

The Untold Story of Polio

By Tracy Slepcevic

Renaming and Vaccine-Induced Disorders to Hide Their Mistakes

Polio is often cited as one of the great success stories of modern vaccination. Public health officials frequently tout the campaign to eradicate the disease as a triumph of science. However, the historical reality of polio eradication is far more complex and troubling than the simplified narrative suggests. While the disease may have been renamed or reclassified under various conditions, and vaccines themselves have been implicated in causing polio-like disorders, these critical details remain absent from the mainstream discourse.

Polio: A Disease Reclassified

One of the most overlooked aspects of the polio eradication story is the reclassification of the disease. Once synonymous with paralysis, polio has been renamed and diagnosed under a variety of conditions, including:

- **Guillain-Barré Syndrome (GBS)**
- **Transverse Myelitis**
- **Acute Flaccid Myelitis (AFM)**
- **Spinal Meningitis**
- **Chinese Paralytic Syndrome**
- **Inhibitory Palsy**
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This reclassification has obscured the true impact and persistence of polio-like conditions. While public health authorities claim victory over the virus, these renamed conditions often present identical symptoms to polio, including paralysis and muscle weakness.

The Polio Vaccine: A Troubled History

The narrative of the polio vaccine's success often ignores its controversial history. The inactivated polio vaccine (IPV) developed by Jonas Salk and the live-virus oral polio vaccine (OPV) developed by Hilary Koprowski and Albert Sabin were never properly tested before their widespread implementation. What's more troubling is the evidence that these vaccines frequently caused the very condition they were supposed to prevent.

Vaccine-Induced Polio

Despite assurances from Salk that his "killed-virus" vaccine could not cause polio, cases surged following its introduction. Within a year, the number of reported polio cases rose dramatically, including a staggering 642% increase in Massachusetts. The live-virus oral polio vaccine (OPV), meanwhile, has been linked to vaccine-derived poliovirus (VDPV), a phenomenon where the weakened virus in the vaccine mutates and causes outbreaks of polio.

The Cutter Incident

In 1955, one of the darkest chapters in vaccine history unfolded: the Cutter Incident. A manufacturing error resulted in over 200,000 children being injected with live poliovirus, leading to 40,000 cases of polio, 200 cases of paralysis, and 10 deaths. This tragedy underscored the dangers of rushing vaccines into widespread use without adequate testing.

The Global Impact of Vaccine Policies

Even today, vaccine-derived poliovirus (VDPV) continues to plague parts of the world. The live-virus oral polio vaccine is still used in some countries, where it has caused outbreaks of polio-like conditions. These outbreaks are often downplayed or attributed to other factors, perpetuating the myth of eradication.

A Need for Transparency

The historical and on-going issues with polio vaccines raise critical questions about the role of transparency and accountability in public health. The reluctance to acknowledge vaccine-induced polio and the reclassification of polio-like conditions has prevented meaningful dialogue about the risks and benefits of vaccination.

The Link Between Polio Vaccines and Autism

Emerging research and parental accounts suggest a possible link between the polio vaccine and the rise in autism diagnoses. The vaccine's introduction coincided with an increase in neurological conditions, with some children experiencing developmental regression (even paralysis) following vaccination. The presence of neurotoxic ingredients, such as aluminum and formaldehyde, in certain polio vaccines may contribute to neuro-inflammation and immune dysregulation, factors often observed in children with autism. These correlations raise critical concerns about the long-term impact of polio vaccination on neurological development.

Conclusion

The story of polio eradication is not as clear-cut as it is often portrayed. Renaming the disease and failing to address vaccine-induced disorders obscures the real impact of polio and its vaccines. To move forward, we must demand transparency, rigorous testing, and an honest conversation about the history of vaccination campaigns. Only then can we truly understand the legacy of polio and the lessons it holds for public health today. For more information, read the Vaccine chapter in my book, *Warrior Mom: A Mother's Journey In Healing Her Son with Autism*. www.WarriorMom.com