

The Year of the Swine

Drug Companies Reap Big Profits

Bob Nirkind

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When 1976 is all over and done with not long from now and we look back on it as history, it may well be remembered as the “Year of the Swine.” No, not the Jimmy Carter variety, but the four-legged, corkscrew-tailed, snouted species currently being much maligned as the source of virus strain A/New Jersey/76, more commonly referred to as swine flu.

What started as simply another winter’s outbreak of influenza at the Fort Dix military installation in New Jersey, and picked up substantial media attention as -a private named David Lewis died of viral pneumonia, has snow-balled into a full-fledged plague scare and a \$135 million-plus financial windfall for four pharmaceutical companies and a number of insurance agencies.

Despite little or no evidence of the advent of a swine flu epidemic in America this winter, Gerald Ford saw the golden opportunity to jump on the health care issue. Up to that point it had been monopolized by the Democrats prior to the presidential election and, with the speedy approval of Congress, authorized \$135 million for the purchase of influenza vaccine for every American.

Although it was apparent that the go-ahead decision was being made much too rapidly to fully research all the implications of such a costly vaccination program, Atlanta’s Communicable Disease Center, (CDC) director Dr. David Sencer pointed out the political significance of a swine flu epidemic before the election and stressed that “the Administration can tolerate unnecessary health expenditures better than unnecessary death and illness.” Those conceivably “unnecessary health expenditures” have already exceeded \$170 million, which is the total budget for both research and enforcement in occupational health each year.

It was Ford’s tough luck in making the quick decision to spring to the defense of his people as leader of the country when, just three weeks before the election, some forty elderly persons died after receiving free government-sponsored inoculations. The deaths made the front page of every newspaper in America and while federal, state and local medical spokesmen fell all over themselves explaining that the vaccine itself wasn’t at fault for the deaths, nor were those-responsible for administering the inoculations, the number of persons lining up for their freebie diminished dramatically.

According to a November 6 story in the *New York Times*, less than one-tenth of the persons intended to receive the vaccination have actually gotten them, with one-third of the planned time-period for the nationwide program elapsed.

Clearly a significant percentage of the American public are reluctant to be vaccinated. Many are downright skeptical of the government’s swift institution of the inoculation program and, reviewing the pertinent facts involved in the issue, it’s easy to understand why.

To begin with, the origin of the current plague scare is Fort Dix, where, as previously mentioned, Private David Lewis collapsed and died on February 3 during a five-mile march back from the rifle range.

His case was one of twelve on base diagnosed from throat swabs as the first signs of a non-A/Victoria strain of virus (A/Victoria being the strain developed in New Guinea which 20,000 Americans in 1975) found to be swine.

When Pvt. Lewis reported to the base medical clinic on the 3rd, he had a fever of 100 degrees and was told by doctors to remain in his quarters for the next forty-eight hours. Anxious to complete his basic training by qualifying on the rifle range, Lewis instead chose to fall in with his unit on its five-mile trek.

By noon he was visibly ill, yet he refused to return to his barracks and on the five-mile march back he collapsed, fell into a coma and later died. In the opinion of the medical officer at Fort Dix, had Lewis stayed in bed as suggested, he would have survived.

An autopsy on David Lewis produced the first and last recognizable sample of A/New Jersey/'76 swine virus. With this death, the strain seemed to disappear completely. Of the five hundred soldiers said to be infected, none ever showed any symptoms. The other 11,500 living in close quarters with them at Fort Dix were never infected in the slightest.

In the opinion of the editors of a British medical journal, *The Lancet*, the flu "seemed to be very poor at infecting people, and may have died out as a result." That didn't halt the panic over a possible pandemic, though, and by March 24, Ford had announced the institution of the vaccination program.

The source of such irrational alarm over the potentiality of a swine flu pandemic is the memory of the 1918 through 1919 flu plague which resulted in the deaths of twenty million people, 500,000 of them Americans, in a matter of weeks. In the early 1930s scientists traced the epidemic to a pig virus, thus enabling the catastrophic plague to be labeled the swine flu. Now, however, there may be just cause to dispute that classification.

According to an article on the swine flu scare in the *Village Voice* (October 25, 1976), three scientists at the National Institute for Health have stated that the 1918 plague may well have had nothing to do with swine flu.

"They (the three scientists) had discovered an island in the Pacific (Fais, one of the Caroline group) where the population had been exposed to and suffered from the great 1918 pandemic, but which suffered no flu epidemics of any sort since that date," explained *Voice* writers Alexander Cockburn and James Ridgeway.

"A survey of the island's inhabitants showed a singular absence of swine flu antibodies. Given the presumed connection of the 1918 pandemic with swine flu, this absence was startling. The antibodies studied by the three scientists instead appeared to relate closely to Puerto Rican 8, a type of human fly," they reported.

Several medical authorities, including Dr. David Tyrell, a British flu specialist, and Dr. Sidney Wolfe of the Nader Health Research Group, have said that an epidemic of the type predicted by the government is usually preceded by several local outbreaks in different sections of the world, yet the swine flu epidemic has thus far confined itself to the infection of twelve men and the death of one.

An important question to be considered is whether the flu vaccine would do any good, or could actually do some harm, even if administered. One clue might be found in the fact that many private insurance companies have refused to insure the manufacturers of the vaccine.

During the Hong Kong flu epidemic of 1969, in one of the few well-controlled clinical tests of the actual disease-prevention effectiveness of flu vaccine, scientists for the CDC concluded that "The results indicated that the optimally constituted influenza vaccine at standard dosage levels have little, if any effectiveness and that even very large doses of vaccine do not approach the high degree of effectiveness that has been achieved with other vaccines."

The effectiveness of the vaccine aside, there remains the interesting revelation that in the manufacture of the vaccine, an important ingredient, neuraminidase, a protein was omitted. Clinical tests conducted last spring showed that while the vaccine appeared relatively successful in stimulating the body's first line of defense against the swine flu, it lacked the active component which would have triggered the body's second line of defense.

Government spokesmen deny any concern over the omission, but other experts have stated that the lack of neuraminidase may well devalue the effectiveness of the swine flu vaccine by as much as 10% to 20%.

With all these doubts and faults, why has the mass inoculation program been implemented? There've certainly been no shortage of wild theories advanced. One group has speculated that the vaccine is a population-control conspiracy by the "house of Rockefeller and the international banking cliques" to 'wipe out a goodly number of those people they regard as hopeless cases (i.e. the poverty-stricken and impoverished masses of America, India and Africa).

Other theories have it that the vaccine is a mind-control drug or that the contagion will affect only the swine in our midst, meaning the politicians and owners of the multinationals.

While you can't totally dismiss any idea anymore, no matter how far-fetched it appears to be a pretty good bet that the real reasons behind the mass inoculation program are economic. Since flu vaccines are never effective for any more than 2 to 12 months, any really valid prevention program would necessitate the revaccination of the population on a yearly basis. Obviously those to benefit from such a costly program would be involved in the medical industry—the doctors, drug companies, insurance companies, etc.

As it is, four commercial drug manufacturers—Mere Sharpe and Dohme, Parke-Davis & Co., Merrell-National Laboratories, Inc. and Wyeth Laboratories—have pocketed already over \$135 million for the manufacture of this year's vaccine. A yearly program of this kind would insure them millions of dollars of additional revenue annually.

Again quoting Cockburn and Ridgeway in their *Village Voice* evaluation of the swine flu scare: "The mass-vaccine program is useful in elevating U.S. Public Health Officers within the medical establishment and simplifying their friendly relationship with the drug industry with which they historically have had close ties. And the program allows them to hold high the banner of preventive medicine, in a peculiarly restricted way."

"The mass program allows the state to aid businesses fearful that a flu epidemic would damage them with extensive malingering and absenteeism," they go on to explain. "The sector of the population most in need of vaccination is the high-risk percentage—those over 65 and those with chronic diseases for whom flu is perilous. The high-risk category actually involves about 40 million people. Instead of isolating and treating this number, the federal government has plunged enthusiastically into the business of vaccinating over a hundred million low-risk citizens who, at worst, could be taken ill for a few days."

"The panic last March produced another boon for the drug and insurance companies. The federally created panic allowed these companies to push successfully for federal assumption of liability. The government's agreement to assume liability in the present program has the drug and insurance companies on a giant step out of vaccination insurance and, indeed, out of malpractice insurance altogether. Once again the state assumes the social costs of the private sector's medical initiatives and failures."

Perhaps not coincidentally coming at a time when the hazards of nuclear energy and toxic chemicals, not to mention occupational diseases such as black lung and asbestosis, are appearing daily in newspaper and magazine articles as well as on television's few news-feature programs, the swine flu epidemic scare serves only to divert our attention from more vital issues which scream out to be dealt with.

The only swine we see that present any current danger are those who stand to benefit the most from this sham—government officials and big business executives.

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