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Introduction

The present research is related to finding the relationship between the vaccines relevant to MMR and autism. As three sources will be discussed and evaluated in the research. The entire research will cover the detailed analysis of the relationship between the two, and also the opinion about the article which is giving much more information about the safety of the vaccination and Autism. Hence the detailed analysis will help find the authenticity and accuracy of the scientific method adopted by the researchers in their research. MMR is abbreviated for measles, mumps, and rubella – three prevalent diseases in immature children up to the mid-70s. For each of these conditions, vaccines have been developed.

Analysis

(Miller,n.d.) Claimed the details about the interview of DR. Wakefield which has been taken from an excerpt where MMR is an abbreviation for measles, mumps, and rubella – three prevalent diseases in infantile children up to the mid-70s. For each of these conditions, vaccines are available. But they were merged into a single MMR "three-in-one" injection in the 1980s. The strain of the aborted viable embryo was cultivated. A neutralized salt solution "added to the Fetal Bovine Serum" is the growth medium for three live viruses required to generate the MMR vaccination. A comprehensive list of cautions, restrictions, and bad effects related to the three shots is published by the drug company which makes the MMR vaccination. These can be obtained in any doctor who gives MMR in the vaccination linked report and the physician's desk reference (PDR) in the libraries. Nearly everybody's system has been affected by these diseases – blood, lymph. Before measles, mumps, and rubella vaccination were introduced, thousands of cases occurred annually of measles, mumps, or rubella. "The medical community vociferously denies any connection between the MMR vaccine and autism". In vaccinated populations, for instance, influenza epidemics occur frequently.

(CDC, 2020) Explained the details about the MMR vaccine safety Because of high levels of immunization, measles, mumps, and rubella breakout is not as common in the US as before the adoption of the vaccination. But these infections still exist and those who, on the grounds of religion or personal conviction, opt not to immunize their kids bring their kids or others at danger for these infections.



- Holding hands for children
- The MMR vaccine defends against severe infections, even fatal ones.
- Pain, fever, moderate rash, and enlarged glands in the cheeks or the neck constitute some of the most typical side effects of the immunization following MMR.

Studies have revealed that febrile convulsions are a slight increase in the risk for every 3,000-4,000 children immunized with MMR vaccine, kids under 7 years of age are about 8-14 days following vaccination. This is contrasted in the previous 30 days to infants not immunized. No scientific evidence is published that suggests an advantage in dividing the MMR vaccination combination into three single injections. In regions with a large number of unvaccinated persons, measles outbreaks can take place. To limit the spreading of measles further, relatively high MMR vaccination rates are necessary. Since autism indicators may occur at about the same time as children are vaccinated against MMR, a few parents might be worried about autism from the vaccine. In 2004, an Institute of Medicine (IOM) report concluded that autism does not have any link with MMR vaccination, and also that autism does not have any connection with thimerosal-containing vaccines.

(Hornig et.al, 2008) states about the lacking of any connection between autism and measles virus vaccine by conducting enteropathy. In children with autism spectrum disorders (ASD) and gastrointestinal (GI) disturbance, the detection of measles virus (MV) RNA in gut tissue was discovered in 1998. MMR vaccine is not responsible for recent increases in the number of children with autism. It was aimed at determining whether children with GI disorders and autism are much more likely to also have MV RNA and/or autism than children with GI disorders only. Bowel tissue inflammation and when autism and/or GI occurrence temporarily affect MMR receiving. The sample was an aging cohort of United States youngsters who had had Ileocolonoscopy clinical screening. In three diagnostic laboratories, including one in which original results showing a relation of MV to ASD were reproduced, ileal and cecal tissues in 25 children with autistic GI disorders and 13 children with GI disorders alone (controls) were assessed for MV RNA in real-time reverse transcription (RT-PCR). The frequency of the start of GI episodes and autism concerning the delivery of MMR was investigated. "This study provides strong evidence against association of autism with persistent MV RNA in the GI tract or MMR exposure". We did not see any distinction between cases and control groups in ileum and cecum in the existence of MV RNA. Results at the three laboratory sites were comparable. Symptoms of GI and the



beginning of autism were unconnected to MMR. GI autism is related to high levels of language or other ability regression and can reflect a different end phenotype to other ASDs.

Evaluation

All the three sources have been analyzed critically and these articles have been describing the clear connection between Autism and vaccination, though every researcher has clearly provided details through various sources of experimentation and systematic literature review and it has been clearly stating that there cannot exist the relationship between the MMR vaccination and autism in the infants. The vaccination is only providing protection to spread the infection of measles within the community, and the vaccination is only being used to treat the disease but not for creating the other issues like autism, it can only be used for treating the infection and spreading of infection at large scale within the community.

Inference

According to my point of view, the CDC article MMR vaccine safety studies have been providing clear details about the connection between the autism and MMR vaccination as the article has clearly described the details by evaluating various research studies and providing the details about having no connection between autism and the vaccination in much more effective manner.

Conclusion

Hence it is concluded that virtually everybody system, blood, lymph, digestive, cardiovascular, immunological, nerve, respiratory, and perceptual illnesses have been impacted. Reported following the receipt of the MMR vaccination. Tens of thousands of reported cases each year of measles, mumps, or rubella before the introduction of measles and rubella immunization. The numbers have decreased substantially. Therefore, permanent prevention does not emerge from the MMR vaccine, unlike natural diseases. Studies showed that every 3,000-4,000 infants who are inoculated with MMR vaccine with febrile seizures is slightly increased risk; children under the age of 7 years old are about 8-14 days after immunization. In the last 30 days, this is opposed to non-vaccinated newborns. Following studies, there were no associations with MV exposures to ASD, but no testing of MV RNA was conducted in



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intestines and children with ASD and GI issues. Further investigation into the lack of reproduction of the initial range can help further to societal issues, guaranteeing the safety of the Measles vaccination.

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