of this liver enzyme. Thirty-five percent are carriers of a non-functional CYP2D6 allele, that is, 5% of the US population cannot metabolize perhaps upward of 50% of today's drugs. The risk of adverse drug reactions, including but not limited to suicidal and homicidal ideations, rise especially when these individuals are taking multiple drugs. Drugs that CYP2D6 metabolizes include Prozac, Zoloft, Paxil, Effexor, Hydrocodone, Amitriptyline, Claritin, Cyclobenzaprine, Haldol, Metoprolol, Rythmol, Tagamet, Tamoxifen, and the over-the-counter diphenhydramine drugs, Allegra, Dytuss, and Tusstat. Moreover, CYP2D6 is responsible for activating the prodrugs codeine and other opioids into their active forms. The analgesic activity of the drugs is therefore reduced or absent in CYP2D6 poor metabolizers. The following is a [full list of drugs](#) that need the 2D6 pathway to metabolize.

This means that potentially up to 1 billion people on the planet cannot metabolize and eliminate the commonly prescribed drugs from their bodies as others without enzyme inhibition would.

Today, Mayo Clinic, St. Jude's Children's Hospital and other major institutions have recognized the importance of individualized medicine and the field of pharmacogenetics. They have declared pharmacogenetic testing, prior to prescribing, as standard of care. The gene test identifies whether a person can metabolize the drug properly. Shannan Manzi, director of the clinical pharmacogenomics service at Boston Children's credits James Hoffman and his colleagues at St. Jude Children's Research Hospital with helping Boston Children's Hospital

establish its own pharmacogenetics service. Organizations that haven't yet incorporated pharmacogenetics into patient care need to do so", says Manzi.

Now what has this got to do with vaccines and Sen. Paul Boyer's, (R-Phoenix) legislation that would require that the full list of ingredients ([CDC vaccine excipients-list](#)) before a vaccine could be administered? Let's look more closely at the [excipient ingredients in vaccines](#). The following understanding is that Infants cannot metabolize the multiple overload of the repetitive excipient ingredients in multiple vaccines due to an inability of infants and children to metabolize these toxins due to the generally recognized fact that Cytochrome P450 is "immature" in infants and children. Pharmacogenetics may indeed unlock the key to the epidemic rise of Autism, ADHD, OCD, Bi Polar, Sudden Infant Death, shaking baby, auto-immune disease, allergies, eczema, asthma, seizures, deaths, and juvenile diabetes. The Journal of Pediatric Pharmacology and Therapeutics] [Developmental Pharmacokinetics in Pediatric Populations](#) by Hong Lu, PhD and Sara Rosenbaum, PhD informs us that Infants do not have a mature liver enzyme function of Cytochrome P450 and its various metabolites until the age of three years old. Hence, upwards of 36 vaccine doses by 18 months old, alone, containing unmetabolized excipients, are poisoning and severely disabling the world's emerging humanity. End of discussion! Drop the mic!