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Protective vaccinations - contemporary dilemmas of holistic and traditional medicine

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Abstract

Introduction and purpose of the work. Vaccinations, as one of the key achievements in medicine, is an important element of pursuing health policy at the national and global level. Systematic immunization of children and adults has improved quality and extended life expectancy. For each society, in addition to individual protection obtained by administering vaccinations, it is very important to achieve collective resistance. There have been reports of serious side effects of vaccination recently. On the Internet forums there is a fight between vaccine proponents and their skeptics. In Poland and in Europe, there is a growing reluctance of society and a downward trend in child immunization. The aim of the work is to identify contemporary parents' dilemmas in the aspect of holistic and traditional medicine.

Summary. Identifying the needs of modifications to the immunization program, including how to implement them along with justification, on the identification of connections between mass media, health service and other interested parties will help to develop a common ground for the perception

of population implantation. It will be used to plan methods to improve education not only for parents but also for health care professionals: educational programs, training conferences or individually designed awareness-raising interventions based on reliable, comprehensive free access to knowledge.

Key words: vaccination, holistic medicine, traditional medicine, prevention

Introduction

In recent years, in Poland, increased activity of anti-vaccine movements can be observed, which inform parents about the negative, tragic, controversial effects of vaccination of children [1]. Vaccines are assigned the features of depopulation and handling agents [2]. More and more people use the information posted on websites, and they do not relate to this topic positively. In the ranking of a popular internet browser, the first positions include sites that opt for vaccines and provide numerous foreign sources denying this way of protecting the public. According to anti-vaccine movements, people should be able to choose: they want to vaccinate their child or refuse such a procedure. And they have full right to do so, because the state serves to satisfy the interests of individuals, and not vice versa. On the other side there are doctors, with many years of practice and experience, who have above all knowledge of how to make vaccinations. They are well aware that giving up vaccinations will increase the incidence of serious infectious diseases. In addition, they are aware that in some cases, the administration of vaccines should be delayed. In many statements of both sides, one can see a radical attitude, which in relation to human health and life should not be. *Promum non nocere!* - as one of the leading ethical principles in medicine indicates.

It is not without reason that the first place in the title of the study is holistic and not traditional medicine. Usually associated with unconventional methods of treatment is in fact a holistic view of a person: his body and psyche, as well as complicated connections between them. Its purpose is to truly restore health, reveal and eliminate the source of the disease (destabilization of the system), not "treatment of symptoms". Traditional medicine doctors are more and more often interested in the holistic vision of man, but only the richest individuals (often in private clinics and hospitals) can afford total treatment. People who do not have enough income to cover such treatment, receive "partial", "fragmentary" help, unprotected, neither their health nor their lives. The problem of preventive vaccination is a multidimensional problem, therefore it should be considered not only from the perspective of traditional medicine. The poorest citizens benefit from its "partial"

achievements for the following reasons:

- For the lack of knowledge - not always because of lack of education. These two things do not always go hand in hand. There are many educated people who are sick and they depend on their external health for example from incompetent traditional doctors. One of the key functions that is currently assigned to a family doctor is writing out prescriptions and dismissals. Real knowledge should not flow from the Internet, pseudo-scientific articles. Methods and techniques of conducting research, which traditional medicine uses today, are necessary. However, the decision to take such and no other protective measure or treatment belongs to each individual (not the "collective", vaccines from this perspective should be considered as "activities for the collective", but not necessarily for individuals) [3].
- In the absence of another option - people who are already ill often do not receive sufficient or proper information from doctors. In other words, they are often uninformed about the potential for treatment and prophylaxis, especially in the case of preventive vaccination [4].
- Improper treatment by traditional medicine doctors - especially in Poland, where traditional medicine is in poor condition. It is enough to mention here the incompetence of doctors [5] (bad diagnoses, bad treatment, which often contribute to the deterioration of patients' health) [6], long queues to specialists, long waiting for research [7]. The situation is much better in the case of private treatment (which costs a lot especially in the case of chronic diseases), but here too, there are considerable deficiencies. According to a study conducted by M. Van Such, R. Lohr, T. Beckman, JM Naeseens, in 12% of cases the primary diagnosis was the same as the final one (of which the final diagnosis was better described and defined), and in 21% of cases primary and final diagnoses differed significantly [8]. The authors of the study indicate that advanced care is needed for people with ambiguous, uncertain, unrecognized symptoms. Without the right resources and tools (equipment, methods and experienced doctors) there are more and more mistakes related to the diagnosis. Not only is this action more expensive, but it also causes serious delays in treatment (which means stress, loss of health and even life for the patient) [9]. The aim of the study is this is the presentation of contemporary dilemmas of holistic and traditional medicine in the field of immunization.

Description of the state of knowledge

After reading the literature one can see the unilateral position [10]. In the publications of representatives of traditional medicine, one sentence can be observed, in various ways modified with the same sense:

- "Vaccinations are the most effective means of combating infectious diseases" [11];

- "Vaccinations are the most effective preventive method in combating infectious diseases" [12];
- "We are being vaccinated to avoid infectious diseases, which are - especially for young children - risk of severe course, serious complications and even death. Vaccinations give the child the opportunity to create immunity to diseases without being infected"[13];
- "The creation of vaccines against certain infectious diseases and the dissemination of their use has been considered one of the greatest achievements of mankind for decades [14].
- "Protective vaccination is the most effective method of preventing and preventing the spread of infectious diseases" [15].

By treating the topic (radical, black and white) traditionalists very much lose - above all the trust of people who need help and support of health care. The wording "vaccination has a protective function" no longer has its original value. Vaccinations are intended for healthy children and are to have a protective function [16]. Perhaps the thought of D. Sienkiewicz, which is the closing of her article, "Safe vaccinations is a hint for future actions": "Despite the assurances about the necessity and safety of vaccinations, there are more and more questions and doubts on which explanation awaits both doctors and nurses performing vaccination, as well as parents. It seems that it would be worth applying the precautionary principle - an ethical principle (from 1988), according to which, if there is a probable, although little known, risk of negative effects of new technology, it is better not to implement it than to risk uncertain, but potentially very harmful, consequences "[17]. Anti-vaccine movements use the following arguments against traditional medicine: first, the traditional "version" of medicine does not allow oneself to be "dropped from the pedestal"; secondly - there are huge funds for it, including profits from medicines that help pharmaceutical companies (on the sale of goods and intellectual property, i.e. on patents and on their prolongation); thirdly - in the Polish healthcare system, it is not enough that patients are not adequately informed about their health and treatment methods (not to mention alternative ones), but they do not carry out specialized research. Many children died due to vaccination, because "doctors" made bad diagnoses, downplayed the problems of adverse post-vaccination reactions or did not perform specialist tests.

Health professionals: doctors, nurses and other representatives use such arguments: first, each drug can cause side effects and vaccines also cause them; secondly, the vaccines were created as a result of long-term research and were introduced so that people would not have to suffer from some diseases, for example chicken pox, measles or Heine-Medina, which caused terrible health complications, often leading to permanent disability and death; thirdly, post-vaccination complications are much milder (if any) than the disease itself; fourthly - you can take advantage of an individual vaccination calendar, ask doctors for help and support if you have chronic diseases both in your parents and in your child; another argument - vaccination against parents' will is

a violation of their basic rights.

In foreign literature, the topic of vaccination (both from the point of view of traditional and holistic medicine) is widely discussed. Not only from the point of view of adverse post-vaccination reactions, but also long-term action of pharmaceutical concerns and governments. The newest can include:

- Studies by Tielemans, de Melker, Hahné, Boef, van der Klis, Sanders, van der Sande, and Knol on the non-specific effects of vaccination against measles, mumps and rubella (MMR) - cohort studies in the Netherlands. However, they have to be questioned because as a dependent variable, another vaccine("suited to potential disturbances")[18].

- Studies by Bustamante, Calzado, Sainz, Calvo, Del Rosal, Méndez-Echevarría on epidemiological factors related to hospitalization of children under 6 months of age due to influenza. As the researchers point out: infants under the age of 6 months are considered to be high-risk populations; vaccination against influenza is not allowed in this group; Increasing the vaccination coverage of older people has a huge impact on reducing infant hospitalization [19].

- Research conducted by Hoft, Xia, Zhang, Blazevic, Tennant, Kaplan, Matuschak, Dube, Hill, Schlesinger, Andersen, Brusica on PO and ID BCG vaccination in humans that cause other immune reactions when administered by the traditional route (injection) and oral [20]. The following information can be found in *The Journal of Immunology*: "Vaccination using *Bacillus Calmette-Guérin* (BCG) is the most common strategy to combat tuberculosis (TB) in the world. The protective efficacy of BCG can be affected by both the methods and the route of administration of the vaccine. The article uses the system biology approach to study congenital and adaptive response to BCG oral (PO) and intradermal (ID) vaccination in humans. 60 healthy adults vaccinated with PO and / or BCG ID were examined. Although both PO and ID BCG were able to induce systemic Th1 responses capable of producing IFN, BCG ID strongly induced such responses, while a significant increase in mucosal response (specific for the sIgA group and tracheal trachea) resulted in PO vaccination BCG. To identify early gene signatures that predicted optimal mucosal and systemic immune responses, CD4 + T lymphocytes were isolated from volunteers vaccinated with PRE and ID BCG before (day 0) and after vaccination (day 7 and 56) and examined by transcription analysis Illumina BeadArray. Particularly pronounced gene expression profiles were identified both on day 7 and on day 56 (comparison of groups vaccinated PO and ID BCG - GSEA analysis). The correlations between the expression patterns and mucous membranes and the systemic immune response are examined. These data emphasize the usefulness of using system biology in the differential study of mucosal and systemic immune responses [21]. Research by Hwang, Lee YT, Kim, Ko, Lee Y, Kwon, Kang regarding the interaction of vaccines [22].

- Research Ames, Najng, Glenton, Fretheim, Kaufman, Hill, Oku, Cliff, Cartier, Bosch-Capblanch, Council, Muloliwa, Oyo-Ita, Kum, Lewin on the opinion of interested parties on access to information on communication . The research was carried out in two regions of Cameroon and it is a qualitative case study. They confirmed parents' trust in vaccinating their children (they claimed to be important), but at the same time pointed to the poor organization of the health service and too little information that could be obtained especially in the case of routine vaccinations [23].
- Research Smith, Shaw, Seither, Lopez, Hill, Underwood, Knighton, Zhao, Ravanam, Greby, Orenstein on "exemptions" of vaccines and "gaps" in pre-school immunization. Their attention was drawn to the fact that the requirements relating to vaccination of children in pre-school age differ depending on the standards adopted in a given country. In all countries, however, two doses of measles vaccine (MCV) are in force. The scale of vaccination of children was theoretically 98.6% and in practice 90.9%. From which the authors of the study found that this level may increase when schools enforce a law obliging parents to vaccinate children [24].
- Pebody, McMenamin and Nohynek research on influenza vaccines (LAIIV), which indicates increased monitoring of vaccination of children at many points [25].

Summary

On the Internet, on television, on the radio, you hear the arguments of only two opposite parties, i.e. die-hard supporters and die-hard opponents of vaccination. Is it possible to find a "golden mean"? In the United States, affected citizens apply for high compensation. Poland, in turn, is: "a country with a population below 38 million, with a negative birth rate, with one of the highest mortality rates in newborns vaccinated in the first day of life (in Western European countries, first vaccinations are carried out after the second-fifth month of a child's life), with a staggering number of deaths (specialists from the Jagiellonian University estimate that there are about 7,500-2,000 per year) and with the lowest trust in doctors in Europe "[26]. In the "country on the Vistula":

- high fines are imposed on parents who do not want to vaccinate their children. If they persist, they are brought to trial. It is also said about the possibility of restricting their parental rights. All these activities are inconsistent with the Constitution and indicate action from external power;
- awareness of side effects, reading in not only Polish but also foreign literature (it goes hand in hand with education and knowledge of foreign languages), make parents in corporations see only the attitude towards profits of the "machine".

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