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Thinking ... For a Change

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CDC DATA STRANGLEHOLD BLOCKS AUTISM-VACCINE RESEARCH

WITH WILLIAM THOMPSON, PHD AND BRIAN HOOKER, PHD

<http://fearlessparent.org/cdc-data-stranglehold-blocks-autism-vaccine-research-recording-2/>

- Dr. Thompson: Posey seems like he's on the warpath so...
- Dr. Hooker: Yeah, He was not happy with Insel, that's for very sure.
- Dr. Thompson: Yeah. And I didn't know about this study that Tom Insel was talking about. I asked Marshalyn about it, and she said she was going to find out for me. But I am going to find out. Do you anything about this study?
- Dr. Hooker: I have no idea what he's talking about. I heard that, and my initial thought was, "Well, the way he is talking about it, I can predict what the outcome is going to be." But going back to what you said previously, I'm sure they didn't look at tics.
- Dr. Thompson: Well, let me tell you something really interesting I learned about this week in the midst of this. And I was yelling at Marshalyn this week. I mean, Marshyln and I were—whew! I suggested I resign. It's like that type of stuff going on right now. The whole place is a big pressure cooker.
- And I don't know if you know this. The CDC was invited to testify and they declined.
- Dr. Hooker: Really?
- Dr. Thompson: Yeah. And Marshalyn said she's been offered to testify, she won't. Colleen has been offered to testify. Colleen said she will never go and testify again.
- Dr. Hooker: And they don't supoen. I mean, it's a very, very rare instance that they would ask for a subpoena.

Dr. Thompson: Really?

Dr. Hooker: Oh, yeah. No, Representative Issa doesn't like to use a supopena unless he's really cornered to do so. It's one of the things where if he goes there too often, then he comes under considerable criticism, and he's trying to lobby for future chairmanships. Now, he won't be the chairman. Most likely, his term will be up at the end of 2014 because it's a six year term and he's out in six years.

But no, they just don't like to use him. I used to be page. I was a page in the U.S. Senate when I was 14 years old.

Dr. Thompson: You're kidding! You're kidding!

But let me just say this. Alright! I don't know where you're going with all these or how this is all going to play out. I just want to tell you one thing. Right now, I'm sitting in a very pretty position in terms of providing you a lot of information. And let me tell you what is... just become available.

I was talking to Marshalyn, my team lead, my immediate supervisor this week. I was telling him what should be done. It's just outrageous. You will die when you hear this. We have 800 kids with autism that had all been given the ADI, the autism diagnostic interviews for the parents and the ADOS for the kids.

Dr. Hooker: Right!

Dr. Thompson: So, all of them had been given the ADI and ADOS So, they've all been given these instruments, all confirmed cases of autism. We have population controls of similar size, and we have disability controls of similar size.

Now, this is the study I was brought in to clean up. Diana Schendel left town, left for Denmark, and then I was brought in to clean it up. It's a big mess. But regardless, there's now data available, and there's going to be more data available. We're going to have 1200 kids with autism as part of this study with all their medical records and all their vaccine records abstracted.

So, what's amazing—now, this is what's going to be shocking to you, it shocked the crap out of me—they have six different sites contributing data. They all put in proposals to do studies. So far, there's about 50 proposals in for people ready to do studies. Not a single one of them looks at vaccines—not one.

Well, I ripped into these people this week. I'm like, "The vaccine studies have to be done. This is the largest case control study you could ever do. They're all

objectively identified. There are kids with autism. You have the vaccine records." And after seeing the Posey hearing, I was like, "How are you going to answer the question when they want these environmental studies and want to look at all these risk factors? What are you going to say when you have 1200 autism cases and a bunch of controls and you never looked at vaccines, and you have all their vaccine records?"

Dr. Hooker: Oh, my goodness!

Dr. Thompson: And we have their prenatal. We have all the prenatal stuff.

Dr. Hooker: You have the pre-natal too? This is like Disneyland.

Dr. Thompson: It is like Disneyland.

So, here's the point. Here's what I said to them. I said, I told them, "This study needs to be done." I said, "It should be contracted out to some independent organization." I said, "Groups like SafeMinds should be included in the study." And we were insane to be sitting on this data and not have an independent group— independent of the CDC completely." I said, "CDC not even touch it, not even have a co-author on it."

Anyway, the point I'm trying to make is I want to give you the name of the study, so you can start telling people to ask questions about this study because this data is sitting ready to go and no one has analyzed it yet.

And they don't really want people to know that this data exists. Again, you were the first person to get the MMR/autism... I just can't believe we actually got you that data.

Dr. Hooker: It was incredible to me. I'm very thankful, let's put it that way.

Dr. Thompson: It's mind-boggling. It sat on one CD. And actually, the guy who had the one CD just came down with pancreatic cancer...

Dr. Hooker: Oh, my...

Dr. Thompson: So literally, literally, that study data could have been gone for good.

Dr. Hooker: No kidding.

Dr. Thompson: Anyways, so the name of the study is "the study to explore early development," and it's called SEED. If you go on the CDC—what?

- Dr. Hooker: SEED? S-E-E-D?
- Dr. Thompson: SEED. Do you have a computer in front of you?
- Dr. Hooker: Yes, I do.
- Dr. Thompson: Just search for 'CDC' and then 'SEED' and 'autism', and you should be able to pull up a description of the study.
- Dr. Hooker: Okay, hold on. SEED, autism spectrum disorders, okay. There is! Okay, let me bookmark this. Got it!
- Dr. Thompson: Well, that's the gold mine. That's the motherlode of motherlodes because it doesn't matter what Insel does. He doesn't have confirmed autism cases in his study. His study will probably some type of record review where they just look at kids who have autism in the records.
- Dr. Hooker: So, is this data that I would eventually be able to access myself?
- Dr. Thompson: Well, right now, it's under lock and key. Only the principal investigators can get access to it. But if you can get Congressmen starting to—if you can get Posey to start asking questions about this study, this will become the leak in the dam.
- Dr. Hooker: Oh, my goodness. Here it is, a tab on data and statistics that I'm looking at. Okay, I see that. And so...
- Dr. Thompson: There's one study that's been published from it just describing the study and the sample. Diana Schendel is the first author. It's a 2012 paper. You can just look it up. It might actually be on the website, I'm not sure. It's a Diana Schendel paper. And it just pissed me off. I read it for the first time Friday. She references two of her papers with Thorsen. I was just like, "Are you guys are fucking insane?" I'm like, "Are you guys really this fucking insane?"
- Dr. Hooker: Oh, my goodness. Oh, here it is. I looked it up on PubMed. It's in JAD, The Journal of Autism Disorders.
- Dr. Thompson: Yes. Yeah, yeah.
- Dr. Hooker: Yeah.
- Dr. Thompson: Yup!
- Dr. Hooker: Okay.
- Dr. Thompson: So that's the one paper that described the first sample. There's SEED 1 and SEED

2.

Dr. Hooker: Oh, they piled it on. There's like 20 co-authors.

Dr. Thompson: Yeah, it's all the PI's [Principal Investigators], everyone.

Dr. Hooker: Okay, okay.

Dr. Thompson: It's a big study. There are six sites that are contributing data. But it is the motherlode.

Oh! And then, you know what else I found out this week? I almost went nuts. So, do you now...

Dr. Hooker: We can't have you do that again, dude.

Dr. Thompson: Do you know the name Lisa Crowen?

Dr. Hooker: Yes, I know Lisa Croen. She's in California.

Dr. Thompson: Yeah, she's at Northern California, Kaiser.

So, Diana Schendel is still involved in these studies. There are 50 proposals. One of the studies is on prenatal infections. I started asking questions. I'm like, "Who's doing the prenatal infection studies?" She said, "Lisa has invited Diana to participate." I'm like, "You are having Diana Schendel as a co-author of a childhood infection paper?"

Dr. Hooker: That's not going to go over well.

Dr. Thompson: "...while she's in Denmark with her boyfriend?" You don't know how insane this all is. This is just absolutely insane.

So then, Marshalyn, and my supervisor, Laura Schieve—I don't know if you've ever seen that name.

Dr. Hooker: Yes, I've seen Laura's name before, yeah.

Dr. Thompson: Yeah, yeah. So anyways, the two of them are looking at me and they're like, "Oh, maybe you're right. Maybe that is a bad idea."

Dr. Hooker: You think? You think? I think that Diane is putting herself in danger just by showing her head.

Dr. Thompson: I could not believe she was there. I could not believe she was there.

- Dr. Hooker: Oh, my goodness. That is just crazy.
- Dr. Thompson: So anyway, the bottom line is I want to help you get the best data available. That is the best data available. No one has analyzed it yet. If you can get someone—and Brian, you have to get someone other than you asking these questions because you are like—they just...
- Dr. Hooker: I'm damaged goods, I understand. I do have some people in mind.
- Dr. Thompson: Okay, okay. You just have to seed these questions around to different people and have different people ask these questions. So, it's prenatal. I was told there's both maternal influenza prenatal records, there's RhoGAM.
- Dr. Hooker: Really? RhoGAM, okay.
- Dr. Thompson: Yeah. It's all there. But I've never looked at it yet. But I could actually go into the database right now and do a frequency count on things. I'm not going to do anything like that right now. I'm just really trying to sort this all out. I'm being in trouble because I'm blowing up and stuff like that. I'm getting really agitated and I just have to settle down.
- Dr. Hooker: Right, right. You mentioned on a previous voicemail something about maybe taking a leave of absence or putting in for a new assignment.
- Dr. Thompson: Yeah, I was considering getting detailed out of the branch. The downside to that is I would no longer have any access to this type of information that I'm sharing with you.
- I'm learning more and more. As I ask more and more, I'm learning more and more. These people are like in one big bubble. And their bubble is getting smaller and smaller.
- Dr. Hooker: Right!
- Dr. Thompson: But these PI's—and it's two PI's—that are really tight with Diana. And it's Lisa Croen and Dani Fallin. Do you know Dani Fallin, that name, F-A-L-L-I-N?
- Dr. Hooker: That's a name that's not familiar to me.
- Dr. Thompson: Alright, she's a genetics expert and she is at Hopkins.
- Dr. Hooker: And Lisa Croen as well.
- Dr. Thompson: Right! Now, Dani really likes Diana and is tight with Diana because we've been

collecting genetic information on all these subjects. All these subjects have bloods drawn and swabs.

So, here's the other crazy thing. The CDC has not been able to get resources to sequence all these kids that we have. We have samples where you could sequence every single kid. And only a couple of hundred have been sequenced and it's because Dani Fallin went and got money from the NIH.

I'm just like, "Are you serious? You guys can't go out and get a small sum of money?" And it's not even a lot of money. It would just be a couple of million dollars. And they could get every single kid sequenced. They're sitting on these samples! Yeah! They're sitting on these samples!

Dr. Hooker: Can you imagine what we could do with that?

Dr. Thompson: Oh my God! I mean, when I heard the Congressmen like asking these guys questions like, "What are you guys doing?" I'm like, "We are sitting on this goldmine and..."

Here's the deal. The CDC, they're paralyzed. The whole system is paralyzed right now. The whole branch is paralyzed and it's becoming more paralyzed. So there's less and less and less being done as the place just comes to a grinding halt.

So, really, what we need is for Congress just to come in and say, "Give us the data. We're going to have an independent contractor do it. And bring in the autism advocates. Have them intimately involved in the studies."

Dr. Hooker: Right, right.

Dr. Thompson: So...

Dr. Hooker: Wow. Wow, I don't even know where to begin. I can definitely talk to Bill Posey about this. I think that he...

Dr. Thompson: Ask about this study. Just start asking questions about this study.

Dr. Hooker: I will, I will. And I'll be able to kind of sit down with him and explain what's going on with the study and just ask questions. I mean, I don't want to appear to know too much.

Dr. Thompson: Yeah, yeah.

Dr. Hooker: Then, just too much of a tip off.

I wanted to take you back to something. And if you don't want to talk about this, it's fine.

Dr. Thompson: Oh, let me just say one more thing. You saw that slide set I sent you, right, the 2012...

Dr. Hooker: Yeah, the Barile, yes.

Dr. Thompson: Yes. Jack Barile. And you saw the last three slides, right?

Dr. Hooker: Mm-hmmm... yes, I did.

Dr. Thompson: Did you see the reviewer's comments?

Dr. Hooker: Yeah.

Dr. Thompson: Did you see that?

Dr. Hooker: Did I ever!

Dr. Thompson: Yeah, I know. And we were just trying to demonstrate that when—this paper sat in clearance for over a year. Birth Defects made us add the guy from Rochester as a co-author. I've never been involved in a study like this before where I was asked to add a co-author in the middle of clearance.

Dr. Hooker: So you were told, "Get out!" in the middle of the clearance process, then that guy was recruited.

Dr. Thompson: Yes. The Birth Defects recommended that we add him as a co-author because they said, "We didn't know enough about tics." So they added Ed Trevathan's buddy. This guy is at Rochester...

Dr. Hooker: Oh, he's Ed Trevathan's friend?

Dr. Thompson: Yes.

Dr. Hooker: Okay.

Dr. Thompson: So, we added him. And then, every step of the way, we had to water down the discussion, and then we got it out. Those reviewers, that gives you an example of what happens. Every single reviewer said, "Why are you not highlighting your significant pitfalls?" It was a unanimous opinion of independent observers.

Dr. Hooker: Well, I tell you, it made for good reading.

Dr. Thompson: Unbelievable!

- Dr. Hooker:** It was pretty, pretty amazing. And it seems like—without being too vicious—it seems like sort of a visceral response to a lot of people in CDC whenever they see a connection between an adverse event and a vaccine or a vaccine component.
- Dr. Thompson:** No, I know! And I actually presented it to Marshalyn's branch. It was before I moved in there. I had Jack present it. Jack and I prepared those slides. And I was very happy that we put in that final slide that we confirmed—I don't know if you read that conclusion—that thimerosal causes tics.
- Dr. Hooker:** You did. And you've given me such a gift. I mean, that's such a hook in terms of getting thimerosal out of vaccines.
- Dr. Thompson:** Absolutely! I am telling you. If people went around saying that, do you think a mother—you and I have had this discussion already.
- This is what blows my mind. What blows my mind is somehow tics have not been added to the adverse events schedule.
- Dr. Hooker:** Right. It's definitely not a table injury.
- Dr. Thompson:** Yeah! But why? This is what I don't get. I started wondering like, "How does something get on to the table?"
- Dr. Hooker:** And this is huge for me [because my son has tics].
- Dr. Thompson:** I know, you told me. But how does something get on to the table. I don't get it.
- Dr. Hooker:** Oh, it has to go through HRSA. I don't know if it's ACCV that puts it on the table, but it is very, very difficult to get something on the table. I know that much.
- Dr. Thompson:** Got it, got it. But anyway, you have that to support you now.
- Dr. Hooker:** Yes, I appreciate it. That was amazing. The other question I wanted to bring up was you, two voicemails ago, had talked about two individuals—and if you don't want to answer this, that's fine—that you wanted to point out some of their activities or perhaps some of their behavior.
- Dr. Thompson:** Well, Brian, you and I don't know each other very well. Here's what I struggle with. I struggle with saying anything that isn't in writing that can't be backed up.
- Dr. Hooker:** I understand.
- Dr. Thompson:** Here's my fear. Let's say you go public with anything, whatever. And then, it becomes clear that you got information from me...

I talk to you, you have a son with autism. I have great shame now when I meet families with kids with autism. I have been part of the problem...

Dr. Hooker: Well, at least not personally. My son had his vaccines in 1998, dude. You don't have to shoulder that one.

Dr. Thompson: No, no, no, no, no. Here's what I shoulder. I shoulder that the CDC has put the research 10 years behind. Because the CDC has not been transparent, we've missed 10 years of research because the CDC is so paralyzed right now by anything related to autism. They're not doing what they should be doing. Because they're afraid to look for things that might be associated.

So anyway, there's still a lot of shame with that. So when I talk to a person like you who has to live this day in and day out, I say, "Well, so I have to deal with a few months of hell if this all becomes public. No big deal. I'm not having to deal with a child who's suffering day in and day out." That's the way I view all this. I'm completely ashamed of what I did. Well, that's that.

Dr. Hooker: But you were told to do specific things.

Dr. Thompson: Well, the higher-ups wanted to do certain things, and I went along with it. So, in terms of chain-of-command, I was number four out of five. And when you have three...

Dr. Hooker: Was it Melinda Wharton?

Dr. Thompson: No, no, no, no. The co-authors, right? We have...

Dr. Hooker: Oh, you mean Colleen?

Dr. Thompson: Yeah, Colleen was the division chief. Marshalyn was the branch chief, and Frank was the branch chief at the time.

Dr. Hooker: Right, right, right.

Dr. Thompson: Now, Colleen is the center director. Frank is the director of immunization safety. And Marshalyn is the branch chief. They're still all much more senior than me. So, we're in a room discussing these things. And there's things I haven't even shared with you because I can't prove it. And that's what I struggle with. I don't want to share things with you that I can't prove, that there aren't hard records.

Dr. Hooker: Okay.

Dr. Thompson: ...because I am worried that the other four people will collude and say, "No, that's

not true." So, that's my fear.

Dr. Hooker: It's your word against theirs, and they're higher-up.

Dr. Thompson: Well, they're higher up... That make sense?

Dr. Hooker: I wish it didn't.

Dr. Thompson: I know! I know, but that's the way it'll play out. So that's why I'm trying to give you as many hard records as possible. I think I've shared the last two that I've sent to you. I don't know if you've looked at them. Did you look at those results?

Dr. Hooker: Yes, I did.

Dr. Thompson: Do you see that the strongest association is with those without mental retardation—the isolated to non-isolated, there's the non-MR [mental retardation]. So, the effect is where you would think it would happen. It's with the kids without other conditions, without the co-morbid conditions. Honestly, I looked at those results. I have not gone through these hardcopy papers. I don't think I've ever gone through them since 2004. I came across those and I'm like, "Oh, my God!" I'm like, "Yeah, this is 0.97 to 16." I'm like, "Yeah, it's not statistically significant, but the odds ratio is 8. If we had one more subject, it probably would've been significant." I was just looking at that, I'm like, "Oh, my God! I can not believe we did what we did... but we did."

Dr. Hooker: Yeah.

Dr. Thompson: So, it's all there. It's all there. I have hand-written notes.

Dr. Hooker: Okay. I understand your reluctance to name specific names because if you can't prove it, it's your word against theirs.

Dr. Thompson: It'll be four to one. It'll be four to one.

If you could get people starting to ask questions about SEED, I'm sitting in a dream spot to basically give you feedback how that information is playing out.

Dr. Hooker: That would be tremendous.

Dr. Thompson: But there is this dream data set. I'm saying this is dream data set.

Now, again, Brian, I don't know if vaccines cause a certain percentage or whatever. I can say confidently, I do think that thimerosal causes tics. I'm not sure about the rest, I don't know. But I will say, I can say that tics are four times more prevalent

in kids with autism.

So, there is biologic plausibility right now. I really do believe there is to say that thimerosal causes autism-like features. And that's the way I would say it.

So, anyway, I want it to be a resource. I want to be valuable to you. I want you to have someone in the system that can give you feedback as these things go through. And as long as you're willing to let me sit where I am, I'll sit as long as I can tolerate it, and we'll just keep going.

Dr. Hooker: Okay, okay. Well, I appreciate it. You've given me a lot to think about. Let me really explore this SEED website, and then...

Dr. Thompson: And get the paper, get the Diana Schendel paper.

Dr. Hooker: I will, I will. I've got access to JAD, so I can do that.

Dr. Thompson: Okay. Okay, great.

Dr. Hooker: Okay. Hey, thanks a lot, Bill.

Dr. Thompson: Alright, good talking to you. Bye.

Dr. Hooker: Good talking to you. Bye bye.