

Science gives the honor of having vanquished infectious disease mortalities to nutrition and sanitation

A comprehensive study of this foundational assertion published in 2000 in the high-gravitas journal *Pediatrics* by CDC and Johns Hopkins scientists concluded, after reviewing a century of medical data, that “vaccination does not account for the impressive decline in mortality from infectious diseases . . . in the 20th century.”⁴⁷ As noted earlier, another widely cited study, McKinlay and McKinlay—required reading in virtually every American medical school during the 1970s—found that all medical interventions including vaccines, surgeries, and antibiotics accounted for less than about 1 percent—and no more than 3.5 percent—of the dramatic mortality declines. The McKinlays presciently warned that profiteers among the medical establishment would seek to claim credit for the mortality declines for vaccines in order to justify government mandates for those pharmaceutical products.⁴⁸

Seven years earlier, the world’s foremost virologist, Harvard Medical School’s Dr. Edward H. Kass, a founding member and first president of the Infectious Diseases Society of America and founding editor of the *Journal of Infectious Diseases*, rebuked his virology colleagues for trying to take credit for that dramatic decline, scolding them for allowing the proliferation of “half-truths . . . that medical research had stamped out the great killers of the past—tuberculosis, diphtheria, pneumonia, puerperal sepsis, etc.—and that medical research and our superior system of medical care were major factors extending life expectancy.”⁴⁹ Kass recognized that the real heroes of public health were not the medical profession, but rather the engineers who brought us sewage treatment plants, railroads, roads, and highways for transporting food, electric refrigerators, and chlorinated water.⁵⁰

The illustrations on the following page pose an indomitable challenge to germ theory’s central dogma and stark support for miasma’s approach to medicine. These graphs demonstrate that mortalities for virtually all the great killer diseases, infectious and otherwise, declined with advances in nutrition and sanitation. The most dramatic declines occurred prior to vaccine introduction.

Note the mortality declines occurred in both infectious and noninfectious diseases, irrespective of the availability of vaccines.

“When the tide is receding from the beach it is easy to have the illusion that one can empty the ocean by removing the water with a pail.”

—René Dubos

As Drs. Engelbrecht and Köhnlein observe:

Epidemics rarely occur in affluent societies, because these societies offer conditions (sufficient nutrition, clean drinking water, etc.) which allow many people to keep their immune systems so fit that microbes simply do not have a chance to multiply abnormally.⁵¹

From “The Real Anthony Fauci”, RFK Jr.

History of Drinking Water Treatment

A Century of U.S. Water Chlorination and Treatment: One of the Ten Greatest Public Health Achievements of the 20th Century

American drinking water supplies are among the safest in the world. The disinfection of water has played a critical role in improving drinking water quality in the United States. In 1908, Jersey City, New Jersey was the first city in the United States to begin routine disinfection of community drinking water. Over the next decade, thousands of cities and towns across the United States followed suit in routinely disinfecting their drinking water, contributing to a dramatic decrease in disease across the country (Fig 1).

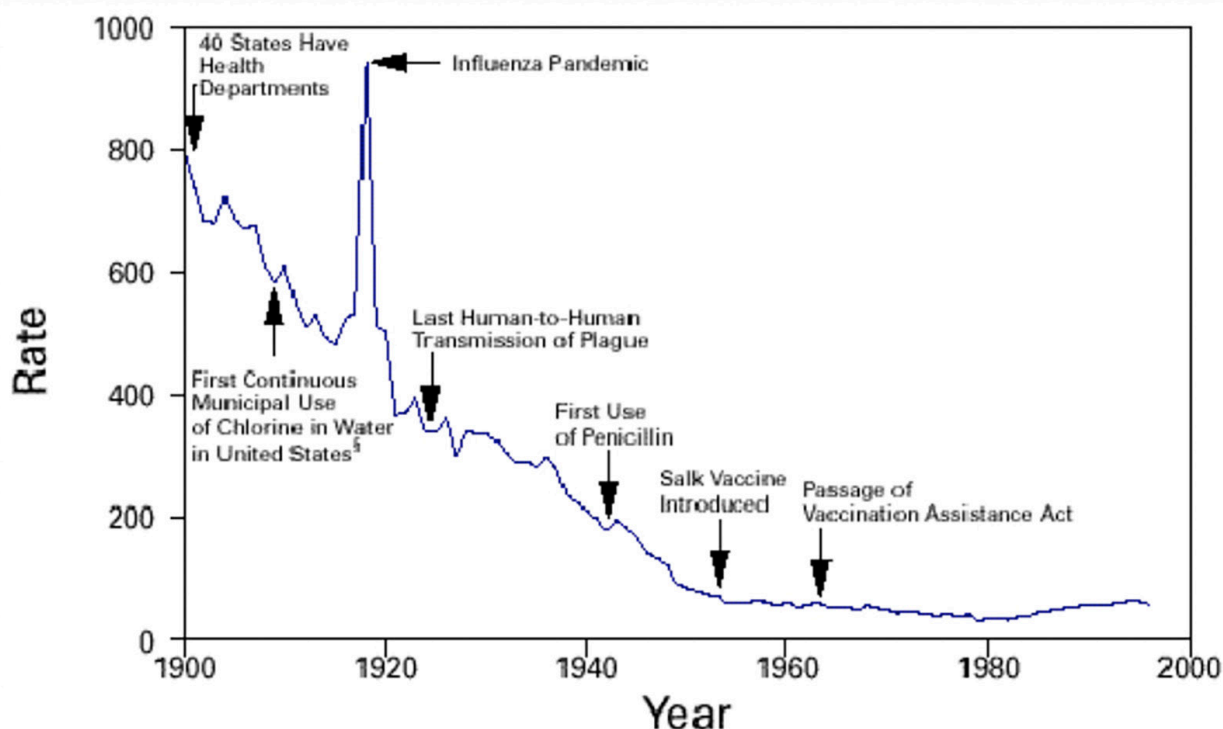


Figure 1. Crude death rate* for infectious diseases - United States, 1900-1996

*Per 100,000 population per year.

The occurrence of diseases such as [cholera](#) and [typhoid](#) dropped dramatically. In 1900, the occurrence of typhoid fever in the United States was approximately 100 cases per 100,000 people. By 1920, it had decreased to 33.8 cases per 100,000 people. In 2006, it had decreased to 0.1 cases per 100,000 people (only 353 cases) with approximately 75% occurring among international travelers. Typhoid fever decreased rapidly in cities from Baltimore to Chicago as water disinfection and treatment was instituted. This decrease in illness is credited to the implementation of drinking water disinfection and treatment, improving the quality of source water, and improvements in sanitation and hygiene.

It is because of these successes that we can celebrate over a century of public drinking water disinfection and treatment – one of the greatest public health achievements of the 20th century.

CDC. [A Century of U.S. Water Chlorination and Treatment: One of the Ten Greatest Public Health Achievements of the 20th Century](#). Morb Mortal Wkly Rep. 1999;48(29):621-9.

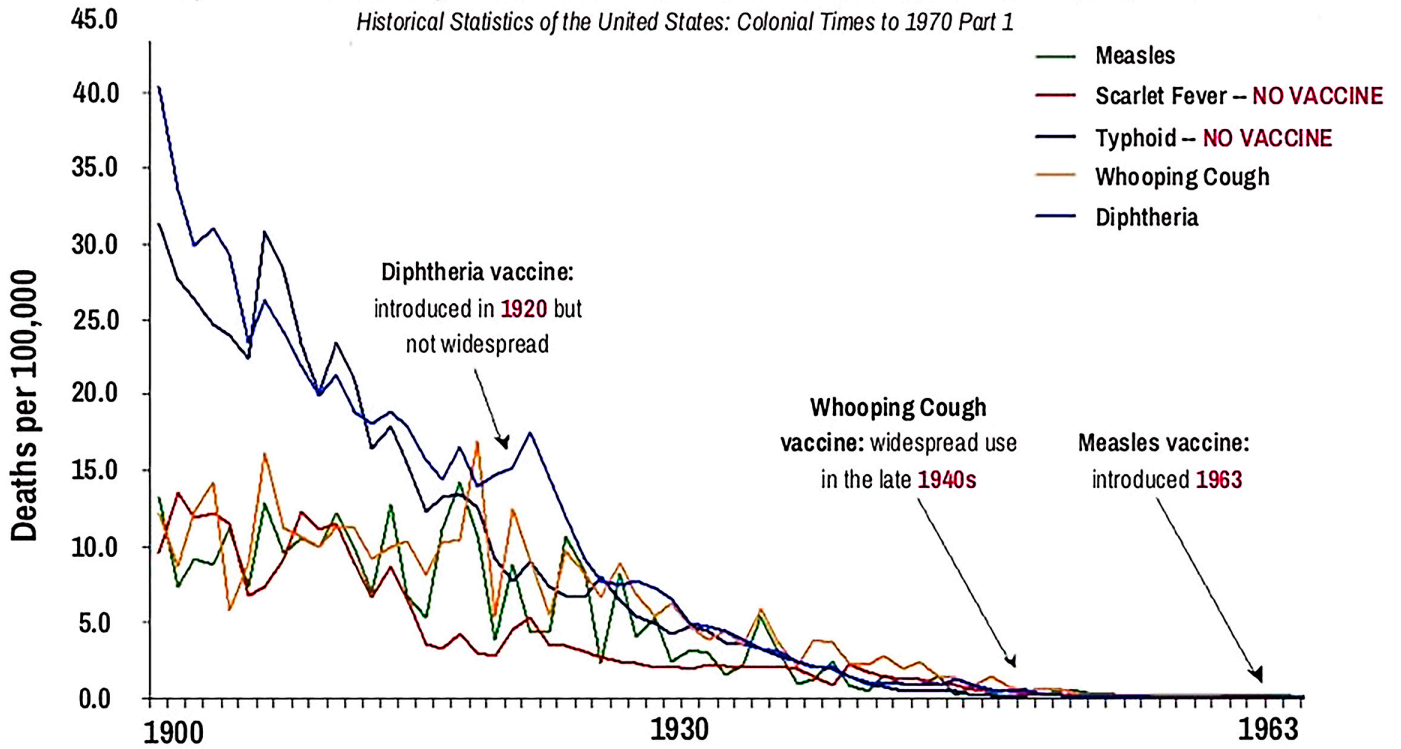


[Learn more about the history of U.S. drinking water chlorination](#)



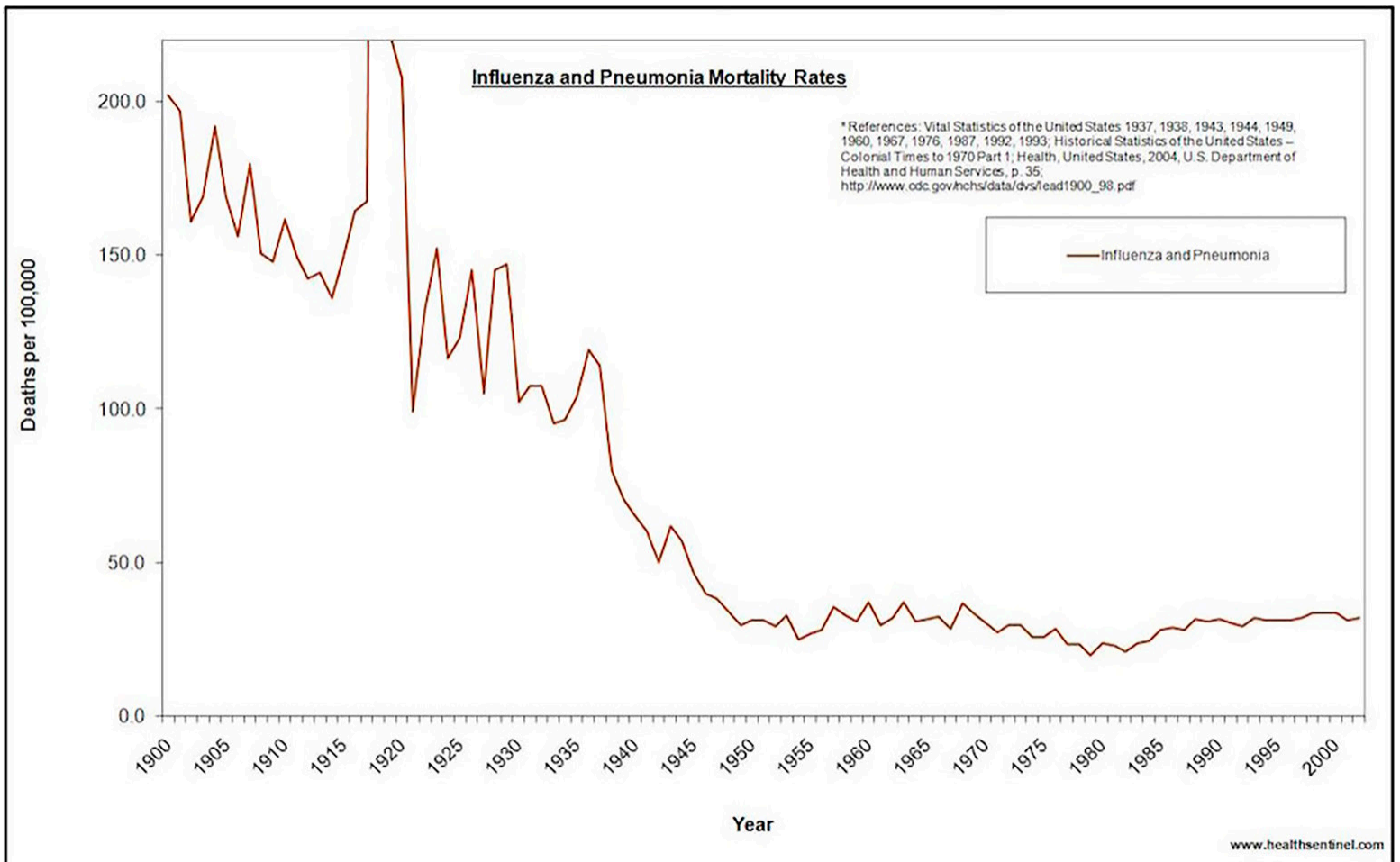
United States: Disease Mortality Rates

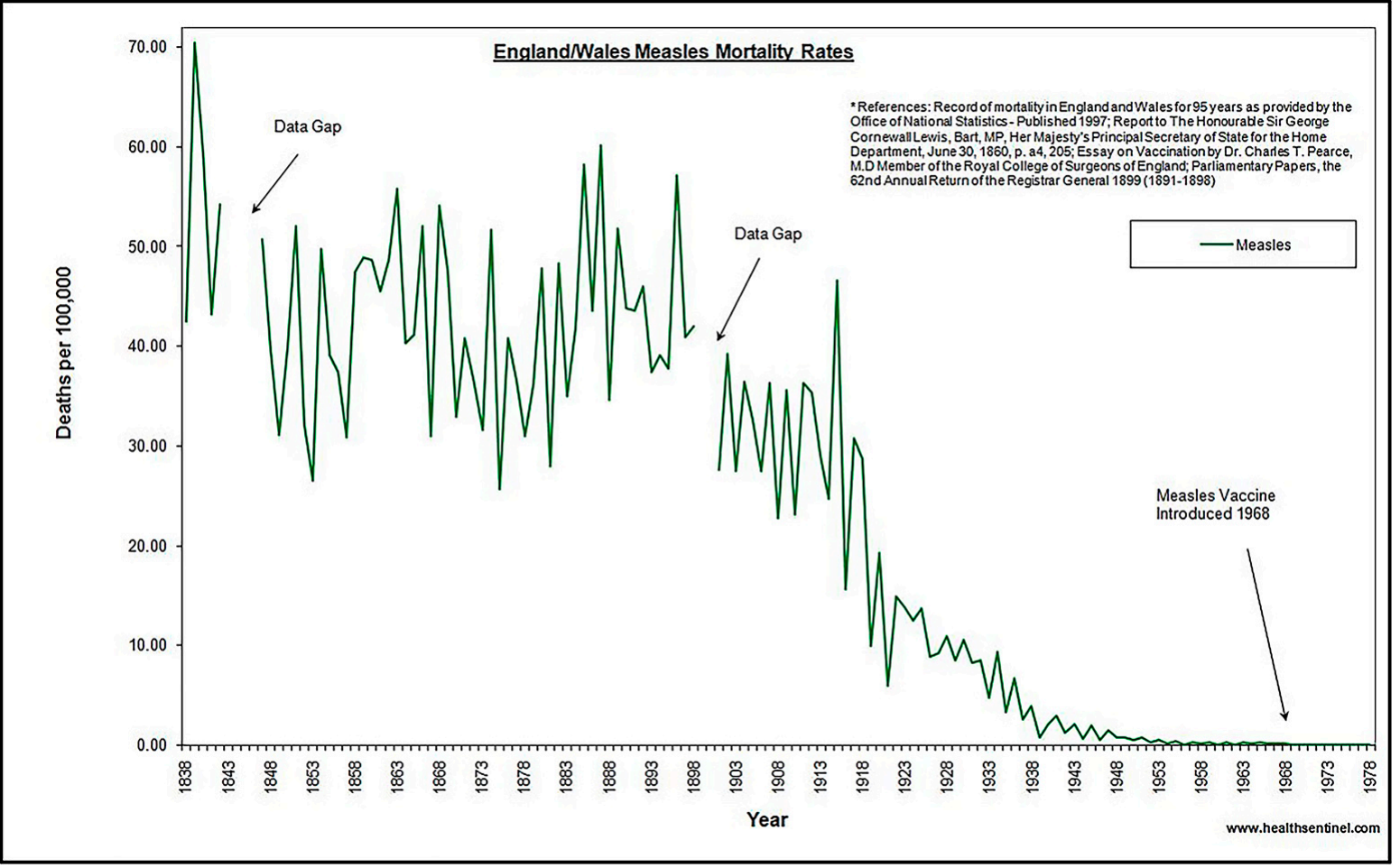
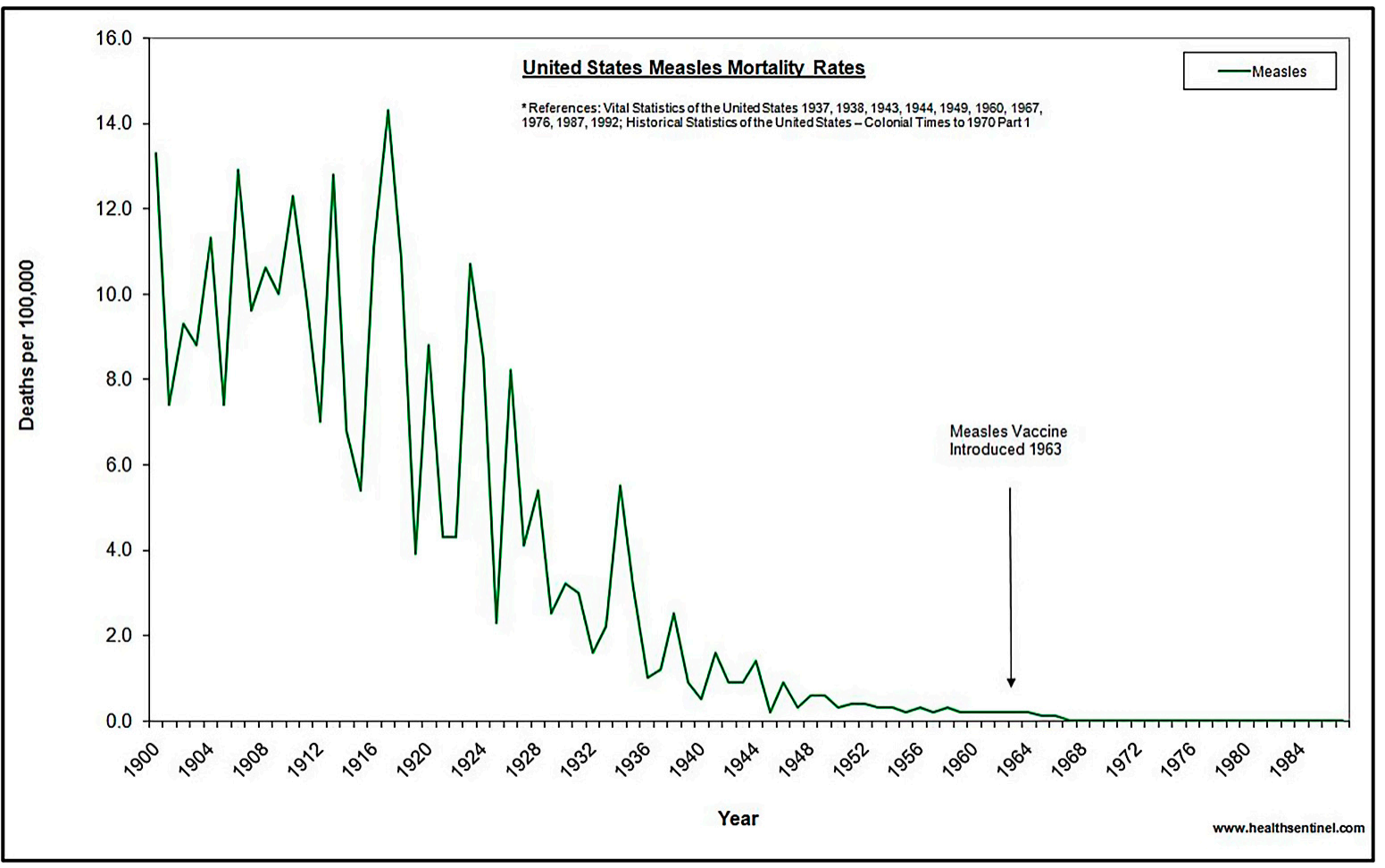
References: Vital Statistics of the United States 1937, 1938, 1943, 1944, 1949, 1960, 1967, 1976, 1987, 1992;
 Historical Statistics of the United States: Colonial Times to 1970 Part 1

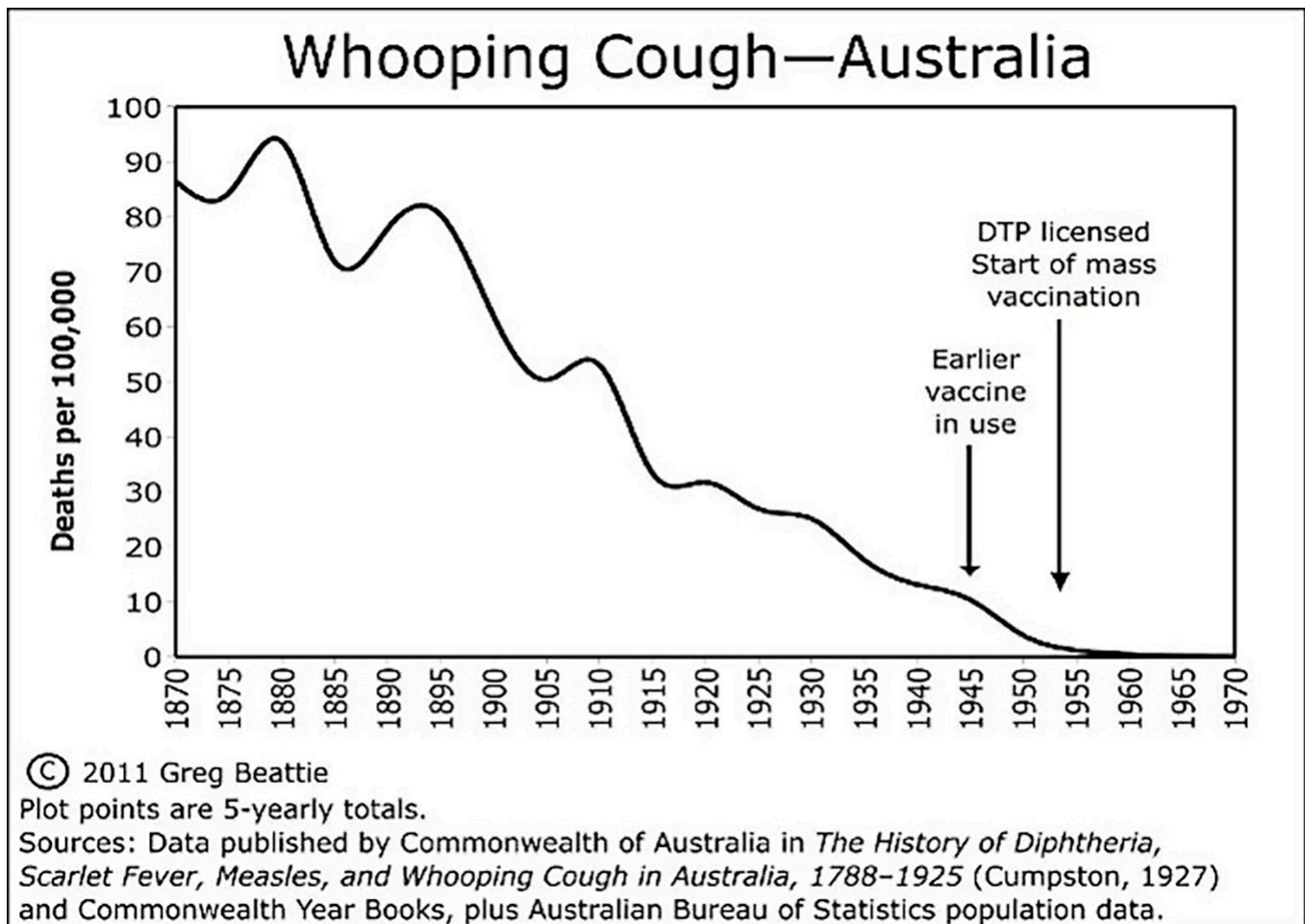
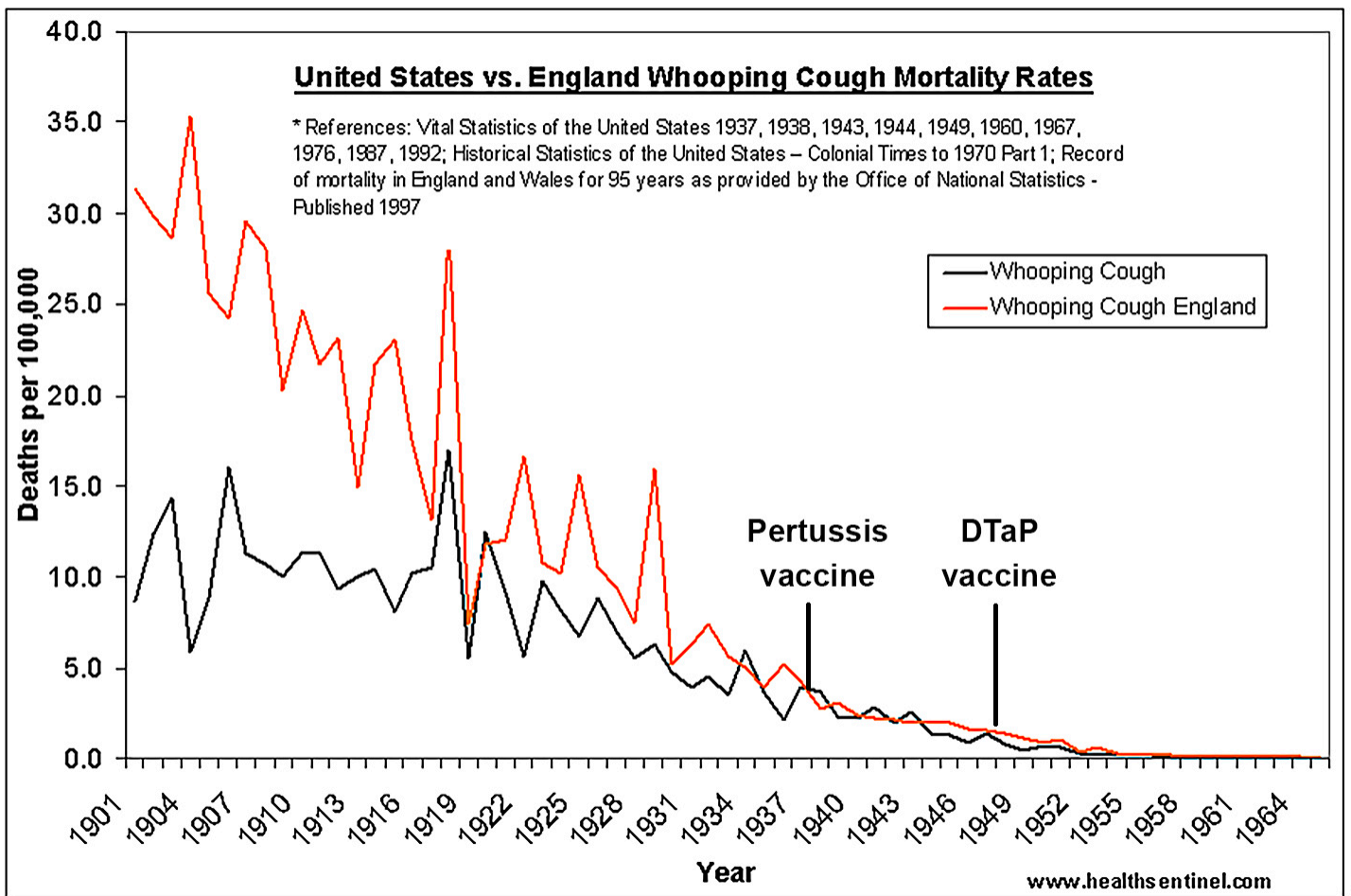


Despite common belief, infectious disease deaths **DECREASED 85-90%* BEFORE VACCINES** were introduced in the US. Diseases **WITHOUT VACCINES** -- including Scarlet Fever, Tuberculosis, Cholera and Typhoid -- followed the **SAME** trend.

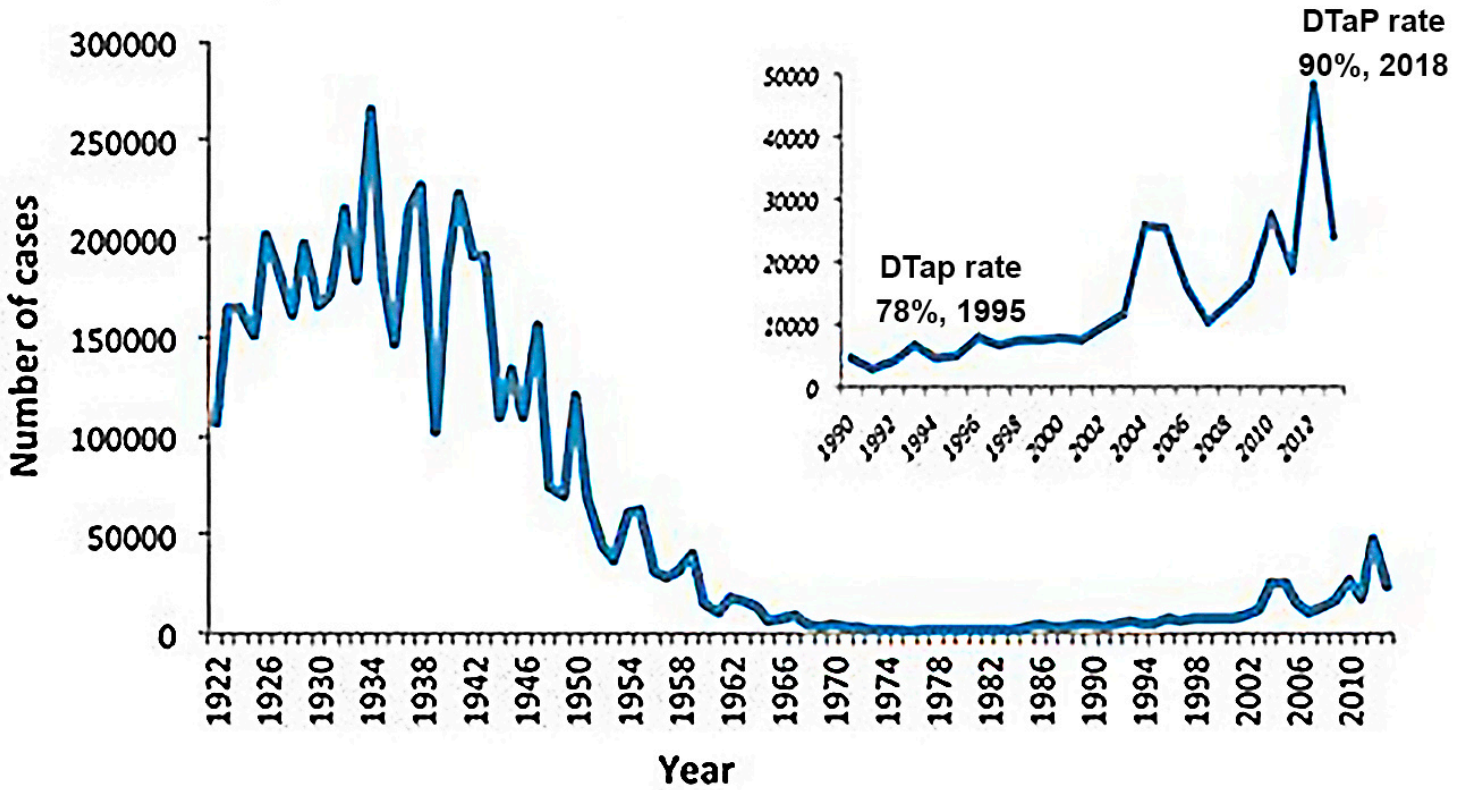
*Trends in the Health of Americans During the 20th Century. Pediatrics







Reported US Pertussis Cases: 1922-2013*



Source: Centers for Disease Control and Prevention

BCCDC COVID-19 Surveillance Dashboard by BCCDC

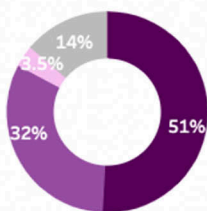
Introduction Outcomes by Vax 1 Outcomes by Vax 2 Vax Donut Charts Vax by Age Vax Progress Map Vertical Plots Scatter Plot Ca

BC Centre for Disease Control Provincial Health Services Authority

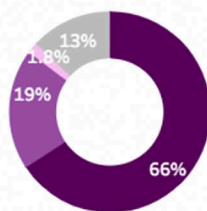
COVID-19 health outcomes by vaccination status, BC, 03 Apr. - 30 Apr. 2022

Data include Vaccination status as of mid-point date - 16 Apr, Cases from 03 Apr - 30 Apr, Hospitalizations, Critical care & Deaths from 03 Apr - 30 Apr

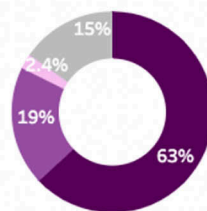
Vaccinations (all BC; n=5.3M) Cases (n=8,358) Hospitalizations (n=1,416) Critical care (n=197) Deaths (n=204)



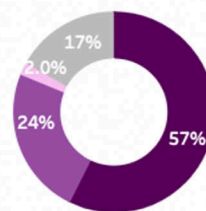
14% v. 86%



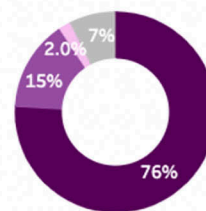
13% v. 87%



15% v. 85%



17% v. 83%



7% v. 93%

■ Vaccinated, 3 doses ■ Vaccinated, 2 doses ■ Vaccinated, 1 dose ■ Unvaccinated