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**Anti-vaccinationists and their arguments in the Balkan countries
that share the same language**

Антивакциналисти и њихови аргументи у балканским земљама
које повезује исти језик

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Anti-vaccinationists and their arguments in the Balkan countries that share the same language

Антивакциналисти и њихови аргументи у балканским земљама које повезује исти језик

SUMMARY

The objective has been an analysis of anti-vaccination situation in the language-related Balkan countries. Mass and organized opposition to vaccination in this part of the world is a relatively recent phenomenon. It has been an offshoot of the respective ideas from the West, associated with New Ageism, postmodernism and similar worldviews, but particularly beefed up by MMR vaccine fear in the late 1990s. The four key local leaders from four countries, sketched in some more details, have been selected to represent the whole diversity of the Balkan anti-vaccination scene. Each of them exerts his/her influence throughout the region. The result is that vaccination coverage has substantially decreased in many areas. Outbreaks of vaccine-preventable diseases that have to follow sooner or later would eventually, at least temporarily, bring a blow to the credibility of anti-vaccinationists. We already witnessed such a trend in Bosnia and Herzegovina where vaccines were not readily available during the Bosnian wars in 1990s. As a result, major epidemics of measles, mumps and rubella took recently place all over the country. A dynamic balance between the influence of anti-vaccination movement and the incidence of diseases, characterized by an inverse relationship (the more damaging impact of vaccine opponents on public health, the more cases of diseases, and vice versa) has been a pattern that health services have to deal with.

Keywords: anti-vaccinationists; vaccination; the Balkans

САЖЕТАК

Циљ рада је анализа антивакциналне ситуације у језички повезаним балканским земљама. У том делу света је масовно и организовано противљење вакцинацији релативно скорашњи феномен. Последица је ширења одговарајућих идеја са запада, повезаних са „њуејџизмом“, постмодернизмом и сличним погледима на свет, а нарочито оснажених страхом од ММР (мале богиње, заушке, рубеола) вакцине од краја 1990-их. Одабране су и детаљније приказане четири водеће локалне личности из четири земље, како би репрезентовале сву разноликост балканске антивакциналне позорнице. Свака од њих врши свој утицај у целом региону. Резултат је знатни пад обухвата вакцинацијом у многим подручјима. Епидемије вакцинама спречивих болести, које пре или касније морају да уследе, бар привремено ће задати ударац антивакциналистима. Већ смо сведоци таквог тренда у Босни и Херцеговини, где вакцине нису биле лако доступне 1990-их током грађанског рата. Последице се огледају у великим епидемијама малих богиња, заушача и рубеоле које су захватиле ову земљу. Динамична равнотежа међуутицаја антивакционалног покрета и инциденције оболевања, оличена у обрнутој сразмери (што је веће штетно дејство противника вакцинације на народно здравље, више је оболевања), представља проблем са којим здравствена служба мора да се суочава.

Кључне речи: вакцинација; анти-вакциналисти; Балкан

INTRODUCTION

Resistance to mandatory vaccination was never a major issue in the countries that comprised the former Yugoslavia. Some uneasiness was observed among the urban parents in 1947, when mandatory BCG vaccination of school children had been introduced. The reason for obstruction was a memory to the Luebeck tragedy in 1929/1930 when 72 babies died due to the use of a virulent strain of *B. tuberculosis* (1). There were no riots (the system was too autocratic to allow any form of disobedience), but some parents tried to keep their children at home on the day of vaccination. Health authorities solved the problem by repeated unannounced visits to school premises.

The author's intention was to portrait key opponents to vaccination in the centrally positioned Balkan countries, their general views, attitudes to vaccination, motives for engagement, and arguments.

Regional cooperation of anti-vaccinationists

Anti-vaccination (antivax) movement is a recent phenomenon in the Balkan countries. It swept over from the West, sharing the same triggers and similar manifestations. The key issue has been a fear of MMR vaccine after the well-known Lancet article (2). Newageism, postmodernistic hype with a relativistic attitude to any (including scientific) truth, and an enthusiastic embracement of “natural” products found a fertile soil in the Balkans. In addition, reliance on Internet as a source of information and a wide use of electronic social networking made anti-vaccinationists (antivaxxers) much more efficient in imposing their messages to the public as compared to rigid and sluggish medical services.

The 1990s wars left emotional scars and fairly tense relations between the nations that once comprised Yugoslavia. An amazing fact, however, is an excellent cooperation of the regional antivaxxers. Thus, in 2013 a right wing Serbian Cristian Orthodox site Vaseljenska TV (<http://www.vaseljenska.com/>) took over from its Croatian counterpart news on Bosnia that read: “Bosnian activist reveals dark secrets of UNICEF, WHO and Bill Gates ... and efforts needed for not forgetting 2249 small graves“ (3). The implication was that all infant deaths over a period (2249) were due to vaccination. The concerned Bosnian activist denied the wording, but maintained that some of the children might have been victims of vaccination (Ms. J. Savic – written communication). Witnessing to quite a number of such examples of efficient collaboration between nations, this author referred to the once most popular socialist slogan and gave a title to one of his lectures “Brotherhood-unity of antivaccinists” (4).

More recently, a major Serbian antivax group, Citizens’ Initiative for Non-Mandatory Vaccination (5), organized meetings in Novi Sad and Belgrade, on May 26 and 27, 2016, respectively, and three key speakers were from Croatia (L. Gajski, Đ. Rušinović Sunara) and Slovenia (P. Verbič). Another invited Croat (S. Sladoljev) apologized for not being able to attend, and a chairperson of the most influential Bosnian antivax group (J. Savić) was duly present. Official medical organizations do not have such an intensive collaboration.

Prominent antivaxxers

Any better known regional antivaxxer builds up his/her reputation by “original” worldview of yet unknown health threats, covered international plots against human race, “neglected” individual rights, etc. A variety of approaches may be illustrated by presenting one example from each of the four neighbouring countries.

The most influential antivaxxer in the region is a general practitioner Slađana Velkov (6). Though Macedonia-born, she used to spend most of her time in Serbia, spreading her “missionary” activities as far to the West as Slovenia. Velkov studied 17-18 years, spent a short time as a doctor and then was left without the license. Her CV is greatly forged and her ideas are strikingly bizarre. Velkov believes in the spontaneous evolution (bacteria develop in our bodies), denies existence of AIDS, considers rabies a non-contagious disease, and claims that cancer, multiple sclerosis and many

other diseases should be treated by sunbathing (she also believes in a “theory” that the Sun is cold, though it transfers “vital organ energy”).

According to her, chemtrails contain biorobots that behave as parasites upon being inhaled. Furthermore, shoes are allegedly the most destructive invention in the human history since rubber soles somehow prevent crucial transfer of electrons. This blockade is important since diseases are caused by vibrations (common cold occurs at 58 Hz, candidiasis at 55 Hz, and cancer at 42 Hz).

Along with such a wide range of irrational statements, Velkov perceives vaccines as a major evil. Her assessments that vaccines are a biological weapon and the most dangerous practice in the history of classical medicine made her the antivax icon of the Balkans. Her destructive role against regional public health is reflected by the fact that the number of her followers reaches several dozen thousands only on the Facebook. Velkov’s recent recommendation that autistic children should be treated with a toxic chlorine dioxide (one bottle of the solution costs 15-30 €) rose police interest (7, 8). Since then, her activity outside of Macedonia appears to be less conspicuous.

Upon being sent to an early retirement three decades ago, Serbian dentist Todor Jovanović “invented” AIDS cure. The business developed extremely well, people rushed to his “pharmacy”, and he extended indications for his allegedly miracle drugs, Todoxin and Torexin, to the prevention and cure of cancer and variety of other conditions (9, 10).

In a strange and logically hardly explainable way, nonsenses that Todor has been claiming seem to only beef up his popularity. He allegedly made free of AIDS the basketball player Magic Johnson, King Zulu’s grandchildren, as well as many nobilities. His imaginary successes (“96-98% cure rate”) were demonstrated in a two-digit number of his private clinics scattered over three continents, including West (Bethesda, Md., Washington, D.C.) and East coast of USA (Los Angeles). This unlicensed dentist (of course, without USMLE and any chance to treat medical patients) impresses people by pretending to have been granted 100 million dollars by the US authorities.

From a common sense point of view, much more serious is his inclination to the conspiracy theories. Thus, eugenicists established an association for the reduction of the world population, and therefore “the cause of leprosy was composed only for well-defined unwanted populations”. Furthermore, “the top management of Torlak” (a leading regional producer of vaccines and sera) developed a polio vaccine which caused breast cancer in 61% of women. Why they did it? Well, they were “promised the Nobel Prize” if they “punished curious Serbs” (by the way, Torlak is a Serbian company). Shipment somehow was directed to Brazil, but Brazilians were clever enough to refuse mass vaccination.

Along the same mindset is this gifted story-teller’s complain for being deprived of Nobel Prize himself. It is true that he never published any contribution to science, but instead, he created “a distinct scheme of life development”. Unfortunately, some evil people pushed his creation aside.

Inconsistency is one of his hallmarks. Thus, he “discovered” two mutually exclusive events – one that HIV does not exist, and the other one that Americans secretly introduced this virus to Africa in 1975, while being unable, due to some undisclosed reasons, to throw an atomic bomb.

As the time was passing by, Todor’s popularity grew up and even the fairly reputable regional daily Politika, the oldest in the Balkans, published an interview with him (11). Statements he gave (“Sleeping is waste of time”, all diseases are “absolutely” curable, etc.) made it clear that it was a covert paid advertisement. Generally speaking, his boasting is so far away from reality that he would deserve only despise and pity, if his influence has not taken regional proportions. Many doctors are desperate when approached by terminally ill Todor’s patients.

Ms. Jagoda Savić chairs the Association of the Parents of Severely Ill Children in Bosnia & Herzegovina (12). She is a sociologist and tries to respect scientific standards. Her fight with the Bosnian medical community has two main aspects: a) too high expectations in terms of meticulously maintained documentation for a healthcare system of a developing country, and b) a suspicious attitude towards available evidence both at global and local levels.

She requested that all “infants’ deaths without explanation” be reconsidered since 2000 onwards. Savic referred to SIDS, but actually had in mind children who developed severe unwanted manifestations following vaccination (13). Her emphasis was in particular on 137 infants whose cause of death was labelled “unknown” or “unexplained” (14). In a rhetorical way, she points that “2249 small graves appeal to the consciousness of forensic pathologists and require an answer if a human life is for them a valuable orientation” (14). Her Association offered to the parents free translation of all necessary documentation into English, as well as mailing this material to the US Vaccine Adverse Events Reporting System or, short, VAERS (13). Within less than a month, 30 reports were sent to VAERS (15).

Some controversies were raised by Savic’s initiative “Report your own pediatrician” (16), allegedly designed to identify departures from a proper practice and thus to improve the services. All eight initially reported cases, both from the Federation B&H and Republika Srpska, were presented as victims of vaccination.

Savic bitterly opposed the practice of administering separately DTPr and HiB vaccines, instead of a pentavalent ones. She implied that many serious adverse reactions were associated with simultaneous application of two vaccines provided by different producers and requested Glaxo Smith Kline for clarification, with a pending request prepared for Sanofi Aventis (17). It is apparently much more comfortable to administer a single pentavalent vaccine, but international experience implies that Savic’s fear is not based on facts.

A major regional concern took place when two small children, from Lukavac and Doboj, purportedly passed away due to vaccination (18). A Belgrade’s expert, whose comment was taken as a final truth, left a room for such an interpretation in a mail (J. Savić – written communication).

Among many other reasons for frictions, the most bitter conflict between J. Savić and medical establishment (UNICEF B&H, Prof. M. Zubčević, etc.) concerns subacute sclerosing panencephalitis (SSPE). Due to the irregular and/or absent MMR vaccination during the stormy 1990s, Prof. Zubčević diagnosed 14 SSPE cases. On the other hand, J. Savić tries to demonstrate that at least some of these children developed SSPE due to vaccination, rather than after natural infection. Her doubts are not substantiated by the scientific literature. However, based on ELISA and genotyping testing, she took Bosnian authorities to court on March 26, 2016.

Dr Djula Rusinovic Sunara is a MSc in surgery, but her professional interest is medical law. She established and chaired the Croatian Association for Promotion of Patients' Rights. Sunara's points of view are presented in her book *Why Am I Involved in Politics* (19), where she develops the idea of agatocracy (rule for the common cause). She argues for two strategic tracks: a) promotion of human rights through patients' rights, thus building a better health care system, and b) promotion of the family values by the affirmation of mothers and children.

In her biography (20) Sunara explains that in this book she „talks about the need to foster different kinds of democracy, since the existing ones are perceived as being full of corruption”. She also revealed that in 2001“ she remained unemployed due to pervasive political corruption, direct discrimination, and her personal religious attitudes and non-party beliefs.” (19, 20).

Sunara might have been a victim of a political persecution, but her points of view are fairly radical indeed. One should appreciate her critics of an alienated health care system that applies both to Croatia, as well as the whole region. On the other hand, her perceived mutually exclusive roles and duties of individual vs. community doctors are hardly acceptable. According to this rigid and confrontational division, an individual doctor is exclusively concerned with the interest of his/her patient and must not care about public health, while a community doctor may advise only his/her colleagues, but neither parents, nor politicians. Consequently, community doctors should not be allowed to suggest mandatory vaccination (Dj. R. Sunara – personal communication).

Sunara interprets the Convention on the Rights of the Child (21) in her own way. She ignores the responsibility of parents, community and the government to protect children's rights, including the right to grow up healthy, reducing it instead only to the right to healthcare, that may be consumed or not. This standpoint departs from the ruling of the Constitutional Court of Croatia that the right of a child to health is above the right of parents to make a (wrong) choice (22).

She argues that health is a state, rather than a matter of rights, and that no reason, including community interest, may justify “sacrificing” the children. In her interpretation, „it would not be excusable to run nowadays Mengele-style experiments“ and, consequently, „no one could prove the benefits of vaccination“. She somehow misses the worldwide standard practice of vaccine safety and efficacy testing according to the highest ethical norms.

There are better known antivaccinists in Croatia (L. Tomljanović, S. Sladoljev, L. Gajski), but Sunara appears to exert more powerful influence in the neighbouring countries.

The reason is her activity in international organizations for medical law (she served as a vice-president of one of such global bodies). From this position, she involves local medical law experts in anti-vaxx movement.

Antivaxxers' motives

A vast majority of people who do not vaccinate their children are victims of misinformation. They are overwhelmed by contradictory interpretation of data and do not know whom to trust. In Scandinavian countries a parent who challenged a pediatrician's motives on professional or ethical grounds would be considered psychopathic. In this part of the world, however, people have been so frequently cheated and betrayed by officials and countrymen alike, that they do not take as granted anyone's sincerity any more.

The role of community leaders, above all medical doctors, is critical at this point. They are the ones who dictate vaccination policy. Some of them, pediatricians in particular, are not enthusiastic about vaccination because the risk of epidemics of vaccine preventable diseases has been, at least until recently, fairly low (except in B&H). They have never seen a case of poliomyelitis, tetanus of newborn, diphtheria and similar conditions. Instead, they are annoyed, as well as parents, by occasional postvaccinal reactions of children. Doctors' lives are easier if they simply do not encourage parents to bring their children for vaccination. This policy may pay off when mass immunity exceeds 90-95%. However, since there are more and more such "smart" doctors, population immunity goes down and dire consequences of such a short sighted approach may be ahead.

Doctors who experienced some problems with their children's health frequently blame vaccination for their ordeal. In such a case, arguments are irrelevant. An ENT professor from Zagreb was "99% convinced" that a vaccine caused his daughter's encephalitis. He was shown his own notes that excluded any possible cause-effect relationship. He admitted that handwriting was his, but commented that what he wrote at the time of his daughter's hospitalization was apparently wrong. A professor of pediatrics from Belgrade strongly believes that MMR vaccine has been responsible for his son's autism. As a pulmonologist, he favors pneumococcus vaccine, but resists to acknowledge plenty of studies on the lack of association between MMR vaccine and autism.

Manipulators may be easily recognized because they offer their "miracle" medicaments instead of vaccines. Close to them are sociopaths. Some have strange preconceived ideas, while others do their best to escape anonymity by any means. The last group is a mixture of religious fanatics, people obsessed by rigidly perceived human rights and freedoms, xenophobes, followers of conspiracy theories, etc.

It is frequently difficult to classify an antivaxxer into a single group. Thus, an associate professor of pediatrics from Belgrade had a preconceived idea that diphtheria vaccine led to leukemia (23). The whole concept was so baseless that it experienced a devastating critic (24) and was never seriously considered. The author, however, kept repeating the same nonsense in low esteemed media

over years (25). Media attention pushed him further, even to claim that most viruses, including measles and influenza, are beneficial, with an “argument” that God would not sent us influenza virus each year if it were something harmful (25, 26).

Antivaxxers’ arguments

The most widespread and stubbornly maintained urban legend is that MMR vaccine leads to autism. Scientific arguments on the lack of any causal relation between the two events (27) simply do not touch the skeptics’ mind frame.

Another traditionally used argument is that vaccines contain mercury. Toxic mercury compounds, such as methyl mercury, are than considered, instead of much less toxic ethyl mercury that used to be added to formulas in the past. There is nowadays hardly any example in the whole region that infants and toddlers are exposed to any amount of mercury.

People are also frightened by a variety of other substances, as a rule present in minute, negligible concentrations, sometimes lower than in human milk or other food that infants consume. Manipulation with statistical data is antivaxxers’ favorite means to impress people. Thus, absolute numbers are used to compare vaccinated and non-vaccinated children affected in an outbreak, ignoring the fact that most children (in some examples, over 95%) have been vaccinated. If a proper approach were applied, it would be obvious that the proportion of diseased children in the two groups differed 10-20 times, i.e., that vaccination had an impressive protective effect.

Another way to frighten parents is to refer to the US passive surveillance data (VAERS). It is a system where any event that followed vaccination is reported to, either related to this intervention or not. This data repository only serves for sorting out if there is any cause-effect relationship in each individual case (overwhelmingly, it is absent).

VAERS is sometimes used (and exploited by antivaxxers) as a data source for listing possible unwanted events in instructions for using vaccines. This way, pharmaceutical companies are on a safe ground, because they could not be blamed for hiding any side effect, even if it is non-existent or might appear in less than one in a million cases.

Suggestions that childhood contagious diseases should not be prevented because they provide better immunity as compared to vaccines could only be seriously considered if such diseases were not leading to human suffering, permanent impairment or even death. This line of reasoning leads some opponents of vaccination close to the condemned theory of racial hygiene.

It is nowadays a hype to argue in favor of free choice as a human right. It may be an argument for non-contagious conditions, but for effective prevention of infectious diseases it is mandatory to achieve a high level of herd immunity. Antivaxxers raise a question: “How my unvaccinated child may jeopardize other (assumably vaccinated) children in a community?” First, some children have been spared of vaccination due to medical reasons (permanent contraindications), and second, a

vaccine may not provide 100% protection. An adequate post-vaccinal immunity may not develop at all or induced resistance may wane quicker than expected.

In this presentation we ignore suspicions that vaccines are biological weapon designed to reduce human population, means for introduction of chips into humans in order to subjugate them and similar nonsenses that are offensive to common sense. A recent phenomenon that should be mentioned, however, is Vladimir Putin's role in revealing putative Western plots by use of vaccination (28).

Future of the antivax movement

Anti-vaccinationists exist almost as long as the vaccination (29). Their influence fades away after major epidemics. This process is going on nowadays in the West, after reduced comprehensiveness of vaccination in the previous decade and consequent outbreaks of measles and whooping cough. The same sequence of events may be expected in the Balkans.

CONCLUSION

Mass opposition to vaccination has taken place only recently and almost simultaneously in the Central Balkan countries. Values that local anti-vaccinationists argue for, their arguments and motives resemble the agenda of their Western counterparts. Once established, the movement against vaccination will not fade away. However, epidemics of vaccine-preventable disease will, at least temporarily, reduce their influence on the general population.

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