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# Why Have Vaccines Become a Religion

Analysis by A Midwestern Doctor | September 10, 2026

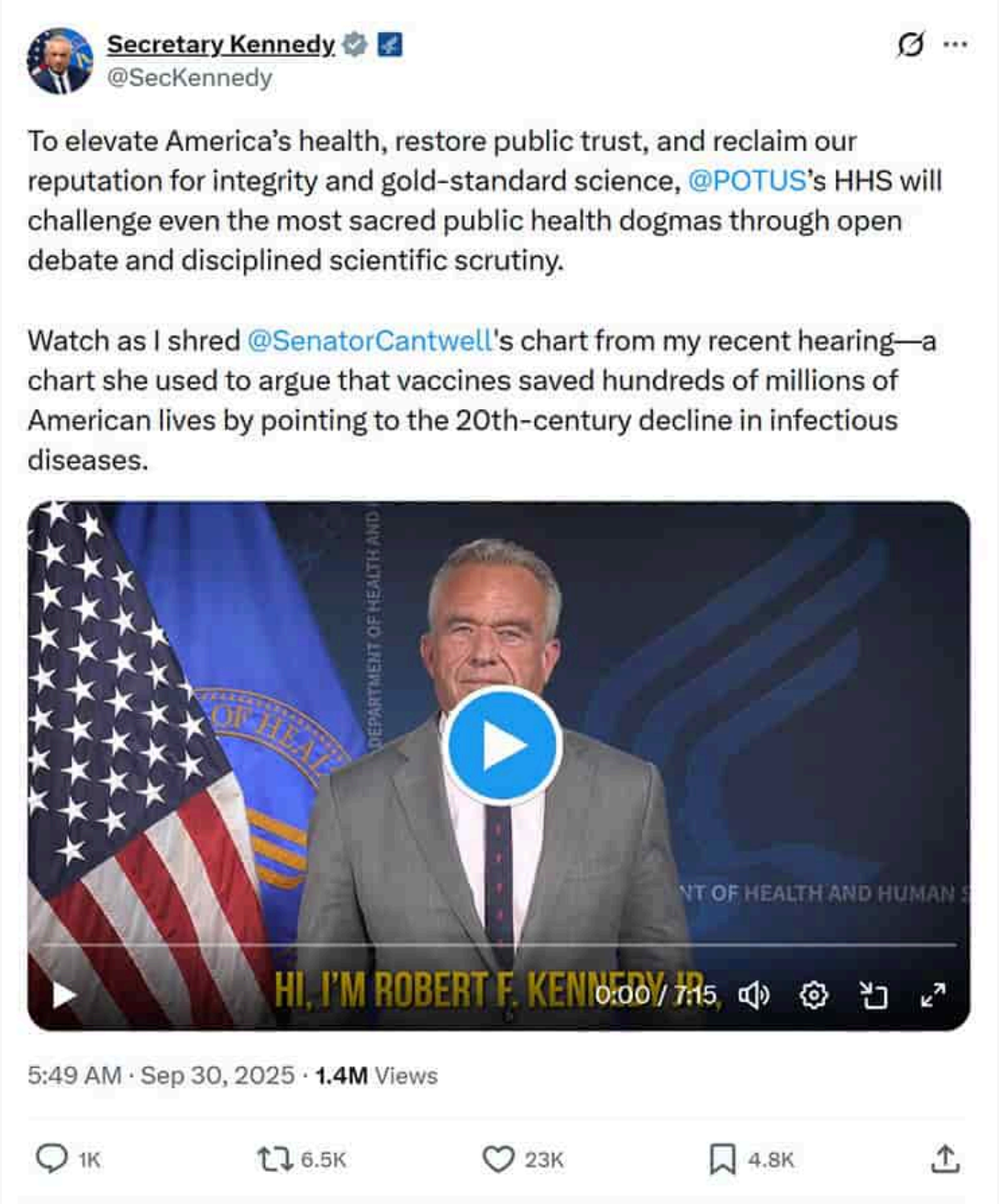
## STORY AT-A-GLANCE

- As more people awaken to the dangers of vaccines, they discover a persistent problem vaccine safety advocates have faced for decades: talking to vaccine zealots is like speaking to a brick wall. Regardless of the evidence presented, you cannot reach them — sometimes it feels like speaking to religious fanatics unwilling to consider the "blasphemy you're spewing forth"
- This is deliberate, as vaccines have been enshrined as the holy water which baptizes you into the faith of Western medicine and became the "miracle" the superiority of modern medicine is based upon
- Because of this faith and the relentless propaganda accompanying it, a series of absurd and contradictory arguments have been established to assert vaccines are "safe" which would never be accepted anywhere else
- As a result, all vaccine research is designed around the assumption vaccines must be safe, and all regulatory decisions sharing this bias — thereby making it nearly impossible to prove a vaccine is harmful, regardless of how many people it kills or injures
- This article will review the absurd fallacies used to defend mass vaccination, the unsound mindsets that produce them, and the incredible opportunity we have to at last shift this dysfunctional dynamic

**Once people awaken to vaccine issues, one question emerges: why does the medical field maintain such rigid ideological attachment to vaccination? This phenomenon reflects three converging factors:**

- First, human society has always been defined by competing groups vying for status and wealth, and it is a very recent development that doctors have attracted the prestige and salary the profession commands. This was accomplished through:
    - Market monopolization (via the American Medical Association) and technological developments birthing an incredibly profitable medical industry that generated the funding to market a newfound faith in it to the entire world and required doctors (and faith in doctors) to serve as the keystone for the industry.
    - Medicine creating a mythology that it rescued us from the dark ages of disease, and hence deserves its supremacy in the current social hierarchy.

      As "vaccines ending infectious diseases" is a central part of that mythology, to maintain their existing prestige, those within the conventional medical system are essentially forced to double-down on the absolute supremacy of vaccines, regardless of the evidence against them, or the fact, as Secretary Kennedy brilliantly shows, there is no actual evidence vaccines were responsible for the decline in infectious disease the medical industry falsely claimed credit for.




***Note:*** *The evidence for the most sacred vaccines (smallpox and polio) is quite weak.*[1] *For example,* ***the smallpox vaccine was never proven to work***, ***caused rather than prevented outbreaks***, *and* ***smallpox only ended*** *after an English city eschewed the vaccine in favor of improved public sanitation and smallpox quarantines.*

- Second, as the Dunning-Kruger effect demonstrates,[2] less competent individuals vastly overestimate their competence because they lack the knowledge to recognize their incompetence.

In medicine, there is a massive amount of information that needs to be learned, so in most cases doctors are forced to take short cuts throughout their training where again and again they assume if A is true then B is true without understanding exactly why A leads to B, how tentative the link can be, and in which situations it does not apply.

Likewise, when the public (especially members of the media) appraises medical information, rather than try to understand how A becomes B, they typically take the pronouncement of an expert (e.g., a doctor) that "A always leads to B" as all there is to say on the subject.

Since A often does not actually lead to B, and people do not like admitting they are wrong (especially if, like doctors, an incredible personal investment was required to attain the social status they hold), when confronted with inconsistencies in their beliefs, the typical response will be to double-down on their position rather than try to critically understand the additional data.

***Note:*** *The cognitive dissonance created by acknowledging vaccines they prescribed harmed their patients also makes doctors psychologically invested in dismissing evidence vaccines cause harm.*[3]

- Third, a strong argument can be made that societies cannot function without some type of unifying faith or spirituality (particularly since in the absence of one, people will frequently seek out one to adopt). In our culture, a rather peculiar situation emerged where religion was cast out by broad swaths of the society and replaced with science (under the belief it would create a fairer and more rational society) while the underlying need for a widespread faith was never addressed.

  Because of this, science gradually morphed into the society's religion, resulting in it claiming to be an objective arbiter of truth, but in reality, frequently being highly dogmatic and irrational as it sought to establish its own monopoly over the truth (which has led to many labeling the current societal institution of science as "**scientism**").

As such, when science is discussed, religious terminology is often used by its proponents (e.g., "I believe in science," "I believe in vaccines," "anyone who denies climate change is reprehensible and must be silenced").

## The Religion of Medicine

Over the years, many have observed that medicine, by claiming dominion over life and death, has become science's new religious foundation. Dr. Robert S. Mendelsohn stated: "Modern Medicine can't survive without our faith, because Modern Medicine is neither an art nor a science. It's a religion."

In Mendelsohn's 1979 book Confessions of a Medical Heretic, he argued that medicine was a dogmatic institution prioritizing authority and ritualistic practices over patient well-being.[4] He then made numerous highly impactful television appearances, including a 1983 debate on vaccine dangers:


***Note:*** *55 other previously aired news segments aired on vaccine dangers that would never air now can be viewed* ***here****.*

Mendelsohn highlighted how doctors compulsively rushed to prescribe new drugs before side effects were known, many routine practices caused more harm than benefit, that medicine's compulsion to "do something" was faith-based rather than rational, and that doctors challenging the faith were treated as heretics and cast out — all of which we collectively witnessed decades later throughout COVID-19.

Mendelsohn also highlighted specific techniques medicine appropriated from religion: doctors replaced priests; white coats replaced priest robes; hospitals functioned as temples; medical insurance resembled religious indulgences; drugs were treated like

communion wafers; and vaccines became the holy water baptizing you into the faith. I would argue the final point is the most important as:

- Medical students and healthcare workers are required to be fully vaccinated — filtering out those not aligned with dogma and forcing submitters to push vaccines on patients. Likewise, as COVID-19 showed, many segments of the public will now excommunicate those who aren't vaccinated.

- Vaccines significantly increase chronic illness likelihood (**typically a 3-10X increase**), causing recipients to become lifelong medicine adherents.

- The trauma of vaccination repatterns the nervous system to be less connected with one's surroundings, thereby making the individual much easier to pull into a controlling materialist paradigm.

For a long time, the religious nature of vaccination has been a relatively unknown and taboo topic to discuss, but fortunately, in recent days that has shifted. Here for example, Tucker Carlson and Cheryl Hines gave millions of viewers one of the most poignant explanations I've seen for why vaccination is ultimately a religious ritual:

**Video Link**

***Note:*** *This is the mural deifying vaccination Tucker was referring to.*[5]

**Vaccines, Amen**

In 2025, Aaron Siri published **Vaccines, Amen**, an excellent book which makes the best comparison between medicine and religion since Mendelsohn's 1979 work by showing how repeatedly:

- The words of a small number of (pharmaceutical-funded) trusted authorities are taken as dogmatic truth everyone copies — despite lacking evidence or logical support. Siri deposed the godfather (high priest) of America's current vaccine program, showing critical gaps in his duplicitous reasoning that defined vaccination practice.

- Illogical and blatantly inconsistent positions are taken arguing vaccines are safe and effective with identical evidence types accepted if supporting that belief but rejected if refuting it. Siri highlights countless instances of glaring contradictions with the phrase "Vaccines, Amen," something that also captures vaccine zealotry's censorship of questioners and forced vaccination rather than logical persuasion.

- Vaccine safety research is layered with endless assumptions that vaccines must be completely safe, concealing actual harms, yet this research — which never actually proved safety (due to those assumptions) — is presented as ironclad proof vaccines are both safe and effective.

***Note:*** *I corresponded with a CDC employee who shared that he "read a 2021-2022 project proposal which discussed how they were seeing the first girls that got the HPV vaccines were showing higher rates of cervical cancer as they got into older ages. Instead of making the obvious observation that this disproves the central [**but never proven**] justification for HPV vaccines, they just said, we know the vaccine works so something else must be happening to cause the rise in the condition it was meant to prevent."*

## The Absence of Evidence Is Not the Evidence of Absence

Due to **the high toxicity of vaccines**, real studies inevitably show significant injury. The medical community's strategy hence has been to block studies comparing vaccinated to unvaccinated from ever being produced.

As such, placebo-controlled vaccine trials are vehemently rejected as "unethical" because they deny (placebo) children a "life-saving" vaccine — despite it being far more unethical to inject every child with vaccines of unknown safety. Yet when "ethical" studies show vaccine injuries are real, they're rejected as "non-controlled" and met with demands for "controlled trials" (that are banned for "ethical" reasons). This absurdity continues as:

- When "non-controlled" datasets indicate safety, rather than be questioned, they are widely publicized.
- Large datasets that could "ethically" compare vaccinated to unvaccinated exist, but the public is never given access despite extensive efforts to obtain them.
- When individuals independently conduct such studies demonstrating harm, **studies get retracted and investigators are often targeted by medical boards**.
- A physician agreed to conduct a vaccinated vs. unvaccinated study to prove vaccines were safe and then publish the results regardless of what they showed. Once its data irrefutably showed vaccines were immensely dangerous,[6] he refused to publish the study and apologetically admitted to a hidden camera he did that to protect himself.[7]
- Many other incriminating datasets are routinely buried. For example, a CDC whistleblower testified that the CDC buried data they collected showing vaccines cause autism,[8] and when a court order finally forced the CDC to release the data used to track COVID-19 vaccine safety, it showed significant harm and **that past publications of this data had hid that harm**.

In short, an illogical status quo has been enshrined where "the absence of evidence" for vaccine harm is erroneously accepted as "the evidence of absence." Building upon this, evidence-based medicine (the guiding principle for modern medical practice) was founded upon the premise that clinical decisions should be made with the "best available evidence."

Unfortunately, industry redefined this to mean "large (expensive) double blind trials" (RCTs) published in top (industry funded) medical journals and positions endorsed by (corruptible) "experts," rather than the best evidence currently existing on a subject.

***Note:** The FDA also rigidly demands costly RCTs for drug approvals, making it impossible for off-patent (non-monetizable) therapies to ever be approved. RCT fundamentalism (the refusal to consider anything besides randomized controlled trials) is particularly misguided as smaller observational trials typically yield the same results as large RCTs (proven by a definitive 2014 Cochrane Review[9]), especially if effects are significant.*

As such, while the best currently available evidence (retrospective comparisons of vaccinated and unvaccinated children) shows significant harm from vaccines, it is dismissed for not being from RCTs (despite vaccine placebos being "unethical") rather than taken as a sign "better" research needs to be conducted to disprove the harm the best available evidence currently shows.

**Video Link**

Likewise, when Siri tried to obtain data proving vaccine safety (e.g., in depositions, lawsuits, or Federal petitions), no one could identify a single study supporting the claim that infant vaccines don't cause autism, despite all being certain "mountains of evidence" exist showing vaccines are safe.

In turn, the Institute of Medicine (IOM)'s 1994 and 2012 reports[10,11] (considered by many the definitive proof of vaccine safety) actually stated insufficient evidence existed to definitively support or disprove a link between vaccines and serious injury, and that this research should be urgently done.

Furthermore, Gavin DeBecker's excellent book Forbidden Facts, focuses on how the IOM routinely whitewashes proven harms of toxins the government has a financial stake in (e.g., Agent Orange) and, as DeBecker discusses below, provides leaked records that show IOM members were told at the start that their final report could not provide evidence suggesting vaccine harm.


## Burying Evidence

Since RCT's cost so much to conduct, the pharmaceutical industry has found a series of reliable methods to game them that are continually utilized.[12] This data manipulation is particularly brazen with vaccine trials. For example:

- In clinical trials, vaccines are monitored for very short periods (e.g., the studies for hepatitis B vaccines given to every newborn only monitored side effects for 4 to 5 days[13]), making long-term detection of **the myriad of chronic illnesses vaccines cause** impossible.

- The "placebos" used in vaccine trials typically cause a significant degree of injury, hence concealing the harm of the vaccine as the injuries observed in trials are "equivalent to placebo." For example, consider this data from the HPV vaccine trial[14] (which used a harmful aluminum adjuvant as "placebo" to mask 2.3% of trial participants developing a life-altering autoimmune condition):

| Conditions | GARDASIL (N = 10,706) | AAHS Control* or Saline Placebo (N = 9412) |
|---|---|---|
| | n (%) | n (%) |
| Arthralgia/Arthritis/Arthropathy† | 120 (1.1) | 98 (1.0) |
| Autoimmune Thyroiditis | 4 (0.0) | 1 (0.0) |
| Celiac Disease | 10 (0.1) | 6 (0.1) |
| Diabetes Mellitus Insulin-dependent | 2 (0.0) | 2 (0.0) |
| Erythema Nodosum | 2 (0.0) | 4 (0.0) |
| Hyperthyroidism‡ | 27 (0.3) | 21 (0.2) |
| Hypothyroidism§ | 35 (0.3) | 38 (0.4) |
| Inflammatory Bowel Disease¶ | 7 (0.1) | 10 (0.1) |
| Multiple Sclerosis | 2 (0.0) | 4 (0.0) |
| Nephritis# | 2 (0.0) | 5 (0.1) |
| Optic Neuritis | 2 (0.0) | 0 (0.0) |
| Pigmentation Disorder** | 4 (0.0) | 3 (0.0) |
| Psoriasis†† | 13 (0.1) | 15 (0.2) |
| Raynaud's Phenomenon | 3 (0.0) | 4 (0.0) |
| Rheumatoid Arthritis‡‡ | 6 (0.1) | 2 (0.0) |
| Scleroderma/Morphea | 2 (0.0) | 1 (0.0) |
| Stevens-Johnson Syndrome | 1 (0.0) | 0 (0.0) |
| Systemic Lupus Erythematosus | 1 (0.0) | 3 (0.0) |
| Uveitis | 3 (0.0) | 1 (0.0) |
| **All Conditions** | 245 (2.3) | 218 (2.3) |

*AAHS Control = Amorphous Aluminum Hydroxyphosphate Sulfate

**Protocol 018: Clinical Adverse Experience**
**Summary Days 1-15 Postvaccination – Protocol 018 (Overall)**

| | HPV vaccine group N=1179 | Placebo group N=594 |
|---|---|---|
| Subjects with follow-up | 1165 | 584 |
| N (%) with 1+ AE | **963 (82.7%)** | **392 (67.1%)** |
| N (%) with IS AE | **877 (75.3%)** | **292 (50.0%)** |
| N (%) with systemic AE | 541 (46.4%) | 260 (44.5%) |
| N (%) with SAE | **5 (0.4%)** | **0 (0.0%)** |
| Deaths | 0 | 0 |
| D/C due to AE | 3 (0.3%) | 0(0.0%) |
| D/C due to SAE | 1 (0.1%) | 0 (0.0%) |

SAE=Serious Adverse Experience, D/C=Discontinued Trial

Likewise, in the initial Gardasil trials, out of 21,458 subjects, 10 vaccine recipients and 7 "placebo" recipients died[15] including 7 from car accidents[16] (which POTS — a common Gardasil side effect — can trigger by causing drivers to pass out).

So, despite the Gardasil death rate (8.5 per 10,000) and "placebo" death rate (7.2 per 10,000) being almost twice the background death rate in girls and young women (4.37 per 10,000), much like the unprecedented spike in autoimmune disorders, the FDA wasn't concerned since it matched the "placebo."

- More remarkably, as Siri has shown, most vaccines use another vaccine (often one for a completely different disease) as the "placebo," again making it possible to mask all the injuries observed from the vaccine. Likewise, in many cases, when you look up each consecutive vaccine trial, you will find that the very first vaccine in the pyramid scheme was simply never tested against a placebo but assumed to be "safe" (despite the injuries which occurred in those trials).

- In many instances trials will become unblinded. For example, in the COVID-19 trials, trial investigators testified (and published data indicated[17]) that the trial was not blinded, resulting in vaccine recipients with COVID like symptoms not being PCR tested for COVID-19 (thereby reducing their COVID cases and inflating vaccine efficacy), much in the same manner adverse events were not logged from vaccine recipients.

  ***Note:*** *This likely explains why the vaccine performed so much worse in reality than the trials suggested.*

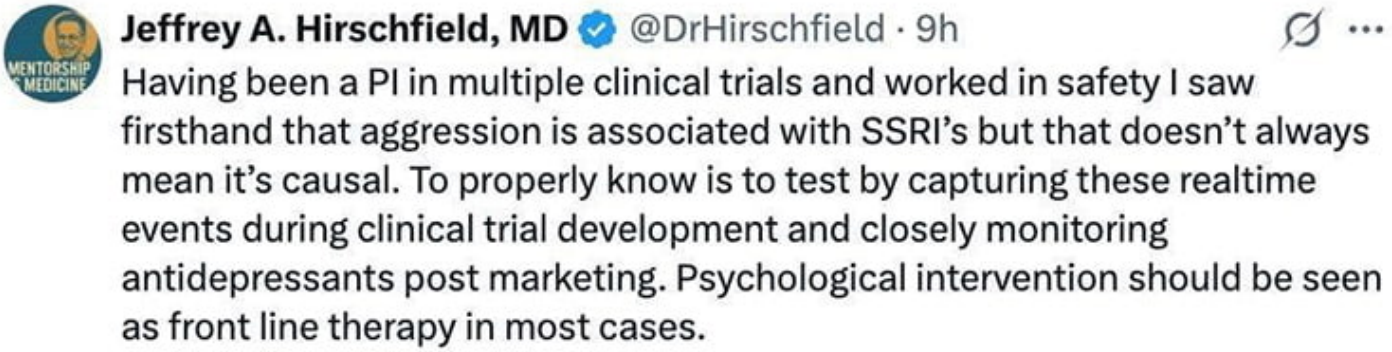
- In trials, it is almost impossible to report adverse reactions occurring that are not "expected reactions" being monitored for (typically minor side effects like fever or fatigue) — something we also saw through the COVID vaccine trials and within the CDC's system that was created to monitor the vaccines for safety.

- Pharmaceutical companies being permitted by the FDA to reclassify injuries that occur to make them seem less bad (e.g., COVID trial participants testified that a severe cancer was reclassified as enlarged lymph nodes and a permanent disability

was reclassified as "functional abdominal pain") and principal investigators (PIs) having the authority to determine if the reaction was related to the vaccine — which they inevitably will conclude was not.

Sadly, as mentioned before, these issues are not unique to vaccines. For example, Secretary Kennedy **shared a post** highlighting the decades of suppressed evidence SSRIs can cause violent behavior:


**One comment on the thread[18] caught my eye, as it illustrates how reluctant PIs are to tie an injury to a pharmaceutical, even if they can clearly see it occurring:**




## Regulatory Capture

Vaccines are the only consumer product which:

- Are mandated upon you for your own good.
- You are forbidden to see the safety data on and instead must trust "experts" to evaluate.
- You cannot sue the manufacturer if a defectively designed one severely harms you.

If you take a step back, that is completely absurd, and has only been possible due to the religious faith around vaccination and drug regulators abjectly failing their basic duties to protect the public. This failure results from:

- The religious zeal for vaccines having permeated the healthcare bureaucracy and preventing any real scrutiny of vaccines before or after they enter the market.
- The Federal government (which pays out vaccine injury claims) being strongly incentivized to eliminate any science suggesting they are unsafe or ineffective. For example, if a single HHS study found one in five autism cases were linked to vaccines, it could result in approximately $1.3 trillion in liability[19] — for context, the entire 2017 federal budget was $3.3 trillion.
- A revolving door incentivizes healthcare bureaucrats to maintain the lie each vaccine is "safe and effective." For example, the FDA and CDC fought for years to bury a deluge of severe injury reports for the HPV vaccine, after which that CDC

director **became a Merck executive and received over 30 million from Merck**.

Likewise, Peter Marks, an FDA director **who continually fought to conceal COVID vaccine injuries** and **rush the vaccine along without adequate testing** so it could be mandated left the agency and **became a Eli Lilly executive**.

Similarly, in Vaccines, Amen, Aaron Siri shows:[20]

- FOIA'd emails demonstrate the CDC's Immunization Safety Office head routinely communicated with the pharmaceutical industry to set national vaccine policy while stonewalling citizen groups advocating vaccine safety.
- CDC reports are heavily scrutinized internally to ensure they only release data supporting the notion that vaccines are safe, effective, and necessary.
- CDC members and advisory panels view vaccination industry authorities with such reverence that their claims rarely face basic scrutiny, regardless of how absurd they may be.
- Since lackluster standards exist for ensuring vaccine safety (no placebo trials due to "ethical" issues), the proposed solution is post-marketing surveillance. Unfortunately, since this is at CDC and FDA's discretion and since they "know" vaccines are safe, signals of harm are virtually always dismissed — best demonstrated by what we saw throughout COVID-19.
- When irrefutable vaccine injury examples arise, the typical priority is covering up bad publicity rather than addressing issues (e.g., UNICEF worked with CDC to cover up backlash from data showing their vaccine program killed children, rather than changing the program itself).

## Conclusion

Because vaccines have such a high rate of injury (and conversely such a small benefit), the only way the existing paradigm can be sustained is by having the majority believe vaccines are "safe and effective" and prohibiting debate, as the moment debate emerges, nonsensical contradictions justifying the paradigm become immediately apparent.

COVID-19 at last shifted this, as beyond the vaccines being mandated despite failing abysmally to prevent the infection, they severely injured millions of recipients,[21] with robust polls since 2022 (detailed here), consistently finding a third of recipients had side effects, a tenth had severe side effects, and half the population believes the vaccines likely caused a significant number of unexplained deaths.

For example, a 2024 survey[22] found 26% of vaccine recipients experienced "minor" side effects, 10% experienced "severe" side effects, and 46% of Americans believe it is likely the COVID vaccine is killing a significant number of people — with 25% believing this is very likely.

Furthermore, since the vaccine brand was used to sell the experimental COVID-19 gene therapies, this tarnished the entire brand, creating a window for many others to begin speaking about similar severe injuries they experienced from other vaccines (e.g., Tucker Carlson told millions his son got Guillain-Barré syndrome from an [unnecessary] flu shot). The faith that protects vaccines is hence fracturing and leading to lawmakers at last calling out the absurdities used to sell everyone vaccines.

**Video Link**

Furthermore, last week, thanks to you speaking out, the completely unjustifiable newborn hepatitis B vaccination was removed from the immunization schedule — something many of us who'd fought it for over thirty years never imagined was possible. There has never been an opportunity like this in our lifetimes and it's critical to get this message out and support people doing excellent work to shift this issue.

***Author's Note:*** *This is an abridged version of* ***a longer article*** *which goes into greater detail on the points mentioned here and their profound implications. That article, along with additional links and references can be read* ***here****. Additionally,* ***a companion article*** *which reviews over a dozen suppressed studies that show vaccinated children were far more likely to develop chronic illness and how far more experienced subtle neurological injuries which profoundly changed society 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.

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