

Why Is Every Newborn Forced to Get the Dangerous Hepatitis B Vaccine?

Analysis by [A Midwestern Doctor](#)

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STORY AT-A-GLANCE

- › The hepatitis B vaccine has been marred by controversy since its inception, particularly since it is now given to every newborn child despite less than one in a million children benefitting from this policy
- › Remarkably, much of that controversy (e.g., Congressional hearings, mainstream news programs, and HIV vaccine contamination concerns) has been largely forgotten
- › The hepatitis B vaccine has long been associated with autoimmune disorders, particularly demyelinating ones. While the medical community has insisted for over 50 years that this link remains unproven and requires “further research,” evidence demonstrates this process indeed occurs
- › While the hepatitis B vaccine has reduced acute cases in high-risk demographics (e.g., intravenous drug users), there is no evidence it has done the same in newborns (as applicable circumstances are incredibly rare) or reduced chronic hepatitis cases
- › Today, the blanket policy to give it to every newborn will at last be re-evaluated. It is critical we understand what is at stake and why we actually vaccinate every newborn so we can support this policy being changed

Since our society is conditioned to believe all vaccines are “safe and effective” many do not realize the risks and benefits of [each vaccine vary greatly](#). One of the most controversial vaccines has been the Hepatitis B vaccine, which is given to every

newborn in the country at their most fragile moment of life despite their risk of contracting hepatitis B being negligible.

“Bonnie Dunbar PhD has also been in contact with numerous physicians and research scientists from several countries who have independently described thousands of identical severe reactions occurring in Caucasian recipients of the hepatitis vaccine.”¹

Since entering the market, the hepatitis B vaccine has been marred with safety concerns:

- As early as 1976, one researcher cautioned that since autoimmunity is involved in the pathogenesis of hepatitis B infections, they might also be provoked by molecularly similar hepatitis B vaccines. Numerous papers and major news articles since have shown that vaccine provokes a wide range of autoimmune disorders.^{2,3,4,5,6,7,8}
- In 1998 Scientist⁹ highlighted growing concerns threatening to derail the hepatitis B vaccine program, such as more and more people claiming it caused serious autoimmune diseases (e.g., rheumatoid arthritis [RA], optic neuritis, and multiple sclerosis [MS]), that one doctor had collected over 600 cases of this happening, and that in July, attorneys representing 15,000 people sued France's government for exaggerating the vaccine's benefits and downplaying its risks (after which France suspended the vaccine in schools – a move widely condemned by health authorities¹⁰).
- In January 1999 ABC News aired a scathing criticism of the Hepatitis B vaccine:¹¹

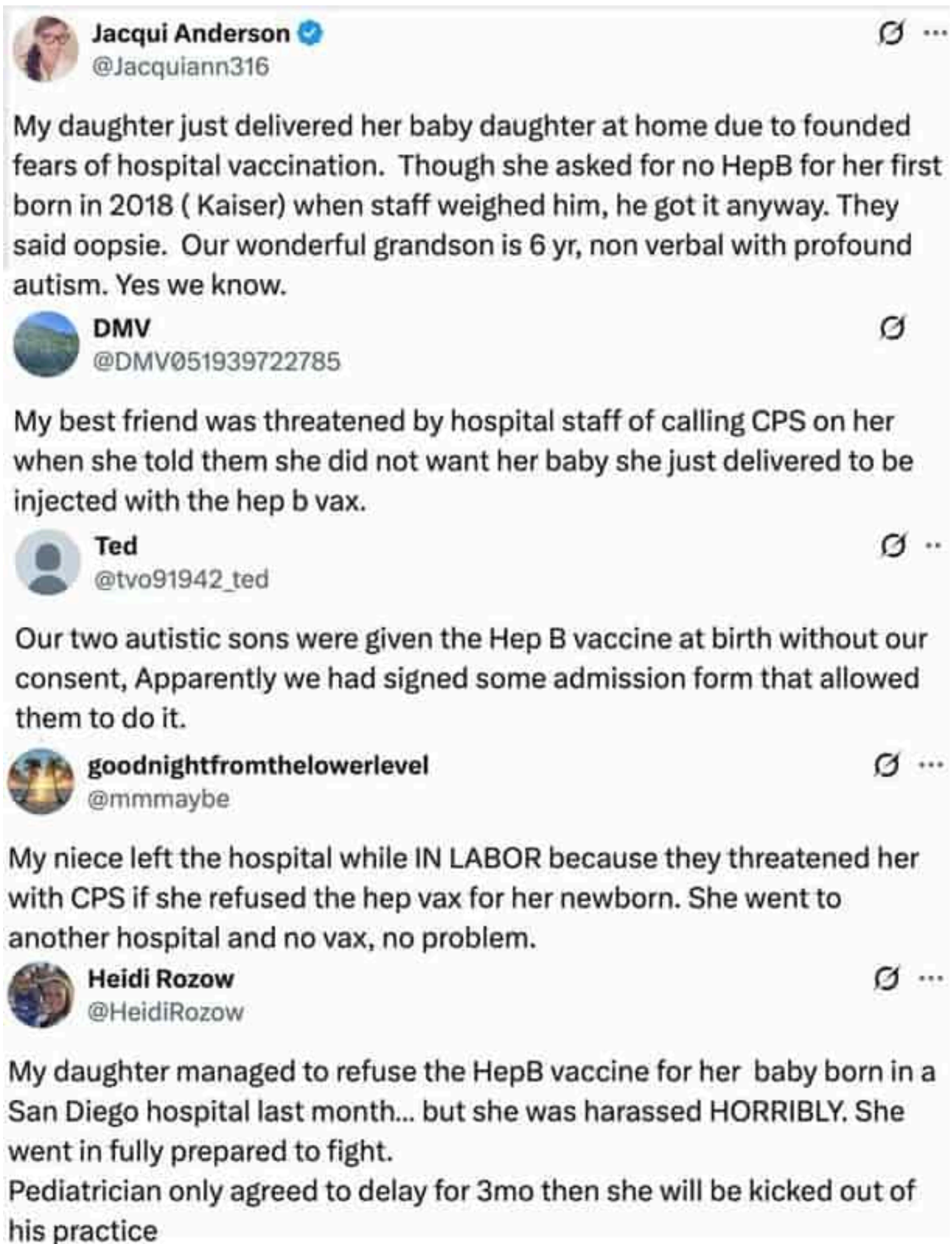
[Video Link](#)

Note: 55 other news programs criticizing vaccines they would never air today can be read [here](#).

- A May 1999 Congressional hearing on the vaccine highlighted that:¹²

- Serious side effects included infant death, seizures, autism, dysautonomia, MS, RA diabetes, and rare cases of liver cancer in children post-vaccination, with (vastly underreported) VAERS data showing over 8,000 reactions, including 43 deaths in children under 2 in 1997. In contrast, there were only 95 (or less¹³) annual hepatitis B cases and no infant deaths, indicating the risks of newborn vaccination vastly outweighed any possible benefit.
- There was massive underreporting of injuries (e.g., 4 to 5 day trials were too short to identify them, and physicians denied they'd occurred when parents reported them) and no effort had been made to identify injury susceptibility.
- All long-term research into the safety of the vaccine was being stonewalled, yet the medical community argued the lack of robust long-term safety studies actually proved the vaccines were "safe" but promised to do future research to determine if the vaccines were safe (which 25 years later still has not happened – but again was repeatedly promised this year as a way to dismiss proposals to stop giving the vaccine to newborns).
- Vaccinating low-risk newborns for an adult-associated disease is inappropriate, particularly since immunity can wane before adolescence and 10% to 30% of individuals fail to produce antibodies, questioning efficacy.
- The National Vaccine Injury Compensation Program denied most claims, leaving debilitated victims unsupported despite a \$1 billion trust fund, with restrictions limiting filings for hepatitis B vaccine injuries.
- There was no informed consent as parents were not provided with information on the vaccine's risks, newborns were vaccinated without parental consent, and parents faced coercion, including threats of social services intervention if they did not vaccinate.

Note: *This is still an issue. Consider what these readers reported.*



Many of the testimonials were quite riveting:

- This woman's son developed seizures, then neurologic disorders, then autism after the vaccine.

Video Link

- This nurse developed chronic inflammatory demyelinating polyneuropathy (losing the ability to walk) along with multiple types of autoimmune disorders.

Video Link

- This adolescent girl became disabled from the neurological and autoimmune complications of the vaccine.

Video Link

- This father's daughter died immediately after vaccination.

Video Link

Vaccine Autoimmune Disorders

One of the Congressional witnesses, produced a report highlighting the dangers of the hepatitis B vaccine including cases of encephalomyelitis he'd observed (resulting in a two week coma for one, a four week coma for the other, along with optic neuritis and significant neurological disability for both).¹⁴ He and others^{15,16,17} ultimately identified hundreds of publications linking that vaccine to a wide degree of autoimmune disorders:

- Multiple Sclerosis,^{18,19,20,21,22,23,24,25,26,27,28,29,30,31} myelitis,^{32,33,34,35,36,37,38,39,40,41,42,43,44,45} encephalitis,⁴⁶ encephalomyelitis,⁴⁷ optic neuritis,^{48,49,50,51,52} Guillain-Barré syndrome,^{53,54,55,56,57,58,59,60,61} neuropathy,^{62,63,64,65,66,67,68,69,70,71} myopathy,^{72,73,74,75,76,77,78,79} Myasthenia Gravis,^{80,81,82} APMPE (an eye disease)⁸³ and uveitis.⁸⁴
- Arthritis,^{85,86,87,88,89,90,91,92,93,94,95,96,97} Lupus,^{98,99,100,101,102,103,104,105,106,107,108,109,110,111,112,113,114,115,116,117,118,119} juvenile dermatomyositis,^{120,121,122,123,124} macrophagic myofasciitis,¹²⁵ polyarthralgia-myalgia,¹²⁶ Still's disease.¹²⁷

- Vasculitis (general,^{128,129,130,131} pulmonary and cutaneous,^{132,133} Churg-Strauss,^{134,135} Henoch-Schonlein purpura,¹³⁶ Kawasaki's disease¹³⁷ polyarteritis nodosa¹³⁸), hemolytic anemia,¹³⁹ thrombocytopenia,^{140,141,142,143,144,145,146} antiphospholipid syndrome.^{147,148}
- Lichen planus,^{149,150,151,152,153,154,155,156,157,158,159,160,161,162,163,164,165,166,167} lichen striatus,¹⁶⁸ bullous pemphigoid,^{169,170} erythema multiforme,^{171,172,173} erythema nodosum¹⁷⁴ Gianotti-Crosti syndrome,^{175,176} alopecia,^{177,178} buccal aphthosis.
- Chronic Fatigue Syndrome,^{179,180,181,182,183,184} Fibromyalgia,¹⁸⁵ Graves' disease,^{186,187} Sjogren's syndrome.¹⁸⁸
- Hepatitis,^{189,190,191,192} glomerulonephritis,¹⁹³ pancreatitis¹⁹⁴ pneumonitis.¹⁹⁵

Note: *This vaccine has also been linked to a variety of other disorders not classically classified as autoimmune disorders such seizures,^{196,197} Bell's palsy,^{198,199} cerebellar ataxia,²⁰⁰ tic disorders,²⁰¹ anorexia,²⁰² tufted angioma²⁰³ and to increase common childhood illnesses (e.g., one study found a 1.6X increase in acute ear infections and a 1.41X increase in pharyngitis and nasopharyngitis²⁰⁴). Worse still, one study found an 81% increase in death.²⁰⁵*

Molecular Mimicry

If an immune provoking substance (e.g., an infection or antigen co-administered with an adjuvant like aluminum) overlaps with human tissue, it can cause the immune system to target human tissue and hence cause autoimmunity. From the start, many believed the Hepatitis B vaccine's issues resulted from it overlapping with myelin (what coats nerves).

This link was vociferously denied by the medical community (yet never researched) but in 2005, proven by a study which showed until the hepatitis B vaccine had a significant overlap with myelin and that 60% of its recipients also developed immune reactivity to the myelin coating their nerves (which in the majority of cases persisted for over 6 months).²⁰⁶

Antigens	aa position		Identities	Similarities
SHBsAg	(135-140)	P S C C C T	4	5/6(82%)
MOG	(10-15)	P S C L C S		
MOG	(12-20)	C L C S F L L L L	5	6/9 (66%)
SHBsAg	(89-98)	L C L I F L L V L L		
MOG	(13-22)	L C S F L L L L L L	6	7/10 (70%)
SHBsAg	(83-89)	F L F I L L L	6	6/7(86%)
MOG	(16-22)	F L L L L L L		
SHBsAg	(9-15)	L G P L L V L	5	7/7 (100%)
MOG	(218-224)	L G P L V A L		
SHBsAg	(67-80)	P I C P G Y R W M C L R R F	6	8/14 (57%)
		P . P G R . R F		
MBP	(82-95)	P A D P G S R P H L I R L F		

Figure 1. Amino acid sequence homology between small Hepatitis B surface antigen (SHBsAg) and myelin antigens. Amino acids in standard single letter; Full stop (.), conservative substitution. MOG, myelin oligodendrocyte glycoprotein; MBP, myelin basic protein.

Furthermore:

- A 2005 VAERS study found the hepatitis B vaccine, in adults, (compared to a tetanus vaccine) was more likely to be followed by a variety of autoimmune disorders (5.2X for MS, 18X for rheumatoid arthritis, 14X for optic neuritis, 9.1X for lupus, 7.2X for alopecia, 2.6X for vasculitis, and 2.3X for thrombocytopenia).²⁰⁷

A similar 2002 study found a 6.1X increase for chronic arthritis (persisting for at least one year), which affected women 3.5X as much as men, and on average occurred 16 days after vaccination.²⁰⁸

- A 2002 study found individuals who received a hepatitis B vaccine, within the next two months, were 1.8 times as likely to experience a demyelinating event.²⁰⁹
- A 2015 study found cases of MS in France rose by 65% in the years following an aggressive national campaign to increase hepatitis B vaccination rates, and that a statistically significant correlation existed between the number of hepatitis B vaccine doses given and the number of MS cases 1 to 2 years later.²¹⁰

- A 2004 study compared 163 MS patients with 1,604 randomly selected matched controls without MS. It found that MS patients were three times more likely to have received the hepatitis B vaccine within three years of symptom onset (which was not seen from tetanus or influenza vaccination).²¹¹
- A 2009 study in children found that the GSK's hepatitis B vaccine, which contains five times more yeast protein antigen than other brands, was associated with a 2.77X increased risk of developing MS. A smaller increase (1.5X) was observed for other CNS inflammatory demyelinating disorders.²¹²

The hepatitis B vaccine has also been repeatedly linked to autism and other developmental disabilities:

- Secretary Kennedy revealed that in 1999, the CDC conducted a study which found that receiving a hepatitis B vaccine in the first 30 days of life caused a 12.35X increase in autism – after which the study was buried.²¹³

Note: Kennedy likely referred to this (unpublished) study, which, via the CDC's private database, found the highest doses of mercury containing vaccines caused a 1.8X increase in neurologic development disorders, a 7.6X increase in autism, a 5.0X increase in nonorganic sleep disorders and a 2.1X increase in nonorganic sleep disorders.²¹⁴

- A 2007 study of 1824 children found boys who received the hepatitis B vaccine were 9 times as likely to have a developmental disability.²¹⁵
- A follow-up 2010 study found giving the hepatitis B vaccine at birth increased autism 3X,²¹⁶ while a 2017 study found newborn (mercury containing) hepatitis B vaccines increased the risk of autism by 4.6 to 6.7X.²¹⁷

Note: A 2015 study found they increased the risk of developmental delays by 1.6X to 1.7X²¹⁸ (which a 2016 study estimated equated to over a trillion in healthcare costs²¹⁹).

Similar results were also seen in animals:

- A 2010 monkey study determined that the vaccine caused a significant delay in the acquisition of root, snout, and suck reflexes (critical processes for development).²²⁰
- A **2016 mouse study** found the vaccine impaired neurogenesis, behavioral performances and hippocampal long-term potentiation which simultaneously increased brain inflammation (that was proportional to the neurologic damage which occurred),²²¹ later determined to largely result from elevated IL-4.²²²

Note: A 2013 study found that hepatitis B vaccination spiked their inflammatory CRP levels, and in 22 out of 70 infants, this increase was large enough to pass the diagnostic threshold for sepsis.²²³

In contrast, the licensing studies for the vaccines only monitored for side effects during a short window long before these side effects would emerge (typically 4 to 5 days²²⁴) and did not use actual placebos.^{225,226} This limited data shows:

- 17% to 22% of adults reported injection site reactions.^{227,228}
- 5% to 14% of adults and 10.4% of children reported systemic adverse reactions (e.g., fatigue/weakness, dizziness, headache, fevers above 100°F, malaise, nausea, diarrhea, pharyngitis, upper respiratory infection).^{229,230}
- Around 1% (or 3.8% of diabetics) had significant systemic reactions (e.g., anorexia, somnolence, hypotension, a wide range of gastrointestinal conditions, hives, irritability, and weakness).²³¹
- In newborns, within 48 hours of vaccination, the following were reported: pain (9%), erythema (20%), swelling (4%), irritability (20%), vomiting (23%), diarrhea (12%), feeding difficulties (17%), drowsiness (28% to 32%), restlessness (31%), and fever $\geq 38^{\circ}\text{C}$ (0.7%).^{232,233,234}

Note: Many of these symptoms can be immensely consequential in infants (e.g., fevers trigger invasive sepsis workups).

- The only long-term study of these vaccines found that after 7 months, 5.8% to 6.2% of recipients reported a serious adverse event.^{235,236,237}

Note: A definitive 1994 report by the Institute of Medicine noted that while preliminary data existed for many of the injuries attributed to the hepatitis B vaccine, no further research had ever been done (and still has not been), so there was insufficient evidence to prove or disprove a link between these conditions.²³⁸ Remarkably, that was taken as proof the vaccines did not cause harm rather of a gross failure by the scientific community.

Vaccine Justifications

Assessing the benefit of a vaccine is quite challenging as a number of things have to lineup for a proposed benefit to occur, and since this rarely occurs in practice, a variety of overly optimistic assumptions are used to justify the vaccine (while conversely, every possible rationalization is used to downplay any possible vaccine injury). In the case of the hepatitis B vaccine, its justifications are that:

- Large numbers of people get hepatitis B each year and can progress to chronic hepatitis B.
- Chronic hepatitis B is a disease that can severely impact one's quality of life, and there is no good cure for it.
- The vaccine prevents hepatitis B.

In turn, when the hepatitis B vaccine came out, hepatitis B rates dropped across the country, and the public health profession has long considered this vaccine to be one of their crowning achievements (which they hence will fight tooth and nail to protect).

However:

1. Hepatitis B requires blood-to-blood contact, which is typically through unprotected sex (particularly anal sex²³⁹), accidental blood exchanges (primarily needle stick injuries or sharing contaminated drug needles²⁴⁰), or during childbirth (which is the primary way hepatitis B is transmitted in high prevalence areas).

2. Hepatitis B transmission hence is isolated to specific communities (e.g., the gay community volunteered to be subjects for the vaccine due to **around a quarter having it in the 1980s**, and in IV drug users, studies find chronic hepatitis B at rates between 3.5% to 20%²⁴¹).

Note: Extensive data indicates AIDS originated from contaminated (chimp derived) hepatitis B vaccines tested in the gay community during the 1980s.

3. The only way a child can get severe chronic Hepatitis B is from a childbirth transmission (**any other route is essentially impossible**), which requires:

- The mother to have hepatitis B (approximately 0.1% do²⁴²).
- Prenatal care and the hospital failing to identify it with (typically legally mandated) screening (applying to far less than 1% of hospital births).
- If the mother has a more severe HepEAg+ infection that is more likely to transmit the disease (constituting approximately 10% of maternal hepatitis infections²⁴³).
- The infection transmitting during childbirth (80% with HepEAg+,²⁴⁴ around 10% with HepEAg²⁴⁵).
- The acute infection becoming chronic (85% to 95% from a HepEAg+ mother, less from a HepEAg- mother²⁴⁶).

Furthermore:

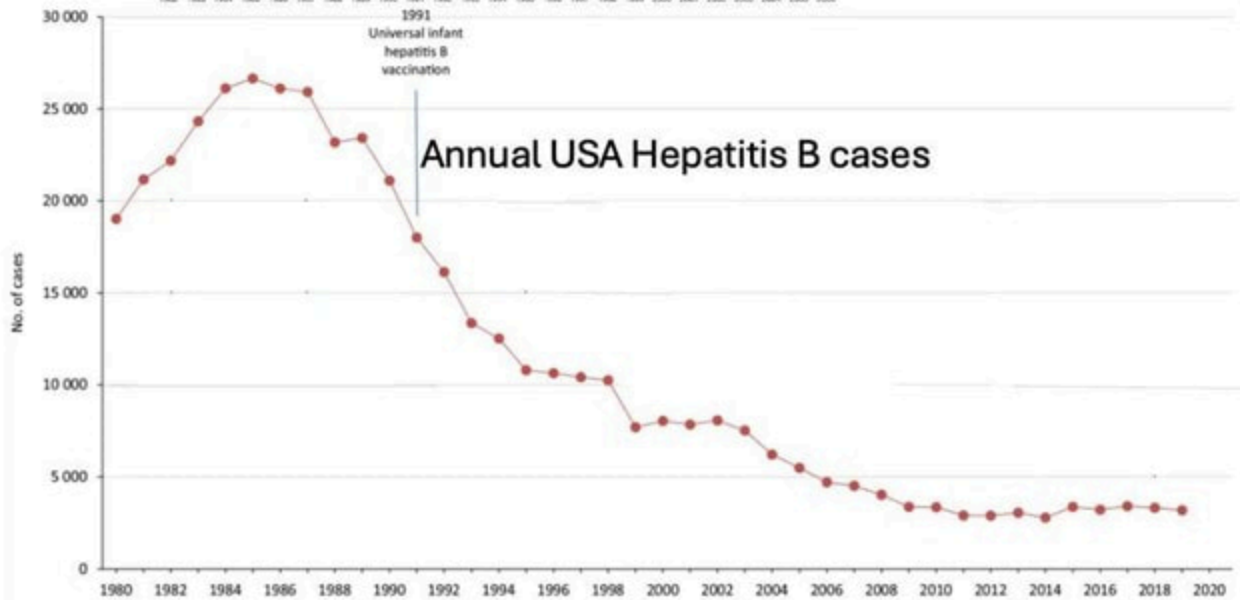
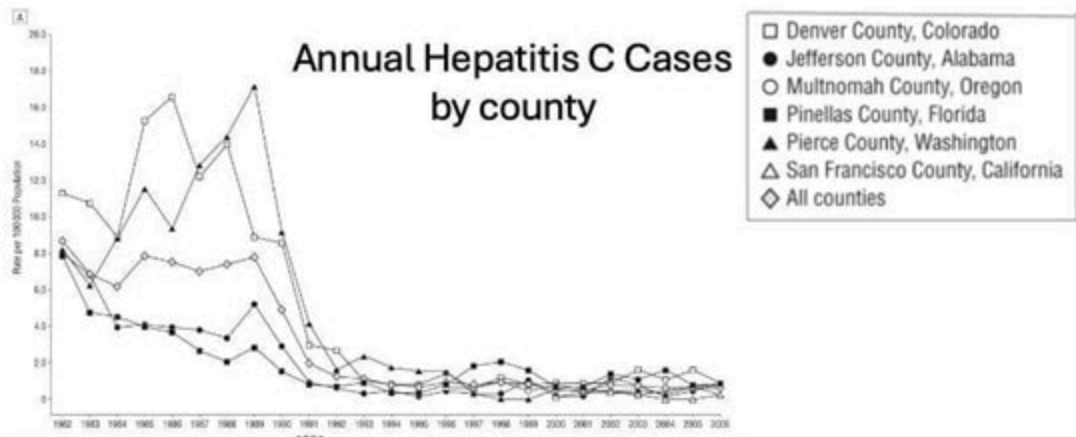
- Of those with chronic HBV, about 15% to 25% may progress to develop severe illnesses like liver cancer or failure later in life as adults.²⁴⁷
- The HepB vaccine frequently fails to prevent a transmission (publications suggest a 68% to 86% efficacy^{248,249,250} with greater vaccine efficacy seen in HepEAg- mother, with one study finding 9.26% of infants born to a HepEAg+ mother who were vaccinated and given immunoglobulin still developed chronic hepatitis²⁵¹).

Note: *Because of this partial efficacy (infants do not have fully developed immune systems), immunoglobulins are also given to children of HepB+ mothers. However, this is non-applicable for mass vaccination (which is done to protect children missed by screening).*

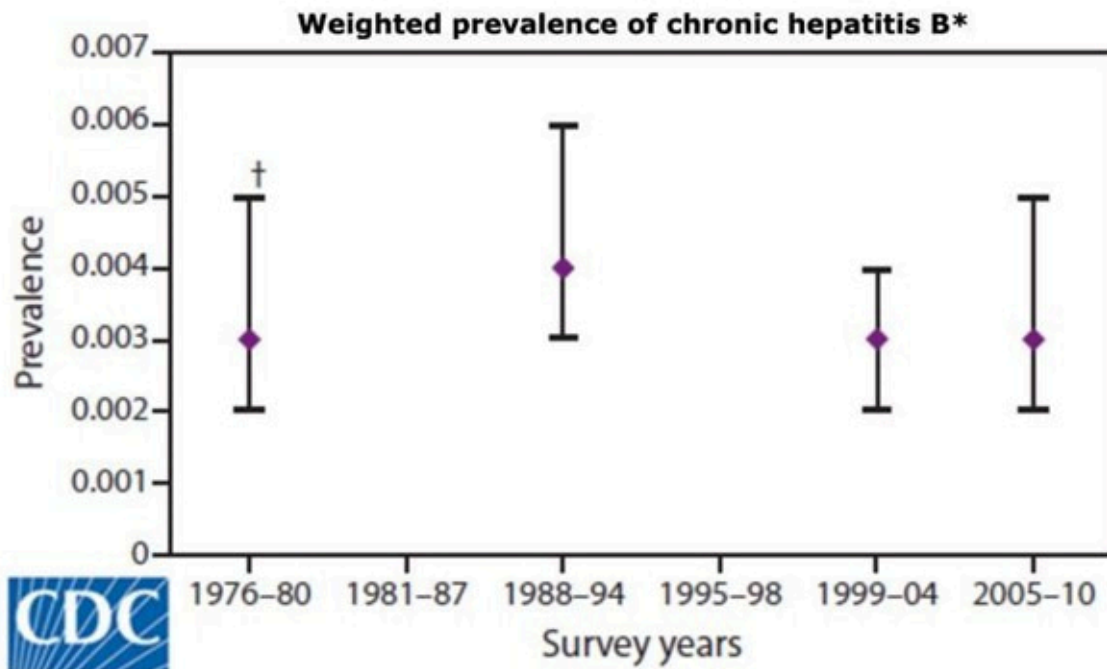
These numbers, which I took from official sources, are important, because when you multiply them out, you need to vaccinate over a million children to prevent one case of consequential hepatitis B (and five million to prevent a severe complication) – demonstrating the vaccine injures far more children than it protects.

Furthermore societal data, shows that the hepatitis B vaccine campaigns **greatly lowered acute hepatitis B in high-risk groups**, but also that:

- This decline preceded infant vaccination, and that a similar decline occurred for hepatitis C^{252,253} (which shares hepatitis B's transmission patterns but is not vaccinated against).



- While acute hepatitis B rates have dropped, the actual target, prevalence of chronic hepatitis (0.003%) has not changed since 1976 in the United States.^{254,255}



National Health and Nutrition Examination Survey, United States, 1976–2010

Note: Given that the hepatitis B vaccine failure rate is similar to the percentage of people who can't eliminate an acute hepatitis infection and become chronic carriers (5%²⁵⁶), I suspect this failure is a result of the vaccine being unable to protect those whose impaired immune systems are actually at risk of developing chronic hepatitis – particularly since a similar phenomenon **was observed with the early smallpox vaccines** and most recently **with the COVID vaccines**.

Why Is the Vaccine Given?

As the official reason (preventing maternal-to-fetal transmission) doesn't justify vaccinating every infant, I've searched for decades for the actual justification for this policy. The most compelling ones (many of which came from "insiders") include:

- Since the target demographics for the hepatitis B vaccine are small, universal vaccination was needed to increase sales to a profitable and sustainable level.
- Vietnam has amongst the highest rates of hepatitis B in the world (10% in urban areas and up to 40% in rural areas²⁵⁷). Once a large flood of refugees came here after the war (roughly doubling in both the 1980s and 1990s to 988,000 immigrants

by 2000²⁵⁸), it caused a (relative) explosion in neonatal transmission here authorities felt needed to be addressed by vaccinating every American infant.

- Vaccine manufacturers only have legal immunity if their vaccine is on the childhood vaccine schedule.
- Vaccinating their newborn in the hospital conditions parents to come in for their 2-month vaccination appointment and hence be compliant patients who routinely acquire medical goods and services (and if their child begins life neurologically injured, less able to recognize subsequent injuries in their child – **particularly the subtle ones**).
- Since injuries from newborn vaccines will occur before parents have a clear sense of what is "normal" for their child, it makes it much harder for them to recognize **the subtle harms that frequently occur following vaccination**, again making it easier to increase patient compliance.

Most recently, a reader (I vetted) shared that:

"[After the 1991 vote, a close colleague on ACIP] explained to me in confidence that they added vaccine not to prevent vertical [mother to child] transmission but to get the vaccine administered to a "captive audience" before they could leave the hospital. Their fear was that it would be the only opportunity to prevent Hep B infection later in life to the highest-risk inner city youth populations [the primary source of hepatitis B transmission]."

Of these, I believe the final one is the most probable, particularly since the medical industry will still force mothers who do not have hepatitis B to vaccinate their children, but it is likely some of the others played a role as well.

Conclusion

When the 1986 Vaccine Injury Act was passed, one of its primary purposes was to ensure safer vaccines could be created. However, since direct liability was removed and every provision to produce safer vaccines was placed at the discretion of the government (which was also made financially liable compensating vaccine injuries), this eliminated all incentive to create safer vaccines or even acknowledge there was a problem to begin with.

Books could be written on the consequences of it; imagine for a moment how much suffering could have been avoided if the industry had simply been pressured to develop a hepatitis B vaccine that did not overlap with human myelin.

For years, they've told us there is "no evidence" the hepatitis B vaccine, despite the fact I've cited hundreds of studies in this article showing it's anything but safe. Fortunately, decades of suppression and gaslighting can no longer maintain the status quo and there is now strong pressure to change it (e.g., recently President Trump publicly stated children should not get the hepatitis B vaccine²⁵⁹).

Today, the most pivotal moment in the history of this vaccine will occur and the American Committee on Immunization Practices (which creates the CDC's vaccine guidelines) will meet, and for the first time, independent members will assess if this vaccine should actually be given to every newborn.

Due to the vested interests behind that vaccine, the pushback against changing the policy has been immense, but I believe if we speak out and bring attention to this travesty, we can create vital public support for ACIP to rescind every newborn getting this vaccine. Please consider sharing this article with those you know and [virtually attending this meeting](#).

Author's Note: This is an abridged version of [a longer article](#) which details the atrocious history of the hepatitis B vaccine (and can be read [here](#)). Additionally [a companion article](#) on the pros and cons of each individual childhood vaccine can be read [here](#). Finally, [an article](#) providing the extensive evidence vaccines cause a wide range of subtle and severe complications (e.g., making many chronic illnesses 3-10X more likely) can be read [here](#).

A Note from Dr. Mercola About the Author

A Midwestern Doctor (AMD) is a board-certified physician from the Midwest and a longtime reader of Mercola.com. I appreciate AMD's exceptional insight on a wide range of topics and am grateful to share it. I also respect AMD's desire to remain anonymous since AMD is still on the front lines treating patients. To find more of AMD's work, be sure to check out [The Forgotten Side of Medicine](#) on Substack.

Sources and References

- [¹ See all references](#)