



Australian Vaccination Network · 6,973 like this. 28 August 2013 at 18:08 · _

The following email has just been sent to Greens senator Richard Di Natale:

Hi Richard

This email will be posted publicly as many are awaiting your response.

As things stand your statements about Greens policy on vaccination and compulsion are misleading and in conflict with your party's actions. There is a need for immediate clarification. Should you continue to avoid responding I will conclude, as I'm sure others will, that the deception is deliberate. To avoid such judgement befalling the whole party, the option is available for your leader or deputy leader, both of whom have been copied in on these emails, to respond in your place.

Best wishes

Greg Beattie

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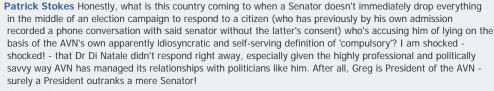
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Like · Reply · 19 · 28 August 2013 at 19:02

Australian Vaccination Network Patrick Stokes - I wonder why you bother to make comments about issues when you are completely ill-informed? Ah, that's right - you celebrate ignorance because you're not gualified. Well, it shows! Greg has been writing to the Greens for over 2 months. And Di Natale has told absolute lies about this organisation, what we stand for and what our information consists of. I think he

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portfolio responsibilities and end up working insane hours during normal periods, let alone during campaigns. I know this issue is extremely important to you and your membership - and that's fine, we're all here because we care deeply about this one way or another - but do you not see how demanding 'immediate clarification' two weeks from an election might not seem just a tad overblown to outside observers? Like $3 \cdot 29$ August 2013 at 01:15

Kaye Payne when I saw Di Natale's address to parliament on youtube there were a lot of untruths sprouting from his mouth; and he along with many other SAVNer's should be held accountable for this. Either he has been misled by the SAVN or he is just ignorant. and being a politician, he must be used to being called to clarify a statement. If he or his party wants my vote then this is a very reasonable request. Like · 3 · 29 August 2013 at 10:11

Tristan Wells Now I realise none of this will make any difference because you have made it clear that you will never believe any explanation of anything unless it has been published in a peer-reviewed scientific journal but here goes:

"What exactly is he going to say other than to repeat himself? "

Well he could answer the very specific questions asked of him. That's just a for instance though.

"Morally? Not sure it makes a radical difference."

Yeah you're probably right. It is definitely immoral to record your own voice. All singers are pure evil!

"And I'm honestly quite confused as to what you thought releasing the recording would achieve."

Is that supposed to be a revelation for us? Stop presses everybody! Patrick Stokes has trouble getting his around something that is actually remarkably simple. Whodathunk?

To help you out it was so that when di Natale ran to the media claiming Greg said nasty things about his mother or some such Greg could easily prove it to be a lie.

"He's said unambiguously that he does not support compulsory vaccination. You insist that he has said something differently in private"

The point is that he ran to the papers and had a sook about the AVN supposedly misrepresenting him. Given this you would think he would be only too happy to clarify precisely his position and therefore precisely why this site has done him a grave injustice.

"but do you not see how demanding 'immediate clarification' two weeks from an election might not seem just a tad overblown to outside observers?"

Again, Di Natale apparently has the time to read every post on this webpage or at least have his minions do it. If these angels amongst men are so pressed for time you would think it remarkable then that they would be running to have a sook to the media every single time somebody said something that wasn't complimentary about them on a website.

Like · 4 · 29 August 2013 at 10:41 · Edited

Greg Beattie Patrick, I think you need to go over what's happened in a little more depth before writing.

1. "He's made a clear statement..." His clear statement is apparently at odds with his party's actions. http://www.parliament.nsw.gov.au/.../V3Key/LC20130620006... It's also at odds with a report we've received. He really needs to clarify.

2. Recording my own voice is something you consider immoral? I'd love you to expand on that. We are often accused of saying something we didn't. In this case I was accused of acting in a way I didn't, so I'm glad I recorded myself. Who knows how far and public that accusation may have gone had I not? But please tell us... how could it possibly be considered immoral to record your own voice?

3. I think you're losing the order with this one. It all started with Richard accusing *us* of dishonesty. He's actually done much worse than that but we are prepared to forgive it all. Big hearts, I know. All we want is for him to come clean regarding the conflict outlined in point 1. If he refuses then that is surely a deliberate act. We, as voters, will judge that deliberate act. I didn't use the word 'lying'. I used 'deception'. His statement attempts to portray a stance that AVN supporters would be happy with. Is this a deliberate attempt to deceive? Well, if he refuses to clarify I think it is. What do you think?

4. You didn't explain it in terms of 'compulsory voting'. If we fail to vote and don't have a legal excuse we get penalised financially (fined). We don't have free choice. In some other countries they do have free choice. We say those countries don't have compulsory voting. You've been given another example by Tasha David, below. Choice is not free if it carries penalty. The bottom line is: if he is simply playing a semantic game with the word 'compulsory' he needs to clear that up by answering the questions put to him. Otherwise he is being deceptive.

5. Yeah I'm sure he's a busy man. And you're right... he doesn't have to answer the questions. I've merely outlined what that will mean to us. I don't know how many have been browned off the Greens over this, but I suspect it's more than they can afford to lose. Again, he took the time to send an unsolicited letter to me about this. It seems everyone here except you finds it misleading. Surely the guy can invest 5 minutes in clarifying things. But it's *his* integrity that's on the line, so it's his choice.



Public Health Amendment (Vaccination of Children Attending Child Care Facilities) Bill 2013 -...

www.parliament.nsw.gov.au

NSW Legislative Council Hansard extract; Speakers: Kaye, Dr John; Pavey, The Hon... See more

Like · 7 · 29 August 2013 at 10:59

Australian Vaccination Network "Now I realise none of this will make any difference because you have made it clear that you will never believe any explanation of anything unless it has been published in a peer-reviewed scientific journal but here goes:"

Tristan Wells, I have to take issue with your comment there. Patrick Stokes doesn't really care if something has been published in a scientific peer-reviewed journal or not because, as he's said so many times, he isn't qualified to understand that sort of information anyway. The only thing he will believe, apparently, is anything that passes through the lips of a doctor or a scientist. That is as if it descended directly from the mouth of God. And if they say it, it is believed in toto without any question whatsoever. After all - they are the experts - Patrick is just following their orders.

B52

Like · 4 · 29 August 2013 at 15:05

Tristan Wells But B52, he doesn't believe scientists or doctors who disagree with the omniscient and perfectly benevelont governments. He is sure that such scientists are all stupid liars just because. One can only presume he also believes that all those parents who swear blind their children were harmed after a vaccine are in fact part of a vast international conspiracy to bring back polio and smallpox (assuming they ever left) but by sheer coincidence they all only choose to become part of this vast international conspiracy a few moments after they decide to get their kids the vaccines.

You know it makes sense.

Anyway, it is usually at this point he runs away only to return when the SAVNs can convince him that he is really doing a fine job so we should probably leave him alone. Like \cdot 3 · 29 August 2013 at 15:19

Patrick Stokes Hi Greg (and I'll try to answer Tristan as we go, though as usual he's all over the place):

1. How is it at odds with his party's actions? He's said he does not support compulsory vaccination. You only perceive a contradiction there because you seem to think implementing a coercive public policy measure counts as making something compulsory. (See 4, below).

2. Recording your own voice isn't necessarily a problem. But I do think there is a potential grey area around recording your own half of a conversation given the reasonable expectation of privacy that attends a phone conversation. And again, I don't think releasing that recording really did you any favours. (Not least the fact you recorded yourself saying you don't know the views of your membership just days before posting results of a survey of your members' views).

3. He accused you of 'dishonesty' eh? Well yes, pretending not to have a position on vaccination when you are clearly and indeed aggressively anti-vaccination might strike many people as dishonest, Greg. In his Senate motion he accused you of promoting claims which by this point you must know to be demonstrably false, and I guess that counts as 'dishonesty' too.

You say "His statement attempts to portray a stance that AVN supporters would be happy with" but again you can only consider that misleading because you think the state exercising its legitimate interest in discouraging you from making bad choices regarding the health of children amounts to making vaccination compulsory. I doubt very much he's concerned with making his views seem like "a stance that AVN supporters would be happy with" – I think he's made his views of both your organisation and your core beliefs more than plain and I doubt he's expecting AVNers to rush out and vote for him.

4. "Choice is not free if it carries penalty" is simply untrue. I can make a free choice to smoke tobacco and there will be a penalty for doing so (extra tax) but that does not mean that non-smoking is compulsory. If the conscientious objection provision were scrapped tomorrow, the net effect would be (and I'm not a lawyer so open to correction here) that those who refused to get their kids vaccinated without a medically valid reason could lawfully be refused entry to preschools who chose to do so, and would not be eligible to receive a component of the FTB. Is that coercive? Yes. Does it amount to compulsory in the very sense you're using here in relation to voting and seatbelts i.e. do it or get fined).

For the record I think it would be perfectly valid to restrict exemptions to medical ones for those specific purposes, and if that were Dr Di Natale's position I would have no problem with that. But the only evidence you've provided that this is in fact his position is, at this point at least, hearsay. And in any event such a move would still fall short of compulsory vaccination.

5. And it's entirely your choice not to vote for him. (Or more accurately his party, unless you're in Victoria). You, like everyone else, get to vote for whoever you think is the best, or at least least-worst, option on the ballot.

Like · 2 · 29 August 2013 at 16:00



Patrick Stokes Correct, B52. I'm not a scientist and so not capable of entering into scientific disagreements or evaluating scientific claims. But I also acknowledge that science is clearly the only epistemic paradigm that works with respect to empirical questions. That doesn't make scientists infallible by any means. But it does make them clearly more likely to be right than anyone else about empirical matters. Like · 2 · 29 August 2013 at 16:07

Karen Little PS, Family Tax Benefit (FTB) is a *means-tested* welfare measure designed to support parents in the cost of raising children. Any policy to remove an ability to opt out of vaccination on CO grounds, serves to make vaccination compulsory for those who rely on these payments. Wealthy families will still be able to opt out, but those of lesser means will be compelled to vaccinate. That's entirely inequitable. Additionally, from a legal standpoint, I don't believe that one can give informed consent freely under such circumstances. Impoverished people in developing countries frequently sell their kidneys for money. Would they do so if they weren't impoverished? I don't think so.

It's not just the FTB that's at stake here either, it's access to Child Care Rebates, and Child Care/Education services. You choose to adopt a literal interpretation of non-compulsory, instead of considering the practical implications of such policy pronouncements.

Like · 5 · Yesterday at 04:11 · Edited

Anita Rush Ah Patrick I beg to differ in one respect. To deny child care or pre school is more than coercive it is discrimination. End of story. For you to think otherwise is a reflection on your ability to be objective.

Like · 4 · 29 August 2013 at 21:08 via mobile

Greg Beattie Patrick, I was wondering what you might do next. When cornered... attack the man. I'm now dishonest, hey? I promote claims which I "must know to be demonstrably false".

Discussing this with you is pointless. You can't answer the questions. Only a Greens rep can.

For the record... in hindsight I could have given a longer answer to Richard about my thoughts on AVN members' views, but the simple fact is we do not collect them. We collect names, addresses and a few other things, but not their 'views'. The survey you refer to was a non-random 1/4 of members. Although it's useful info you shouldn't infer the views of the wider AVN membership from it. You can guess, which was what he asked me to do, and I refused. If you want to explore the results of that survey be my guest. You'll find lots of data, all available to the public.

And the circumstances... he was constantly talking over the top of me and deflecting the conversation away from the reason for the call. Questions about my views and others views were completely irrelevant. You don't call for an organisation to disband because some proportion of its membership holds a view.

Most here probably have a feel for how you think because it sorta stands out... the AVN is bad because Daddy says so. Vaccination is good for the same reason. And we all have an idea of what does and doesn't feature in that thought process. Defending myself against puny accusations of dishonesty is not something I'm going to waste more time on so don't bother with them.

Apart from that you've rendered your position down to just one point:

1. In your world we can't use the word 'compulsory' unless it involves fining people. Gotcha. I guess that means

vaccination is not compulsory in the USA either. Have a look at this one: http://www.theguardian.com/.../compulsory-vaccination...

As you've shown us, the word is obviously open to interpretation, which is why the clarification is needed. Let's find out what their policy is. Can you find out?



Compulsory vaccination urged after measles outbreaks

www.theguardian.com

Prominent doctor wants British Medical Association to change its stance over mandatory immunisation

Like · 8 · 30 August 2013 at 10:33

Tristan Wells "But it does make them clearly more likely to be right than anyone else about empirical matters."

Really? What are those odds Patrick? 90:10? 51:49? I must confess I haven't emprically researched the odds of the government appointed experts being right throughout all of human history but I suspect their track record wouldn't be something to be too proud of.

In addition, could you explain at what point on this probability scale the other side must shut up and do as its told?



I love it how you throw in your own opinions as though you are just an objective observer.

"I don't deny it's coercive: the whole point is to say 'well you can do this, but it's such a bad idea we will make it as hard as possible for you."

I know you won't answer this but I will put it out there anyway. Where would you draw the line? If the government said that anybody who didn't vaccinate wasn't allowed to work would that be OK by you? What about if the unvaxed were excluded from universities. Actually scratch that last one - independent thinkers are of course already hated at universities.

Is there any level of punishment/coercion/punishment that you would fail to support in your noble quest to ensure that children's health continues on the same trajectory it has over the past 60 years. Like · 3 · 30 August 2013 at 12:32 · Edited

Patrick Stokes Trying to be objective, Tristan, not necessarily presuming to get there. I'm a flawed and limited being just like everyone else, but I do at least try to be a fair and civil interlocutor. Whether I succeed or not is for others to decide. No doubt you'll tell me.

Where would I draw the line? Somewhere short of everything you've just described as it happens, at least under current conditions. (One exemption to the point about employment would be for workers in professions where they're at high risk of exposure to/exposing others such as healthcare workers, childcare workers etc.). Again, compare anti-smoking policy: being a smoker shouldn't mean you aren't allowed to get a job, but that doesn't mean you're allowed to sit there sucking down a pack of Winnie Blues in your cubicle.

Your idea of 'independent thinkers' incidentally sounds very much like someone who thinks they have nothing to learn and so turns up believing they are somehow already magically equipped to understand anything, usually with minimal effort. And we certainly do see people like that in unis. Strangely enough, they're always right and everyone else is always wrong and stupid. What are the odds, eh? These free-thinking rugged individualists rarely make a mark in academia or anywhere else, which obviously just shows that the whole system must be hopelessly corrupt because we are living in an Ayn Rand novel apparently.

Speaking of odds: if taking the advice of scientists strikes you as a bad bet, who exactly would you choose to believe instead, Tristan? What better option do you recommend? Like · 3 · 30 August 2013 at 12:56

Patrick Stokes Sorry Greg, only just saw your comment above (for some reason I get notifications on some comments but not others). You're right that I can't speak for the Greens (not a member, not involved with them) and don't presume to.

Greg I don't doubt you honestly believe what you claim about vaccines to be true, so I can see why the charge of dishonesty rankles. I'm not suggesting you don't actually believe it; my concern is with how you go about trying to convince others of it. How else are we to describe people who continually reassert claims they know to have been refuted if not dishonest? What term would you prefer? As just one example, it appears you pulled out the mortality graphs again in a parliamentary committee submission recently. How many people have pointed out to you, in the course of the last - what, 20 years? - why that's a misleading measure to use? (I.e. people not dying of a disease is not the same thing as people not getting that disease). Again I am sure you honestly believe what you're saying, but why continue to prosecute your case like this when you know that?

Don't quite see what you're referring to re the US? Re: the UK example, I wouldn't support what the Welsh Assembly considered doing, if only because I don't think kids should miss out on schooling because their parents think they somehow know better than scientists.

Like · 1 · 30 August 2013 at 14:41

Tristan Wells "if taking the advice of scientists strikes you as a bad bet, who exactly would you choose to believe instead,"

Again, I love how you ask this question as though we have never discussed this before. I tried to explain to you why some "experts" are worth listening to (ie their opinions) and others aren't. No matter, I will explain it again: if you can't independently validate the truth of your claims then the "science" is prone to information cascades (herding if you like). Therefore the opinions of the experts are completely worthless. And I mean completely. In such circumstances you either use your own reasoning to choose whichever of the hypotheses which you believe has the most fidelity to the commonly accepted facts, come up with your own theory or if you don't have enough confidence in your own abilities you just remain agnostic (or at least not evangelise for anything).

But again, you evaded the question. You think that that there should be some level of coercion (and thank you for answering my question about the level of coercion you would accept I appreciate that) against those who don't vaccinate and a media "blackout" against those who openly question vaccination. So what odds justifies such a stance?

For simplicity (and to be kind to you) let us say that there was a simple dichotomy of opinion and that there was a 90 per cent chance everything you believe about the benefit/safety of vaccines was right and a 10 per cent chance our understanding of their benefits/safety were correct, would that be sufficient to justify your actions on this matter? What if there were a 10 per cent chance that what you were doing was in fact not saving children but poisoning them? Of course you would say that would still mean my actions were LIKELY to end up causing problems, but unless you believe that there is a moral equivalence between not stopping people from being injured and actually injuring them wouldn't the odds need to be overwhelmingly in your

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favour to justify your stance?

That is why I asked the question. What odds do you think justifies the levels of compulsion you support and do you think that a perusal through their historical record would warrant such faith in the opinions of scientists?

Like · 4 · 30 August 2013 at 14:51

Patrick Stokes Whoops, looks like you forgot to change your socks before posting, so to speak...

Yes we have been through this before, and I've made the point that epistemically limited beings simply can't independently verify every single claim, and as a consequence most of what we 'know' we take on trust.

I've used this example before so feel free to tune out if you've heard it: I've never seen Iceland but I believe it's there. Why? Because people have told me they've been there, I've seen documentaries about it, and it's been on every map I've ever seen of that part of the North Atlantic. Of course it's logically possible that everyone from Lonely Planet to Björk are all in on one big conspiracy, or that they're somehow massively and systematically mistaken. Information cascade is logically possible here: maybe cartographers have just been copying each other's maps (which is how we got the nonexistent 'Sandy Island' after all), tourists have placed so much faith in their guidebooks they've failed to notice Reykjavik is actually in Greenland, and so on.

So why, then, do I accept the existence of Iceland? I don't infer that Iceland exists or declare that I have 97% confidence that Iceland exists based on current evidence – rather, I 'know' that Iceland exists to the extent that I know anything empirical at all. At some level, and absent shocking and inescapable evidence that Iceland isn't there, I either trust the world-view that tells me there is an Iceland, or I suspend all my beliefs and find myself not knowing anything. In the latter case I'd be basically incapable of making any decision on any basis other than irrational preference: if I no longer put any stock in maps, guidebooks, travel photos and the testimony of others then I have no grounds left on which to say whether Iceland exists or not. That seems to be roughly where the position you describe leaves us: if we have to independently verify everything before we can say we know it to be true, then we accept we basically know next to nothing. That's not so much throwing the baby out with the bathwater as demolishing the entire bathroom.

It would also make it impossible to calculate the empirical odds you're appealing to. You're asking in effect how often science, historically speaking, gets it right so that we can use that to infer how likely it is to be right at present. But what counts as having 'gotten it right' will itself be determined by the current state of scientific knowledge. So prima facie there seems to be a pretty serious circularity problem before you start: we'd be assessing the truth or falsity of scientific claims against criteria that implicitly assume those claims to be true. Hence I don't think an appeal to predictive track record is going to do the work you want it to do here, though I'd be interested to hear if I'm wrong about that.

That's not to say that 'odds' if we want to call them that don't play any role however. Suppose that 97% of published research finds that vaccinations are a net health benefit and 3% finds them to be a net health disbenefit. At that point we could say that we can be 97% confident vaccines do what they say on the tin (wonderful expression we picked up in the UK). I doubt there's a non-arbitrary cut-off point between 'the science is unclear' and 'the science is settled,' though 97% would strike me as more than enough confidence to act in policy terms. However that's not the same thing as looking at track record, for the reasons given above. And it's certainly not the same thing as concluding that nothing science says can be trusted one way or the other on the basis that it's still logically possible it could all be wrong.

Oh and for the record I'm reasonably comfortable with the idea that omitting-to-save-from-injury is, all else being equal (and there be dragons...) morally equivalent to injuring. The example I always use with students (can't remember where this is from now but will look it up) is Mary, who decides one day to murder her husband by putting poison in his coffee. In scenario A, she poisons his coffee, he drinks it, and he dies. In scenario B, before Mary can put poison in his coffee, he accidentally puts it in his own coffee thinking it's sugar, and he drinks it. Mary could intervene to save him at this point but she does not. Is Mary less culpable in scenario B than in A? I'd say not. Your mileage may vary.

Like · 2 · 30 August 2013 at 16:12

Karen Little PS, I'd love you to write an article for The Conversation about the quality of published medical research. You could begin your research with Dr. Beatrice Golomb and Dr. John Ioannidis. Like · 1 · 30 August 2013 at 16:29

Karen Little http://www.theatlantic.com/.../lies-damned-lies.../308269/

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Much of what medical researchers conclude in their studies is misleading, exagge... See more

Like · 1 · 30 August 2013 at 16:36

Greg Beattie Patrick, I can lead you there but I can't do your drinking. The relevance of the USA and UK examples was very clear. They both use the word "compulsory" just like we do, and not like you do.

And about the mortality graphs... you have my book. I doubt you've read it (or if you did you certainly didn't follow it) but I know you have it. Had you read it you would have found several very clear explanations of why your comments are pointless. Let me know if you need me to quote from it.

Alternatively you could read the actual parliamentary committee submission you referred to. It's only a few pages long and, again, clearly renders your accusation pointless.

But you won't, will you? You'll act as if it's not your area so you wouldn't be able to understand it. That's how it goes isn't it? You can't understand it but you can criticise it. And all without reading it. Like · 7 · 31 August 2013 at 09:14



Tristan Wells "I've used this example before so feel free to tune out if you've heard it: I've never seen Iceland but I believe it's there."

It boggles the mind that you could accuse others of dishonesty. You used the example of Iceland BEFORE I pointed out why it isn't applicable to this situation. Your analogy references a situation whereby people can directly observe whether or not their theory is correct. As I explained above, in those circumstances, it makes perfect sense to "trust" people who have made said observations. Particularly when many of them make the exact same observation INDEPENDENTLY.

Let me give you another example along the same lines: Many parents INDEPENDENTLY swear blind that their children had a severe reaction after their child's shots. Many of them even experienced a challenge, dechallenge, rechallange situation. Given that so many of them all witnessed the same (or similar) thing happen to their child I am inclined to believe that such a situation can, most assuredly, occur. Now, the skeptics on the other hand believe that all those parents are stupid and deluded and hallucinating and are all part of a vast international conspiracy to bring back nasty diseases (assuming they ever left).

Now, I agree wholeheartedly that anybody who takes the same position as the skeptics on this issue is completely deranged.

However, NOBODY can directly observe a vaccine working. The only way that could happen is if a neon sign flashed on a kid's forehead after receiving a shot saying "No polio here thanks Doc!" or some researchers observing in real time (presumably in vitro) some T-cells/B-cells/Q-cells etc actually "learning" how to fight off an infection. Now I'm sure even you realise the former doesn't happen but neither has the latter. You see, unlike you who is happy to hear the priests spout nonsense in Latin that you don't understand and so simply assume that what they are saying is holy writ, I am happy to ask questions. So I did. I rang up a very senior immunologist once and asked him how he knew they worked and he freely admitted that there were no laboratory observations which corroborated his/their theories and he was totally reliant on epidemiological data. Now, before you go asking me to tell you who it was, why don't you go and ask the same questions of others in your university (remember you're the guy who doesn't like people talking about phone conversations). And I don't mean Dorothy Dixers I mean actual difficult questions that would enable you (or anybody else) to understand why they think the things they do.

So your analogy is an extremely good reason to think that OUR beliefs have credibility but absolutely no reason at all to think that yours does.

I believe that were you to tally up the success rates of the hegemonic views in similar fields of knowledge (eg economics, astronomy, metaphysics) vs say engineering (and IT recently) throughout history you would find an astonishingly low success rate (in terms of things we would both agree were right or wrong). I doubt it would be above 1 per cent but that's just a guess. At any rate if a belief system can only be justified by referencing the views of the experts (and this is clearly one of those situations) it is essentially a surefire bet that it is wrong. Of course the opposing views might not be right either but that is irrelevant for these purposes.

This is why the same people who thought it a brilliant idea to burn witches on a regular basis were still able to build the most extraordinary cathedrals and other structures. The Hegelian view of history applies to some degree to engineering but it couldn't possibly be more wrong when it comes to economics or disease based medicine.

But we extrapolate one to the other because we are looking to rationalise why it is we herd in the presence of uncertainty. So just like people rationalise following the herd in the markets by extrapolating the laws of momentum to commodity prices people rationalise their desire to follow the herd by extrapolating from one field of knowledge to another even though the way they draw their conclusions are completely different. Like · 4 · 31 August 2013 at 10:47

Tristan Wells "But what counts as having 'gotten it right' will itself be determined by the current state of scientific knowledge."

Like I said, the criteria would simply be a perusal through history of every hegemonic belief that you and I both considered right or wrong. Of course we could be wrong too but I don't see how that would help your case. You look at vaccination and think "how could anybody not believe in something so amazing?" and look at the practice of bloodletting and think "how could they have been so stupid?" But of course a few hundred years ago the average person would have thought the same about bloodletting and those opposing it as you do about vaccinations. The experts agreed with it so who were they to argue? The idea that the experts are almost certainly right is based on an unbelievably arrogant assumption that our time has some privileged position in history. Basically it is saying that "Our experts are real smart and honest but yesterday's experts were all fools and charlatans". I just don't think this is a very sound position. Easy. But not sound.

"The example I always use with students (can't remember where this is from now but will look it up) is Mary"

What a stupid analogy.

Firstly, in both cases Mary had malicious intent. In the vaccination situation there may not be any malicious

intent from either side (although one side is making billions of dollars and is happy to resort to coercion if they don't get their own way).

I can only assume therefore that you are saying that we and we alone have malicious intent. Now, this makes no sense of course but it is very clear that you are the sort of person who believes that ANYBODY who doesn't agree with you on every issue is pure evil.

So the only thing your analogy has proved is that everything I said about the sort of people who run our universities is true.

Like · 6 · 31 August 2013 at 11:21 · Edited

Tristan Wells "How many people have pointed out to you, in the course of the last - what, 20 years? - why that's a misleading measure to use? (I.e. people not dying of a disease is not the same thing as people not getting that disease). Again I am sure you honestly believe what you're saying, but why continue to prosecute your case like this when you know that?"

As Greg says you should read his book, but just to help you out: there is no such thing as data for the number of people who get these diseases. Never has been, never will be. Greg has tried to explain this millions of times but no matter how many finger puppets he uses none of them can get their heads around why notification data DOES NOT equal incidence data and why it can't even be used to estimate it. When notification data was introduced it was never intended to be used for such a purpose it was simply to help with a rapid response to disease outbreaks. At the end of each year it should be thrown out because it has no analytical value whatsoever.

Mortality data is not perfect and indeed it is actually biased FOR the vaccines but it is the only data that we have that is remotely useful because at the very least we know how many people die. Like $5 \cdot 31$ August 2013 at 11:20

Karen Little PS, I will write to The Conversation. Thanks. Like · 31 August 2013 at 14:45

Karen Little Well said Tristan. You have such a way with words.

Like · 4 · 31 August 2013 at 14:46

Patrick Stokes Hi Greg,

I did read the parliamentary submission, though I confess I've only managed to skim the book you (very kindly) sent me ages ago – I don't get much time for reading books for non-work purposes, and as they say, the postie doesn't go for a walk after work. (Moral: do not give a humanities academic a book if you want it read in anything like a hurry. I've got a stack of reading literally two foot deep to work through just for the book manuscript I'm writing right now).

To be completely fair: I get that it's a parliamentary submission and you have to keep it succinct. But your submission contains point after point after point for which you know important refutations exist. None of the points raised in your submission show any evidence of having been modified in response to these refutations or even acknowledging that they exist.

At one point I recall you used the 'well if vaccines work why are you worried about unvaccinated kids?' bit and then went right on to note that not everyone who is vaccinated produces the desired immune response. Again, you've lived with this material long enough to see the contradiction there, surely?

It's an utterly glorious day here and I'd rather not be stuck inside typing, so I'll stick to the mortality/morbidity point. The most you could show with that (and again someone other than me would have to comment on whether or not the data does show this - except that anytime someone capable of offering such a refutation pops in here your admins ban them) would be that vaccines did not account for most of the drop in mortality. But unless mortality from a given VPD dropped to zero due to other factors it would still be that case that vaccines, insofar as they reduce infection rates, also reduce mortality. And that's well before we get to reductions in disease-related disability and suffering.

But you know all that. You've seen the morbidity graphs. You've been doing this for a very long time and you know these objections exist – so why did you leave it out of your submission?

For what it's worth, I thought your submission was on strongest ground when you focused on issues of informed consent and coercion. I suspect you would ultimately still lose that argument – but there are at least serious issues to be worked through there. Like · 31 August 2013 at 17:20

12

Patrick Stokes Hi Tristan,

Ah, so now you're prepared to allow ad hoc trust of testimony into your epistemology? Why should I trust the testimony of independent – oh I'm sorry, INDEPENDENT – observation made by people who say they've been to Iceland? After all they could all be wrong. We could have precisely the sort of information cascade scenario you're worried about. Unlikely, yes, but logically possible. You can't put the sceptical (in the epistemological sense) genie back in the bottle just by saying people report seeing something for themselves.

I don't doubt the sincerity of people who think that the adverse health events their children have suffered is correlated with vaccination. But that alone isn't enough. The point is to establish whether there is genuine evidence of a causal relationship, and if there is, it should show up at the population level. So yes, we have

And to repeat a question I posed ages ago and you never answered: how does one "dechallenge" a vaccine? I can see how one dechallenges a drug i.e. stops administering it. But a vaccine? What are we supposed to do, stick in a straw and suck out the antigens?

"I believe that were you to tally up the success rates of the hegemonic views in similar fields of knowledge (eg economics, astronomy, metaphysics) vs say engineering (and IT recently) throughout history you would find an astonishingly low success rate (in terms of things we would both agree were right or wrong)." – again that only works if we can find things we would both agree are right and wrong i.e. we'd have to stipulate that the current state of disciplinary knowledge is better (more likely to be true) than past states of disciplinary knowledge. And all that really seems to say, then, is that these fields do in fact advance. And what time period are we going to tally up over? "Yes, the increase in survival rates for e.g. leukaemia in the last couple of decades is very impressive, but it's outweighed by a thousand years of treating everything with leeches, therefore medicine is inherently untrustworthy?"

(Also just a heads-up: you're using 'Hegelian' wrong, or at least in a uselessly loose sense, unless you think engineering as a discipline is teleological and has a perfected end-state. History, for Hegel, is not just advancing but advancing towards a culmination: hence for Hegel, all history is ultimately theodicy).

Finally: "the skeptics on the other hand believe that all those parents are stupid and deluded and hallucinating and are all part of a vast international conspiracy to bring back nasty diseases" – who has ever, in the history of anything, suggested that parents who claim vaccine injuries are part of a deliberate conspiracy to bring back disease? The Scarecrow from Wizard of Oz had less straw in him than that assertion. And considerably more brain.

Like · 31 August 2013 at 17:24

Patrick Stokes Sorry, just saw your above bit about bloodletting - again, the fact that we don't take our current knowledge-state to be perfect does not entail that we can say it's *no* better than past knowledge states or has no truth-value.

Like · 31 August 2013 at 17:30 · Edited

Patrick Stokes Oh and the Mary example wasn't particularly offered in reference to vaccination, just to demonstrate that acts and ommissions can be morally equivalent.

Like · 31 August 2013 at 17:29

Australian Vaccination Network Comment from B52 - I'm not sure why, but every single post by Greg Beattie, Patrick Stokes and Tristan Wells is automatically being hidden by Facebook. I don't know why this is but I and the other moderators are unhiding them as soon as they are seen - it's just that there could be a gap of time between what was written and what appears on the page. No idea why this is - and it only seems to be affecting this thread.

Like · 3 · 31 August 2013 at 19:55

Daisy Marskell Don't worry about it, Patrick needs to move on, this has gone on long enough and he (Patrick) is not getting anywhere. Facebook might be tired of it as well. hee hee Like · 3 · 31 August 2013 at 20:03

Karen Little Yes D, and btw P, your Iceland example was a shocker.

Like · 1 · Yesterday at 04:12 · Edited

Patrick Stokes Wow. That's some compelling counter-argument there Karen. Don't even bother to elaborate, I'm clearly not getting back up off the mat after that.

Anyway Daisy's right, this discussion has probably gone as far as it's going to go here; it's only going to get more abstract and long-winded from here on in. That's certainly my idea of fun, but, oddly enough, not everyone's. I'm happy to respond here further if Tristan or Greg want me to, or I'm happy to continue this elsewhere too.

Like · 31 August 2013 at 21:49

Anita Rush More abstract and more long winded?? Seriously??? Thanks for the giggle again Patrick! Like - 31 August 2013 at 23:53

Greg Beattie Patrick, there are lots of graphs in my book. The few that you're referring to address what I consider to be the most dishonest aspect of the marketing campaign for vaccination. And they do so completely.

But you must realise you're a perfect contradiction. Everyone else does. You're not qualified to comment on these things. Remember you wrote an article about that. Yet here you are, breaking your own rules. How would you know about mortality data... or any other sort of data? How could you possibly evaluate others' refutation of my work. You're Patrick Stokes, the guy who believes he doesn't have the skills for that.

Mind you I think in this case you're right. But why have you changed? Why didn't you just stick to the 'compulsory' word... something you could understand?

Like · 1 · 1 September 2013 at 01:19

Greg Beattie Patrick, here's the relevant part from the submission. I'm not aware of any sensible refutations of this anywhere. Are you? If so, please explain. As I see it, unless the recorded mortality data is

erroneous there can be no sensible grounds for questioning the conclusions. Perhaps you could explain why you disagree.... without straying from the point.

"Vaccines are popularly thought to have saved more lives than any other intervention in human history other than clean water. They are frequently credited with conveying us from the days when children died in large numbers from infectious disease to the present day where such deaths are rare. Indeed it is this image that forms the fundamental marketing slogan for vaccination. An examination of the publicly available data, however, suggests these claims are lacking in evidence. The attached graphs (Appendices 1-4) provide pictorial representations of the limited role vaccines played in the reduction of deaths from infectious disease in Australia. Readers will immediately see that if a role was played in the transition it was small in comparison to other factors.

The vast majority of the declines for which vaccination is typically given credit by its promoters occurred before the vaccines were even available. The real heroes of our past were those who brought about improvements in nutrition, sanitation, housing, education and the many other areas which have long been considered the primary determinants of

health. It was through these efforts that our communities were forged into the robust and safe living environments they are today. The scenario represented in the graphs was identical to that found throughout the developed countries of the world."

Like · 3 · 1 September 2013 at 09:58

Greg Beattie And Patrick, in my book I discuss the broad categories of reactions to the graphs. One of them is your 'refutation'. Please read and understand what I've written rather than continuing to accuse me of dishonesty.

"The second is the *that doesn't prove a thing* reaction. This is a declaration of rejection. It is less common, and often comes from those who are actively involved in marketing and promoting the use of vaccines. When asked to explain this reaction, these people tend to argue one thing—that this data cannot be used to assess vaccine performance. And they are correct. These graphs do not make any attempt whatsoever to measure the performance of a vaccine. They simply put things into historical perspective for us. This perspective illustrates that vaccines were unimportant influences in the bigger picture; that they arrived too late to be considered potential contributors of any significance.

In Chapter Three we will examine (under a microscope) the contribution that vaccines made to the tail end of the declines. For now, let us simply acknowledge that, in historical perspective, vaccination made little if any contribution to the decline in deaths from each illness."

Like · 2 · 1 September 2013 at 10:19

Greg Beattie And finally, Patrick... in half of chapter 3 and all of chapter 4 I present (in graphs) and discuss in detail the data that *you* think is most suitable.

I don't mind at all that you haven't read the book but why on earth are you criticising it? In doing so you've made a gross error, all because you listened to ill-informed people who have an agenda. The worst part of such a mistake is that you're accusing dishonesty. People don't normally do that unless they know what they're talking about.

Like · 4 · 1 September 2013 at 10:45

Tristan Wells "Ah, so now you're prepared to allow ad hoc trust of testimony into your epistemology? "

No. Every time you are backed in a corner you lie. How could anybody describe someone coming up with a specific criteria a priori which they then apply consistently as "ad hoc"?

"Why should I trust the testimony of independent – oh I'm sorry, INDEPENDENT – observation made by people who say they've been to Iceland? After all they could all be wrong."

Que? You can trust whoever you like. It really doesn't bother me. I explained how I differentiate different fields of knowledge. It's fine with me if you don't agree with it but just don't call it arbitrary.

"We could have precisely the sort of information cascade scenario you're worried about. Unlikely, yes, but logically possible. You can't put the sceptical (in the epistemological sense) genie back in the bottle just by saying people report seeing something for themselves."

Sure I can. All I have to do is assume that x doesn't necessarily = y. I described clearly, coherently and consistently why I think x may not = y. If you think that everything = everything else then fair enough, but then why would you pour such scorn on things like homeopathy etc?

I said precisely how I rank different fields of knowledge. Yours seems to be no more than "immunology is science because all immunologists say so in their publications and homeopathy is pseudo-science because all immunologists say so in their publications".

"But that alone isn't enough. The point is to establish whether there is genuine evidence of a causal relationship, and if there is, it should show up at the population level."

Ummm, it does show up at a population level. Ever since the introduction of vaccines there has been a massive ostensible rise in asthma, allergies, diabetes, autism, seizures and a whole host of other conditions. According to the US census data kids are 10 times more likely to have a disability today compared to 1950. Now, you will no doubt arbitrarily decide that these statistics are worthless whereas your precious notification data is flawless. But that is what the likes of Greg and I are on about. If people could look at this objectively there is no way they would side with vaccines. The mortality data is no help to the vaccine case

so those who defend the practice refer to the notification data despite being easily the least valid of the lot. And it simply cannot be corroborated. Not by mortality data, not by disability data and not by health expenditure data (risen around 4 times as per cent of GDP). I would have thought that when you have 1 piece of data which you know a priori is nigh on useless and bias vs 3 other pieces of data (which are not flawless but at least don't suffer from the same biases) you wouldn't side with the former in a million years. And yet...

"I'm aware of your views on that topic, and they seem to amount to "anything less than 100% certainty is utterly worthless"

No. They amount to "if you want to use data highly susceptible to the prejudices of the researchers then you had better make sure those researchers don't have any prejudices" otherwise you don't have evidence you have propaganda.

"And to repeat a question I posed ages ago and you never answered: how does one "dechallenge" a vaccine? I can see how one dechallenges a drug i.e. stops administering it. But a vaccine?"

I didn't answer it because there was nothing to answer. I mean you have already said it in that paragraph. The "dechallenge" component is the patient GETTING BETTER (so long as the drug is no longer being administered). You can have a challenge, dechallenge, rechallenge event of a whole round of antibiotics or just one tablet. It doesn't matter. The point is the patient gets sick first (the challenge) and then better (in the absence of further challenges).

"What are we supposed to do, stick in a straw and suck out the antigens?"

Que? Not that I rate any of your other posts but this one has really been poorly thought out Patrick (although I do genuinely admire your courage for coming here). Which drugs do we suck out when we are using this mechanism Patrick?

"we'd have to stipulate that the current state of disciplinary knowledge is better (more likely to be true). than past states of disciplinary knowledge."

That's just it. We don't need to stipulate that at all. All we have to do is show that fields of knowledge that once had a hegemonic view would often change. It wouldn't matter to the question at hand whether it was wrong to change or right to do so. We could be right now and wrong then or wrong now and right then – or (as I believe is the case for disease) wrong all the time.

"And all that really seems to say, then, is that these fields do in fact advance. And what time period are we going to tally up over?"

Would it matter? The last 1000 years? The last 300? Either way I don't think you are going to get a track record which fosters faith in your approach of blindly trusting the experts even when those experts do not have a privileged position to evaluate the truth of their claims.

Like · 2 · 1 September 2013 at 10:45

Tristan Wells "Yes, the increase in survival rates for e.g. leukaemia in the last couple of decades is very impressive, but it's outweighed by a thousand years of treating everything with leeches, therefore medicine is inherently untrustworthy?"

If you want to try persuading me on the glories of hegemonic science with the wonders of oncology you are really going to have your work cut out. This is particularly so if the best you can do is come out with some cherry-picked examples whereby our approach is somewhat less disastrous than it was a few decades ago.

It is impossible to have a placebo controlled trial for cytotoxins (because the placebo group would get suspicious if they kept their hair and didn't need to vomit every 5 minutes). So instead pharma companies give one cohort the new chemo and another cohort the old chemo. If the people die slower in the new cohort than the old one the new drug is deemed a success. But how could they possibly know they weren't just poisoning them less? They don't. Hence the fraud of oncology. They don't understand cancer they think it is all just God playing dice so they use statistical evaluations for their treatments which as I just showed are completely inappropriate (but I suppose you will say that that is a Nirvana fallacy – because as we all know a million times nothing = a lot.)

"History, for Hegel, is not just advancing but advancing towards a culmination: hence for Hegel, all history is ultimately theodicy).

Fair enough, would you prefer the phrase "linear"?

"who has ever, in the history of anything, suggested that parents who claim vaccine injuries are part of a deliberate conspiracy to bring back disease? The Scarecrow from Wizard of Oz had less straw in him than that assertion. And considerably more brain."

When we say that we don't think people should blindly trust the "experts" can you guess what we are called? It wouldn't be conspiracy theorists would it? The term is commonly used to avoid the argument. But there are conspiracies and there are conspiracies. Saying a small number of people get together and organize a bombing of a crowded place is a conspiracy theory. But most (quite reasonably in my opinion) believe it can happen. Saying millions of otherwise disparate people got together and conspired to lie about what happened to their children (and yes Patrick, in case you haven't been following your own crowd, they do call us liars on a regular basis) is a conspiracy that most people would think implausible. But how else do we



| interpret the likes of the SAVNs? They don't just say we are mistaken and explain how it is we read the stats |
|---|
| wrong or some such they explicitly call us liars – including when we are discussing what we have actually |
| witnessed. Why would we do that? Now, given that none of those who defend vaccines has ever been able |
| to come up with a remotely coherent explanation as to what our motives are then I reckon I am entitled to |
| describe theirs as a conspiracy theory – but more importantly a conspiracy theory with virtually no |
| plausibility. |

The interesting thing is that ours isn't a conspiracy theory at all – at least not necessarily. Some of us may believe that the elites get together and with malicious intent decide how best to do evil things but it is most certainly not inevitable that we do that. I believe that doctors are desperate to believe that their own self-interest runs parallel to what is for the good of society. In other words they do genuinely believe it but only because they desperately want to believe it. So there is no conspiring as it were (at least not on a macro level) but the self-interest of individuals just leads them to all say the same thing.

It is a simple counter-factual: if you were right, what do we have to gain by lying about this issue? On the other hand, if we are right what do those in the medical industry have to lose by confessing?

If you bothered to ask yourself this question you may just realize why blocking our arguments from polite society is so misguided.

Like · 2 · 1 September 2013 at 10:49 · Edited

Willow Harper Tristran I am always so outstanded by your knowledge. I am unsure hoew you know so much, but I am glad you are on this side of these importnat issues of health.

I really have trouble undertstanding Patrick, but people like him that are in academia insitutions have never been my strong point in getting what they are saying.

Greg your books are amazing, I do enjoy the grpahs, easy for me to understand so I can expliane to people my health choices.

all of these comments are so interesting with all three of you on the same level, and of equila equality, jsut a different veiw points.

Like · 1 · 1 September 2013 at 17:06

Patrick Stokes I'll take Greg's comment as a request to reply. Apologies to any bored bystanders.

As you rightly note Greg I am not qualified to comment on the veracity or otherwise of the mortality data. But even if you're absolutely 100% correct in what you've written regarding historical mortality rates (and again I am not saying you are or are not) it entails nothing of relevance. That's why it's misleading: at best, it's asking the wrong question. It might annoy you that people make claims for vaccines that you think are historically inaccurate – roughly what I feel every time someone misattributes that "First they ignore you..." quote to Gandhi – but it says nothing about efficacy, as you yourself concede in the book, but not in the parliamentary submission.

I see that in the book you then go on to insist that notification data isn't reliable. And as you say, I'm not qualified to debate you on that. I'd love you hand you over to someone who is, but your admins have banned them all. (Though I believe Jason Brown has engaged with some of your claims at some length elsewhere).

But again, if you really want everyone to sit up and take notice, write it up and submit it for a decent journal. If a twit like me can get into journals, anyone can.

Like · 1 · 2 September 2013 at 00:32

Patrick Stokes "Every time you are backed in a corner you lie. How could anybody describe someone coming up with a specific criteria a priori which they then apply consistently as "ad hoc"?"

- No, Tristan, every time you get caught out saying something which entails an absurdity you accuse me of lying. You introduced a worry about information cascades, and I pointed out that even your beloved direct personal observation can be subject to the same sort of systematic error. So yes, giving epistemic privilege to personal observation is indeed arbitrary.

"Sure I can. All I have to do is assume that x doesn't necessarily = y. I described clearly, coherently and consistently why I think x may not = y. If you think that everything = everything else then fair enough, but then why would you pour such scorn on things like homeopathy etc?"

- Ok I've read that paragraph half a dozen times now and I have no idea what you're trying to say or how it responds to my point. (And I don't recall saying anything about homeopathy, but if you want to believe that claims for memory water should motivate us to abandon much of what we think we know about physics, go right ahead).

"Ever since the introduction of vaccines there has been a massive ostensible rise in asthma, allergies, diabetes, autism, seizures and a whole host of other conditions. According to the US census data kids are 10 times more likely to have a disability today compared to 1950. Now, you will no doubt arbitrarily decide that these statistics are worthless whereas your precious notification data is flawless."

- It's striking that you're prepared to point to changes in diagnostic criteria to explain reduced disease incidence when it suits your purposes (cf. polio) but reject the idea that an increase in diagnosis could also be due to changed diagnostic criteria, improved testing etc. (I recall one post where you poured scorn on the idea that there were people displaying severe ASD symptoms in the pre-vaccine era – because of course those symptoms were completely unknown in the insane asylums of yesteryear. Strange that they built so many of them). And again, even if every single one of these was on the increase, you still need to demonstrate a causal relationship with vaccination.

I did not and would not assert that notification data is flawless – as you say it could only be a proxy for incidence data, but proxies are better than nothing and often a very long way better than nothing. And given your general scepticism about diagnosis I don't really see how mortality data works any better for you than morbidity data anyway: if you don't believe the diagnoses in the first place you aren't going to believe the declared causes of death either.

"The "dechallenge" component is the patient GETTING BETTER (so long as the drug is no longer being administered). You can have a challenge, dechallenge, rechallenge event of a whole round of antibiotics or just one tablet. It doesn't matter. The point is the patient gets sick first (the challenge) and then better (in the absence of further challenges). [...] Which drugs do we suck out when we are using this mechanism Patrick?"

- Yes, I know what 'dechallenge' means. I'm asking, once you've vaccinated someone, how are you supposed to dechallenge that? What is the equivalent to withdrawing the administration of a drug? Most of the claims I've seen antivaxxers make for things like autism as an adverse reaction frequently manifest quite some time after the shot (and so after the cited "toxins" have been cleared), or involve a claim that the "toxic" substances aren't cleared at all but remain in the system. Either way, where is the dechallenge?

"That's just it. We don't need to stipulate [that the current state of disciplinary knowledge is better than past states of disciplinary knowledge] at all. All we have to do is show that fields of knowledge that once had a hegemonic view would often change. It wouldn't matter to the question at hand whether it was wrong to change or right to do so. We could be right now and wrong then or wrong now and right then – or (as I believe is the case for disease) wrong all the time."

- So we agree that you have no criteria for 'wrongness' if you do that. You can point to change, but you can't legitimately say any past viewpoint was wrong or right. You're responding to a legitimate concern: scientific knowledge is always subject to revision and the fact we believed different things in the past is a reminder that present beliefs are always revisable. So yes, you're right that one day modern medicine may look as primitive as leeches look to us. But it is simply perverse to deny that *any* progress has been made or that the current medical understanding of the body is better than that of a hundred years ago, and that in turn better than a hundred years before that. Your grudging admission that some aspects of medicine are "somewhat less disastrous" than they used to be amounts to an admission of progress.

Which brings me to your chemo example: you seem to be assuming that the trial you describe takes place in a vacuum where we have absolutely no idea what the clinical outcomes with no treatment at all would have been. Is that your claim?

And frankly, when it comes to cancer, "somewhat less disastrous" is pretty bloody fantastic.

"When we say that we don't think people should blindly trust the "experts" can you guess what we are called? It wouldn't be conspiracy theorists would it?"

- But you weren't saying that that people who make *that* claim are accused of participating in a conspiracy, you were saying that people who claim their children are vaccine injured are accused of conspiring to bring back disease. Who is making *that* accusation? As I say, complete and utter strawman. Saying that someone is mistaken does not amount to saying they must be lying, and saying that someone is being dishonest in the way the present an argument does not mean that they are being dishonest about everything else they say they believe.

One thing we do agree on here: there's a real issue with the ill-defined way we use the term 'conspiracy theory.' The surprisingly limited literature on the topic in philosophy addresses this problem, but at the usual cost of multiplying definitions rather than consolidating them. David Coady at UTAS has some interesting stuff on this.

Like · 1 · 2 September 2013 at 00:45

Tristan Wells Thank you Willow I appreciate that.

Patrick, can I just ask? When the upstanding men and women over at the SAVN suggest that people should come here and argue "mortality shmortality" did you not think it just a little peculiar that they were doing so even as the great banner they have at the top of their site says "VACCINATION SAVES LIVES" (I know you don't like capitals to emphasise in the absence of italics but it is capitalised there so hopefully you will forgive me).

I mean they obviously do think it is really important and yet here you are telling us that whether or not vaccines save lives is "nothing of relevance".

Of course, as you say, following them will and has helped your academic career whereas following us most assuredly will not so I guess that is sufficient cause to forgo the use of sense and reason.

"I'd love you hand you over to someone who is, but your admins have banned them all. "

Again, sense and reason. Your posts have none. What on earth is to stop anybody at the SAVN board posting a line-by-line rebuttal of what is in Greg's book? Why would it be any sort of a concern that they couldn't post it here (assuming of course you believe their protestations about how they are all angels censored by the big bad AVN meanies for nothing more than having superior arguments)?

Come to think of it - don't many universities have maths/stats departments? So, on the off chance that yours

has one also why don't you take Greg's arguments over to someone who works in that field and ask them to rebut it?

Actually, do you know what would make this really interesting? If you took it to two statisticians one of whom you made it clear that these arguments were being used to critique the science of vaccination and for the other you obscure this fact and see if their responses are any different.

But anyway if you don't care to do that here Greg refers to the book that many of today's statistics lecturers learnt from http://nocompulsoryvaccination.com/.../reducing-the.../ (scroll down to "Incidence").

And Jason Brown never tried to defend the validity of notification data (at least not that I can see). Greg had said that the notification data for pertussis didn't seem to show any discrepancy between the ratio of vaxed who were reported with pertusis vs the unvaxed. Now, Greg (and I) don't have any faith in notification data anyway, but he thought it quite telling that the data set that is usually paraded out in support of vaccinations would actually be suggesting that this particular vaccine is useless. Brown ignored the problems with notification data but said Greg got it wrong because his denominator was wrong. Brown was using the fact that by the age of two 95 per cent of children are fully vaxed for pertussis. However, Greg pointed out that, again ignoring the problems with notification data, this method was invalid because you can't extrapolate the percentage vaccinated at 24 months to whether they were fully vaxed at 6 months, or 9 months or 12 months. Many parents delay shots (for many reasons) so you need to age-match the cases (or at the very least take a random sample of those in that age group.) The ABS did that around a decade ago and found that the figure indicated Greg's assertion was more likely to be correct than Brown's. In other words, the proportion of the fully vaxed who are notified with pertussis is roughly equal to the proportion of fully vaxed kids in the equivalent population.

But again, I have to stress that Greg was not saying that notification data was credible or that it always showed no benefit to the vaccine. Greg, I believe, was simply implying that those who push vaccines on us use evidence in a completely "ad hoc" manner (actual "ad hoc" not Patrick Stokes "ad hoc" that is). The flu vaccine is another whereby those who push vaccines on us completely ignore the same data they would normally flaunt (hospitalisations due to flu) and tell us we should get them anyway.

In other words the conclusion that I would draw from all this (and I assume Greg as well) is not that the proportions are the same for the vaxed and unvaxed to get any specific disease – we simply have no idea – but that those who defend vaccines aren't to be trusted. Maybe they are deliberately lying maybe they are just very good at deluding themselves. Either way they cannot be trusted.

To the best of my knowledge, nobody has ever answered Greg's (or Huff's) points about the validity of notification data. But please please please, go and ask some statisticians and come back here with a summary of what they have to say. But please please please don't just tell us they all "fully support vaccination".



Reducing the incidence of grand claims

nocompulsoryvaccination.com

This is the second post in our series critiquing the new booklet "The Science of... See more

Like · 2 · 2 September 2013 at 11:09

Tristan Wells "So yes, giving epistemic privilege to personal observation is indeed arbitrary"

Oh I see! So when you say that it is all about probabilities that is perfectly acceptable but if I talk about probabilities it is purely arbitrary. Am I supposed to believe that everything is equally likely to be true?

Sorry Patrick but I really don't think the absurdities are coming from me.

"(And I don't recall saying anything about homeopathy, but if you want to believe that claims for memory water should motivate us to abandon much of what we think we know about physics, go right ahead)."

According to you because it is possible for direct observations to be wrong we should give such no more gravity than anything else – reading tea leaves, having dreams, gazing into a crystal ball, reading a book about dragons written by someone a thousand years ago. There is simply nothing to differentiate any of them. After all, direct observations can be wrong and therefore to give any more credibility to eyewitness accounts than gazing into a crystal ball is "arbitary and ad hoc".

You said it Patrick. Don't blame me if the logic takes us to the most fanciful places.

"It's striking that you're prepared to point to changes in diagnostic criteria to explain reduced disease incidence when it suits your purposes (cf. polio) but reject the idea that an increase in diagnosis could also be due to changed diagnostic criteria, improved testing etc."

Ummm, I absolutely accept that changes in diagnostic criteria would have an effect on such things Patrick. The claim is that vaccines have been a miracle for our health. But 2 pieces of data (disability and health expenditure) would suggest that whatever has occurred over the past 60 years has been catastrophic. If you don't like that data that is fine with me but it is YOU who bear the burden of proof. All you have is notification data which is useless.

I reckon it would be much easier to make a case that vaccines have been deleterious for health rather than beneficial but I don't need to show that. What I have shown is that your claim is nothing more than wild

speculation.

"And again, even if every single one of these was on the increase, you still need to demonstrate a causal relationship with vaccination."

No. I don't. I could – and that is why I go on about challenge, dechallenge, rechallenge – but even if you decided to ignore their adverse consequences you still need to show they are beneficial.

"I did not and would not assert that notification data is flawless – as you say it could only be a proxy for incidence data,"

No it can't be a proxy for incidence data. It is like saying the number of kangaroos in my backyard is a proxy for their number in Australia. It isn't a proxy, it isn't an estimate it is nothing.

"And given your general scepticism about diagnosis I don't really see how mortality data works any better for you than morbidity data anyway: if you don't believe the diagnoses in the first place you aren't going to believe the declared causes of death either."

No Patrick I don't. I even said that mortality data is biased towards the vaccine. But it is government mortality data. Remember, I pick and choose what data I support based on my criteria for evaluating credibility. You pick and choose what data you support based on whether it comes from the government. So you should support this data. What I would do with it is irrelevant. I don't even believe in the germ theory. (I do believe that the number of people who died was measured correctly but everything else is up in the air as far as I am concerned).

I don't use statistics to support my views on anything. I came to the realisation that the entire disease paradigm was abject nonsense from first principles. Unlike the skeptics I understand the statistics - and I owe Greg a deal of gratitude for his explanations - but it had nothing to do with how I came to my views.

"Yes, I know what 'dechallenge' means. I'm asking, once you've vaccinated someone, how are you supposed to dechallenge that? What is the equivalent to withdrawing the administration of a drug? "

And I'm asking: how is not giving someone a vaccine different to not giving someone an antibiotic? I just can't see what is so difficult to understand about it. In the case of antibiotics there may be a choice to stop the antibiotic whereas in vaccines the choice is made for us (ie by the schedule) so in one you can specifically 'test' for a CDR whereas in the other it just happens incidentally. But the conclusion when it happens is exactly the same because the 'coincidence' would need to be just as great in each.

"So we agree that you have no criteria for 'wrongness' if you do that."

Of course not. But as long as we stick by the assertion that two contrary viewpoints can't both be right then we can feasibly make such an analysis - at least conceptually.

"But it is simply perverse to deny that *any* progress has been made or that the current medical understanding of the body is better than that of a hundred years ago, and that in turn better than a hundred years before that. "

It isn't perverse. Sometimes we go backwards in some areas, forward in some and static in others. That is why I gave you the example of the witch-burners building extraordinary structures.

"Your grudging admission that some aspects of medicine are "somewhat less disastrous" than they used to be amounts to an admission of progress."

If you really want to clutch at straws I suppose you can argue that it points to a tiny bit of progress in one tiny aspect of one field of knowledge. Hooray!!

"Which brings me to your chemo example: you seem to be assuming that the trial you describe takes place in a vacuum where we have absolutely no idea what the clinical outcomes with no treatment at all would have been. Is that your claim?"

Given the state of epidemiology it would not surprise me if that statement was correct on the face of it. But I was referring to the fact that we don't know the strength of the placebo effect.

"And frankly, when it comes to cancer, "somewhat less disastrous" is pretty bloody fantastic."

Not in my understanding of disease it ain't. But you missed my point. I wasn't saying that 20 years ago they could do nothing and now they could do a little. I was saying that, for all we know, 20 years ago we were causing further harm and today we are simply causing less further harm.

"But you weren't saying that that people who make *that* claim are accused of participating in a conspiracy, you were saying that people who claim their children are vaccine injured are accused of conspiring to bring back disease."

Read the whole paragraph Patrick. To reiterate the important bit: I made an inference – and I believe quite reasonably so. But I certainly wouldn't expect you to appreciate said inference.

"at the usual cost of multiplying definitions rather than consolidating them. David Coady at UTAS has some interesting stuff on this."

Cheers Will see if I can find it

Oh and can I say - thoroughly enjoying this. Like · 3 September 2013 at 11:16 · Edited

Patrick Stokes "I mean they obviously do think it is really important and yet here you are telling us that whether or not vaccines save lives is "nothing of relevance"."

- No, I said whether vaccination historically was the largest contributor after sanitation to reduction in mortality adds nothing of relevance. That is not the same as whether they save lives or not. To save lives they simply have to reduce the incidence of diseases that kill people.

"Of course, as you say, following them will and has helped your academic career"

- How has it helped my academic career? For good or ill, what matter in academic career progression is publications, grants and teaching evaluations, more or less in that order. Half a million hits on the "No, You're Not Entitled..." piece is nice and all but it doesn't count towards any of those three metrics. If anything I'd like it if people could kindly stop being wrong on the internet so I can go back to writing books that nobody will read.

"What on earth is to stop anybody at the SAVN board posting a line-by-line rebuttal of what is in Greg's book?"

- Maybe if Greg published his work properly it might be seen as important enough for people to do that. Again, if you're so sure of the validity of the claims why aren't you trying to get this stuff into the journals? As it stands it just looks like you're trying to avoid proper scrutiny.

As stated I'm not qualified to get into the stats and will not attempt to do so, nor would I presume to speak for Jason Brown.

Like · 2 September 2013 at 20:30

Karen Little "Wow. That's some compelling counter-argument there Karen. Don't even bother to elaborate, I'm clearly not getting back up off the mat after that."

I wasn't aware we were in some kind of competition PS. On the question of compulsion - is voting compulsory in Australia, in both a literal sense and a practical one? Does compulsory voting really mean compulsory?

1 · 2 September 2013 at 22:29 Like ·



Karen Little Yes that's correct PS. Voting is compulsory in a literal sense but not a practical one. No different to the meaning of non-compulsory as it pertains to FTB.

In regards to the Iceland example, Tristan had more than adequately addressed it, so it didn't bear repeating. Like -2 · 3 September 2013 at 00:02



Greg Beattie Thank you Willow. And I agree wholeheartedly about Tristan. Like · 1 · 3 September 2013 at 10:32

Tristan Wells Oh and by the way Patrick, your Sandy Island example isn't particularly helpful to your case. It would appear that there was only ONE erroneous independent observation (all the subsequent observations were just vague descriptions made by people who already assumed that something was there). So whilst it certainly shows that people's observations can be skewed by their prejudices it tells us nothing about the validity of putting one's trust in many independent observations.

Like · 3 September 2013 at 10:39

Tristan Wells Steve, do you want to know the difference between an explanation and a rationalisation? You would never volunteer a rationalisation. You and Patrick would NEVER tell people about the disability data when you are defending vaccines unless they mentioned it. Just like you would never volunteer what pharma companies use as "placebos". When we bring it up you fumble around for excuses but you know perfectly well how embarrassing such things are for your case.

Asthma, allergies, diabetes, autism are chronic conditions. Their prevalence is roughly equal to their incidence (at least over the medium term). Generally the way to work it out is through a random sample of the population (self-reported (but presumably their doctors might have diagnosed it)). But in the case of the census data that isn't obviously a random sample that is complete data. It isn't notification data in other words. Census data is an attempt to measure something, random surveys are an attempt to measure something. Notification data is not an attempt to measure anything that is not its purpose (it has been retrospectively used in such a way by charlatans who should know better). Whether the former two are good measures is a reasonable question but they are at least measures.

Do I think that there has actually been a 10 fold increase in disabilities amongst children? I honestly don't know. I would say that it probably hasn't been that rapid but it wouldn't shock me if it were. I certainly believe it has increased and I believe that vaccinations have probably played a significant role. But again, even if I was completely agnostic mine is not the burden of proof yours is. How can you possibly argue that vaccines have led to a period of unprecedented health when all the data that you are normally so enamoured by is telling you that people are sicker than ever?

And again, our figures for total spending on health are not subject to massive biases or unknowns. So long as

we talk about in real dollars or percentage of GDP they give us a highly accurate figure. It is an indirect figure true but it is highly reliable and it is corroborating the disability data in telling us that the widespread use of vaccines was not accompanied by any sort of improvement in health (and most likely a massive reduction).

But anyway, like I said, you aren't looking to explain but to rationalise. Like 2 · 3 September 2013 at 12:06 · Edited



Greg Beattie Quoting Patrick - "As you rightly note Greg I am not qualified to comment on the veracity or otherwise of the mortality data."

Just a small but very important correction, Patrick. It's *you* who claims you aren't qualified... not me. I was merely reminding you of that. I actually think the opposite. You have the ability to think all this through. Why don't you put it to work? Mind you I think you've already broken clean out of your shell because you're discussing all sorts of things the Patrick of old said he wouldn't have touched.

Now.... back to the mortality graphs and your claim that I've been dishonest - "How else are we to describe people who continually reassert claims they know to have been refuted if not dishonest? What term would you prefer?"

That was you referring to the graphs I included in a submission to a parliamentary hearing. You've now seen that everything was completely legit and that nothing's been refuted. And I'm guessing your integrity is literally bursting to apologise, but please.... there's no need.

Anyway you've moved straight on to a new one - "...it entails nothing of relevance. That's why it's misleading: at best, it's asking the wrong question."

Aha! So that's why it's misleading. It's irrelevant. I see.

So the heart and soul of the vaccine marketing machine is irrelevant. OK. I'm prepared to go with that. Let's see the point openly conceded by those now promoting vaccination. Have them take those stories off the table. Actually, have them retell the stories, but this time with the truth instead of the big lie. Loud and clear... "vaccines played little or no role in the great fall in deaths. Therefore there's no reason to believe death rates would rise if we all stopped vaccinating tomorrow".

If it's such an irrelevant part of the whole show I'm sure they wouldn't mind 'fixing' the dishonesty in their previous versions.

But I think we're dreaming. A lot of stuff would have to be corrected. Countless documentaries, articles, books etc. Thousands of peer-reviewed medical papers retracted and rewritten. Would you join me in pushing for that?

I didn't think so.

The claim that vaccines saved us from the scourges of the past is the backbone of the vaccine marketing machine, Patrick. I consider it the most dishonest aspect of the whole show. I believe the graphs demonstrate that. And that makes it the opposite of 'irrelevant'. But consumers will decide... not you.

You're like a rabbit jumping from burrow to burrow as you get gassed out. This all started with you insisting the word 'compulsory' didn't mean what the rest of the world thought it did. Then you focussed on my alleged dishonesty. That failed too. Now you're somewhere else. Do you ever stop to acknowledge your mistakes?

At first you said I was dishonest because my arguments had been refuted for 20 years. That completely failed. Without a breath you quickly moved to I'm now misleading people because my argument is irrelevant. And I know I'm the stupid one here. I run around spending time putting out your (as I said way back... 'puny') allegations.

If you want to comment on a book read it first. If you want to comment on a submission *read it first*. The 'irrelevance' argument is pointless... irrelevant. Ultimately consumers decide what's relevant to them.

But can we just sort the qualifications issue first? Are you in or not? I mean, do you think it's OK to discuss this issue and form a legitimate opinion, thereby nullifying the article you wrote for 'The Conversation' website? Or do think, for consistency, you should fess up to having gone too far with this discussion? Like $\cdot 2 \cdot 3$ September 2013 at 11:06

Tristan Wells "No, I said whether vaccination historically was the largest contributor after sanitation to reduction in mortality adds nothing of relevance."

So now the squirming begins. This is what you said: "But even if you're absolutely 100% correct in what you've written regarding historical mortality rates (and again I am not saying you are or are not) it entails nothing of relevance."

You know perfectly well Greg isn't merely saying vaccines should be further down the list of great life-saving improvements but that there is no reason to think that they should be on the list at all.

"If anything I'd like it if people could kindly stop being wrong on the internet so I can go back to writing books that nobody will read."

You truly are a magnanimous soul. You don't want to get public acclaim and tell people what to do. Honest. You just have to endure these hardships for the good of society. Just like Richard III.

"Maybe if Greg published his work properly it might be seen as important enough for people to do that."

Aaah I see. The moment a True Scotsman publishes Greg's book you guys will be there armed with your glorious counter-arguments and won't we look stupid then?

I must say this post of yours is just about having me in tears Patrick. Did you not read it to yourself before you posted it and think "I'm going to have to go back to the SAVN site for a double helping of reassurance after this feeble effort"?

"Again, if you're so sure of the validity of the claims why aren't you trying to get this stuff into the journals? As it stands it just looks like you're trying to avoid proper scrutiny."

Trying to avoid proper scrutiny!!?? From the guy who says that none of us should be heard by anybody!

For everybody else reading this, despite what it looks like, I promise I have not hacked into Patrick's facebook account and written a parody response from him.

"As stated I'm not qualified to get into the stats and will not attempt to do so, nor would I presume to speak for Jason Brown."

Congratulations! In your entire post you managed one solitary sentence that wasn't completely ridiculous. Like \cdot 1 \cdot 3 September 2013 at 14:06 \cdot Edited

Patrick Stokes Hi Greg,

For the sake of clarity I'll re-introduce the numbered points:

1. "You've now seen that everything was completely legit and that nothing's been refuted."

– Incorrect. I made what is known as an argument e concessis. And I'm usually loathe to use them online because people do precisely what you just did i.e. ignore the hypothetical character of the premise. "Even if you're right about x, then..." is not the same thing as "You're right about x, but...". As I say I am not qualified to discuss statistical analysis or clinical diagnosis. What I am qualified to talk about is inference and argumentative structure, and I am confining myself solely to that. Which brings me to this:

2. "Actually, have them retell the stories, but this time with the truth instead of the big lie. Loud and clear... "vaccines played little or no role in the great fall in deaths. Therefore there's no reason to believe death rates would rise if we all stopped vaccinating tomorrow"."

- See how you slipped into an invalid inference there? You're again trying to suggest that your historical point (which again I am neither endorsing nor not endorsing) somehow bears on the efficacy of vaccines. If vaccines lower incidence then yes, we have a perfectly valid pro tanto reason to think that death rates (not to mention morbidity and resultant disability rates) would rise if we stopped vaccinating. Suppose we have a beach where there's 10 shark attacks a year. Over the years, over-fishing reduces shark numbers until there's only 3 attacks a year. Then we put in a shark net and it drops to 1 a year. Is it not reasonable to think that if we got rid of the nets, while attacks would not go back up to 10, they may still go back up to 3?

So why not be honest with the Queensland parliament that the argument about historical mortality does not show what you just asserted it to show? Why did you not say in your submission "Of course, none of that says anything about whether vaccines work or not, I'm just complaining about the way they're marketed"? If I had to hazard a guess, I'd say it's because you wanted to use these graphs – a powerful visual aid – to create the impression that vaccines don't prevent illness, which is absolutely not what they show. Likewise, why didn't you remove the glaring logical contradiction between your point 1.1.3b in the submission and point 2.2 before you put it before a parliamentary committee? Either you didn't notice it's there, or you were hoping no-one else would.

3. I'm rather pleased to see you acknowledge this point:

"A lot of stuff would have to be corrected. Countless documentaries, articles, books etc. Thousands of peerreviewed medical papers retracted and rewritten."

- Exactly. Tristan likes to invoke odds, so let's play that game: What are the odds that all those articles, all those books, and all those papers are wrong and you are right? *Logically* possible, absolutely. But at least you can see how much heavy lifting your hypothesis would need to do in order to be successful, how many other well-supported beliefs it would need to be able to disprove, how many auxiliary hypotheses you would need to invoke. Still, if you're so absolutely sure about this, go ahead and submit yourself to peer review. That's the only way to establish your case.

4. "You're like a rabbit jumping from burrow to burrow as you get gassed out. "

- Mostly because I'm responding to arguments as they are made, and you two keep bouncing from point to point. (Tristan far more than you I should add). But let's go through your reconstruction of the argument to date anyway:

4.1 "This all started with you insisting the word 'compulsory' didn't mean what the rest of the world thought it did."

- No, I argued against your idiosyncratic and gerrymandered definition of 'compulsory'. You tried to defend it with one British news article and a reference to the US that you never actually explained or elaborated upon.

4.2 "Then you focussed on my alleged dishonesty. That failed too."

- You went before a parliamentary committee and presented claims you know to be highly contested as if they were fact and used mortality data graphs despite knowing they don't show what you need them to show for your case to be successful. Again, if not dishonesty, what should we call that?

4.3 "Do you ever stop to acknowledge your mistakes?"

- Pot, have you met Kettle? I think you'll really hit it off.

4.4 "At first you said I was dishonest because my arguments had been refuted for 20 years. That completely failed."

- So I failed because you refused to acknowledge the refutations others have offered? And in fact I made that point specifically about why mortality is the wrong measure because it can't show what you want it to show. And you acknowledge in your book that that's true!

4.5 "Without a breath you quickly moved to I'm now misleading people because my argument is irrelevant."See points 2 and 4.2 above.

5.1 "If you want to comment on a book read it first."

- It's not my job to refute your book. It's your job to make your arguments in the proper venue (i.e. peer reviewed journals) and expose yourself to the scrutiny of qualified people. Why haven't you done that?

5.2 "If you want to comment on a submission *read it first*."

- Perhaps you missed the post where I said I'd read it.

6. "The 'irrelevance' argument is pointless... irrelevant. Ultimately consumers decide what's relevant to them.

- They don't decide what's empirically true though. Again, if you think your arguments accurately reflect empirical reality, you know what you need to do.

7. "But can we just sort the qualifications issue first? Are you in or not? I mean, do you think it's OK to discuss this issue and form a legitimate opinion, thereby nullifying the article you wrote for 'The Conversation' website? Or do think, for consistency, you should fess up to having gone too far with this discussion?"

- If you to go back and read everything I've written to date, you'll see I've been very careful about not commenting outside my remit. I do not analyse the stats or the diagnostic questions and confine myself to questions of inference. My point Greg remains precisely what it was a year ago: non-scientists can have all the opinions they want about science, but they don't have some automatic right to be taken seriously. If you want people to take you seriously, go publish in journals. In the meantime, your group should stop presenting itself as possessing expertise that it does not.

Like · 1 · 3 September 2013 at 17:03 · Edited

Tristan Wells "Over the years, over-fishing reduces shark numbers until there's only 3 attacks a year. Then we put in a shark net and it drops to 1 a year. Is it not reasonable to think that if we got rid of the nets, while attacks would not go back up to 10, they may still go back up to 3?"

Is this how you think the data looks? There was a drop then bottoming out and then introduction of a vaccine and then subsequent drop again? Could you point us to this phenomena?

"So why not be honest with the Queensland parliament that the argument about historical mortality does not show what you just asserted it to show?"

Burden of proof fallacy. It is up to those who call for the use of vaccines to demonstrate that they save lives.

Let me break it down: We have government mortality data for infectious disease showing no obvious benefit to mortality from vaccines (the life expectancy data corroborate this). We have no data whatsoever on morbidity but you want to use some data which is completely unrelated to say that morbidity has definitely fallen due to vaccines and from there you extrapolate that mortality must have fallen too despite the fact the actual mortality data (which if anything is biased in favour of the vaccine) is showing no such phenomena. Doesn't seem like a position of strength to me. And it certainly doesn't seem enough to describe Greg's representations of the data as dishonest.

"Exactly. Tristan likes to invoke odds, so let's play that game: What are the odds that all those articles, all those books, and all those papers are wrong and you are right?"

Well given that there is clearly no basis for them in the data I would say less than 0.1 per cent. You want to outsource your views to everybody else because you believe in the infallibility of groupthink (well no more fallible than the existence of Iceland at any rate) we don't think it is worth anything.

"Still, if you're so absolutely sure about this, go ahead and submit yourself to peer review. That's the only way to establish your case. "

Nothing in all of human history has ever happened unless it has been published in a peer-reviewed journal.

Well the good news is that this post is better than your last one. The bad news is that that is only because it couldn't have gotten any worse.

"Again, if not dishonesty, what should we call that?"

Dishonesty is pretending that these graphs lend absolutely no credibility whatsoever to our point of view when there isn't a chance in a million years you would volunteer what's in them to someone you were trying to persuade of the wonders of vaccines.

"So I failed because you refused to acknowledge the refutations others have offered? And in fact I made that point specifically about why mortality is the wrong measure because it can't show what you want it to show."

Who has refuted it? Most just ignore it. Some brave souls call for our views never to be aired in public.

"Why haven't you done that?"

Probably got something to do with the fact that academics believe that he isn't allowed to air his arguments in public.

"They don't decide what's empirically true though. Again, if you think your arguments accurately reflect empirical reality, you know what you need to do."

Let me guess: have it agreed to by people whose entire incomes, reputations and self-esteem are dependent on them not agreeing to it?

"If you to go back and read everything I've written to date, you'll see I've been very careful about not commenting outside my remit. I do not analyse the stats or the diagnostic questions and confine myself to questions of inference."

You said that others have refuted his arguments. You clearly believe then that you are in a position to evaluate such things despite claiming not to be.

"If you want people to take you seriously, go publish in journals."

But how could he get published in journals when he is telling them the wrong thing Patrick? And we know that it must be the wrong thing because he hasn't been published in journals.

You know it makes sense.Like ·2 · 4 September 2013 at 18:25 · Edited

Tristan Wells You missed the relevant point Steve ie incidence vs prevalence. But never mind. And you missed the point about how health expenditure data corroborates the disability data but again never mind. And I never used the ostensible rise in asthma, etc to prove they were caused by vaccines. Still, zero out of three ain't bad I suppose.

Like · 4 September 2013 at 17:40 · Edited

Patrick Stokes "Is this how you think the data looks? There was a drop then bottoming out and then introduction of a vaccine and then subsequent drop again? Could you point us to this phenomena?"

- I don't assert there is or isn't a pattern like that in the data (though you have rightly pointed out a limitation in the analogy), what I'm saying is that if something reduces the incidence of a disease that kills people then we have a pro tanto reason to believe it will likewise reduce mortality.

"Burden of proof fallacy. It is up to those who call for the use of vaccines to demonstrate that they save lives."

- And the only reason you refuse to accept they've done that is because you seem to think – to the extent I've understood you and my apologies if I've gotten this wrong – that all notification data is worthless and we have no meaningful comprehension of how widespread certain diseases were and are. You're prepared to reject what are taken to be quite settled and well-attested findings about the way vaccines work because you think you've found a big glaring flaw that brings the whole house of cards crashing down. If you want to claim that you're right, that in fact the whole edifice of modern medicine is massively and irredeemably flawed, then yes, the burden is indeed on you. Off you go to the journals to make your case.

But before you go I'll ask a question, seeing as you ignored it when I phrased it as a comment: if you don't accept notification as any kind of proxy for incidence data, and given your scepticism of clinical diagnosis, whence your confidence in the mortality data? Why do you seem to think doctors are hopeless at diagnosing living people but get cause of death spot on?

"And it certainly doesn't seem enough to describe Greg's representations of the data as dishonest." - It's dishonest in that, and to the extent that, he's using it in support of a claim it cannot make.

"You want to outsource your views to everybody else because you believe in the infallibility of groupthink (well no more than infallible than the existence of Iceland at any rate) we don't think it is worth anything."

- Again with falsely invoking infallibility! Is science infallible? Hell, no. Is there anything better available? Also, no. But yes, I, as one person, cannot test and recreate the entire edifice of even one sub-branch of science in the space of one lifetime. Like it or not, the advancement of knowledge is always a collective enterprise and you cannot learn everything, and that means deference to expertise is inescapable. If you want to call that "outsourcing your views," fine.

"Nothing in all of human history has ever happened unless it has been published in a peer-reviewed journal."

- Not lately, no, at least as regards testable empirical claims. And to preempt what you're going to say next: no, just because something is peer reviewed doesn't automatically make it true. But if you believe in the validity of your claims you submit it to proper quality control. Otherwise it's simply untested noise.

"Dishonesty is pretending that these graphs are of no relevance to the case at hand when there isn't a chance in a million years you would volunteer what's in them to someone you were trying to persuade of the wonders of vaccines."

- They aren't relevant, so I'm not sure why I'd 'volunteer' them in any case. Even Greg admits they say nothing about vaccine efficacy and at most could only impugn what he thinks of as 'vaccine marketing.' (And again, note that's an e concessis argument and I do not accept or reject the antecedent; I'm simply pointing out what can and cannot be entailed by it).

"Probably got something to do with the fact that academics believe that he isn't allowed to air his arguments in public."

- I've said all along he can air his arguments. He can even continue to ignore counter-arguments, though it's disingenuous to do so. What he doesn't get to do demand equal time with scientists in the media, which is where all this started.

"Let me guess: have it agreed to by people whose entire incomes, reputations and self-esteem are dependent on them not agreeing to it?"

- Ah yes: scientists are all hopelessly incapable of being objective, whereas people who are motivated by some or all of a disdain of scientists, an understandable emotional need to explain personal tragedy, a visceral hatred of authority, a quasi-religious belief in the inherent goodness of nature or a financial interest in alternative therapies are of course completely objective and entirely trustworthy. But again, if you're really convinced you're right, then just write a paper that no referee can find any reason to reject. (And if that sounds impossible, remember that this is precisely what everyone already does when they submit work to journals. You don't write to convince the referees your paper deserves *to* be published, because there's ten other papers that also deserve to be published vying for the same space. You write to show the referees that they have no grounds on which they could possibly *not* agree to publish your paper.) But if all you want to do is cast unsubstantiated slurs against the integrity of scientists as an entire class of people, why then you should also go ahead and submit, just to expose their perfidy! After all, you'll have their referee reports vindicating how hopelessly biased they've been.

"You said that others have refuted his arguments. You either don't know what "refuted" means or you believe you are in a position to evaluate such things despite claiming not to be."

- I've pointed out that he continues to assert points without either acknowledging and responding to counterarguments or modifying them in light of those arguments. Go back to the Qld committee submission and have a look at the bald way the point about vaccinated vs. non-vaccinated pertussis is presented for instance. You either refute a putative refutation or you let it stand; you don't just pretend it never happened.

"But how could he get published in journals when he is telling them the wrong thing Patrick?"

- See above.

"And we know that it must be the wrong thing because he hasn't been published in journals. " - Ah, so he's tried then?

We can keep going if you like but ultimately none of this conversation matters. There is only one game in town. You play it, or you don't. You say your claims are valid? Then get out there and publish. You've had long enough to try.

Like · 4 September 2013 at 17:21

Greg Beattie Patrick, you've used a tactic which I call 'returning to the start' (although there's no doubt some Latin term for it). You see it when people are cornered. They use the complexity of the discussion as cover while they slip back to their initial position. Matters that had been settled are brought up again as if they never were. Sometimes I think people do it deliberately to confound and other times I guess they honestly didn't follow what happened. Assuming it's not deliberate here, the vast majority of your numbered points relate to one gross failure of comprehension.

The rebuttals to everything you've raised can be found in the posts above. But in summary, my use of the graphs is simple. It's also correct and has never, to my knowledge, been meaningfully refuted. That's because, unlike yourself, I am extremely careful with my inferences. The points I make are crystal clear. Any

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muddying of them by you is *your* work: not mine.

My conclusions are also nothing new. Many authors have presented them, well before my time. They've even been published in the scientific literature. They are correct. No question. What these graphs deal with is a cultural trance: a situation where, as a community, we tend to herd around a belief which is not based in reality, and reject one which is. The reasons we have done so in this case have been debated for a long time. But the soundness of the belief that is rejected is very easy to demonstrate. And the unsoundness of the one we accept, trance-like, is equally easy to demonstrate. That's what I've done.

I posted the quote from my parliamentary submission for a reason: so you could point out the dishonesty you claim was inherent in it. You didn't do so because there was none there. It's all in your head. The submission doesn't refer to the 'efficacy' of vaccines. Point out for everybody please where the dishonesty is in the submission (without referring to 'the vibe'). If you can't do that then you should, at the very least, keep your mischievous mouth closed. Again, I don't pray for an apology.

About the odds of my conclusions being correct... try 100%. As I said earlier, if we can trust that mortality data has been reasonably faithfully reported the conclusions are unequivocal. And I'm mildly confident the mortality data is ok. It's been corroborated all over the world. But I'm open to suggestions someone slipped some pepper into it if you think that will help you out.

The vast majority of the fall in death rates occurred before the vaccines arrived. There is no question about that. And had those rates continued to fall on trend we would be roughly where we are now, vaccine or not. That means the data gives us no reason to credit vaccines for the fall - with any part of it really, but certainly not a significant part. It doesn't mean they *couldn't possibly* have contributed. No one knows that one. All we know is the story that vaccines were the magic bullets that brought about the change is crap. Even if you give them credit for everything that happened after they arrived (which would be absolutely stupid.... although it has been done by one of our country's highest ranking authorities) it's still just a cameo.

I shouldn't have to explain all this so often.

My book goes further. It goes into the efficacy question, and examines many more graphs. But you can't seriously criticise it without reading it. Do you understand this simple point?

You say you can't criticise it anyway because you're not qualified. But then you go on to evaluate arguments that have been put forward by others, and you claim they are refutations of my work. Listen to yourself.

This topic is not that hard, and there is no field of expertise that's needed to follow it. Stop pretending you aren't qualified. We all know that's just a stance you take to bolster your argument that others shouldn't be questioning the 'experts'. There's probably another reason but I won't level it: you have enough to deal with.

With the 'meaning of compulsory' flasco, you've been given examples where we, as a community, use the word in ways that parallel its application here.

Compulsory vaccination in the USA The article proposing the same in the UK Seat belts Voting

These all involve compulsion through various means of penalty. Can you think of a common usage of the word 'compulsory' that negates these and paints a new picture? If so, does your example present an important distinction?

Like · 4 September 2013 at 17:46

Tristan Wells "I don't assert there is or isn't a pattern like that in the data (though you have rightly pointed out a limitation in the analogy), what I'm saying is that if something reduces the incidence of a disease that kills people then we have a pro tanto reason to believe it will likewise reduce mortality."

If I had a million dollars I could buy a lamborghini. Ergo I have one.

"And the only reason you refuse to accept they've done that is because you seem to think – to the extent I've understood you and my apologies if I've gotten this wrong – that all notification data is worthless and we have no meaningful comprehension of how widespread certain diseases were and are."

Congratulations! You have interpreted me correctly that notification data is worthless. What was your first clue? Was it when I said that notification data is completely worthless? Still, considering the rest of your post I should just appreciate you got that much right.

"If you want to claim that you're right, that in fact the whole edifice of modern medicine is massively and irredeemably flawed, then yes, the burden is indeed on you. Off you go to the journals to make your case."

Could you do me a favour Patrick? When you finally realize the circular nature of your argument (and hence are forced to engage in independent thought) could you inform me please? That way I will know to prepare for the apocalypse.

At any rate, as Greg says there are criticisms of notification data that have been published by True Scotsman scientists. But you ignore them because all of your arguments are ad hoc. You will grab at any straw to rationalize your determination to stick with the popular opinion.

"But before you go I'll ask a question, seeing as you ignored it when I phrased it as a comment:"

Criticism about not answering every key point from the guy who every time he has no answers just shrugs his shoulders and says "greater minds than I". This should be good.

"if you don't accept notification as any kind of proxy for incidence data, and given your scepticism of clinical diagnosis, whence your confidence in the mortality data? Why do you seem to think doctors are hopeless at diagnosing living people but get cause of death spot on?"

Yep. It was good. Is there are a remotely honest bone in your body? I answered it precisely. Here it is for you: "No Patrick I don't. I even said that mortality data is biased towards the vaccine. But it is government mortality data. Remember, I pick and choose what data I support based on my criteria for evaluating credibility. You pick and choose what data you support based on whether it comes from the government. So you should support this data. What I would do with it is irrelevant. I don't even believe in the germ theory. (I do believe that the number of people who died was measured correctly but everything else is up in the air as far as I am concerned)."

When I said "No Patrick I don't" what exactly did you take that to mean? As Greg says mortality data is at the very least complete and actually measures something real. He is being kind to it though because the vaccine is almost certainly biased IN FAVOUR of the vaccine (but not as much as notification data).

"It's dishonest in that, and to the extent that, he's using it in support of a claim it cannot make."

As Greg says, you don't have a clue what you are talking about. You don't understand statistics, you clearly don't understand English and your logic consists of "if 50.1 per cent of people believe it then any questioning of it is a waste of time. No wait! Not 50.1 per cent. Whatever percentage that you decide suits your purposes.

Like · 8 September 2013 at 18:33 · Edited

Tristan Wells "Again with falsely invoking infallibility! Is science infallible?"

If it isn't infallible why would you declare the credible questioning of it open only to those on the inside Patrick?

"Hell, no. Is there anything better available? Also, no."

Yes there is. Pure logic wins against science every time. Maths isn't falsifiable but I believe that the derivative of $y=x^2$ is 2x with a greater degree of certainty than, say, the laws of thermodynamics (although obviously I have a lot more time for thermodynamics than I do immunology, phrenology, eugenics or any other belief set whereby each person is just following the leader).

"If you want to call that "outsourcing your views," fine."

Ok.

"Not lately, no, at least as regards testable empirical claims."

Hahahahahahahahahahaha!!!!! So my grandmother didn't die a few years ago because it wasn't published in a peer-reviewed journal?

I said it to parody your beliefs Patrick – I must say it never occurred to me that even you would be so foolhardy to say you agreed with it. You do realize that simply proves you have no connection to reality don't you?

Can I just ask? How do you know what peer-review is? Has its definition been peer-reviewed?

Aaah never mind. But I have to reiterate to all those reading this: I HAVE NOT hacked into Patrick's facebook account.

"But if you believe in the validity of your claims you submit it to proper quality control."

No. If you believe in the validity of your claims you would be prepared to back this up with your own behavior (revealed preference) – like, just off the top of my head being prepared to take a massive dose of vaccines to prove they are safe. At any rate, what has getting your mates to agree with your paper got to do with proper quality control Patrick?

"They aren't relevant, so I'm not sure why I'd 'volunteer' them in any case."

Because you're trying to convince them that all our arguments are wrong. If you think these are amongst our weakest then you should be grateful they are so easy to debunk.

"Even Greg admits they say nothing about vaccine efficacy and at most could only impugn what he thinks of as 'vaccine marketing.'"

I said "our case" Patrick.

"What he doesn't get to do demand equal time with scientists in the media, which is where all this started."

That's because you don't understand anything about anything. I explained it before for you but it clearly all went over your head. Greg doesn't demand to have equal time with anybody. But if journalists are going to criticize the AVN or people who don't vaccinate then it is simply standard for reputable journalists to allow us to respond. If you have a look at the journalistic code of ethics I think you will find the right of reply as the number one. Actually I found it for you knowing you won't believe it exists as it hasn't been peer-reviewed (I wonder if the existence of Google or even computers has been peer-reviewed – at any rate the AVN's existence hasn't so I am not entirely sure why you keep arguing this (but then the fact that your arguments are appalling hasn't been peer-reviewed either I suppose)).... Anyway: "1. Report and interpret honestly, striving for accuracy, fairness and disclosure of all essential facts. Do not suppress relevant available facts, or give distorting emphasis. Do your utmost to give a fair opportunity for reply."

Now, you may or may not have noted the last sentence (despite not being peer-reviewed). If a newspaper wants to write an article extolling the virtues of vaccination giving all the reasons they are so grand then it is welcome to do so and doesn't have to ask Greg or Meryl or anyone else. BUT if they want to say the AVNers are big bad meanies and anybody who doesn't vaccinate is a child abuser then they have to get a response from someone in that position.

So when journalists say they don't want to provide false balance and then go on the attack against those making such decisions they are breaking their own code of ethics. Not that I would expect the average journalist to actually care about ethics of course I just think it telling that they are breaking their own code and you should be right there beside them telling them it is the right thing to do.

"Ah yes: scientists are all hopelessly incapable of being objective, whereas people who are motivated by some or all of a disdain of scientists, an understandable emotional need to explain personal tragedy, a visceral hatred of authority, a quasi-religious belief in the inherent goodness of nature or a financial interest in alternative therapies are of course completely objective and entirely trustworthy."

Who cares about whatever motivations I may or may not have? I am not asking anyone to believe any of my opinions. Why this point is so hard to understand is beyond me. But then I am discussing this with a guy who thinks nothing is true unless it has been peer-reviewed.

"After all, you'll have their referee reports vindicating how hopelessly biased they've been."

So if I were to do this and come back with a referee saying he won't publish me just because would you change your mind Patrick?

"You either refute a putative refutation or you let it stand; you don't just pretend it never happened."

Right. So if I said I had kids and someone on the other side of the planet said I don't and I don't refute that it means that I don't really have kids after all! Your last three posts have been ones for the ages Patrick.

"Ah, so he's tried then?"

Your comprehension is extraordinary.

"There is only one game in town."

No. The game in town is that we are spending billions of dollars on a medical procedure given to people who can't consent to it that appears to be useless and dangerous. But all people like you can think of is the precious reputation of academia.

Like · 8 September 2013 at 18:09 · Edited

Tristan Wells "and that means deference to expertise is inescapable."

My God your arguments are facile. It is truly beyond belief that someone who gets paid to think can just come up with this guff as though it is an insight.

Yes Patrick, all of us will defer to expertise for some things. It all depends who you defer to, when you defer it and what you do with it once you have deferred it. In all three aspects you have chosen very unwisely for this field of knowledge.

You have deferred to people with a massive vested interest in the general public's beliefs on this issue. You have deferred it in a situation where the experts are in no better position to evaluate the truth of their claims than anybody else (with a rudimentary understanding of statistics and comprehension - oh wait I can see where you're coming from on this aspect). And because its truth or otherwise is critical to the health and wellbeing of those who get no say in the matter to think it a mistake that many parents should pause and question it is barefaced lunacy.

Like · 8 September 2013 at 18:21

Greg Beattie Patrick, I really need to nail you down on this. You made a quite specific accusation that I was dishonest in my submission to a parliamentary hearing concerning the graphs. You need to substantiate that, or apologise (at the very least withdraw the accusation).

I posted word for word the relevant section of the submission. It's up above. You're job is to point out the dishonesty. Quote the offending words, tell us what you think they say, and explain why it's dishonest.

I note you've brought up other concerns. I'm happy to talk about all of them but I want to resolve this first. Like · 9 September 2013 at 13:06



impression to the effect that vaccines don't work. You did not explicitly state the limits of what your argument can and cannot show or point out the limitations of its relevance to the topic at hand. All of this falls well short of the actions of an honest interlocutor who is keen not to mislead his audience or lead them to draw unwarranted conclusions.

Assume – and again I am not saying this is or is not the case – that every word in your presentation was literally true. You seem to think that somehow gets you off the hook for dishonesty. It does not. In the immortal words of Elwood Blues, and invoking the purely technical sense of the latter term: "It wasn't a lie, it was just bullshit."

Like · 11 September 2013 at 17:46

Greg Beattie The title is "Claims of saving lives lack evidence".

The question is "which claims?" Of course, we read the text to find out. It then becomes clear.

Your problem here is obvious. You fell in a trap. You heard others declare "Those graphs don't prove vaccines don't work!". And you thought you'd try and pull it off yourself. But what you didn't immediately realise was that they weren't presented to show vaccines don't work. The reason they were presented was all there in black and white, had you bothered to read.

They address the widespread belief that vaccines were responsible for the massive declines in deaths. (This is something I happen to think is the most pivotal aspect of the whole conundrum.)

But without reading, you've thought "Ahhh... I've heard people say these graphs are dishonest, so *I'll* have a go at him". After I pointed out your mistake and invited you to read the submission, I naively thought you might apologise in keeping with your apparently friendly demeanor. But perhaps that was a bit difficult with others watching. Even withdrawing the accusation was not something you were prepared to do.

Instead you made up a brilliant defence. Apparently I was arguing something I hadn't actually written. Something in your head, which you thought would be in other's heads. The graphs are now so "arresting-looking" that I should have reasonably known that people (including members of parliament) would read more into them than they actually showed, or that I had attributed in the submission. Kind of like Fooling Themselves, hey?

Interesting thought but I don't think it's likely, Patrick. The graphs are certainly arresting. But not for the reason you suggest. What they show is explained very clearly in the text. The rest is all in your head. And that's because you desperately need to wriggle out of an embarrassing situation: one you got yourself into because you listened to others (ironically, one of the traps of deference).

Just think about this. You're actually reduced to claiming that any presentation of the graphs is dishonest! After all, I was very clear about what they show, but that wasn't enough. I should have expressly stated that they don't show what Patrick Stokes thinks when he sees them... (just guessing here what he sees). And if I don't declare that I must be dishonest.

Don't worry. I said way back I wasn't holding my breath for an apology. That would require considerable integrity and humility. Anyway, I see no point in discussing other facets of the issue with you. Like · 2 · 12 September 2013 at 00:43 · Edited

Patrick Stokes Greg, I'd be happy to apologise if I felt it was warranted. I am neither apologising nor withdrawing the accusation here because I believe I've adequately demonstrated the dishonesty of what your presentation does. It is quite clear that you tried to bedazzle a parliamentary committee with material that is irrelevant but serves to create a negative impression of vaccination. It'd be like a prosecutor introducing prejudicial but irrelevant material about a defendant in an attempt to sway the jury.

Or are we seriously to believe that after however many years of doing this you spare no thought whatsoever to the impression this material generates? That it seriously never occurred to you that introducing irrelevant material without pointing out that it's irrelevant would produce a misleading impression in your listener/reader? That it never occurred to you that an inattentive listener (say, a busy parliamentarian) might get the wrong end of the stick when looking at a downward-sloping graph with an arrow near the end saying "this is where vaccines came in"?

I don't assert that "any presentation of the graphs is dishonest." But any presentation of them that is not scrupulously clear about what they do and do not show is. If you care about not creating misleading impressions they should never have been in there.

Like · 12 September 2013 at 01:07

Tristan Wells "But perhaps that was a bit difficult with others watching."

Pretty much sums him up really Greg. He has his twitter followers and you're going to have to take them from his cold dead hands.

"That it seriously never occurred to you that introducing irrelevant material without pointing out that it's irrelevant would produce a misleading impression in your listener/reader?"

How can someone who professes to know nothing about anything discern whether something is or is not relevant Patrick? How could they possibly be in a position to concern themselves with the propriety of others' thoughts?

The politicians appoint the 'experts' you so slavishly follow Patrick, how dare you question their judgement? Like · 12 September 2013 at 11:44

Tristan Wells "Greg, I'd be happy to apologise if I felt it was warranted."

Just like you said you would be happy to criticise any other groups of people who are supposedly more likely to spread disease but you refrained when you realised you would lose some twitter lickspittles. The probability of you doing or saying anything that might make you unpopular is precisely zero. Like · 12 September 2013 at 11:52

24

Patrick Stokes I asked you to cite some such groups as I recall, Tristan. I think you responded with 'sick people sitting in waiting rooms' or something? (I think people who come to work while clearly sick are



https://www.facebook.com/...living.wisdom/posts/10151677624316925?comment_id=27392333&reply_comment_id=28896679&offset=0&total_comments=525[1/01/2014 8:37:42 PM]

You're free to draw whatever conclusions about my integrity you wish. I stand by my argument and I don't

see an apology as warranted on that basis. Like · 13 September 2013 at 14:19



(Also I thought this was all about my few hundred Twitter followers? Now suddenly it's about humanities academics?)

Like · 13 September 2013 at 14:20

Tristan Wells "(Also I thought this was all about my few hundred Twitter followers? Now suddenly it's about humanities academics?)"

Sorry? Did you have a mass exodus of twitter followers due to your article on refugees? I kind of thought it was obvious I was referring to twitter followers as a proxy for ingratiating yourself with the 'in crowd'.

"Tristan: how is opposing scientism (construed in my article as the claim that science can answer all questions and/or that any questions science cannot answer are not real questions) hypocritical on my part?"

I have already pointed this out to you several times Patrick (albeit indirectly). You are not the arbiter of what is and what is not an 'expert'. If you don't feel it required to believe astronomers' views on metaphysics as opposed to priests' why should we be required to believe virologists' views on disease as opposed to homeopaths?

To elaborate further, the astronomer likely asks a completely different question to a priest just as a virologist asks a completely different one to a homeopath. You can't use the fact that each has knowledge of far more details of their own beliefs to evade the question as to which one has the most fidelity to reality. In all four cases it is nigh on impossible for any of them to evaluate this themselves. Well, in theory a virologist should be able to peer through a microscope and observe everything happening in vitro exactly as they imagine it would in vivo, but, alas, no virologist has ever observed any non-trivial phenomena of this nature. This is why I keep on parodying your views as "government appointed experts" - because you have no absolutely no idea why you believe one set of experts over another. You can't remove yourself from your upbringing and go back to the beginning like I did.

If you could - and YOU couldn't - you would see that not only is vaccination questionable it is downright lunacy. Indeed the entire edifice of disease that we are taught is lunacy. It all comes crashing to the ground the moment you ask yourself why on earth doctors don't have the lifespan of a fruitfly. But as I say, logical impossibility means nothing unless you can accept that everything you have been told about this issue is garbage.

Like · 13 September 2013 at 14:56

Patrick Stokes "If you don't feel it required to believe astronomers' views on metaphysics as opposed to priests' why should we be required to believe virologists' views on disease as opposed to homeopaths? [...] You can't use the fact that each has knowledge of far more details of their own beliefs to evade the question as to which one has the most fidelity to reality.

- Both are in fact asking the same question insofar as, unlike the priest in your example, they're asking about the structure of the physical world – specifically, in this case, about the physical mechanisms involved in disease and about ways to intervene in these physical processes.

Each of them offers us a theoretical explanatory framework for disease. One of these frameworks is compatible with other well-supported theories about how the physical world works, the other is not. That already creates a prima facie reason to believe virology over homeopathy: for homeopathy to be based on true principles, we'd have to chuck out a bunch of other stuff we have reasons to believe to be true. Then, when faced with the evidence that homeopathy produces no therapeutic effect beyond placebo, homeopaths would have to start changing their auxiliary hypotheses in order to preserve their central theory. Revising auxiliary hypotheses or initial conditions is perfectly ok to an extent. But do that often enough with no corresponding predictive gain, and you have what Lakatos called a 'degenerating research program'. Now to be scrupulously fair here, there is no clear point at which it suddenly becomes clear that a research program is degenerating, nor any clear point at which you can say it has become indefensible.* And, before you say it, scientists can indeed cling stubbornly to degenerating programs as much as anyone else. But at some point, where you have a theory that is massively epistemically expensive (because we have to alter a shedload of other theories in order to accommodate it), can make no successful predictions or retrodictions (in this case, can't successfully predict therapeutic outcomes) and has no evidence in support of it – then yeah, it loses.

[Coming up after the break: Tristan opens with some blustery ad hominem and then asserts that virology is itself a degenerating research program].

Still, I'm glad you're once again admitting openly you reject the germ theory of disease. Apparently everyone since Pasteur has just been too blind (or corrupt) to see what you have seen. And to be clear: no, you did not "remove yourself from your upbringing" in any non-trivial sense. No-one does, and no-one can. And we don't all need to 'go back to the beginning' individually in any case: one thing epistemologists have started to realise in the last couple of decades is that reliance on the testimony of others is an unavoidable part of being able to know anything at all. Trust is inescapable.

*As a rule; one can imagine counterexamples. If I believed that MI6 murdered Diana, and then suddenly Diana emerged from hiding to announce she'd actually faked her own death, the "MI6 murdered Diana" research program suddenly looks indefensible, and any attempt to defend it by playing around with auxiliary hypotheses ("That's not the real Diana!") is pretty clearly part of a research program that's circling the drain. Like · 13 September 2013 at 16:15 · Edited

Tristan Wells I must say that this is an odd post as you have actually branched out into saying something substantive. Unfortunately it just reminds us all why you are usually so reluctant to do such a thing.

"Both are in fact asking the same question insofar as, unlike the priest in your example, they're asking about the structure of the physical world – specifically, in this case, about the physical mechanisms involved in disease and about ways to intervene in these physical processes."

Sorry, I should have been clearer. If a cosmologist says creation couldn't have involved divine intervention then on what basis do you have to say he isn't an "expert" on this matter?

I should say I don't use homeopathy and I know very little about it. It really annoys a bunch of people who deserve to be annoyed so it clearly has that going for it but I have no views on its efficacy.

"One of these frameworks is compatible with other well-supported theories about how the physical world works, the other is not."

I don't think either of them are quite frankly but some here may quite reasonably point out that I haven't looked sufficiently deeply into homeopathy to make such a harsh judgement. Virology on the other hand I hold no such reservations for - in every aspect it is incoherent. No idea where you get the idea it is well supported by other 'accepted' theories from. But then you have hardly been averse to speculative assumptions on this thread have you? If a pathogen can replicate inside our body autonomously it would be impossible for our body to fight it – it would be like the Sorcerer's Apprentice. Similarly, if our bodies are able to hold off the pathogens (viruses/bacteria/prions etc) that are on us all the time but only succumb when we are weak then clearly we would never be able to survive any type of infection (the moment one gets through our defences they all will in our weakened state).

But perhaps by "compatible with other well-supported theories" you just mean that it is also studied at universities.

"Then, when faced with the evidence that homeopathy produces no therapeutic effect beyond placebo,"

Do you not remember the discussion we had about not being able to know whether chemo was better than placebo? But for some reason that didn't stop you from declaring 'progress' on that front.

"Revising auxiliary hypotheses or initial conditions is perfectly ok to an extent. But do that often enough with no corresponding predictive gain, and you have what Lakatos called a 'degenerating research program'."

Oh, you mean like "boosters"? Vaccinated kids keep on coming down with the disease so we just revise our theory on immunity from meaning that "you can never get measles twice" or "those with cowpox never get smallpox" to "you can never get it more than once every couple of months". But perhaps you are referring to the fact that unlike say the measles virus, the flu virus is constantly mutating for some reason (hence a different strain's shot each year). But maybe you mean herd-immunity whereby we only need 50 60 70 90 99 per cent, every man and his dog revaccinated every five minutes to achieve this mythical accomplishment. But perhaps what you mean is Koch's Postulates themselves whereby it was originally decreed that in order to prove a germ was a pathogenic agent you needed to show that it always caused disease when introduced into a new organism. Unfortunately that fell by the wayside with the "discovery" of the dreaded asymptomatic carrier (you know, like those unvaxed babies you find so terrifying). But hey, if you want this to be a battle of which theory needs the most shoehorning then good luck with that!

But as you say, we need to make predictions for it to be useful so exactly what non-trivial, non-self-fulfilling prophecies has the germ theory made Patrick? I remember growing up and seeing images of the Grim Reaper bowling over little old ladies with AIDS which we were told was unavoidable unless we found a cure or vaccine. But here we are with neither of those things and yet somehow little old ladies seem remarkably unaffected by it all. And that is despite there being a dramatic increase in other supposed sexually transmitted diseases.

And then there was SARS or bird flu – which were supposed to kill us all too. The only "prediction" that is ever correctly made by the vaccine crowd is that when they introduce a vaccine doctors tend to look for that disease less (and describe people presenting with the same symptoms as having something else).

"But at some point, where you have a theory that is massively epistemically expensive (because we have to alter a shedload of other theories in order to accommodate it), can make no successful predictions or retrodictions (in this case, can't successfully predict therapeutic outcomes) and has no evidence in support of it – then yeah, it loses."

I love your world. Nothing bad ever happens, and in the rare times it does heroic bureaucrats and their trusty experts put a stop to this wasteful, counterproductive or destructive spending tout de suite. Do you have a name for this planet Patrick?

"[Coming up after the break: Tristan opens with some blustery ad hominem and then asserts that virology is itself a degenerating research program]."

Wow! Finally a sound prediction from the vaccine crowd! You foresaw that I would destroy your argument. Could you tell me what the lottery numbers will be Patrick?

"Still, I'm glad you're once again admitting openly you reject the germ theory of disease."

But Patrick, I thought you said you had no problems holding unpopular views? You were just telling me about how you are so incredibly courageous because you repeat word for word what is written in student newspapers but now here you are telling me I should be ashamed for holding a minority position.

"Apparently everyone since Pasteur has just been too blind (or corrupt) to see what you have seen. And to be clear: no, you did not "remove yourself from your upbringing" in any non-trivial sense. No-one does, and no-one can."

I just love that I am dealing with an "expert in logic" here who can't help contradicting himself in every paragraph. If nobody can remove themselves from what they have been told Patrick why on earth would you wait for those from within the hegemony to pinpoint what is wrong with it? You're probably going to be waiting a very long time aren't you?

I have changed my mind. They haven't. If you think that inertia is an immensely powerful force on this issue then clearly those who change their minds should be given the most credibility ceteris paribus.

" Trust is inescapable."

See my dozens of posts above about when trust is fine and when it isn't. But you didn't read/understand them then so I dare say you won't do so now. Like · 13 September 2013 at 18:05

Tristan Wells "inertia a force"???

Anyway, you know what I meant. Like · 13 September 2013 at 19:34

Patrick Stokes [Breaking this into two posts as it won't post for some reason - might be too long? Does FB do that?]

"Sorry, I should have been clearer. If a cosmologist says creation couldn't have involved divine intervention then on what basis do you have to say he isn't an "expert" on this matter?"

- Wait, should that be 'could' or 'couldn't'? Either way I suspect the answer here will just be that science involves a commitment to methodological naturalism. (But of course there's all sorts of interesting stuff in the background there about how necessary that commitment is and what it does and doesn't entail: was Newton not doing science when he posited divine intervention to explain the non-decaying orbits of the planets? Or was Laplace, who famously 'had no need of that hypothesis' to explain the orbits just doing better science?)

"Virology on the other hand I hold no such reservations for - in every aspect it is incoherent."

- And there it is. Like clockwork.

"No idea where you get the idea it is well supported by other 'accepted' theories from. But then you have hardly been averse to speculative assumptions on this thread have you? If a pathogen can replicate inside our body autonomously it would be impossible for our body to fight it – it would be like the Sorcerer's Apprentice."

- Hang on, are you now denying we *have* an immune system at all? Hey, remember what I was saying about auxiliary hypotheses? Might be a good moment to revisit that.

"Similarly, if our bodies are able to hold off the pathogens (viruses/bacteria/prions etc) that are on us all the time but only succumb when we are weak then clearly we would never be able to survive any type of infection (the moment one gets through our defences they all will in our weakened state)."

- So again, you're basically denying that we have any pre-existing immunity to *any* pathogen or that different pathogens produce diseases of different severities? Or are you denying that we can be more resistant to one than to another?

"But perhaps by "compatible with other well-supported theories" you just mean that it is also studied at universities."

- Well what I was getting at is that unlike homeopathy virology is compatible with our current understanding of physics, but if you want to go revising physics as well in order to accommodate homeopathy, good luck with that. But yes, universities are where people who systematically build knowledge usually work. But look, others have taken you to task for your simplistic view of how the relevant disciplines progress before, so I'll just quote Stephen Novella here from a blog post three years ago: "We have fleshed out (not simply by making up hypotheses but by thousands of experiments) many of the details of immune system function and its underlying genetics. We can see these cells in action, and are learning how to manipulate the immune system to prevent tissue rejection or reduce auto-immune diseases. We are certainly nowhere near a complete understanding of the immune system – it is very complex, but no knowing everything is not the equivalent of knowing nothing. Again – I invite Punter to pick up a basic textbook of immunology."

Not sure who this 'Punter' chap is, but my word, he gets a right shellacking in that post. I'd hate to be him right now.

"Do you not remember the discussion we had about not being able to know whether chemo was better than placebo? But for some reason that didn't stop you from declaring 'progress' on that front."

- Yes, the 'some reason' (which you ignored) being that if we know what a type of cancer typically does when left untreated we can see whether different types of chemo do to remission and survival rates. [And now we cross live to Tristan insisting 'Yes but we DON'T know because no-one has ever successfully observed anything!']

"Oh, you mean like "boosters"? Vaccinated kids keep on coming down with the disease so we just revise our theory on immunity from meaning that "you can never get measles twice" or "those with cowpox never get smallpox" to "you can never get it more than once every couple of months".But perhaps you are referring to the fact that unlike say the measles virus, the flu virus is constantly mutating for some reason (hence a different strain's shot each year)."

- Again, see Stephen's post.

"But maybe you mean herd-immunity whereby we only need 50 60 70 90 99 per cent, every man and his dog revaccinated every five minutes to achieve this mythical accomplishment."

- No, we don't, but don't let facts get in the way of a nice bit of rhetoric.

"But perhaps what you mean is Koch's Postulates themselves whereby it was originally decreed that in order to prove a germ was a pathogenic agent you needed to show that it always caused disease when introduced into a new organism. Unfortunately that fell by the wayside with the "discovery" of the dreaded asymptomatic carrier (you know, like those unvaxed babies you find so terrifying)."

- Seems like a perfectly valid example of revision in response to evidence to me, though you seem to be conflating postulates 1 and 3 there (asymptomatic carriers would fall under 1, infecting an organism would be 3). "All swans are white" went out the window when Europeans got to Australia too, but no-one concluded "and therefore we know absolutely *nothing* at all about swans!"

"I remember growing up and seeing images of the Grim Reaper bowling over little old ladies with AIDS which we were told was unavoidable unless we found a cure or vaccine. But here we are with neither of those things and yet somehow little old ladies seem remarkably unaffected by it all. And that is despite there being a dramatic increase in other supposed sexually transmitted diseases."

- Yeah I remember it from when I was a kid too (it's actually kind of surprising that we remember that: that ad ran for only three weeks!). So that's your masterstroke? One TV ad in 1987 had a little old lady in it, little old ladies haven't started dying of AIDS in big numbers, and *that's* your coup de grace for the germ theory?

Remind me, what was the point of those ads? Oh, that's right: to get people to change high-risk behaviours. (Wear condoms, stop sharing needles etc.). I don't suppose it could have, you know, worked? That high-risk population groups changed their behaviour because all their friends started dying?

"And then there was SARS or bird flu - which were supposed to kill us all too."

- So, there was an outbreak of a coronavirus that had a mortality rate of just under 10%, people did everything possible to reduce the possibility of transmission, and the epidemic was contained and eventually stopped. Yes, clearly a massive failure for the theory that diseases are caused by pathogens. Like · 13 September 2013 at 20:01

Patrick Stokes "The only "prediction" that is ever correctly made by the vaccine crowd is that when they introduce a vaccine doctors tend to look for that disease less (and describe people presenting with the same symptoms as having something else)."

- And of course you have research data to that effect?

- "I love your world. Nothing bad ever happens, and in the rare times it does heroic bureaucrats and their trusty experts put a stop to this wasteful, counterproductive or destructive spending tout de suite."

- Eh? (You get that 'epistemically expensive' doesn't have anything to do with money, right? That I'm saying a belief 'costs' us a lot when we have to rearrange a huge number of our other beliefs in order to accommodate it?)

"Do you have a name for this planet Patrick?"

- We call it Empirical Reality, Tristan. You should visit sometime. It's lovely this time of year.

"Wow! Finally a sound prediction from the vaccine crowd! You foresaw that I would destroy your argument."

- Then I foresaw wrong I'm afraid. Can't win 'em all.

"Could you tell me what the lottery numbers will be Patrick?"

- Sure: 6, 21, 3, 11, 25, 15, 21... nah, I have no idea what a 'lottery' even is. Is that something people who aren't receiving massive bribes from Big Pharma do?

"But Patrick, I thought you said you had no problems holding unpopular views? You were just telling me about how you are so incredibly courageous because you repeat word for word what is written in student newspapers but now here you are telling me I should be ashamed for holding a minority position."

- Unpopular doesn't always mean correct.

- "I just love that I am dealing with an "expert in logic" here who can't help contradicting himself in every paragraph. If nobody can remove themselves from what they have been told Patrick why on earth would you wait for those from within the hegemony to pinpoint what is wrong with it? You're probably going to be waiting a very long time aren't you? I have changed my mind. They haven't. If you think that inertia is an immensely powerful force on this issue then clearly those who change their minds should be given the most credibility ceteris paribus."

- What I said was you can't remove yourself from your upbringing. And the structure of scientific revolutions and how they come about is pretty well-studied. Funnily enough, there's a few steps that come after 'someone changes their mind' that are kind of important.

"See my dozens of posts above about when trust is fine and when it isn't. But you didn't read/understand them then so I dare say you won't do so now."

- Maybe I wasn't clear enough in my responses above then: the grounds you set are unduly narrow and don't acknowledge how pervasive testimony is. Tony Coady is the guy to read on this. Like · 13 September 2013 at 20:01

Greg Beattie Patrick, getting back to the relevance of the "vaccines brought about the decline in mortality" argument... we're not talking advertisements here. We're talking cultural trance.

Let's use your Red Bull experience. If the world actually believed the drink enabled them to fly, we would have a problem. People would be making all sorts of poor decisions for a start. But then there's government. What if they started legislating with that belief in place? Say they were considering making it compulsory so as to reduce congestion at airports... now we're on the same page.

Let's say there is clear evidence demonstrating the belief isn't sound. Is it relevant to bring this evidence to the attention of the legislators? We all know what you've been saying, but think again.

I say it's entirely relevant and extremely important. And I also say that if someone jumps up and says "Hey that's dishonest because it's irrelevant and doesn't prove that Red Bull *can't possibly* make you fly"... then they are most assuredly dishonest themselves. Either that, or they're fooling themselves. Like · 14 September 2013 at 10:03

Tristan Wells "Wait, should that be 'could' or 'couldn't'? Either way I suspect the answer here will just be that science involves a commitment to methodological naturalism"

You still didn't respond to the point.

- Hang on, are you now denying we *have* an immune system at all? Hey, remember what I was saying about auxiliary hypotheses? Might be a good moment to revisit that.

No. I don't believe in immune system memory – well there is (temporarily) building antibodies to poisons but that is a separate issue to "learning" how to attack an autonomously replicating pathogen.

"So again, you're basically denying that we have any pre-existing immunity to *any* pathogen or that different pathogens produce diseases of different severities? Or are you denying that we can be more resistant to one than to another?"

Let me help you out here. I reckon the whole thing is nonsense. IF I believed in the germ theory I would still believe that immune system memory was impossible. But obviously as I don't believe in germ theory the rest is a moot point isn't it?

"Well what I was getting at is that unlike homeopathy virology is compatible with our current understanding of physics,"

Oh ok. If you say so. I would have thought that the ability to fight off a self-replicating pathogen was hardly consistent with mathematical principles but there you go.

"but if you want to go revising physics as well in order to accommodate homeopathy, good luck with that."

Did you not read the part where I said I don't believe in homeopathy?

", so I'll just quote Stephen Novella here from a blog post three years ago: "We have fleshed out (not simply by making up hypotheses but by thousands of experiments) many of the details of immune system function and its underlying genetics. We can see these cells in action, and are learning how to manipulate the immune system to prevent tissue rejection or reduce auto-immune diseases. We are certainly nowhere near a complete understanding of the immune system – it is very complex, but no knowing everything is not the equivalent of knowing nothing. Again – I invite Punter to pick up a basic textbook of immunology."



Not sure who this 'Punter' chap is, but my word, he gets a right shellacking in that post. I'd hate to be him right now."

Haven't we established that you had no right to comment on the soundness of others' arguments in this debate?

Let me tell you about that post of Novella. It came from a debate I had with a Rob Webb. Now Rob was an extraordinary individual - a skeptic with integrity (you may need to look that up). Now, generally whenever I carve one of the arguments from skeptics here they will run back to the SAVN site and fish for reassurance and the rest of the clowns there all say "yeah, that Tristan sure is a fool. Fancy saying something that is unpopular. That just proves that everything he says is wrong and he is a fool." And after 100 equivalent posts on the same thread devoted to how stupid I must be the original poster feels much better about having their arguments torn to shreds here. But, believe it or not, that wasn't sufficient for Rob (remember the integrity thing I was telling you about?). When I gave him these arguments he wanted someone to explain why they were wrong rather than just laugh at me. He asked a guy who he assumed would know and Novella gave this. I have no desire to put words in Rob's mouth but I got the feeling he wasn't too impressed with Novella's answer. Anyway, 'Punter's' response is here:

http://nocompulsoryvaccination.com/2010/08/17/true-colours/ (the top most post).

To this day I keep thinking that the next skeptic I debate may be another Rob, but alas, they always let me down. I mean there was a brief moment where I thought you too would be open to reason. How wrong I was.

"Yes, the 'some reason' (which you ignored) being that if we know what a type of cancer typically does when left untreated we can see whether different types of chemo do to remission and survival rates. [And now we cross live to Tristan insisting 'Yes but we DON'T know because no-one has ever successfully observed anything!']"

Why are you so bad at this? I answered this precisely. If you didn't understand it you should have asked for clarification. But to help you out – testing the difference in untreated patients vs treated patients with a particular disease could be used to support homeopathy too. But you (quite reasonably) don't think that is valid because their tests (allegedly) don't take into account the placebo effect. I say "but if that is true for homeopathy then it is DEFINITELY true for chemo".



True colours

nocompulsoryvaccination.com

Today, I would like to share a few more of the abusive and threatening messages

Like · 15 September 2013 at 12:28 · Edited

See more

Tristan Wells "Oh, you mean like "boosters"? Vaccinated kids keep on coming down with the disease so we just revise our theory on immunity from meaning that "you can never get measles twice" or "those with cowpox never get smallpox" to "you can never get it more than once every couple of months".But perhaps you are referring to the fact that unlike say the measles virus, the flu virus is constantly mutating for some reason (hence a different strain's shot each year)."

"Again, see Stephen's post. "

See punter's. And his is both more coherent and, more importantly, a lot funnier. Why, as a non-biased observer I would almost describe it as a "shellacking".

"No, we don't, but don't let facts get in the way of a nice bit of rhetoric."

We don't vaccinate every five minutes? Who knew? Most people would have seen that as exaggeration for effect but considering your desperation I honestly wouldn't blame you if you used that to try and discredit everything else I say.

"Seems like a perfectly valid example of revision in response to evidence to me, though you seem to be conflating postulates 1 and 3 there (asymptomatic carriers would fall under 1, infecting an organism would be 3)."

It relates to both actually. The asymptomatic carrier presumably would have 'caught' it right? So out of 4 postulates we have to scrap two (well strictly speaking the third is 'should' as opposed to 'must' which renders it meaningless anyway). As for being a reasonable example of revision – how convenient! Of course the problem is that it renders the theory nigh on worthless. The best we can do is talk about germs being a co-factor in disease rather than the sole cause. Therefore our approach to eradicating disease through vaccination is horribly misguided. It MIGHT still be worthwhile to vaccinate – but we now need to measure that up against other potentially less costly and risky approaches.

Now, it should be stressed again that I do not accept even this watered down view of the germ theory. Germs are there for the healing. They are often there when we are sick but are not responsible for this.

"*that's* your coup de grace for the germ theory?"

I have a dozen points. Most of them on their own are absolutely devastating to the germ theory. That was

me simply illustrating that if you are looking for an escape by saying "well what about all the non-trivial predictions it makes" then you are going to have your work cut out.

"Remind me, what was the point of those ads? Oh, that's right: to get people to change high-risk behaviours. (Wear condoms, stop sharing needles etc.). I don't suppose it could have, you know, worked? That high-risk population groups changed their behaviour because all their friends started dying?"

You need to read everything I write Patrick. I have already thought of everything you could possibly write on this issue. Look at the last sentence about the INCREASE in sexually transmitted diseases during this period. Of course, I don't believe in such but you do so you would have to take that as demonstrating that our sexual behaviour is MORE risky than it was.

" Yes, clearly a massive failure for the theory that diseases are caused by pathogens."

Or it was never a problem in the first place. And how does quarantining work when you have asymptomatic carriers Patrick?

"And of course you have research data to that effect?"

Que? I realise you don't agree with it I was simply pointing out that were you to say "what about the disappearance of polio" that would be my retort. And by the way, I do have research data to that effect. Here is the WHO: http://apps.who.int/.../dise.../poliomyelitis/case_count.cfm. Of course, the WHO don't say this it is just that it is the only sensible thing to infer from their data. Take India for example, in 1996 they had 1005 cases of acute flaccid paralysis of which 1005 were polio. The global eradication program started just after and there were zero cases of polio in 2012. Unfortunately there were 61,000 cases of AFP.

"Sure: 6, 21, 3, 11, 25, 15, 21... nah, I have no idea what a 'lottery' even is. Is that something people who aren't receiving massive bribes from Big Pharma do?

Patrick trying to be funny.

"Unpopular doesn't always mean correct."

Thanks. But I think we both know that you are hoping to use the fact that I have an extremely unpopular view to poison the well for other views I hold that you fear are more likely to gain traction.

"Funnily enough, there's a few steps that come after 'someone changes their mind' that are kind of important."

Doubtless, but it doesn't alter the fact that if you think institutional inertia is significant then I can't imagine why you would base so many of your beliefs on the fact that the people within them are keen to maintain the status quo. By the way, in all these well studied scientific revolutions – how many come from within and how many from without? I assume you would have a fair idea and I can only imagine that they all come from within right? Otherwise, well, your arguments would be pretty bloody stupid wouldn't they?

"Maybe I wasn't clear enough in my responses above then: the grounds you set are unduly narrow and don't acknowledge how pervasive testimony is. Tony Coady is the guy to read on this."

I'm pretty sure your response was that all the keys to the universe could be found in peer-review.

World Health Organization - Global Polio Eradication Initiative

apps.who.int

The WHO OFFICIAL website of the largest ever disease eradication initiative - The Global Polio Eradication Initiative

Like · 14 September 2013 at 11:16

Tristan Wells "We call it Empirical Reality, Tristan. You should visit sometime. It's lovely this time of year."

Wow. And here I was thinking your 97 per cent figure was a, ummm, 'courageous' call but now apparently you think that there isn't a single example in all of human history of an error being institutionalised.

Here's a helpful hint Patrick, noting that you give me a lot more to work with than I do you, when you descend into 'smartarsery' it helps if you make it explicit what you base it on. It is far more effective that way.

Like · 15 September 2013 at 12:24 · Edited

Patrick Stokes In that case Greg you've put the cart before the horse. You're asking 'how did we get here?' before you've established where you actually are. You posit a crucial premise: "Let's say there is clear evidence demonstrating the belief isn't sound." And you're right to see that this premise has to be posited before the question 'how did the belief to the contrary come about/become so widespread?' becomes operative. But you haven't met the burden of establishing that premise yet – and as I keep saying, if you *do* want to establish that vaccines don't work, you're in the wrong place.

Like · 15 September 2013 at 23:13

Patrick Stokes The well-poisoning point is a fair one, Tristan, so it does fall to me to say how I think your germ theory denialism (hereafter GTD for the sake of space) is relevant here. It is of course quite possible to deny germ theory while believing that vaccines don't work and/or cause more harm than they

prevent. Nonetheless I think it's relevant here for two reasons:

Firstly, if you don't want to rely on GTD, then you have a considerably harder time dismissing evidence for the efficacy of vaccination (given that such evidence is predicted by germ theory, so if you were to accept germ theory you're left with the problem that apparently successful vaccination outcomes are just what we'd expect to see). Hence to de-fang apparent vaccination successes you've had to bring a number of drastic auxiliary hypotheses into play: incidence data is worthless, doctors systematically misdiagnose, doctors are biased against diagnosing diseases in individuals vaccinated against that disease, diseases have been renamed rather than eradicated, and so on. That escalating appeal to extra hypotheses, to return to my earlier point, is characteristic of a degenerating research program. If we had good reasons to believe GDT to be true, that would create a good reason to cling onto the vaccines-don't-work research program under those apparently degenerating conditions. If we don't have reason to believe GDT is true then the vaccines-don't-work program looks increasingly like it needs to be abandoned.

Secondly, I think it's emblematic of your reasoning in general. For instance: "I have a dozen points. Most of them on their own are absolutely devastating to the germ theory." This is something I've noticed a fair bit in other places: people who think otherwise highly successful theories can be overturned if you just point to one (or five, or twelve) apparent discrepancies. You see the same reasoning in everything from '9/11 Truthers' to anti-evolutionists: "If evolution is true, why can't it explain the following apparently errant bits of data?" And they then go on to assert that these objections are so self-evidently correct and fatal that anyone who doesn't immediately junk the (again, otherwise well-supported and explanatorially successful) theory on that basis is clearly bone-headed, corrupt, or both. It couldn't possibly be that the problems you've identified either aren't really problems or aren't decisive – no, it has to be everyone else who's wrong, however epistemically expensive that explanation turns out to be. I don't know if anyone has yet given that style of thinking a name. I'd call it Wellsian, but that sounds too much like "Wellesian," and film buffs still need that word for talking about Orson.

Couple of other quick points:

"You need to read everything I write Patrick. I have already thought of everything you could possibly write on this issue. Look at the last sentence about the INCREASE in sexually transmitted diseases during this period. Of course, I don't believe in such but you do so you would have to take that as demonstrating that our sexual behaviour is MORE risky than it was."

- Likewise, read everything I wrote: I raised the possibility that "*high-risk* population groups changed their behaviour."

"And how does quarantining work when you have asymptomatic carriers Patrick?" - From what I saw on the telly I seem to recall a lot of masks being involved...

"Patrick trying to be funny."

- Well I would never claim to have your mastery of the Wildean bon mot, Tristan.

"By the way, in all these well studied scientific revolutions – how many come from within and how many from without? I assume you would have a fair idea and I can only imagine that they all come from within right? Otherwise, well, your arguments would be pretty bloody stupid wouldn't they?

- Yes, they did all come from within, at least as far back as we can meaningfully talk about 'science' as a discrete domain of enquiry (i.e. roughly Early Modernity onwards). Your point?

"now apparently you think that there isn't a single example in all of human history of an error being institutionalised."

- I'm sure there are plenty, and nothing I've said has implied otherwise. Again, 'less than infallible' does not mean 'worthless.'

"when you descend into 'smartarsery' it helps if you make it explicit what you base it on. It is far more effective that way."

- One thing I will not accept advice on is how to be a smartarse. Got that well and truly down pat. Like \cdot 16 September 2013 at 02:12

Tristan Wells Aaaah yes. That old logical maxim that says that the burden of proof belongs to whoever disagrees with Patrick.

Like · 16 September 2013 at 08:15

Tristan Wells "It is of course quite possible to deny germ theory while believing that vaccines don't work and/or cause more harm than they prevent. Nonetheless I think it's relevant here for two reasons:"

Que? It would be impossible to think germ theory is wrong (and the term denial is stupid anyway – I don't deny that there is a germ theory and "denial" is just one more attempt to poison the well by associating people who don't agree with the hegemony on a scientific issue with people who don't trust the word of millions of people who eyewitnessed mass killings by the government - the only people who deny millions of eyewitness accounts of anything are those who defend vaccines) without also believing that vaccines don't work.

"Firstly, if you don't want to rely on GTD, then you have a considerably harder time dismissing evidence for the efficacy of vaccination (given that such evidence is predicted by germ theory, so if you were to accept germ theory you're left with the problem that apparently successful vaccination outcomes are just what we'd expect to see)."

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https://www.facebook.com/...living.wisdom/posts/10151677624316925?comment_id=27392333&reply_comment_id=28896679&offset=0&total_comments=525[1/01/2014 8:37:42 PM]
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The 'evidence' is a self-fulfilling prophecy based on the fact that people believe in germ theory (and that the vaccines will work). To say it has 'predicted' it is worthless. I realise you desperately want to believe it – and you are welcome to believe whatever you want on whatever flimsy grounds you choose – but I can't imagine how you think you are going to get traction amongst people who aren't infinitely credulous.

"Hence to de-fang apparent vaccination successes you've had to bring a number of drastic auxiliary hypotheses into play: incidence data is worthless"

Incidence data is perfect. It is exactly what we want. But we don't have it. Are you so foolish that you think you can get away with such lies or is it just that bad habits are too hard to break?

"doctors systematically misdiagnose, doctors are biased against diagnosing diseases in individuals vaccinated against that disease, diseases have been renamed rather than eradicated, and so on. That escalating appeal to extra hypotheses, to return to my earlier point, is characteristic of a degenerating research program."

Hahahahahahahahahahah!!!!! Says the guy who is absolutely certain that the rise in autism is no more than a function of changing diagnoses. Why can't you ever say you to yourself "what is Tristan's likely reply?". You have already ceded the point that doctors can systematically change diagnoses over time Patrick. The difference is that yours was just a "well maybe this has happened but I have no idea why but I really need it to be true to maintain my faith". Mine is an a priori consistent argument.

The burden of proof is on the positive. If the data has the likelihood of bias then you need to fix the bias, quantify it or at the very least look for corroborating data. The data you believe in has this likelihood which is why I looked at data that might have corroborated it which does not potentially suffer the same biases (health spending and disability data). Alas, not only does it not corroborate it it suggests the exact opposite of what the potentially biased data is showing. On the other hand, the idea that the rise in autism is real IS corroborated by such data (which does not share the same potential biases).

But as I say the burden of proof isn't on me it is on you. If I wanted to prove that vaccines cause autism I wouldn't bother with the statistics except as an auxiliary point I would look at challenge dechallenge rechallenge. But you need to prove they work first and foremost. All you have is biased data which cannot be corroborated by anything else (that doesn't suffer the same biases). In other words you have sweet FA. I reckon I have heaps for my hypotheses but it actually wouldn't matter if I had nothing at all. Like · 16 September 2013 at 17:04 · Edited

Tristan Wells "If we had good reasons to believe GDT to be true, that would create a good reason to cling onto the vaccines-don't-work research program under those apparently degenerating conditions. If we don't have reason to believe GDT is true then the vaccines-don't-work program looks increasingly like it needs to be abandoned."

I think you were just trying to state the bleeding obvious so that just this once you didn't get it wrong. But you still failed. Believing in germ theory in no way forces you to believe in immune system memory as a concept let alone a practice although obviously the latter is meaningless without the former.

"It couldn't possibly be that the problems you've identified either aren't really problems or aren't decisive"

Could be anything. But remember Patrick, one of us is more than happy for both sides to be heard. The other only deems one side should have that honour. Can you guess who's who?

And your analogies are invalid. It is one thing to say I don't understand how the mainstream story on what actually happened on September 11 2001 could have happened to saying "the US government did it or allowed it to happen". I know virtually nothing about truthers but my understanding is that not only are they saying "I can't fathom how the WTC7 building collapsed" but are actually saying "the US government was involved somehow". That is a massive epistemological leap but in a sense they have to make it otherwise their point would be trivial (or at least unclear). But it is not a leap I have to make when I critique the germ theory. I don't have to say what a better theory is all I have to do is say x, y and z make no sense. If society were to accept that the germ theory was spurious – even if it was replaced with complete ignorance – then that alone would have extraordinary consequences.

Creationists and 'truthers' are making a positive claim. So the burden of proof is as much on them as the belief they are critiquing and hence you have to weigh the likelihood of their theory against the 'accepted' one. I am not making a positive claim (at least not in this instance) so there is no weighing to do. If some of my points can't be answered then you just have to accept that the germ theory is nowhere near as certain as you would like to believe. I realise you will think this unfair, but I honestly didn't make up the laws of logic (there you go – I do follow authority!)

There is another salient point too. Let us say that homeopathy and vaccinations were contrary (or contradictory) and both equally likely to be effective. If you had to choose one it would definitely be homeopathy because the consequences of being wrong are negligible whereas the consequences of vaccination being wrong are enormous. But you trust doctors would happily admit en masse to making the most disastrous mistake in history. I don't. Some will and some do. But this practice will not stop because doctors issue a mea culpa.

At any rate I'm not sure where you are trying to go with all this. Are you saying that observations and logic should have no place in the makeup of a theory?

"You need to read everything I write Patrick. I have already thought of everything you could possibly write on this issue. Look at the last sentence about the INCREASE in sexually transmitted diseases during this period.

Of course, I don't believe in such but you do so you would have to take that as demonstrating that our sexual behaviour is MORE risky than it was."

"Likewise, read everything I wrote: I raised the possibility that "*high-risk* population groups changed their behaviour."

But then why would there be an improvement in one area but greater problems in others?

"- From what I saw on the telly I seem to recall a lot of masks being involved ... "

The entire world's population presumably... And it wouldn't be like TV news to falsely imply that images of a tiny sample are representative of the whole population.

"Yes, they did all come from within, at least as far back as we can meaningfully talk about 'science' as a discrete domain of enquiry (i.e. roughly Early Modernity onwards). Your point?

Really? Copernicus had no degrees save for theology and gave us the idea of the heliocentric universe. Lavoisier was hardly an insider either as he pretty much funded all his work himself outside of universities. There is also this list here http://amasci.com/weird/vindac.html and http://en.wordpress.com/tag/crackpotswho-were-right/ of people both inside and outside who were pilloried for their claims. Needless to say I don't agree with the 'discoveries' of many of them (Pasteur is on the list for example) but the point still stands.

"I'm sure there are plenty, and nothing I've said has implied otherwise. Again, 'less than infallible' does not mean 'worthless.""

I claimed that you lived in an absurd world whereby mistakes were never institutionalised. You said this world was simply that of empirical reality – so that is where you implied it. I could have made a more 'charitable' interpretation of your point but that would only have rendered it trivial.

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Like · 16 September 2013 at 16:17

Greg Beattie No Patrick, that was a woeful attempt at avoidance. There is a widespread belief: one which is material in the decision making process. In fact, I contend it's a central factor. I used *your* example of Red Bull enabling people to fly, and asked you to consider such a belief was widespread.

Your claim is that any evidence demonstrating the belief to be false is 'irrelevant'. In fact, you go further and suggest that anyone who presents such evidence is 'dishonest'.

I'm suggesting that that is clearly dishonest itself, because it desires the unchallenged perpetuation of a falsehood. Is there an alternative explanation for your behaviour?

You could have conceded this a long time ago and slipped off with your dignity intact. And note: the point has nothing to do with establishing that "vaccines don't work". Like · 16 September 2013 at 18:27

Patrick Stokes "Believing in germ theory in no way forces you to believe in immune system memory as a concept let alone a practice although obviously the latter is meaningless without the former."

- Which has no bearing at all on what I'm saying, namely, that *without* GTD the warrant for persisting with trying to prove vaccines don't work become considerably weaker.

"But remember Patrick, one of us is more than happy for both sides to be heard. The other only deems one side should have that honour. Can you guess who's who?"

- Well if you want your 'side' to demonstrate that it's worth listening to, you know what to do. That's what started this whole debacle: people who haven't done the hard yards of proper research insisting on equal time at the microphone with people who have.

"I know virtually nothing about truthers -"

- I envy you that.

- but my understanding is that not only are they saying "I can't fathom how the WTC7 building collapsed" but are actually saying "the US government was involved somehow". That is a massive epistemological leap but in a sense they have to make it otherwise their point would be trivial (or at least unclear)."

- Actually the point is more like this: 'I can't fathom how WTC7 collapsed [actually they claim this about all three buildings] therefore it cannot have happened the way the official story says it happened.' That's the bit of reasoning I'm objecting to: 'I can't understand how things could have happened as they are said to, therefore things must have happened differently.' There is, as you say, a further epistemic leap involved in positing a rival explanation, but that doesn't make the purely negative claim trivial.

"I don't have to say what a better theory is all I have to do is say x, y and z make no sense. If society were

to accept that the germ theory was spurious – even if it was replaced with complete ignorance – then that alone would have extraordinary consequences."

- Indeed, but see above.

"Creationists and 'truthers' are making a positive claim. So the burden of proof is as much on them as the belief they are critiquing and hence you have to weigh the likelihood of their theory against the 'accepted' one."

- They actually tend to make both negative and positive claims that are conceptually separable (though no doubt both groups often don't distinguish these claims). The positive claims would be e.g. 'intelligent design theory explains the observed data better than the theory of evolution' or 'a government conspiracy explains the observed events of Sept. 11 2001 better than the al Qaeda theory' while the negative claim would be 'evolution *cannot* explain the observed data' or 'the al Qaeda theory *cannot* explain the observed events of Sept. 11.' The negative doesn't depend upon positing a rival theory. As you say you're making the second type of claim here.

"If some of my points can't be answered then you just have to accept that the germ theory is nowhere near as certain as you would like to believe."

- And that's a much bigger 'if' than you seem to be allowing.

"But you trust doctors would happily admit en masse to making the most disastrous mistake in history. I don't. Some will and some do. But this practice will not stop because doctors issue a mea culpa."

- First you have to demonstrate in the literature it's a mistake, which you've not yet done. Get over that line before you worry about how practitioners are going to react.

"At any rate I'm not sure where you are trying to go with all this. Are you saying that observations and logic should have no place in the makeup of a theory?"

- I'm saying that one person pointing out what they believe to be weaknesses does not suddenly invalidate an otherwise well-established theory or evacuate it of whatever explanatory force it has.

"But then why would there be an improvement in one area but greater problems in others?"

- Possibly because lower-risk populations don't take the same precautions as people in high-risk populations do?

"The entire world's population presumably..."

- Since when did SARS affect the entire global population?

"Copernicus had no degrees save for theology and gave us the idea of the heliocentric universe."

- Copernicus' studies at the University of Antwerp included mathematics, optics, cosmography and astronomy before he went on to take a doctorate in Canon Law. It's not as if Copernicus was a non-scientist working outside a professionalised scientific establishment; to claim that would be anachronistically reading the current highly institutionalised disciplinary setup back into the past. Ditto Galileo for that matter. And Lavoisier? Yes, such a counter-establishment outsider that he was elected to the Académie des Sciences at age 26 and continued to present his work there pretty much up until the Revolution. He had private means and so didn't need a university post (not unlike Kierkegaard actually) but that doesn't entail that he was an outsider in the sense you're talking about. All these people were working within what, over the course of the Enlightenment, becomes an increasingly professionalised and specialised disciplinary framework. They weren't throwing stones from the outside saying 'No, that's all wrong,' they were scientist doing (and publishing) science in scientific forums.

Like · 16 September 2013 at 22:56

Patrick Stokes Greg, I'm finding it harder and harder to avoid the conclusion you are now simply being willfully obtuse. "Why does everyone think vaccines work?" is a wholly irrelevant (indeed, trivial) question if you haven't first established that they do not. If vaccines do work, then what is the relevance of saying that (some) people only believe they do because they believe an historical claim that is itself (on your interpretation) false? What possible more-than-merely-sociological interest would that claim, if established, have?

You assert that "There is a widespread belief: one which is material in the decision making process" – but you present no evidence that people are vaccinating their children because they hold a belief about history, and it would be an odd person who vaccinated not because they believe vaccines work but solely because they believe they were historically significant in some way. You might say 'well people only believe that vaccines work because they heard this story about historical declines in mortality' (and again that's a further empirical claim you would need to demonstrate) but that doesn't mean they're actually wrong to believe they work.

I get that you can't concede the point, because that would be tantamount to admitting you simply raise the historical point to create a negative impression of vaccines without having to show they don't actually work, and because you can't concede that we'll likely be posting on this thread until the end of time. So again: if you have credible evidence that vaccines do not work, submit your findings to peer review and publish. In the meantime, arguing about why you think ordinary people believe they do work is irrelevant, and in certain contexts, dishonest.

Like · 1 · 16 September 2013 at 22:57

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https://www.facebook.com/...living.wisdom/posts/10151677624316925?comment_id=27392333&reply_comment_id=28896679&offset=0&total_comments=525[1/01/2014 8:37:42 PM]
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Tristan Wells "Greg, I'm finding it harder and harder to avoid the conclusion you are now simply being willfully obtuse."

Fair call Patrick. Arguing that there is a fundamental difference between saying something has saved, and will likely continue to save, hundreds of millions of lives and saying that something has, and will, saved few, if any, lives is being willfully obtuse.

Didn't I warn you about spending so much time getting your ego stroked by the SAVNs? I'm sure it feels great and everything but it comes at the cost of any connection you had with reality.

"If vaccines do work, then what is the relevance of saying that (some) people only believe they do because they believe an historical claim that is itself (on your interpretation) false? What possible more-than-merelysociological interest would that claim, if established, have?"

What the hell are you going on about? We vaccinate because we believe in vaccination. Are you saying that if they worked but we incorrectly believed that they didn't then we would still vaccinate?

I just don't think you have this debating thing sorted Patrick. When you want to persuade someone you generally do so by countering those things they use to justify their views – you can counter other stuff if you like but it won't get you very far. The belief that vaccinations have a high probability of saving their child's life means a lot to a lot of people in deciding whether to vacciante and the reason people believe that vaccines have a high probability of saving their child's life is because of what they think has happened in the past therefore it is relevant. I honestly can't see for the life of me what the point is of you coming here and telling us not to use it – your very desperation only highlights how persuasive (and therefore relevant) you believe it must be.

Like · 17 September 2013 at 11:52

Tristan Wells "Which has no bearing at all on what I'm saying, namely, that *without* GTD the warrant for persisting with trying to prove vaccines don't work become considerably weaker. "

Sorry, I thought you said something completely ridiculous. As it so happens you just said something completely ridiculous.

"Warrant for persisting"?...Que? If the germ theory were true we would be looking for no less than divine intervention given that it would be nigh on impossible for any organism to survive. But the annoying thing about reality is that things don't just occur because you want it to be so.

"- Well if you want your 'side' to demonstrate that it's worth listening to, you know what to do. That's what started this whole debacle: people who haven't done the hard yards of proper research insisting on equal time at the microphone with people who have."

And I have told you several times: Nobody is demanding anything except the right of reply when we ourselves are criticised. Given your initial paper dragged you into this why won't you answer this: Do you believe that only published authors should be allowed to defend themselves?

"There is, as you say, a further epistemic leap involved in positing a rival explanation, but that doesn't make the purely negative claim trivial."

I said trivial or unclear. They might not be convinced that the right terrorists were blamed or that there was only the one group etc. That could certainly have non-trivial repercussions but I don't see it as requiring a massive epistemic leap. The point is that there are plenty of positions that require neither a suspicion of US government involvement nor that the official story is accurate but truthers generally appear to be suspicious.

"- And that's a much bigger 'if' than you seem to be allowing."

Didn't you say that homeopathy can be automatically discarded because it makes no sense? But for some reason when it comes to the germ theory you can forgive all manner of incoherence.

"- First you have to demonstrate in the literature it's a mistake, which you've not yet done. Get over that line before you worry about how practitioners are going to react. "

Haven't you ever heard of a hypothetical? My point is that doctors would tell you the exact same thing about vaccination regardless of the truth of the matter – so listening to their 'expertise' is like asking parents if they think their own children are beautiful. True or not you know what the answer is going to be. How was this not obvious?

"- I'm saying that one person pointing out what they believe to be weaknesses does not suddenly invalidate an otherwise well-established theory or evacuate it of whatever explanatory force it has."

Well-established = agrees with Patrick. Explanatory forces = begging the question.

"- Possibly because lower-risk populations don't take the same precautions as people in high-risk populations do?"

Let's go through this for you: If we put a weighting on high risk groups and then looked at the sum total of their behaviour change over the past few decades and then added the sum total of low risk groups' behaviour change do we get overall a) more risky behaviour; or b) less risky behaviour? Obviously this is

hard to measure but the question is: if it were the former then why hasn't HIV/AIDS spread more, if it were the latter then why has syphilis, gonorrhea, etc spread more?

"- Since when did SARS affect the entire global population?"

I'm quite sure that SARS as it was understood didn't affect anybody but according to the mainstream reports it was all over http://www.huffingtonpost.ca/.../11/sars-2013_n_2854568.html

"- Copernicus' studies at the University of Antwerp included mathematics, optics, cosmography and astronomy before he went on to take a doctorate in Canon Law. It's not as if Copernicus was a non-scientist working outside a professionalised scientific establishment; to claim that would be anachronistically reading the current highly institutionalised disciplinary setup back into the past."

But why wouldn't I do that Patrick? If peer-review material published in "reputable" academic journals is the be all and end all and you have said it is (you said that in the past few decades nothing had happened unless it came under those auspices) then why on earth shouldn't I extrapolate that back to the distant past? What changed to the laws of logic that meant that only peer-reviewed material was valid after the mid-20th century but before that anybody could say anything?

"He had private means and so didn't need a university post (not unlike Kierkegaard actually) but that doesn't entail that he was an outsider in the sense you're talking about. "

So presumably you wouldn't have a problem with people funding their own publications then? I agree he wasn't roundly pilloried I was just making the point that a guy who wasn't beholden to universities could completely change a scientific discipline.

"All these people were working within what, over the course of the Enlightenment, becomes an increasingly professionalised and specialised disciplinary framework. They weren't throwing stones from the outside saying 'No, that's all wrong,' they were scientist doing (and publishing) science in scientific forums."

Specialised? I suspect that most pre-20th century scientists would have taken the notion that they could only handle one discipline as a major insult. And as those links I provided showed, there were plenty of people throwing stones.



It's Been 10 Years: Where Did SARS Go?

www.huffingtonpost.ca

 $\ensuremath{\mathsf{TORONTO}}$ - For a little over four months in 2003, the world was gripped in the cl...

See more

Like · 17 September 2013 at 13:41 · Edited

Tristan Wells Now I know that you will either ignore or weasel your way out of this in your next response so I will put it in its own separate post so everybody can see your true nature.

"Nobody is demanding anything except the right of reply when we ourselves are criticised. Given your initial paper dragged you into this why won't you answer this: Do you believe that only published authors should be allowed to defend themselves?"

Like · 17 September 2013 at 16:34



Patrick Stokes "Sorry, I thought you said something completely ridiculous. As it so happens you just said something completely ridiculous."

- Which neatly demonstrates the broader point I've been making for the last three comments or so: you don't understand what someone is telling you, therefore it must be wrong, because you, Tristan Wells, couldn't possibly have failed to comprehend something.

So I'll rephrase. You assert that vaccines don't work ('core theory'). To defend that core theory from evidence to the contrary, you then have to say that a whole bunch of other things ('auxiliary hypotheses') are also true so as to invalidate the evidence that contradicts the core theory. Why go to those lengths when the more parsimonious move would be to accept that vaccines work? Well, if you have another, more basic core theory that would entail that vaccines *cannot* work, then you have a reason to persist in trying to show they don't.

In short, a prior commitment to GTD gives you a reason to go to greater lengths to try to show vaccines don't work than otherwise. I don't say *you* would have given up without believing in GTD, because giving up would invalidate your even more deeply cherished "Everyone but Tristan Wells is wrong and stupid" theory.

"If the germ theory were true we would be looking for no less than divine intervention given that it would be nigh on impossible for any organism to survive."

- And you're doing it again: 'I, Tristan Wells, have noticed the Big Flaw that brings the whole edifice crashing down.' Not 'I, Tristan Wells, have noticed something that I don't understand'; no, clearly you've spotted the glaring weakness that thousands of people over many decades were too stupid or corrupt to notice.

"Nobody is demanding anything except the right of reply when we ourselves are criticised."

- Nonsense. AVN and similar have consistently demanded much more than that. What your organisation

wants is for your views to be taken seriously despite being unable to validate them scientifically. You want your beliefs to have practical impact at the level of individual health consumers and at the level of public policy, but (on the most charitable interpretation) you aren't prepared to do the work necessary to demonstrate it deserves to have such impacts. I know you miss the old days when the media still spoke of a 'debate' and presented your President Emerita as an expert, but if you want to be treated as experts then you have to earn it and to accept the responsibility that comes with that. What most antivax activists seem to want, instead, is to be able to say whatever they want in the public sphere without taking any responsibility for what they say. They want free speech, but not the obligations that comes with it. Above all, they want their views validated for no other reason than that they hold them.

"Given your initial paper dragged you into this why won't you answer this: Do you believe that only published authors should be allowed to defend themselves?"

- No. That clear enough? But 'defending yourself' is a red herring here: either prove your claims to be true, or accept you have no reasonable entitlement to have them taken seriously.

"The point is there are plenty of positions that require neither a suspicion of US government involvement nor that the official story is accurate."

- Yes, that's precisely my point: the negative move ('the official story cannot be accurate') is separable from the positive move ('the US government did it or allowed it to happen').

"for some reason when it comes to the germ theory you can forgive all manner of incoherence." - What *you* take to be incoherence. Again, why this massive trust in your own abilities here Tristan?

"My point is that doctors would tell you the exact same thing about vaccination regardless of the truth of the matter so listening to their 'expertise' is like asking parents if they think their own children are beautiful." - Both uselessly hypothetical and utterly insulting to doctors, but then avoiding needless insult doesn't seem to be one of your core competencies.

"Well-established = agrees with Patrick. Explanatory forces = begging the question."

- No, 'well-established' means 'maximally coheres with the current knowledge base of the discipline' (which is also where explanatory force is demonstrated). But of course you think I mean "agrees with Patrick" because you appear to be incapable of seeing the production of knowledge as a fundamentally social rather than individual endeavour.

"if it were the former then why hasn't HIV/AIDS spread more, if it were the latter then why has syphilis, gonorrhea, etc spread more?"

- You're assuming that infection rates for syphilis, gonorrhoea etc. have risen among the same population groups though. If the question is 'Why haven't new HIV infections among the heterosexual population risen given other diseases have?' then that's a fair question, but it's just that: a question, not a knock-down objection. Answering it would, one assumes, involve looking very closely at the behaviour of the small percentage of HIV-positive heterosexuals (how sexually active are they relative to other heterosexuals? What risks do they take?). If in fact other STDs *are* rising among gay men and IV drug users, which sub-demographics are they rising among? To put it bluntly: in general, are the ones getting syphilis having unprotected sex with the ones with HIV, or do they belong to population groups that don't tend to interact sexually? (And what role do things like HIV screening have in that? How is HIV diagnosis changing sexual behaviour? And so on). I don't have answers to any of that of course, but what it demonstrates is that we shouldn't expect to be able to invalidate a theory just by pointing to apparently incongruent top-line data.

"What changed to the laws of logic that meant that only peer-reviewed material was valid after the mid-20th century but before that anybody could say anything?"

- Disciplines professionalise, and as they do, they develop better quality assurance mechanisms. Peer review doesn't magically confer truth-value on something (obviously); it's simply a mechanism for weeding out the stuff that's obviously flawed so we're not constantly wasting our time reading rubbish or running down blind alleys.

"So presumably you wouldn't have a problem with people funding their own publications then?"

- Not necessarily. In some disciplines it's standard to pay a publication fee to journals, and occasionally some academic publishers will ask for a contribution towards defraying production costs of a monograph that's unlikely to sell more than a few dozen copies. Normally these would be paid for from institutional or project budgets but if someone paid for it out of their own pocket that doesn't seem objectionable. But that is a long way from self-publishing, where there is no peer review and no meaningful quality control in place.

[For the record: I have grave reservations about the commercial model that currently underpins academic publishing – not because I think it produces bad or biased publications, but because it creates purely economic barriers to entry and access, and because publishers making money off the volunteer labour of writers and referees (worth £1.9 billion annually on one estimate, and that's just the refereeing) is more than a little galling.]

"Specialised? I suspect that most pre-20th century scientists would have taken the notion that they could only handle one discipline as a major insult."

- I said 'increasingly specialised' didn't I? As the knowledge base increases greater specialisation is inevitable. Like · 17 September 2013 at 18:11

Grea Peattie

Greg Beattie Of course when you're in a corner, Patrick, one tactic is to pretend you aren't following things. Mind you, you've been squeezed into a corner on several other things by Tristan, but I guess with this one your character is on the line.

One thing I learned a long time ago is that, whenever you back someone into a corner, always leave a door open. That way they have the option of salvaging their integrity. Your door has always been open, but it's slowly closing. All you ever needed to do was say something like "Oh sorry, my mistake. I didn't understand the point the first time you brought it up."

One more time... and again, we'll do it without mentioning "vaccination" because that appears to be what sends your logic flying. It's Red Bull, and it's *your* analogy. You said they could have an advertising slogan promising we could fly if we drank it... but "so what?" I asked you to consider the situation where the advert had worked so well that practically everyone believed it... and that things had gotten to the point where legislators were wanting to make the drink compulsory to ease congestion at airports.

Now... let's say someone jumped up and said "I can demonstrate that the belief is not sound, and is only built on an advertising slogan" ... and they went on to do so. Would you say that this info is 'irrelevant'? Would you go further and claim they are dishonest?

And remember, we aren't evaluating their evidence... just the act of providing it. Once we get past this we can relate it back to vaccination.

Like · 18 September 2013 at 09:31

Tristan Wells "So I'll rephrase. You assert that vaccines don't work ('core theory'). To defend that core theory from evidence to the contrary, you then have to say that a whole bunch of other things ('auxiliary hypotheses') are also true so as to invalidate the evidence that contradicts the core theory. Why go to those lengths when the more parsimonious move would be to accept that vaccines work? Well, if you have another, more basic core theory that would entail that vaccines *cannot* work, then you have a reason to persist in trying to show they don't.

In short, a prior commitment to GTD gives you a reason to go to greater lengths to try to show vaccines don't work than otherwise."

So I'll rephrase. You assert that vaccines don't cause autism. To defend that core theory from evidence to the contrary, you then have to say that a whole bunch of other things (auxiliary hypotheses) are also true so as to invalidate the evidence that contradicts the core theory. Why go to these lengths when the more parsimonious move would be to accept that vaccines cause autism?

In short, a prior commitment to ingratiate yourself to the status quo and win lots of twitter followers gives you a reason to go to greater lengths to try to show vaccines don't cause autism.

Let me help you out here: There is NOTHING remarkable about the idea that doctors will be biased in their diagnoses if they believe the patient has been treated and the treatment works. Indeed it is the very foundation for the "double" in double-blind placebo controlled trial. EVERY part of medicine assumes this to be the case EXCEPT vaccinations which, as we all know, are different. Just like challenge dechallenge rechallenge is considered definitive proof of side effects in EVERY medicine EXCEPT vaccines.

Auxiliary hypotheses would mean I approach vaccines epistemically in a different way that I do other medicines. But I don't. You do. Because you get the same outcome as everybody else you blindly assume that the same approach has been followed.

"- And you're doing it again: 'I, Tristan Wells, have noticed the Big Flaw that brings the whole edifice crashing down.' Not 'I, Tristan Wells, have noticed something that I don't understand'; no, clearly you've spotted the glaring weakness that thousands of people over many decades were too stupid or corrupt to notice."

Aaah yes the old "if the mistake is so obvious someone else must have picked it up before you" gambit. It sounds so appealing until you spend 30 seconds looking through history.

It is precisely the fact that it is so obviously wrong that keeps it all going. Nobody else can believe that they can see what everybody else has missed. But being able to do precisely that, you see, is my gift.

"- Nonsense. AVN and similar have consistently demanded much more than that. What your organisation wants is for your views to be taken seriously despite being unable to validate them scientifically. You want your beliefs to have practical impact at the level of individual health consumers and at the level of public policy, but (on the most charitable interpretation) you aren't prepared to do the work necessary to demonstrate it deserves to have such impacts. I know you miss the old days when the media still spoke of a 'debate' and presented your President Emerita as an expert, but if you want to be treated as experts then you have to earn it and to accept the responsibility that comes with that. What most antivax activists seem to want, instead, is to be able to say whatever they want in the public sphere without taking any responsibility for what they say. They want free speech, but not the obligations that comes with it. Above all, they want their views validated for no other reason than that they hold them."

So your point is just totalitarian drivel then. Thanks for clearing that up.

Inasmuch as your article had any point it was to say that journalists should never talk to us and ask us for our point of view. Inasmuch as you are trying to spin it now it is just incoherent drivel. How could Greg or Meryl 'demand' to be taken seriously? What does that even mean?

As for accepting responsibility – I can only assume you find it appalling that vaccine producers and doctors are shielded from liability for any damage their products cause then?

I mean imagine how hypocritical you would have to be to think that WE should be held liable just for saying

stuff but you believed that pharma companies, health bureaucrats and doctors should bear absolutely no responsibility if they were to make, approve or inject a drug that killed or disabled a child?

Lucky you are a man of utmost integrity (you read Kierkegaard and stuff) so I look forward to reading your next article about how vaccines should have the same legal liability as any other consumer product lest those deemed 'experts' miss their opportunity to have the responsibility you presumably believe they are so desperate to have.

Like · 18 September 2013 at 12:48



Tristan Wells "- No. That clear enough? But 'defending yourself' is a red herring here: either prove your claims to be true, or accept you have no reasonable entitlement to have them taken seriously."

And by the way Patrick, you may or may not have noticed that many people on your side DO take us seriously. Hence the abuse, hence the calls for censorship etc. The entire point of the SAVN is that they absolutely do take us seriously and see our arguments as genuinely threatening to their precious status quo. And you are right there with them.

If all you actually believe is that we simply shouldn't be taken seriously then how could you possibly justify spending so much time on this issue?

"- What *you* take to be incoherence. Again, why this massive trust in your own abilities here Tristan?"

Like I said above, I have a gift that enables me to point out the bleeding obvious even when everybody else is desperate to cling to fairy tales. Believe me, if these points weren't bleedingly obvious I would never have picked them up. But they are.

"- Both uselessly hypothetical and utterly insulting to doctors, but then avoiding needless insult doesn't seem to be one of your core competencies."

Aaah yes. We mustn't question the injection of foreign substances into babies because it might affect the delicate sensibilities of people who earn half a million dollars a year and are worshipped by society. The parents and children who are collateral damage are of no consequence. The only thing that matters is the reputations of our glorious medical men and women. Nothing beats recoiling in righteous indignation to evade the issue.

I should clarify here, I hate the notion of equality as much as I hate vaccines but I can't for the life of me imagine why you would want to try and persuade people who have to sacrifice so much trying to deal with what medicine destroyed that they should shut their mouths lest they offend people who make five times their income and have every politician and journalist in the country fawning over them.

" But of course you think I mean "agrees with Patrick" because you appear to be incapable of seeing the production of knowledge as a fundamentally social rather than individual endeavour."

Thank you. Now I see where you are coming from. We have a collective consciousness. People like me seek only to undermine it with my mischievous independent thoughts. If only I could be made to understand that the truth is far less important than consensus.

When I think of collective thinking I think of witch-hunts, pogroms and skulls piled high in Kampuchea. I must say I never think of science or wisdom but there you go.

"- You're assuming that infection rates for syphilis, gonorrhoea etc. have risen among the same population groups though."

 $http://www.reuters.com/.../us-syphilis-idUSTRE7705UT20110801 \ \text{for 'high risk' groups} \ and$

http://www.eurosurveillance.org/ViewArticle.aspx... for 'low risk' groups.

But anyway good try.

"Answering it would, one assumes, involve looking very closely at the behaviour of the small percentage of HIV-positive heterosexuals (how sexually active are they relative to other heterosexuals? What risks do they take?)."

Yep. We could make excuses and ad hoc explanations 'til the cows come home for the failures of the predictive nature of germ theory. Just as 'alternative' medicine could do the same for any failures in their predictions. My conclusion, you can think what you like about the 'alternatives' but you can't escape the fact that germ theory appears not to have any sort of episteimic superiority over any of them.

"I don't have answers to any of that of course, but what it demonstrates is that we shouldn't expect to be able to invalidate a theory just by pointing to apparently incongruent top-line data."

First you seemed to be saying that listing lots of different incongruities was a waste of time, now you are saying that just the one incongruity isn't sufficient.

" Normally these would be paid for from institutional or project budgets but if someone paid for it out of their own pocket that doesn't seem objectionable. But that is a long way from self-publishing, where there is no peer review and no meaningful quality control in place."

I read and reviewed Greg's book (it passed by the way). I am his peer, ergo – peer-reviewed. What is your problem?

"- I said 'increasingly specialised' didn't I? As the knowledge base increases greater specialisation is inevitable"

I should have gone further. I think that theoretical science for the past century has been appalling. Of course you would beg to differ but regardless, your arguments here rest on the assumption that ever since specialisation and peer-review theoretical science has taken massive leaps forward. I would argue that it is the exact opposite (needless to say that doesn't apply to engineering, IT etc).

Specialisation is generally fantastic for economies (barring transactions costs) but it doesn't follow that it is ideal for science. It may be the case that cave drawings tell us a lot about astrophysics for instance but we will never know under your preferred method of scientific discovery.



Syphilis up among minority gay, bisexual men

NEW YORK (Reuters Health) - The rising U.S. syphilis rate appears to be dispropo...

Like · 18 September 2013 at 12:52

Patrick Stokes Ok, let's stick with the Red Bull example for the moment (horrid stuff though Red Bull is – and the Jaegerbomb in turn is just plain evil) as perhaps it will help you see the flaw in your argument – though again, I suspect you're simply pretending not to see it at this point. You say:

"let's say someone jumped up and said "I can demonstrate that the belief [that Red Bull gives you wings] is not sound, and is only built on an advertising slogan" ... and they went on to do so. Would you say that this info is 'irrelevant'? Would you go further and claim they are dishonest?"

Now, in that example, the person is proposing to demonstrate the truth of not one assertion, but two:

1) The proposition "Red Bull gives you wings" is untrue

www.reuters.com

See more

2) The reason people believe the proposition "Red Bull gives you wings" is advertising.

The first assertion is an empirical claim about the wing-related effects of Red Bull. The second is an assertion about how people acquire certain beliefs about the wing-related effects of Red Bull. And the significance of the second assertion depends upon the first, but not vice versa: if the belief is sound, then the second assertion becomes either false (people believe Red Bull gives you wings because it actually does) or trivial (people believe something that is in fact true for reasons that are not themselves adequate grounds for belief – interesting fodder for sociologists and marketers, but not relevant to the question of whether we should or should not use Red Bull to reduce airport congestion).

So our anti-Red Bull activist owes us a demonstration that Red Bull does not give you wings *before* going on to assert that we're all in some sort of advertising-induced 'trance.' The reason people believe Red Bull gives you wings don't seem terribly important if Red Bull does, in fact, give you wings. But now imagine that, when pressed, our activist friend tries to use 2), the claim that advertising is why people believe the proposition "Red Bull Gives you wings," to try to establish 1) i.e. the untruth of the proposition itself. It can't. And if the activist continues doing so, we find ourselves confronted with two options: the activist doesn't understand his own arguments, or the activist is simply trying to use 2) to try and make Red Bull look bad, so leading people to lean towards 1) without his having to demonstrate that 1) is true.

Which brings us back to your arguments against vaccines. The equivalent assertions here would be:

- 1') The proposition "Vaccines save lives" is untrue
- 2') The reason people believe the proposition "Vaccines save lives" is advertising.

Again, the significance of 2') would depend entirely on the truth or falsity of 1'). And yet, despite having not established this, you persist in pulling out the mortality graphs. (Word is you even brought big laminated versions to the ADT hearing?). So: are you not in control of your own arguments, or are you simply trying to appeal to the 'marketing' story to cast doubts on the efficacy of vaccines even though it has no bearing on that question?

It's interesting you raise the issue of character. I guess the real test of character here is whether you'll finally acknowledge, based on the reasoning above, that appealing to historical mortality data to establish a well-poisoning conclusion that has no bearing on the policy is an illegitimate move. And then, on that basis, maybe apologise to the Queensland Parliament, to your members, and to the thousands of professionals whose work you've impugned and the untold number of parents who may have persuaded them to put their kids at risk on the basis of scientifically undemonstrated claims that you have supported.

Or, if you want to avoid all that by showing 2') to have significance, you'll need to demonstrate the truth of 1') – that is, go forth and publish peer-reviewed evidence demonstrating that vaccination does not work.

Like · 18 September 2013 at 16:01

Tristan Wells What is this?

I don't even...

Firstly, the graphs show that the likelihood of your life being saved by a vaccine is much smaller (if indeed it is positive at all) than what people are generally told. This changes the cost - benefit ratio immensely. How you can think that there is zero difference between a vaccine having a one in a million chance in saving your life vs a 1 in 10 or 1 in 100 chance is beyond me. No doubt some people would continue to vaccinate if the true history was told, but at the margins it would most certainly make a difference. Indeed, I suspect that it would be a bloody big margin.

Secondly, it is perfectly OK to poison the well if people are demanding to be treated as authorities. If those 'authorities' have a clear vested interest or a history of lying or exaggerating then any claim to authority they may have evaporates.

Like · 18 September 2013 at 16:46

Patrick Stokes "You assert that vaccines don't cause autism. To defend that core theory from evidence to the contrary, you then have to say that a whole bunch of other things (auxiliary hypotheses) are also true so as to invalidate the evidence that contradicts the core theory. Why go to these lengths when the more parsimonious move would be to accept that vaccines cause autism?"

- Nice try (actually no, just lazy), but there's no credible evidence and no auxiliary hypotheses in play.

"In short, a prior commitment to ingratiate yourself to the status quo and win lots of twitter followers gives you a reason to go to greater lengths to try to show vaccines don't cause autism."

- Hang on, how many Twitter followers do you think I actually have? And how many of those do I 'owe' to this issue? One of us seems weirdly fixated on my Twitter account, and it ain't me.

"EVERY part of medicine assumes this to be the case EXCEPT vaccinations which, as we all know, are different. Just like challenge dechallenge rechallenge is considered definitive proof of side effects in EVERY medicine EXCEPT vaccines."

- Still waiting to hear how we 'dechallenge' a vaccine.

"Auxiliary hypotheses would mean I approach vaccines epistemically in a different way that I do other medicines."

- The fact you haven't even understood what 'auxiliary hypotheses' means is instructive. A. "Vaccines don't work." B. "Here's a stack of statistical data showing they do." C. "Oh no, the diagnoses are wrong." In that exchange, C. is an auxiliary hypothesis: something you have to assert to be true just to prop up your theory.

"Nobody else can believe that they can see what everybody else has missed. But being able to do precisely that, you see, is my gift."

- Well then, Gifted One, why are you wasting your time here arguing with the likes of me? Don't hide your epoch-defining talents under a bushel! Go! Publish! For the good of humanity!! Seriously, you can't sustain an argument for more than two sentences, and yet seem to think you're more clear-sighted than everyone else on earth?

"So your point is just totalitarian drivel then. Thanks for clearing that up."

- Wow, what a comeback. See what I mean about not being able to sustain an argument?

"How could Greg or Meryl 'demand' to be taken seriously? What does that even mean?"

- Well, let's see. They both present themselves as experts in the media, both think their opinions are important enough to be heard by parliament, and the President Emerita seems determined to challenge anyone with a pulse to a public debate. So yes, they continually demand a position of epistemic authority they haven't earned.

"As for accepting responsibility – I can only assume you find it appalling that vaccine producers and doctors are shielded from liability for any damage their products cause then?"

- Should drug companies be responsible for the quality control of their product? Yes. I don't see that doctors should be liable if they administer properly however.

"The entire point of the SAVN is that they absolutely do take us seriously and see our arguments as genuinely threatening to their precious status quo. And you are right there with them."

- They're 'genuinely threatening' in that it's easy for people to be taken in by them. If you think SAVN thinks you're going to suddenly prove vaccines don't work, you're, dare I say it, "fooling yourselves."

"If all you actually believe is that we simply shouldn't be taken seriously then how could you possibly justify spending so much time on this issue?

- Personally? Because of three things I dislike: needlessly sick kids, claims of false expertise, and crappy argument. In roughly that order.

"We mustn't question the injection of foreign substances into babies because it might affect the delicate sensibilities of people who earn half a million dollars a year and are worshipped by society."

- Your GP earns half a mill? Man, am I in the wrong gig.

"The parents and children who are collateral damage are of no consequence. The only thing that matters is the reputations of our glorious medical men and women. Nothing beats recoiling in righteous indignation to evade the issue."

- And the kids who get sick because their parents listened to you and suffer actual consequences? What about them?

"I should clarify here, I hate the notion of equality as much as I hate vaccines-"

- Wow. Sorry, ladies, he's spoken for.

"-but I can't for the life of me imagine why you would want to try and persuade people who have to sacrifice so much trying to deal with what medicine destroyed that they should shut their mouths"

- That they blame medicine for something doesn't automatically mean they're right. I have huge sympathy for people bringing up children with serious medical problems; I don't pretend to understand their experience, but I get the desire to have something or someone to blame when awful things happen. But apportioning blame in the wrong place doesn't help anyone in the long run.

"Thank you. Now I see where you are coming from. We have a collective consciousness. People like me seek only to undermine it with my mischievous independent thoughts. If only I could be made to understand that the truth is far less important than consensus."

- You seem to think you have some sort of direct, infallible and non-socially-mediated access to "The Truth." All part of your magical gift I assume?

"First you seemed to be saying that listing lots of different incongruities was a waste of time, now you are saying that just the one incongruity isn't sufficient."

- That's the same point!! Incongruities don't automatically invalidate an otherwise well-supported theory. Noting apparently anomalous data is the start of an investigation, not the end of one. You're actually accusing me of inconsistency because I said the same thing twice? ("First you didn't want me to get the pony, now you want me to take it back! Make up your mind." – Homer Simpson).

"I read and reviewed Greg's book (it passed by the way). I am his peer, ergo – peer-reviewed. What is your problem?

- Ah you're a demonstrated expert in a relevant discipline now? Because you don't seem to have troubled the scorers much at either PubMed or Google Scholar – an author search just turns up some co-written reports for what I assume to be your employer (who I won't name here due to legitimate privacy considerations) which don't themselves appear to be peer-reviewed. Again, stop squandering your precious gifts, man! Go forth and publish!

"I should have gone further. I think that theoretical science for the past century has been appalling [...] (needless to say that doesn't apply to engineering, IT etc)."

- Yes, like the discovery of DNA, for instance. Massive disappointment. Lift your game, science. Like · 18 September 2013 at 18:04

Patrick Stokes "Firstly, the graphs show that the likelihood of your life being saved by a vaccine is much smaller (if indeed it is positive at all) than what people are generally told."

- No, they don't, because they don't tell us anything about efficacy at all. So the rest of your reply is moot.

"Secondly, it is perfectly OK to poison the well ... "

- So basically it's ok to argue dishonestly if you think your opponent is a jerk?

Finally, the correct Internet phrasing is "what is this I don't even" i.e. no punctuation apart from the apostrophe. Proper memesmanship is crucial. Like · 18 September 2013 at 18:08

Tristan Wells "- No, they don't, because they don't tell us anything about efficacy at all. So the rest of your reply is moot."

Ummm, they tell us something about mortality - indeed a lot about mortality. So the rest of my point isn't moot.

"- So basically it's ok to argue dishonestly if you think your opponent is a jerk?"

No. It is OK to point out that someone who wants to be trusted shouldn't be.

Like · 18 September 2013 at 18:44

Tristan Wells You assert that vaccines don't cause autism. To defend that core theory from evidence to

the contrary, you then have to say that a whole bunch of other things (auxiliary hypotheses) are also true so as to invalidate the evidence that contradicts the core theory. Why go to these lengths when the more parsimonious move would be to accept that vaccines cause autism?"

"- Nice try (actually no, just lazy), but there's no credible evidence and no auxiliary hypotheses in play."

Again, credible = agrees with Patrick. No wait! Agrees with the collective consciousness known as 'experts'. And by sheer unadulterated coincidence it just so happens that all those deemed to be collective consciousnesses known as 'experts' all agree with Patrick!

"EVERY part of medicine assumes this to be the case EXCEPT vaccinations which, as we all know, are different. Just like challenge dechallenge rechallenge is considered definitive proof of side effects in EVERY medicine EXCEPT vaccines."

"- Still waiting to hear how we 'dechallenge' a vaccine."

Well wait no more. Go back up a few posts where I explain it.

"- The fact you haven't even understood what 'auxiliary hypotheses' means is instructive. A. "Vaccines don't work." B. "Here's a stack of statistical data showing they do." C. "Oh no, the diagnoses are wrong." In that exchange, C. is an auxiliary hypothesis: something you have to assert to be true just to prop up your theory. "

Since the widespread use of vaccines there has been a massive increase in childhood disability and a dramatic rise in healthcare spending. B. Here's statistical data showing that has happened. C. Oh no, the diagnoses are wrong. We can do this forever – as you say even for someone as lazy as I am this is an easy argument.

"Nobody else can believe that they can see what everybody else has missed. But being able to do precisely that, you see, is my gift."

"Well then, Gifted One, why are you wasting your time here arguing with the likes of me? Don't hide your epoch-defining talents under a bushel! Go! Publish! For the good of humanity!!"

Oh thanks Patrick! So nice of you to volunteer to get my work published and distributed. Seems odd that you would do so considering you don't think I should be allowed to be heard but there you go.

"How could Greg or Meryl 'demand' to be taken seriously? What does that even mean?"

"- Well, let's see. They both present themselves as experts in the media, both think their opinions are important enough to be heard by parliament, and the President Emerita seems determined to challenge anyone with a pulse to a public debate. So yes, they continually demand a position of epistemic authority they haven't earned."

No. They have a (strong) opinion. You equate that to them a) pretending to be authoritative; and b) expecting the use of coercion or some such to ensure that everybody listens to and believes them.

"- Should drug companies be responsible for the quality control of their product? Yes. I don't see that doctors should be liable if they administer properly however."

So you agree then that doctors are completely worthless as authorities on the safety or otherwise of the vaccines they administer?

"- They're 'genuinely threatening' in that it's easy for people to be taken in by them. If you think SAVN thinks you're going to suddenly prove vaccines don't work, you're, dare I say it, "fooling yourselves.""

So you admit that everybody at the SAVN believes in vaccines dogmatically and there is nothing that could possibly make them change their mind? Yep. With you there Patrick. You see I don't know about this post – it seemed so hostile in your language but you seem to be agreeing with me on everything.

"- Personally? Because of three things I dislike: needlessly sick kids, claims of false expertise, and crappy argument. In roughly that order."

But none of those things are "serious" though apparently.

But I have to ask – given that you don't believe we have a 'right' to be taken seriously if by chance we are taken seriously – whose fault is that ours or theirs?

"- Your GP earns half a mill? Man, am I in the wrong gig."

And you still evaded the point.

"- And the kids who get sick because their parents listened to you and suffer actual consequences? What about them?"

You think hearing words makes people sick? Maybe I do have no right to question the germ theory after all because I have never been made aware of that mode of causality.

"-but I can't for the life of me imagine why you would want to try and persuade people who have to sacrifice so much trying to deal with what medicine destroyed that they should shut their mouths"

"That they blame medicine for something doesn't automatically mean they're right. I have huge sympathy for people bringing up children with serious medical problems; I don't pretend to understand their experience, but I get the desire to have something or someone to blame when awful things happen. But apportioning blame in the wrong place doesn't help anyone in the long run. "

So you don't understand their experience but you know they are wrong. Got it. And why would they seek to apportion blame to their own conscious decision? Since when do people scapegoat their own choices? A choice made under enormous societal pressure mind but their own choice nonetheless. The people on this site are those brave enough to admit they made a mistake.

"Ah you're a demonstrated expert in a relevant discipline now? Because you don't seem to have troubled the scorers much at either PubMed or Google Scholar – an author search just turns up some co-written reports for what I assume to be your employer (who I won't name here due to legitimate privacy considerations) which don't themselves appear to be peer-reviewed. Again, stop squandering your precious gifts, man! Go forth and publish! "

So you agree then that Lavoisier was an outsider too?

But anyway I think I have it now. Peer-review gives quality control and therefore if it is peer-reviewed it is better. But you can't let anybody peer-review it it has to be someone that is an 'expert'. And what defines an expert? Well it is someone who has written lots of stuff that has been peer-reviewed by other experts. And what made them experts? Well that is the 64,000 dollar question that Patrick never answers for some reason.

"I should have gone further. I think that theoretical science for the past century has been appalling [...] (needless to say that doesn't apply to engineering, IT etc)."

"- Yes, like the discovery of DNA, for instance. Massive disappointment. Lift your game, science."

Oh mercy! Firstly it was first discovered in the 19th century, and if you are referring to the Watson Crick paper this wasn't peer-reviewed!

But you're right. You are much better at this than I am. Like · 18 September 2013 at 20:06

Greg Beattie Patrick, much waffle but no answer to the question. As I said, the question has nothing to do with evaluating the evidence. It's about the act of providing it. Your claim was that such an act was dishonest. My question is "In your Red Bull example, is it similarly dishonest?"

When pressed way back about your accusation, you said it was dishonest because it was irrelevant. I'm now trying to determine whether you think the same about the Red Bull analogy. If there was a widespread belief that the drink made people fly, would it be irrelevant, and thereby dishonest, for anyone to attempt to shatter that belief... regardless of whether they were successful? In other words, is attempting to shatter a belief a dishonest act in and of itself?

I have further questions depending on the answer. Can I get a straight answer? I know it's squeezing you into a corner, but that's not my fault.

Like · 18 September 2013 at 23:27

Patrick Stokes I've already answered the question Greg, but happy to do so again as it appears you haven't understood the answer: it is dishonest to present irrelevant data with the intent to create a negative impression that is irrelevant to the policy question. How many ways do you want me to say it?

In the version of the Red Bull analogy I gave above, the activist who argues 2) without first establishing 1) is either being dishonest or doesn't understand their own argument.

But I note that you've now, without announcement, changed the analogy. Previously you said "let's say someone jumped up and said "I can demonstrate that the belief is not sound, and is only built on an advertising slogan"" but now you are saying "If there was a widespread belief that the drink made people fly, would it be irrelevant, and thereby dishonest, for anyone to attempt to shatter that belief." The former contains two assertions ('Red Bull doesn't give you wings' and 'people only believe it does because of the ads'), the latter only one ('Red Bull doesn't give you wings.'). So you've apparently dropped the equivalent to the 'we only believe vaccines work because of a false belief about the effect of vaccines on historical mortality' claim - which you've admitted is the only thing the mortality graphs can demonstrate.

So: could you explain the point of changing the analogy? Do you no longer want to defend introducing the historical material? Or do you believe that you can somehow derive 'vaccines don't work' from the historical mortality point?

Like · 18 September 2013 at 23:59

Greg Beattie "...it is dishonest to present irrelevant data with the intent to create a negative impression that is irrelevant to the policy question. How many ways do you want me to say it?"

OK. So you agree it's not dishonest to to attempt to shatter beliefs which are material? But 'material' is the only thing you dispute with the vaccination/mortality graphs issue? i.e. you feel the belief itself that I'm addressing is not important to the issue? Is that all? Or is there more? Like · 19 September 2013 at 00:48

100

Greg Beattie And there was no change to the analogy, Patrick. Saying "I have evidence to present" does not change anything. You already knew I had evidence to present because that's what this is all about... the evidence is the graphs. The fact that I didn't say those words in one of my many messages is neither here nor there

My assertions have always been 1. that my evidence shatters the belief, and 2. that the belief is based on something other than empirical evidence (because I actually use the empirical evidence in 1).

Is the belief something you consider 'material' in the Red Bull scenario, but not so in the vaccination scenario?

Like · 19 September 2013 at 09:29

Patrick Stokes I wasn't suggesting your saying "I have evidence to present" is what changes the analogy; what changes the analogy is that you've changed what the evidence is meant to demonstrate - and given you're now just talking about 'the belief' without actually discussing *which* belief it's getting very hard to pin down exactly what you're arguing for. Remember, you earlier said "I can demonstrate that the belief is not sound, and is only built on an advertising slogan" - but those are two importantly different claims.

So: Are you talking about 'shattering' (as you put it) the belief that vaccines historically led to declines in disease mortality? If so, 'shattering' such a belief would indeed be irrelevant to the discussion for the reasons I've already outlined i.e. it can't establish that vaccines don't work and so isn't relevant to the policy issue at hand. (And as noted I consider that dishonest well-poisoning in the relevant contexts). Or are you talking about disproving the claim that vaccines reduce susceptibility to disease? If so, that would be relevant - but as you've acknowledged, the mortality graphs cannot do that.

Like · 19 September 2013 at 17:59

Greg Beattie "...it can't establish that vaccines don't work and so isn't relevant to the policy issue at hand"

We haven't yet discussed what might be relevant to a committee considering legislation designed to exclude unvaccinated children from pre-schools and child care but, since you've made the declaration above, it might be time to have that discussion. And I don't mind kicking the ball off.

Of course it would depend on who we ask. The committee considered a wide range of issues which they, and others, felt were relevant; many more than the one you listed above. There were some for whom the human rights issue was of most relevance. For others, the threat of liability, the administrative nightmare, or the division that might be deepened in communities. But of course the risks and benefits of vaccines was also relevant. Mind you, these also cover a range of bases: many more than the one you mention. There are the many concerns about harm, the varying 'claims' of efficacy, the quality of the research, the conflicts of interest, background theory, and background beliefs.

They're all relevant, and I'm sure there are others I've missed. For myself, background beliefs are extremely important... which is why I spend a lot of time discussing them publicly. The particular belief which I address in the submission, with the graphs, is something which I feel informs the discussion immensely. I believe most of our collective faith in vaccines stems from this belief, or at least is tied to it in some way. I also believe the graphs demonstrate the belief is false.

Now, many people agree with me that this belief is extremely important. You, on the other hand, may think otherwise. You may feel it is unimportant, and of course you're free to think that.

But to call me dishonest for discussing it is really beyond the pale. I can't for the life of me understand why a person would do that... unless they actually *did* think it was of huge importance, and they also felt that the graphs *really did* ruin the belief, and that was something they didn't want to see happen because they are in favour of vaccines and if a little white lie will encourage their use... why not?. But that wouldn't be you, would it?

I guess ultimately the committee members will decide just how important an influence they feel the belief is. Like · 19 September 2013 at 21:16

Patrick Stokes You're quite right there are many other issues that would be relevant Greg, I don't dispute that. (As I've said, I think you'd be on considerably stronger grounds if you focused on issues of autonomy etc.). But the nature and degree of relevance of the other factors - cost, administrative burden etc. - will all be largely determined by the efficacy question. Even the human rights issues look different in a context where we accept that vaccines do in fact prevent illnesses with a serious risk of death, disability and suffering

I now it's not nice having someone accuse you of arguing in a dshonest way Greg, and I genuinely take no p leasure in saying it. As I' e said I have no doubt you honestly believe the claims you makBut you also kno w that "our collective faith in vaccines stemfrom this belief" is not the same thing as "vaccines don't work, " and that even if you could demonstrate the former it doesn't entail the latter. If they *do* work, then even if you could show you're right about why most people believe in vaccination (and that's a further empirical question, so even if your analysis of the mortality figures were spot on it still wouldn't in itself tell us how people form their views), it's hard to see why it would matter particularly. "If people believe something true

on grounds that are false, do they really hold a true belief?" is a question people in my line of work find interesting (I think it would be a 'Gettier Counterexample' which are used to challenge the idea that knowledge = justified true belief). But it would be a very odd to conclude "Vaccinations work, but people are wrong about why they work, so we shouldn't implement policy to encourage them to vaccinate."

You keep appealing to things like "background beliefs are extremely important," that you "feel [they] inform the discussion immensely" and so on. But that sort of vague assertion is simply not good enough: you need to show exactly how, why, and to what extent they matter. And you cannot do that without confronting the efficacy question first. If you can show that vaccines don't work, you need to do that up front, as everything flows from that. If you can't, appealing to the historical 'vaccines didn't save us' argument is simply indulging in prejudicial muddying of the waters. (And poisoning the well. Muddying the well with poison? I'm not good at mixing metaphors).

Like · 20 September 2013 at 22:50

Tristan Wells "and I genuinely take no pleasure in saying it."

History's most credible statement.

"Vaccinations work, but people are wrong about why they work, so we shouldn't implement policy to encourage them to vaccinate."

Firstly, WE don't assume the first premise. Secondly, you don't seem to understand that not everything that works has the exact same benefit as everything else that works. Well I'm sure you do because there is a zero per cent chance you would ever attempt to use this wretched argument in any other field of knowledge but as Greg says you know perfectly well that his graphs are highly disconcerting to your beliefs and you will clutch at any straws to maintain your faith.

But I will ask you another direct question: could it change the nature of the policy questions relating to this issue if, bearing in mind cost and adverse reactions, vaccines saved the life of, say, one in a million recipients as opposed to, say, one in ten? If the answer is yes then what the hell are you going on about? Like -1 · 21 September 2013 at 09:55

Tristan Wells ""I should clarify here, I hate the notion of equality as much as I hate vaccines-"

"- Wow. Sorry, ladies, he's spoken for."

I suspect you would be one of the first to line up for the role as Handicapper General.

You wouldn't win it though I'm afraid. There are skeptics far more consistent in their totalitarian desires than you - indeed, as incredible as it sounds, you would probably be below average in that respect.

Although I should give you some credit though. I told you to make your smartarsery more coherent and you had a crack. Of course it was a bit of a stretch as anybody could see that I was simply saying I wasn't interested in a class war and in your mind that somehow meant I was a misogynist but having encouraged this sort of thing it would be a bit hypocritical of me to complain now. Like · 1 · 21 September 2013 at 10:19

Patrick Stokes "History's most credible statement." - Believe whatever you like. (I doubt anyone is going to be able to stop you from doing so anyway).

"Firstly, WE don't assume the first premise." - I gathered, yeah. That, after all, was my point: the proposition that vaccines don't work has to be established before everything else comes into play. And you've not yet done that.

"Secondly, you don't seem to understand that not everything that works has the exact same benefit as everything else that works." - Not sure how you get that from what I wrote. It is after all obviously true.

"...as Greg says you know perfectly well that his graphs are highly disconcerting to your beliefs and you will clutch at any straws to maintain your faith." - As Greg himself admits, they can't say anything about efficacy. The most they *could* demonstrate is that vaccines were not a major factor in historical declines in VPD mortality. They say nothing about incidence itself, nothing about declines in morbidity, nothing about declines in post-infection disability. So no, they're not 'disconcerting' at all.

"But I will ask you another direct question: could it change the nature of the policy questions relating to this issue if, bearing in mind cost and adverse reactions, vaccines saved the life of, say, one in a million recipients as opposed to, say, one in ten?" - Short answer, yes.

"If the answer is yes then what the hell are you going on about?" - That even if we want to be purely consequentialist about this, a) it's quite easy to envisage a ratio of costs (including adverse reactions, administrative burdens etc) to benefits (including declines in illness and long-term disability, taking duration into account) that comes out in favour of vaccination, and b) given the incidence and risks of the diseases vaccines prevent we appear to have such a ratio.

And ust so we're clear, I wasn't implying misogyny on your pt and I apologise if I gave that impression. I d idn't take you to be referring to gender equality; I was just suggesting that a general hatred of *the very concept* of equality as such is a rather jarringly unattractive trait in a human being. So maybe 'misanthropy' would be the more accurate imputation.

Like · 21 September 2013 at 17:55



Greg Beattie "But you also know that "our collective faith in vaccines stems from this belief" is not the same thing as "vaccines don't work," ..."

Patrick, my point does not address the question of whether vaccines work. I've told you this... many times. My point addresses a belief. I do *not* need to address anything else. What a ridiculous suggestion. If you honestly can't see this, please ask and I will explain why.

And you want me to provide evidence of the influence the belief has? Are you serious? I doubt there would be any available data on that. Anyway, I don't have to supply it. As I said, if the committee members find it important then it simply is. It's not your decision, sorry.

If the belief is unimportant then you have nothing to worry about. Just let me expose the evidence and it will be of no consequence to anyone. If, on the other hand, the belief *is* important, then you will probably want to discourage me from exposing it. Or at least encourage people not to trust it. And isn't that just what you're doing?

Like · 22 September 2013 at 07:12

Greg Beattie "I know it's not nice having someone accuse you of arguing in a dishonest way Greg, and I genuinely take no pleasure in saying it."

Patrick, like Tristan I have very thick skin. I doubt you could hurt my feelings if you tried. That privilege is reserved for those who are close to me.

The reason I'm pressing you on the dishonesty accusation is because it's something you just shouldn't do. Publicly accusing someone of dishonesty, when you have no decent reason, is tacky. Dancing all over the place trying to make it stick, after being called out about it, is worse.

And all the time you mention others attempts to "poison the well". Like · 22 September 2013 at 07:17

Tristan Wells "I was just suggesting that a general hatred of *the very concept* of equality as such is a rather jarringly unattractive trait in a human being."

One day you just might discover that there isn't always complete fidelity between what academics say people should want and what they actually want.

"That even if we want to be purely consequentialist about this, a) it's quite easy to envisage a ratio of costs (including adverse reactions, administrative burdens etc) to benefits (including declines in illness and long-term disability, taking duration into account) that comes out in favour of vaccination, and b) given the incidence and risks of the diseases vaccines prevent we appear to have such a ratio."

That's it? It "appears". You have no idea whether it does or doesn't but you think it might? And from that you have the gall to accuse Greg of dishonesty for thinking that many people might reasonably find the mortality data significant? And you have the temerity to tell us that none of us are allowed to have our stories told (although at the same time you demand that we publish them). All because it "appears" to YOU that we might just still have such a ratio so long as we are generous enough with our benefits and sufficiently dismissive of possible adverse reactions.

Unbelievable!

Well, it would be if not for everything else you have written. Like · 22 September 2013 at 10:49

Tristan Wells And did you say "declines in long-term disability"? Despite the fact that the only data we have on this shows a ten fold increase in precisely that metric. How are you able to so easily shut facts out of your mind in order to maintain your faith?

Like · 22 September 2013 at 17:38

Patrick Stokes I'm glad you have a thick skin, Greg. I'll take that as license to be more blunt than I otherwise would be: you're either arguing dishonestly or you simply don't know how to construct a basic argument, and frankly neither is a good look for someone who thinks policy makers should take his views into consideration.

You have indeed said many times that your point does not address the question of whether vaccines work, and I'm glad you realise that. But yes, you *do* need to address that first, as I have explained over and over - you've offered no refutation of that and at this point I have to conclude that you either aren't capable of understanding the point or are pretending not to.

To be as clear as I can: what people happen to believe is irrelevant. Why they believe what they believe is even more irrelevant. What matters is what is in fact the case. By focusing on belief rather than facts (as you admit you do), or if you prefer, by discussing beliefs without reference to their truth-value, you're basically pulling a slight of hand: 'I can't prove vaccines don't work but let me try to cast doubt on a vaccine-related belief so that my hearer will entertain unwarranted doubts about the overall efficacy of vaccines.' An honest interlocutor would, at the very least, have concluded by saying"Of course, none of that means that vaccines don't work, it's of merely sociological or historical interest and it obviously can't tell us anything about whether coercive pro-vaccination policies are warranted." But that wouldn't have fed into the overall deflationary impression of vaccines you wanted to give, would it?

Suppose we discover evidence that establishes to the satisfaction of absolutely everyone that two

propositions are true: a) People assume that vaccines work because they wrongly believe that vaccines caused the historical decline in VPD mortality, and b) vaccines do in fact prevent VPD incidence, severity, and mortality. Under those conditions, why would a) have any relevance at all for public policy? Would you seriously advocate that we abandon something that actually works just because people believe it works on a mistaken basis?

And while a parliamentary committee may decide what it wants to talk about, but that doesn't mean it determines what is and is not actually relevant to the policy debate. Parliaments also make laws, but that does not mean they determine what is actually morally right and wrong. They make rules of procedural fairness, but that doesn't mean they determine what is and is not actually fair.

Still, I'm pleased to hear you admit you have no evidence of your claim that people believe vaccines work because they believe vaccines caused the historical drop in mortality. Given you have no such evidence, maybe you should stop asserting it to be true? Pretty sure that's what an honest interlocutor would do. Like · 22 September 2013 at 20:15

Patrick Stokes Yes, Tristan, 'appears.' What else do you want, 100% logical certainty? No such animal. But it's not how it appears to *me* that matters – I'm not a scientist, so my view here is irrelevant, and so is yours.

But I'm fascinated: can you tell me more about this tenfold increase in disability caused by vaccine preventable diseases of the sort that I pointed to a decline in? Oh, no, wait: you mean an increase in things you believe, without any scientific warrant, were caused by vaccines. So, not 'facts' then. In fact pretty much whatever the opposite of facts are.

Like · 22 September 2013 at 20:16

Greg Beattie "Still, I'm pleased to hear you admit you have no evidence of your claim that people believe vaccines work because they believe vaccines caused the historical drop in mortality. Given you have no such evidence, maybe you should stop asserting it to be true? Pretty sure that's what an honest interlocutor would do."

And the dance continues. To the tune of Pomp and Circumstance No. 1... choreography revised as needed.

Patrick, that's remarkable. I've been upfront about everything. Every step of the way. I told you I believe the belief plays an important role in our collective faith in vaccination. How much more honest can a person be? Do you want me to shut my mouth about it? Is that what honesty means to you? Why on earth would you call someone who addresses a false belief 'dishonest'? Regardless of how important you feel the belief might be how can it possibly be dishonest to shed light on it, given that (at least some) people have the wrong impression about it?

Like · 22 September 2013 at 22:10

Greg Beattie "You have indeed said many times that your point does not address the question of whether vaccines work, and I'm glad you realise that. But yes, you *do* need to address that first, as I have explained over and over - you've offered no refutation of that and at this point I have to conclude that you either aren't capable of understanding the point or are pretending not to."

Patrick, I did offer to explain this again because I've noticed you've had a problem with it for a long time. Here goes:

The belief (which I assert is in widespread existence) is that vaccines were fundamentally responsible for the massive drop in deaths since the late 1800s. I address this very simply (and completely) by demonstrating that the bulk of the drop occurred *before* the vaccines were used, and that, had things continued on trend, we would be roughly where we are now. Case dismissed. Story over. There is *no* argument.

But you argue that I shouldn't do that without first establishing that vaccines don't work. I say that's just too silly for words, but I'll address it anyway.

First, let's hypothesise that the belief is sound. There may be several ways to test this. The simplest would be just what I did with the graphs, but that would ruin the hypothesis in seconds. Disastrous. I guess if we could establish that vaccines do 'work' then we could at least claim they had the *capacity* to have caused the drops. But it still wouldn't demonstrate that they *did* do so. (And of course the graphs would still ruin it.)

And of course if we found they didn't 'work' we wouldn't have a leg to stand on. So either way, the question of whether they 'work' may *help* in a small way, but is neither sufficient nor necessary to address the issue.

Second, let's hypothesise the belief is *not* sound. Again the most direct approach is just what I did. We could try to demonstrate that they don't 'work', I suppose. That would indeed remove any possibility of the belief being sound. But if it turned out we couldn't establish that for sure the question would remain. Perhaps they 'might work' or 'do work' which would mean it's possible the belief is sound.... but that's all.

So we have a situation where the thing in question - the *belief* itself - can be tested directly and without doubt. Wonderful. There's no need to do anything else.

Well, according to you that's not true. And you teach philosophy at university. You claim I need to establish whether they 'work' first. Hmm... why would I need to establish something (which can't be established) first, in order to go on and demonstrate something which can be established without resort to the former?

And the answer is because you say so. Apparently I'm not an honest interlocutor unless I do. Wow! Luckily, none of it matters. We can examine the belief independently of the question of whether vaccines work. And it's just as well because the latter is not as amenable to examination.

Now, do I have to demonstrate that the belief is important to decision makers first? No. I don't. They will decide that.

Like · 22 September 2013 at 22:56 · Edited

Greg Beattie And Tristan, I didn't thank you for peer-reviewing the book. I do appreciate it. I might put 'Peer reviewed' on the cover of the next edition. I know I don't pay you, and I suspect you're not on the payroll of any organisation whose institutionalised beliefs are supported by the book, but I trust you would point it out if you were. It's just me... picky. I know others don't worry about it. But I don't want to be accused of dishonesty by you-know-who.

Like · 22 September 2013 at 22:44

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Patrick Stokes "I told you I believe the belief plays an important role in our collective faith in vaccination." – Which would be irrelevant unless you do what you've done here: introduce a further claim that this 'faith' rests upon nothing else.

What you seem to be asserting here is that what you call "our collective faith in vaccines" *can only* rest on the historical mortality data. At least, that's the only way I can make sense of the fact that looking at your mortality data is the only way you mention, as if there are no other options. You don't, for instance, mention looking at notification data, which would be the obvious way to do it.

Why don't you do that? Because your whole argument ultimately depends upon a premise that's curiously absent from your parliamentary submission but which you at least allude to here: "why would I need to establish something (which can't be established) first," not amenable to examination etc." For your argument to have any significance at all you have to demonstrate that the entire edifice of modern epidemiology is hopelessly flawed, which will in turn involve demonstrating a bunch of sub-premises: that notifications can never be a workable proxy for incidence, that all the data showing modern disease declines after vaccination are unreliable, that diagnoses are systematically wrong, and so forth. With every novel premise you introduce the parsimony and believability of your theory gets thinner and thinner.

But without establishing this crucial premise, what you have left is – and you admit this – nothing more than a proposition about why people believe what they believe, not about what is in fact true. As I say, that is wholly irrelevant: policy needs to be based on what is the case, not what people happen to believe. Planes would still fly even if most people believed they were held aloft by friendly angels, and vaccines would still work even if people believe they do on grounds that are factually incorrect.

You also ask: "Why on earth would you call someone who addresses a false belief 'dishonest'?.. how can it possibly be dishonest to shed light on it, given that (at least some) people have the wrong impression about it?"

Here's an analogy, from Kierkegaard as it happens: a man escapes from a mental asylum. He has enough lucidity to know he has to pretend to be sane (i.e. he can't run around yelling "I am Napoleon!" or "The sun is made of cheese!"), so he decides he will say something over and over again that's objectively true, thinking that will make him sound sane. He ties a rock to a rope around his ankle and every time the rock hits him he yells "Boom! The earth is round!" Now, what he says is objectively true – but what he doesn't understand is that saying something objectively true in the wrong context still makes it clear that he's crazy.

Likewise, saying something you sincerely believe to be true may yet be dishonest in a certain context. The example of introducing prejudicial but irrelevant material in a courtroom makes the point clearer. That's essentially what you've done here: tried to create an impression that vaccines don't work by saying they didn't save a bunch of lives they're credited with saving.

And just on your last point – are you under the impression researchers actually get *paid* for conducting peer review?

Like · 22 September 2013 at 23:46

Tristan Wells Yes, Tristan, 'appears.' What else do you want, 100% logical certainty? No such animal. But it's not how it appears to *me* that matters – I'm not a scientist, so my view here is irrelevant, and so is yours.

But Patrick, before you said that "science" (which in your mind means the opinions of these priests) was the best we had? Now you're saying that it is – at least in principle – inferior to logic. Which is it? If the opinions of scientists are secondary to logic then why do you constantly ignore logical arguments in favour of "peer-reviewed science"? Why do you say that people who show clear logical flaws in particular theories can be ignored because they don't have the ear of the 'credible' scientists?

I realise this thread has been going a while now but it is still staggering just how many times you have contradicted yourself.

"But I'm fascinated: can you tell me more about this tenfold increase in disability caused by vaccine preventable diseases of the sort that I pointed to a decline in? "

Oh God. This is what you said "...benefits (including declines in illness and long-term disability, taking duration into account)". It is pretty clear that you were trying to use a supposed decline in long-term disability as proof of the benefits of vaccines. Now you are saying that disability due to some illnesses has fallen but you have no basis for saying that other than the fact that you are highly skilled at deluding

yourself. Yours is just a ridiculous circular argument – you believe that disability rates must have fallen therefore proving vaccines prevent disease because vaccines must have prevented disease caused disability. But then you are the guy who says that "your arguments haven't been published therefore they are wrong, and nobody should be allowed to read, much less publish them, because they are wrong". It is just fallacy after fallacy.

"Oh, no, wait: you mean an increase in things you believe, without any scientific warrant, were caused by vaccines. So, not 'facts' then. In fact pretty much whatever the opposite of facts are."

Hahahahaha!!!!

You're hopeless Patrick. Completely hopeless. Only one of us makes a claim about vaccines doing anything to disability - hint: his initials are PS. If I were him I would be hoping like hell that since the widespread use of vaccines disability rates have demonstrably plummeted.

Like · 23 September 2013 at 11:56 · Edited

Tristan Wells Well I don't make any money from my non-belief in vaccines Greg (although I do save a lot by having never taken any of my children to the doctors save exemption forms), but I do happen to find anybody who doesn't agree with me on matters political, scientific, economic etc to be "jarringly unattractive" and "misanthropic" so maybe that has something to do with it. Like · 1 · 23 September 2013 at 11:46

Greg Beattie "What you seem to be asserting here is that what you call "our collective faith in vaccines" *can only* rest on the historical mortality data."

No, that's not what I'm asserting at all. There are many things our faith *can* rest on, but I don't believe the average Joe relies on any of them more than they do the old old story. I may be wrong about that, or I may be right. It doesn't matter. All that matters is that a false belief shouldn't be left on the table to cloud the decision making process.

"For your argument to have any significance at all you have to demonstrate that the entire edifice of modern epidemiology is hopelessly flawed, ...[etc]"

No I don't. It's not my job. The person who wants to use notifications to establish that vaccines *do* work has to convince consumers that they are not flawed in the ways you mention (and others), for their argument to carry weight. But it certainly has nothing to do with the graphs or the issue I address in the submission, so there's no point in you even mentioning it.

"But without establishing this crucial premise, what you have left is - and you admit this - nothing more than a proposition about why people believe what they believe, not about what is in fact true."

So... what is in fact true, Patrick? I mean I admit that I don't know what is true in relation to whether vaccines work. I suspect no one does. And given what you've said I believe you wouldn't have a clue, except for what others have told you. If we can't know what is true, what do we do? Leave some false claim in place as the primary marketing message?

"That's essentially what you've done here: tried to create an impression that vaccines don't work by saying they didn't save a bunch of lives they're credited with saving."

I don't know how many times I can say this. Read the submission. It does not try to create the impression you say. It is extremely clear about the point it makes. You are being belligerent now.

"He ties a rock to a rope around his ankle and every time the rock hits him he yells "Boom! The earth is round!""

Sorry, but that's a shocking analogy. If my conclusion didn't logically flow from my observation then it might have worked for you. But all we need to do is change it: I present the evidence and declare the earth is round. Then you stumble out of the asylum and complain that I should have first tied a rock to my ankle. There. Now it fits.

"And just on your last point - are you under the impression researchers actually get *paid* for conducting peer review?"

No. I think I was quite clear. If I drive a delivery truck for someone, I don't 'actually get paid' for saying nice things to customers. But I would not be seen as a team player if I didn't. It's human nature to not bite the hand that feeds you.

Like · 1 · 23 September 2013 at 18:42

榆

Greg Beattie Look, this is getting beyond a joke. You can't rationally continue trying to defend your position, Patrick. It's absurd.

There is a belief sitting on the table and it has the capacity to influence. I assert that it's very influential in the decisions people make. You say it's not. Either way it doesn't matter. Whether it plays a 99% role or a 1% role, it has no business being on the table. It's a falsehood. It needs to be off the table to ensure that it plays no role.

That's the purpose of my addressing it in the submission. And it's crystal clear that that's my purpose. I state the belief and dispense with it clearly and quickly. Your repeated whining that I'm trying to dress it up as

something else is nonsense. You have no evidence whatsoever for that.

Why are you so against my exposing this belief?

In my book I do briefly discuss people who know the belief is false yet continue to propagate it. I deliberately avoid commenting on their character because I honestly don't know what drives a person to act in that way. In your case, I can see you're not actively propagating the belief, but it appears you are actively shielding it from challenge. The belief sits proudly on the table and you prefer it to stay that way. Why?

Is it dishonesty... the very thing you're accusing me of? I'm reluctant to believe it is. The little I know of you tells me you're above that. Are you just trying to 'do your bit' fighting the big bad 'unconvinced' the only way you know how? Can you give us an alternative reason? I'm genuinely interested. Like · 23 September 2013 at 18:50

Patrick Stokes "If the opinions of scientists are secondary to logic then why do you constantly ignore logical arguments in favour of "peer-reviewed science"? Why do you say that people who show clear logical flaws in particular theories can be ignored because they don't have the ear of the 'credible' scientists?"

- You've not shown any clear *logical* flaws at all. Not one. Why? Because every objection you've raised is one that admits of the possibility of empirical answer. You ask things like (and I'm paraphrasing) 'if germ theory was true doctors would have the life expectancy of fruit flies.' For this to be a logical objection there would have to be a priori no possibility of an inductive answer to that question consistent with the theory you want to invalidate. The objections operate on a much less apodictic level than you're implying – in fact, what you've raised as if they're knock-down objections are simply questions for empirical investigation. Yes, they could be signs that a theory is wrong, but they don't invalidate it outright analytically.

"It is pretty clear that you were trying to use a supposed decline in long-term disability as proof of the benefits of vaccines."

- The context makes it perfectly clear that I meant disability from vaccine-preventable diseases. But of course you've already indicated you have no respect for basic canons of argument like principle of charity, so I should have known you'd choose to misconstrue it.

"Now you are saying that disability due to some illnesses has fallen but you have no basis for saying that other than the fact that you are highly skilled at deluding yourself. Yours is just a ridiculous circular argument – you believe that disability rates must have fallen therefore proving vaccines prevent disease because vaccines must have prevented disease caused disability."

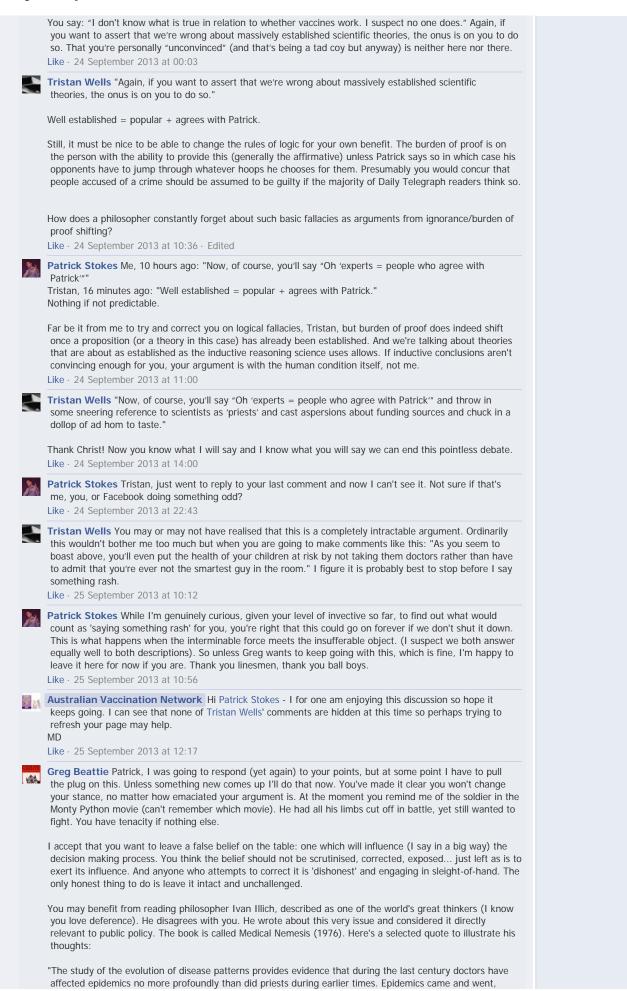
- No, I believe it because actual experts tell me it is the case, and not being an expert in most things I have no choice but to trust in the testimony of those who are. (To paraphrase Pascal: "[you might object that] 'the best course is not to trust anyone at all.' - Yes, but you must trust. It is not optional. You are embarked.") It's really as simple as that.

Now, of course, you'll say "Oh 'experts = people who agree with Patrick'" and throw in some sneering reference to scientists as 'priests' and cast aspersions about funding sources and chuck in a dollop of ad hom to taste. You'll probably assert that long-term neurological or sensory deficits from VPDs are just as common as ever (and the stats showing otherwise are fatally flawed) but have been re-named or whatever, that there's a kid with congenital rubella syndrome on every street corner and we just didn't notice because we're all in thrall to GSK and Merck. You'll continue to try to defend your belief-system with more and more improbable and hopelessly unsupported hypotheses - posits of information cascades and systematic bias and whatever else – just so you don't have to accept the epistemic authority of others that is an inescapable part of being human. As you seem to boast above, you'll even put the health of your children at risk by not taking them doctors rather than have to admit that you're ever not the smartest guy in the room. I hope that's just more bluster, I really do.

Like · 24 September 2013 at 00:00

Patrick Stokes Greg, you ask why I object to your attempting to disprove the 'vaccines causes historical drops in mortality belief,' and of itself that's a fair question. Thing is, you didn't try to disprove it at a meeting of your local historical society, you tried to do so in a hearing before a parliamentary committee on public policy matters. The context is crucial. (And just on that: you completely missed the point of Kierkegaard's analogy. The asylum escapee thinks he can sound sane by saying something true and doesn't notice the context in which he says it makes him sound insane. You think you can assert something (you believe to be) true – and defend it with evidence all you like – but don't notice that the context makes your assertion disingenuous. If the escapee was walking around outlining all the evidence that the earth is round he'd still sound insane).

So, let's consider again why you think the belief is relevant and needs to be taken off the table: you worry that this 'false' belief somehow "clouds the decision-making process." But this already assumes we face some sort of genuine question that we have to make a decision about. And that's just the point I've been making: your 'vaccines didn't save us' argument is only relevant if we're already in doubt that vaccines work at all. And like it or not, you *do* need to establish that this is not the case (or, to be charitable here, demonstrate genuinely warranted doubt) before 'Vaccines didn't save us' before 'Vaccines didn't save us' before the efficacy of vaccines is not already seriously in doubt then the belief you're trying to dispel can't 'cloud our decision' because it's not relevant to any decisions we face. If we learn that the belief is false, it changes nothing. So at best you're wasting your allocated time before the committee (and yes I have read the submission), and at worst you're trying to create an unsupported negative impression of vaccine efficacy.



imprecated by both but touched by neither. They are not modified any more decisively by the rituals performed in medical clinics than by those customary at religious shrines. Discussion of the future of health care might usefully begin with the recognition of this fact."

Note the last sentence. Like · 25 September 2013 at 16:18

Patrick Stokes You're thinking of the Black Knight (from Monty Python and the Holy Grail), and as it happens you and Tristan have both reminded me of him a couple times during this discussion too - nice bit of symmetry I guess. I do feel you've somewhat misrepresented my position in your second paragraph, but I'm not going to try correcting it at this point.

I'm not sure on what basis we're taking Ivan Illich as having the capacity to determine the efficacy of medical interventions, but again, I doubt much good will come of arguing the point here. Seeing as we're finishing off this rather epic thread by quoting philosophers, allow me to quote something I came across just today, from Melbourne's own Neil Levy, and which made me think of you guys:

"Recall the 'illusion of explanatory depth': we consistently underestimate the extent to which our knowledge depends upon our location in the socially distributed network of epistemic authorities. We take ourselves to be able to understand more, far more, by ourselves than we are really capable of. Hence we take ourselves to be able to detect flaws in the official stories, flaws that the epistemic authorities have either, inexplicably, overlooked, or from which they have deliberately turned. We take the conflict between our intuitions and the explanations offered by the epistemic authorities as evidence that the latter are stupid or base rather than recognizing that the conflict is the predictable consequence of our lack of access to the relevant cognitive tools.'

[Tristan: if you want a critique of Levy's claim there - which is very closely akin to the one I've been making about your viewpoint - check out David Coady's reply, in which he invokes information cascades. Both papers are in a 2007 special issue of Episteme: http://muse.jhu.edu/journals/episteme/toc/epi4.2.html]

Episteme: A Journal of Social Epistemology, Volume 4 - Table of Contents muse.jhu.edu Traditional secular conspiracy theories and explanations of worldly events in te... See more Like · Remove Preview · 25 September 2013 at 17:28

Greg Beattie "I'm not sure on what basis we're taking Ivan Illich as having the capacity to determine the 122 efficacy of medical interventions, but again, I doubt much good will come of arguing the point here."

I asked you to take note of the last sentence. Here it is again:

Illich - "Discussion of the future of health care might usefully begin with the recognition of this fact."

No doubt you'll recall saying that I was dishonest because my point was irrelevant to health policy; not because my conclusion was incorrect. Illich disagreed with you, which is why I quoted him. Apparently he must be dishonest too?

The question of whether he had the capacity to assess the data is a separate one: one which you didn't base your position on. So don't bring it up now and pretend it's of some relevance.

Regardless of whether the historical story supports or doesn't support vaccination, 'what happened' is entirely relevant for future policy consideration, because it influences the way we think about the practice. I think any reasonable point of view would agree with that... which is why I say you don't have one. Like · 25 September 2013 at 23:38

Patrick Stokes The entence immediately before the one you draw our attention to is: "They ae not m odified any more decisively by the rituals performed in medical clinics than by those customary at religious shrines." Note the present tense. Illich isn't just saying medicine didn't have an effect on historical epidemics, he's saying it *doesn't*. It's a far more expansive claim than yours, precisely because it involves an efficacy claim. It's also far shakier empirically simply by virtue of its expansiveness.

So, on with the dance I guess?

You keep referring to the historical belief 'clouding' people's decisions. What would that clouding look like, exactly? "Yes, I know that this vaccine will greatly reduce my chance of contracting a serious and potentially fatal illness, but I'm not going to get it anyway because vaccination was not a significant factor in historical mortality drops" - how would that be a rational response based on relevant factors? For the historical belief to be a rational consideration, the first premise, "I know that this vaccine will" etc. has to be at least dubious. Unless and until you demonstrate that, the historical belief is neither here nor there. Like · 26 September 2013 at 00:07

榆木

Greg Beattie If we believe that vaccines brought about the historical drop in deaths then we *must* accept that they work. To even contemplate that they don't, while believing they were responsible for such a drop, would be insanity. In this way the belief eclipses proper consideration of the question.

Of course there is more to it. As a corollary we must also accept that they continue to play a role in keeping the deaths low, and that abandoning them will send the rates back up.

That's how the clouding might look. Although I think 'clouding' is too gentle. Like · 26 September 2013 at 22:06



Patrick Stokes "If we believe that vaccines brought about the historical drop in deaths then we *must* accept that they work."

- Indeed, but the reverse doesn't hold i.e. we can accept that they work without crediting them with the historical drop. "If p, then q" doesn't entail "If q, then p": if it's raining outside the lawn will be wet, but the lawn's being wet doesn't necessarily mean it's raining outside.

But it rather seems now you're actually agreeing with me: the belief is only relevant if there's uncertainty about efficacy. If there is no significant uncertainty about efficacy, the historical belief isn't 'clouding' anything but our historical knowledge. It can't "eclipse proper consideration of the question" if there is, in fact, no question to consider.

So again, you need to claim that efficacy is questionable before the historical belief becomes relevant. Like · 27 September 2013 at 18:13 · Edited

Greg Beattie "Indeed, but the reverse doesn't hold i.e. we can accept that they work without crediting them with the historical drop. "If p, then q" doesn't entail "If q, then p": if it's raining outside the lawn will be wet, but the lawn's being wet doesn't necessarily mean it's raining outside."

This is your first point. You agree that if vaccines were responsible for the drop then we *must* accept they 'work'. But you say that doesn't mean the reverse is true. In other words, that if vaccines work then they must have been responsible for the historical drops.

That's right. And the relevance of this point is... what? It's nonsense. Not that it's not true. But it's an utterly meaningless point to make.

Your second point - "So again, you need to claim that efficacy is questionable before the historical belief becomes relevant."

I do. Weren't you aware? I've had doubts about the efficacy of vaccines for a long time. Are you saying that I should have said so in my submission? That's absurd. There is no such requirement. "If p, then q" is a one way conditional. If I wish to negate p there is absolutely no onus on me to first negate (or partially negate) q.

Consider the following example: If it's Monday, then the store will definitely be open.

Now, if you believe today is Monday you will assume the store is open. But if I grab a calendar and prove today is really Sunday, you won't be so sure. It could be one of those stores that opens on Sunday. So you'll have to look at other evidence if you wish to find out. But the thing is, while you believe the day is Monday, you have *no need* to look at other evidence, because Monday means the store is definitely open. That makes the belief very influential.

So the question is "Is it *honest* of me to grab a calendar and establish that the day is Sunday?" Answer: "Of course". Next question: "Is it *relevant* to do so?" Answer: "Of course". Final question: "Is it my responsibility to first explicitly claim that there's doubt in your mind about whether the store is open?" Answer: "Of course not". In fact there will be no doubt in your mind if you think it's Monday. That's the dangerous aspect of a false belief. But if it's Sunday doubt will be natural unless you are convinced one way or the other by other evidence.

Like · 28 September 2013 at 09:59 · Edited

Greg Beattie So yeah... your second point was just as ridiculous as your first. Isn't this supposed to be your area, Patrick?

Like · 28 September 2013 at 09:53

100

Patrick Stokes The first point was just to formalise that while 'vaccines caused the historical declines in mortality' does entail that vaccines work, 'vaccines work' does not entail that 'vaccines caused the historical declines in mortality.' This matters because if we tried to infer that vaccines don't work from a denial that vaccines caused the historical mortality decline, we'd be committing the fallacy of denying the antecedent: "If p then q, not q, therefore not p." It's just a more formal way of reiterating that if the historical belief turns out to be untrue, that doesn't impact on the truth-value of the efficacy claim.

I think we're actually getting somewhere here: you seem to finally be acknowledging that the historical claim only matters if efficacy is in question. But that's the rub: efficacy is not, in fact, in question. That you've "had doubts about the efficacy of vaccines for a long time" is no more relevant than Andrew Bolt 'having doubts' about the reality of anthropogenic global warming or Tristan 'having doubts' about Germ Theory or Insane Clown Posse 'having doubts' about electromagnetism. None of these people are epistemic authorities in the relevant domains, and you don't displace the authority of settled theories just by personally harbouring doubts.

Let me lay this out a bit more schematically:

1. If we accept the overwhelming scientific consensus, the historical belief, if false, cannot 'cloud' our decision-making.

2. Thus, the claim that the historical belief clouds our decision-making can only be true if we should not accept the scientific consensus.

3. There is a defeasible presumption in favour of accepting strong scientific consensus in practical decisionmaking

4. The presumption in favour of accepting strong scientific consensus has not been overridden in this case. 5. Therefore the historical belief cannot cloud our decision-making.

[Note that 3. is restricted to practical decision contexts; it still allows for counter-consensus scientific work]. You likely disagree about 4. - but you'd be wrong I'm afraid. If you want to disrupt the consensus, go do some science. There really is no other way.

I an't comment on your statistical prowess Greg, but I hope i 's better than your rather confused forays into i nformal logic. But to use your example, the actual situation looks more like this: we're standing in the middle of the open store and you're waving a calendar around saying 'But it's Sunday!!' That might tell us some interesting things - the date on our phones might need changing, we're working too hard if we're losing track of the days etc. - but it doesn't matter, because we know the store is open on grounds other than an inference from a mistaken belief that it's Monday.

"Are you saying that I should have said so in my submission?" Yes, Greg, that's precisely what I'm saying. You're now effectively admitting that you're making points that are only relevant if we make assumptions that run contrary to long-established, overwhelming scientific consensus, assumptions that you yourself admit you didn't attempt to justify in your submission. You don't think that the fact your arguments rely on an unsubstantiated belief that science rejects is relevant to the committee?

Like · 28 September 2013 at 11:30

Greg Beattie The problem with your approach is you assume this perceived consensus was formed 12th without any resort to the belief. That's an unreasonable assumption (and that's being gentle).

In "If it's Monday, then the store will definitely be open" it's apparent that the belief is itself a sufficient reason for concluding the store is open. Therefore if we were to survey a number of people who all believed it was Monday, we would predict a consensus view that the store was open. i.e. the belief forms the consensus.

Similarly, if everyone believes vaccines did the great deed in history, it's reasonable to predict a consensus view that they work. In fact, it would be unreasonable to predict otherwise. Remember, if p then we *must* accept q. There alone is enough reason for your perceived consensus. While the belief is widespread there *must* be a consensus, or close to it.

The perception that there is a consensus in no way challenges my argument, and offers little, if anything, to yours.

To put it another way, your argument only works if the effect of p can be separated out from other evidence we may have for accepting q. It can't. (Unless you care to explain how that might be achieved.)

So no, we're not standing in an opened store. No one can say whether the store is open until they get there and walk in. With vaccines we can never 'walk in'. We're postulating about something which cannot be known. And there is a widespread belief in the mix which *demands* we accept one answer. That's a significant influence!

Like · 28 September 2013 at 14:44 · Edited

Greg Beattie And I didn't address your last paragraph. But I didn't need to. I'll just repeat what I said 122 earlier:

"So the question is "Is it *honest* of me to grab a calendar and establish that the day is Sunday?" Answer: "Of course". Next question: "Is it *relevant* to do so?" Answer: "Of course". Final question: "Is it my responsibility to first explicitly claim that there's doubt in your mind about whether the store is open?" Answer: "Of course not". In fact there will be no doubt in your mind if you think it's Monday. That's the dangerous aspect of a false belief. But if it's Sunday doubt will be natural unless you are convinced one way or the other by other evidence."

Like · 28 September 2013 at 14:51

122

Greg Beattie And you may not realise it but you botched your first paragraph... again.

Quote - "This matters because if we tried to infer that vaccines don't work from a denial that vaccines caused the historical mortality decline, we'd be committing the fallacy of denying the antecedent: "If p then q, not q, therefore not p."

No one is saying "They don't work, therefore the belief is wrong" (i.e. not q, therefore not p). Your p's and q's are out of order. I think what you're trying to say is it's not biconditional. That's obvious. But it's also meaningless in this discussion. It's even worse when you get it wrong. Like · 28 September 2013 at 19:48

Greg Beattie I'll sneak one more in (I rarely get a Saturday at home). I have to say I was far too 编出 charitable in that last post when I suggested you might have made a typo with the p's and q's. Not only does your sentence conflict with the one immediately before it, it also conflicts with what you first said:

"- Indeed, but the reverse doesn't hold i.e. we can accept that they work without crediting them with the historical drop. "If p, then q" doesn't entail "If q, then p": if it's raining outside the lawn will be wet, but the lawn's being wet doesn't necessarily mean it's raining outside."

That's definitely not denying the antecedent. You can't seem to take a trick, Patrick.

Like · 28 September 2013 at 23:26 · Edited



Patrick Stokes You're right Greg, I should have been much less sloppy in laying out the various possible fallacies. So, to lay out all the possible claims:

1. If vaccines caused the historical decline in mortality (p) they work (q); vaccines caused the historical decline in mortality ,therefore they work (p, therefore q) = logically valid (modus ponens) [remembering that 'valid' doesn't mean 'true']

2. If vaccines caused the historical decline in mortality (p) they work (q); vaccines work, therefore they caused the historical decline in mortality (q, therefore p) = logically invalid (fallacy of affirming the consequent)

3. If vaccines caused the historical decline in mortality (p) they work (q); vaccines did not cause the historical decline in mortality, therefore they do not work (not p, therefore not q) = logically invalid (fallacy of denying the antecedent)

4. If vaccines caused the historical decline in mortality (p) they work (q); vaccines do not work, therefore they did not cause the historical decline in mortality (not p, therefore not q) = logically valid (modus tollens).

My point is simply that you can't get from 'vaccines did not cause the historical decline in mortality' to 'vaccines don't work. And so the truth-value of the historical claim can't entail the truth-value of the efficacy claim.

In the rest of your reply, all you've done is point out precisely why I think your resort to the history argument was dishonest: whatever significance it might have depends upon assumptions that are not scientifically accepted, and you failed to tell the committee that your argument depends upon such claims. Specifically, you claim that "We're postulating about something which cannot be known."Now, you know that assertion is not accepted by the relevant epistemic authorities – that it is generally accepted that the epidemiological data demonstrates the efficacy of vaccination – and that means the burden is upon you to demonstrate the truth of such an assertion. You can't simply help yourself to highly controversial assertions. Like · 28 September 2013 at 23:36

Tristan Wells "In the rest of your reply, all you've done is point out precisely why I think your resort to the history argument was dishonest: whatever significance it might have depends upon assumptions that are not scientifically accepted, "

Patrick: you HAVE to trust the experts on this issue.

Us: That's a stupid claim. We don't ever HAVE to trust experts on anything but there might be times when doing so is prudent - but even under the absurd assumption that this was one of those times - how do we know who the experts are?

Patrick: The experts are those who have published lots of papers consistent with the "well-established" belief.

Us: How can you claim it is "well-established" Patrick?

Patrick: Because all the experts agree with it.

Over and over and over again.

Actually it is even worse than that because you have claimed that the only people who are authoritative on this issue are the pharmaceutical company executives but you then subsequently claimed that you don't trust them after all.

So you know the experts are right but you agree that there isn't anybody who actually IS an expert. They don't exist but we should believe everything they say.

It truly is mind-boggling how badly you have failed in this thread Patrick. And yet, astonishingly, you are convinced that you were going spectacularly. I guess it is lucky that you KNOW everybody who disagrees with you is, by definition, jarringly unattractive, misanthropic and, presumably, a witch. That way you can console yourself that if it seems like others are making you look a fool it is only because of sorcery. Like · 1 October 2013 at 12:13 · Edited

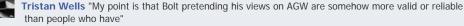
Tristan Wells "is no more relevant than Andrew Bolt 'having doubts' about the reality of anthropogenic global warming"

Another evil fiend who commits the heinous crime of not carefully calibrating all his opinions to ensure the maximum number of Fitzroy dinner party invitations.

I live in Canberra but even I am not used to dealing with such vacuity. Like · 1 October 2013 at 14:57 · Edited

Patrick Stokes I really don't care whether Bolt's 'opinions' get him invited to dinner parties in Fitzroy or not. (Do people in Fitzroy even eat at home? They do have the best souvlaki place in Melbourne, I'll give them that). My point is that Bolt pretending his views on AGW are somehow more valid or reliable than people who have... eh, you know where I'm going with that, we'll take it as read.
Like, 1 October 2013 at 15:15

Like · 1 October 2013 at 15:15



Why don't you find me a quote where Bolt has said his opinions on this issue are important? If he lays out facts that others haven't then it is an indictment on them and their precious qualifications that they missed what even he could see. It is the same with Greg and the vaccine statistics. Greg doesn't claim it makes him a genius, but the fact that he is left being the one pointing this stuff out just goes to show the incredible intellectual impoverishment of mainstream medicine. The world hasn't warmed for nearly two decades but you wouldn't have known about it if it wasn't for the Watt et al. Oh but wait! The fact that the world isn't warming is completely and utterly irrelevant to the question of whether the world is warming as a result of SUVs or not and all the people who point this out are evil liars who are no doubt jarringly unattractive and misanthropic (and smell).

Like · 1 October 2013 at 17:00

Patrick Stokes "If he lays out facts that others haven't then it is an indictment on them and their precious qualifications that they missed what even he could see." - Or, it could be that he's just wrong: that the facts he cites aren't facts, or they don't imply what he thinks they do. And given he's never studied the topic, what's more likely to be true: that thousands of highly educated people who have dedicated their careers to studying incredibly complicated topics to the greatest available depth have all failed (through incompetence or corruption) to notice something glaringly obvious to a layperson, or that the layperson is simply wrong? Again, Tristan, what's more likely: that the entire edifice of modern medicine is based on catastrophically false foundations that you, with your 'gift,' have spotted, or that your own capacities? What's more likely: that Greg has somehow pulled a loose thread and brought the whole edifice of modern epidemiology crashing down, or that something has simply gone drastically wrong with his argument? You remind me of Oliver Cromwell: urged the Presbyters of the Church of Scotland to "consider that you might be wrong" but singularly failed, his whole life, to consider that himself.

I am perfectly happy to admit I have no idea whether or not you smell. Like · 1 October 2013 at 17:18

Tristan Wells "what's more likely to be true"

The belief that is most consistent with the facts.

"Or, it could be that he's just wrong: that the facts he cites aren't facts, or they don't imply what he thinks they do."

Why on earth would someone so intellectually lazy choose philosophy?

"You remind me of Oliver Cromwell: urged the Presbyters of the Church of Scotland to "consider that you might be wrong" but singularly failed, his whole life, to consider that himself."

That just seems completely random. At any rate I have admitted I was wrong. For over two decades I believed in this thing called vaccinations. And - embarassingly - I have to confess I only believed in them because everybody else did. Yes I corrected my error eventually but rest assured I will never forgive my deep credulity on this issue and I resolve to never fall for something so obviously stupid just because it is popular ever again.

Like · 1 October 2013 at 18:19 · Edited

Patrick Stokes It helps if you don't stop reading half-way through the sentence: "who have dedicated their careers to studying incredibly complicated topics to the greatest available depth". You can find plenty of engineers, economists, even many scientists who are AGW denialists. How many of them actually study climate? How many of them can claim any serious training or expertise in the monstrously complex fluid dynamics of the earth's atmosphere?

And your information cascades still require incompetence or corruption if they're taken to operate on a large enough scale.

Like · 1 October 2013 at 17:47

Tristan Wells As you can see I edited my comment. At any rate I just don't think your elaboration helps you as much as you like to think it does. Let me put your words another way:

Everybody whose mortgage repayments are dependent on our continuing to believe in vaccinations and AGW wants us to continue to believe in vaccinations and AGW.

But when I use this exact same argument you have a sook about how it is offensive to our glorious scientific betters.

"And your information cascades still require incompetence or corruption if they're taken to operate on a large enough scale."

Or the same vested interests. Have you never heard of such a thing? Here is a definition for you http://www.thefreedictionary.com/vested+interest (see 4). No need to thank me.



vested interest www.thefreedictionary.com

Definition of vested interest by TheFreeDictionary.com

Like · 1 October 2013 at 18:39

Patrick Stokes "Everybody whose mortgage repayments are dependent on our continuing to believe in

vaccinations and AGW wants us to continue to believe in vaccinations and AGW."

- Tell you what: let's leave aside the fact that most academic climate scientists, immunologists, epidemiologists etc. would still have jobs if we found out tomorrow that belief in AGW and the efficacy of vaccines is unwarranted (because the atmosphere, the immune system and disease wouldn't suddenly cease to be valid objects of study). Let's also ignore the fact that scientists, like researchers in general, don't advance professionally by agreeing with other scientists but by showing why other researchers are wrong. And let's pretend there aren't plenty of people whose mortgages depend on arguing against AGW and against vaccines (you want to talk vested interests – seen the breakdown of AVN 'professional members' by profession?). Let's further ignore the fact that there are people who argue for both whose mortgages do not depend on people believing either of those things – no-one's paying either of us to have this argument, despite what certain folks in these parts seem to believe about SAVN.

So, set all that to one side. What does your claim amount to - the only people we should be listening to are people who don't make a living out of their area of expertise? Or can we take scientists seriously if they've already paid off their mortgages? Jokes aside, I think this is important, because we're constantly hearing from antivaxxers that doctors, medical researchers etc. are all hopelessly compromised when it comes to speaking on vaccines by conflicts of interests.

Like · 1 October 2013 at 21:54

Tristan Wells Let me help you out here Patrick. I spend my life around people who think most of my views are outrageous. The fact that I get any traction at all speaks volumes about my capacity to persuade considering how far outside the mainstream I am on so many issues. You on the other hand – as you have freely admitted – hate being around anybody who isn't in furious agreement with you on any conceivable topic and so you are lulled into a false sense of belief about the quality of your arguments. So when you actually venture out to places where many of the people are "jarringly unattractive" or "misanthropic" it is just a complete train wreck for you. Everything you say is as hopelessly naive and facile as this post but nobody has ever picked you up on it before because they are all oh so desperate to agree with you.

"Tell you what: let's leave aside the fact that most academic climate scientists, immunologists, epidemiologists etc. would still have jobs if we found out tomorrow that belief in AGW and the efficacy of vaccines is unwarranted (because the atmosphere, the immune system and disease wouldn't suddenly cease to be valid objects of study)."

Yeah you're right. The amount of money we spend on climate related research hasn't changed one iota since AGW came to the fore. And I can't imagine governments being reluctant to hand over money to immunologists if it turned out that they were largely responsible for the mass poisoning of children. Remember what I said before? There is no way in the world you could hold such ridiculous beliefs if you had ever been challenged before in your day to day life – but that just never happens.

"Let's also ignore the fact that scientists, like researchers in general, don't advance professionally by agreeing with other scientists but by showing why other researchers are wrong."

But then how could there ever be a "consensus" of people in a particular line of research work Patrick? If there was a consensus then all the scientists would be, by definition, "unadvanced" and therefore presumably not worth listening to. But again, you never get challenged so you have been free all your life to maintain these sorts of delusions. It must be so confusing for you. Over and over and over again you can see your arguments are ripped to shreds here but you go back to the SAVN site or sit and chat with your colleagues and they tell you that logic shmogic, facts shmacts, you're going great guns here.

"And let's pretend there aren't plenty of people whose mortgages depend on arguing against AGW and against vaccines (you want to talk vested interests – seen the breakdown of AVN 'professional members' by profession?)."

Hooray! Second thing that Patrick has said on this entire thread that wasn't completely stupid (mostly, but not completely). There ARE vested interests against the belief in AGW. Vaccinations are a bit of a stretch but I suppose that you could claim that homeopaths and the like might think they will get more work if people don't vaccinate and will be sicker as a result. However, given that health expenditure has skyrocketed since the widespread use of vaccines they would have to be as delusional as you to think such a thing. I suspect that if anything homeopaths and the like are actually arguing AGAINST their own self-interest – ie they know that if less people vaccinated less people would get sick and they would have less work, but because homeopaths are generally honourable people they consider it more important that people are healthy than that they can pay for their Porsches and yachts. And of course that isn't even taking into account the fact that ALL health professionals run the risk of having the same done to them as what happened to Wakefield if they speak up.

But the point is moot anyway (this is where the "mostly stupid" comes in) because – as I keep trying to explain to you - homeopaths (or AGW skeptics for that matter) never say "trust me" the way allopathic doctors do so whether or not they have a vested interest is completely irrelevant. You see unlike you I don't believe in mob justice and that anybody who disagrees with me should be gagged and I believe that everybody is entitled to defend themselves. An accused felon has a vested interest in their acquittal but it would be every bit as stupid not to bother checking out their alibi as it would be to take them at their word when they profess their innocence. Is this really that difficult a concept to understand? I mean I reckon I could explain it to my 6 year old but apparently it is just a bridge too far for the great minds of academia.

Some people lay out the facts when they are debating an issue, others lay out their qualifications. Those people who would have happily pushed the button in the Milgram experiment are primarily concerned with

the latter, those people who wouldn't have given that fatal shock are primarily concerned with the former. What makes the skeptics such as yourself and I stand out though Patrick is that in both our respective cases we need to substitute the word "primarily" for "only".

So all in all, if this was about the credibility of peoples' opinions I would take those who were arguing against their own self-interest or taking a risk by speaking up over those just following the status quo any day of the week but it isn't.

"Let's further ignore the fact that there are people who argue for both whose mortgages do not depend on people believing either of those things – no-one's paying either of us to have this argument, despite what certain folks in these parts seem to believe about SAVN."

No pharma company has EVER paid money to NGOs to lobby indirectly for their cause. And on an unrelated note Santa Claus and the Tooth Fairy are real.

But you're right though, there are many people on your side for whom the term 'useful-idiot' is much more appropriate than 'pharma-whore'.

"So, set all that to one side. What does your claim amount to - the only people we should be listening to are people who don't make a living out of their area of expertise?"

The claim amounts to "if someone lays out their qualifications as a means to win an argument then it is a 99.0 per cent certainty they are full of shit. And if they do this while also having a vested interest in the belief then that likelihood rises to 99.9."

Like · 2 October 2013 at 11:06

Greg Beattie "You're right Greg, I should have been much less sloppy in laying out the various possible fallacies."

A bit worse than sloppy, Patrick. You were trying to obfuscate your way out of a corner by suggesting I was committing a logical fallacy. But you got your fallacies mixed up and ended up talking about two of them as if they were one. To top it off you laid out the second one incorrectly. And all this straight after telling me that my forays into logic were "rather confused" (for some reason that you fail to establish).

Although your 'dishonesty' claim was absurd from the start, I gave you every opportunity to substantiate it. And I've addressed every effort you've made.

Telling the truth about history cannot be considered dishonest by any reasonable person. Trying to stop the truth being told is the dishonest act. That's what you're doing, Patrick. The historical belief is very relevant, as I've explained. It's sufficient for accepting that vaccines work... without any other evidence at all. To suggest that I need to first gauge the level of doubt about whether vaccines work, before telling the truth, is mind boggling. Even if there were no doubt, exposing the belief would still be the *only* honest option.

And you invoke the consensus argument because it's *all* you have. But you know it's fallacious to start with. You also know in this case it's even worse because the belief has the power to form the consensus by itself.

When the belief is removed from the table, as it should be, we might see what effect it had on vaccine sales. If they stay the same that would indicate you were right about it's relevance. But no harm done; it's still good to remove a false belief and know that our decisions are being made without any influence from it. My bet is sales will dry up. But then, we're not likely to see the belief removed while people like you are there to defend its existence despite its truth value. Now that's dishonest.

Like · 2 October 2013 at 12:08 · Edited

12th

Greg Beattie Patrick, there's a belief that God made our world. That belief is of course sufficient for us to accept that God exists (i.e. if you believe the first then you *must* accept the second).

But for a long time others have been trying to demonstrate that the world was not made by God. Of course they haven't been generally popular with devout believers. I'm sure they've been called a few things, including 'dishonest'. And I'm sure many objections have been raised to the publication of their research: objections which didn't always make rational sense. I doubt the researchers were ever required to establish doubt about the existence of God before publishing.

Of course not so long ago the belief that a God made the world was probably near universal: to the point where the law of the land sometimes even enforced its acceptance. Nowadays it's not so widespread, but it does still exist. As scientists came up with each of their pieces of evidence one side (their supporters) cheered them on, while the other side either ignored it or (in the case of devout fundamentalists) objected. Rather than wanting to examine and discuss the evidence they objected to its being made public.

I don't raise this to discuss religion. There are obvious differences between the God argument and the vaccine one so I don't want to get into a discussion of the analogy. I raise this to show you what you look like to me (and possibly many others). You're a die-hard believer. To you information which threatens your belief-world is bad. You'll object to it being made public, and your argument will be made up on the run. You'll reject any discussion of the information. To you the only information of relevance is that which emanates from your priests' mouths. And if any information threatens a belief of your church you'll rule it 'inadmissible'.

Being a philosopher, you'll bring your tools of trade to combat the infidels. You'll *try* to apply them,

sometimes wrongly and irrelevantly, to give people confidence that you 'know' what you're talking about. Because that's how you judge things yourself. You look for authority: someone to believe in. As Tristan said, you look at the lay-out of qualifications. And, child-like, you think that's what everyone else does.

One difference between the God argument and the vaccine one is that we actually have definitive proof vaccines were not responsible for the huge mortality declines. We have a paper trail. Records were kept. (As I said, you may dispute the records, but I haven't seen you do that yet).

But beliefs are hardy. They can be much tougher than reasoned argument and records. There will always be those who object to having them shattered. They'll invoke all sorts of fundamentalist arguments. e.g. "You don't have a right to present that evidence... it's dishonest..." And I love these: "First you need to state whether you believe in God... and also how much doubt you think there is about his existence... etc". In some cases the objections appear to border on insanity.

Like · 2 October 2013 at 12:51 · Edited

Patrick Stokes "Telling the truth about history cannot be considered dishonest by any reasonable person."

Oh really?

- "You should not vote for my opponent. Did you know his great-grandfather was a Nazi? What? It's true, so it can't be dishonest for me to mention his Nazi great-grandfather in this debate."

"Members of the jury, here's irrefutable evidence that the defendant in this theft case cheats on his wife. Of course that's irrelevant to the matter at hand, but it's true, so what's the harm in me exposing it here?"
 "That Danish paper showing no correlation between vaccines and autism must be flawed: one of the authors was arrested on tax fraud charges!"

See what I'm getting at? Context is everything, and in the context in which you raised the historical mortality point, it's simply misleading. Worse, you only brought it in because it's deliberately prejudicial, serving to create a vague atmosphere of unwarranted doubt. As I've shown, there is no valid entailment from "vaccines didn't save us" to "vaccines don't work." You acknowledge this, and yet you keep pushing "vaccines didn't save us" as being somehow relevant. But it can only be relevant if we accept that things are in doubt which are not actually in doubt – a premise your whole argument relies upon which you did not disclose to the committee. It only comes into play if we entertain the rather stunningly unlikely premise that the science of vaccines is wrong, a premise that you did nothing to establish.

And there's nothing even remotely fallacious about appealing to scientific consensus in a policy debate, because that consensus *just is* what we know about the empirical world at any given time. Does it establish that what the consensus currently holds to be true is in some absolute sense ultimately and finally true? Of course not: humans don't have that sort of direct, unmediated access to The Truth. But it's the best – indeed the only – option we have. When it comes to understanding the workings of the physical universe there's only one game in town. You can play it, or you can pick up your ball and go home, but you don't get to stand on the sidelines yelling "You're all doing it wrong, I could play way better!" Like · 2 October 2013 at 13:13

Patrick Stokes Let's leave aside the fact that the existence of God is exactly the wrong sort of belief to bring in here as it's not an empirical belief at all, and so the sort of knowledge we can have of the existence of God is going to be utterly different to our knowledge of the efficacy of vaccines. (That's not to deny that some people do treat God as an empirical posit – the infamous 'God of the Gaps' – but that's a pretty obvious category mistake. Of course I'm a Kierkegaardian, so I would say that!).

To cut to the chase: Yes, epistemic authority matters. Why? Because we live in a world so massively complex that no single person can ever understand all of it, and that requires specialisation. We rely upon the testimony of others and upon the results of our collective knowledge-generating endeavours in order to know anything at all. That doesn't mean these epistemic authorities have authority over everything: you can't, for instance, say you love someone or believe in God *solely* on the basis that a neurologist has run you through and fMRI and noticed the love-related or God-belief-related bits of the brain lighting up whenever your beloved or God is mentioned. Without the subjective dimension such a belief would in fact be false. But "Do vaccines impede the transmission and severity of disease?" or "Is there a causal link between vaccination and autism?" are simply not questions of this kind. They're straightforwardly empirical questions.

You've said what I look like to you, and no doubt to others here. I hope you'll then allow me to return the favour. To me, you look like someone who can't accept that social basis of knowledge: that given we cannot individually encompass every area of human knowledge we frequently have to defer to people who have devoted their finite portion of time to the study of different things than we have. I look to my accountant for financial advice, my mechanic for car advice, and my GP for medical advice, because I don't have a spare fifteen years or more to study those topics in the same depth they have. To assume that I can somehow do their jobs just as well as I do my own without having been formed by the educative processes they've been through would be a failure to admit my own epistemic and intellectual limitations. And to deny that they do, in fact, have an expertise I don't possess would be an arrogant and ideologically-driven denial of reality.

That's what anti-vaxxers look like from the outside – on a good day. On a bad day, it looks more like "You're not the boss of me!" petulance, a simple refusal to accept that in a world where advanced knowledge requires training, untrained opinion carries less weight. You'll call people who have devoted their lives to study and research 'priests' and insist that education doesn't matter because you want to level all knowledge claims into one big relativistic puddle. To me, that's epistemic suicide. Like · 2 October 2013 at 13:56 · Edited

Greg Beattie No, Patrick. Your examples are of irrelevance, not dishonesty. If your opponent was not a

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Nazi it would be dishonest of me to say that he was. But in this case he was. What you're trying to point out is that *you* believe his Nazi-association is of no relevance to the question of whether he is vote-worthy. Another person may view that differently. To them it may be of great relevance. I've already established the relevance of the historical belief in vaccines. It's sufficient for an acceptance that they work. For some it may be the only primary 'evidence' they judge on.

I've explained the relationship many times. You presented nothing substantial to challenge it. So all you're doing now is expressing an unsubstantiated opinion about the relevance of my statement. You do not claim the statement is false; just that *you think* it's not so important.

So your accusation of dishonesty is nothing but an empty accusation. It has no substance. Attempting to return to the start and just make the accusation again is tiresome.

"And there's nothing even remotely fallacious about appealing to scientific consensus in a policy debate,... "

I'm sure you're familiar with 'Argumentum ad populum' but just in case... http://en.wikipedia.org/wiki/Argumentum_ad_populum

You argue that we can accept the absence of doubt simply because of a perceived consensus. Fallacious from the start. It may be a piece of evidence you wish to present, but why do so when I've already dealt with it? It's inconsequential because it necessarily follows from the belief that's being negated. Unless you quantify how much of the consensus is the result of alternate evidence. But I imagine you don't have that info. In fact, you don't even want to look at the info.

Argumentum ad populum - Wikipedia, the free encyclopedia en.wikipedia.org

cn.wikipcula.org

In argumentation theory, an argumentum ad populum (Latin for "appeal to the peop... See more

Like · 2 October 2013 at 14:35

Greg Beattie The first para of the God/vaccine reply was a waste. I'd already made it clear it wasn't raised as an analogy.

The rest of it... for a start, it's not me who views researchers as priests. I was saying that's what *you* do. It's painfully obvious and you repeated it again.

As Tristan told you many times, we all defer to 'experts' when we choose. But sometimes it's not necessary and sometimes it's not wise. How many lost their life's savings after following the advice of experts? How many lost their life?

What do you do when you can see an error with your own eyes? e.g. What do you do when your mechanic tells you you need six new tyres because your car has six wheels? Bow to him and pay (Patrick's way)? Or slink off and say "Thanks, I'll come back and do that sometime". Or do you have the guts to walk him out to the car and count the four of them with him?

I you choose the last option, what if another customer notices you and says "Hey! That's my mechanic you're questioning. Have some respect"? Oh yes, certainly. I'm nothing. I shouldn't question a mechanic who knows everything about cars. How could I possibly know how many wheels my car has?

Experts are fine but it's all about positioning them wisely in your life, and your community. When the country's top experts declare that vaccines were responsible for the massive drop in deaths over the past century, but the data show unequivocally that they're wrong, it's time to speak up. Child-like believers won't like it but that's too bad.

Something's wrong at a fundamental level and I want it exposed. If they can defend their declarations, they will. So far they haven't. No one needs a pest on the sidelines shouting "Stop showing everyone that". Are you worried for them? Do you think they can't defend themselves? Perhaps you're right. Like · 2 October 2013 at 14:50

Tristan Wells "And there's nothing even remotely fallacious about appealing to scientific consensus in a policy debate, because that consensus *just is* what we know about the empirical world at any given time. Does it establish that what the consensus currently holds to be true is in some absolute sense ultimately and finally true? Of course not: humans don't have that sort of direct, unmediated access to The Truth. But it's the best – indeed the only – option we have."

But Patrick, if consensus is always the best option we have then how on earth could we EVER justify changing our minds on anything?

Anyway I have to congratulate you as somehow you have made this effort of a fellow SAVNer https://groups.google.com/forum/... look like a spectacular success.

"would be a failure to admit my own epistemic and intellectual limitations"

It is not as if that is a big secret Patrick. Like · 2 October 2013 at 15:20 · Edited

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Patrick Stokes 'If your opponent was not a Nazi it would be dishonest of me to say that he was. But in this case he was" – eh? You're saying that in that example because someone's great-grandfather was a Nazi he, too, is therefore a Nazi? I'm sure that's not actually what you meant. You're right that the accusation would be irrelevant, but introducing pejorative irrelevant information in certain contexts is also dishonest. It's an attempt to bring people around to an unearned conclusion.

And again you keep appealing to "some people may think otherwise." To be blunt: so what? Why should we care why the person in the street thinks vaccines work if we know they actually do work (an assumption which remains in place until you can disprove it)? Are we relativists now? Likewise, you've maintained all along that "For some [the historical belief] may be the only primary 'evidence' they judge on." Again, how is that relevant? Are we making policy based on what is demonstrably the case, or on the basis of what a substantial percentage of the population happen to believe?

"You do not claim the statement is false; just that *you think* it's not so important." – No, I've argued, quite clearly, for why it *is* irrelevant. You've not managed to rebut that argument without appealing to the false premise that there exists warranted doubt.

"So your accusation of dishonesty is nothing but an empty accusation. It has no substance." – You went before a committee of parliamentarians and tried to make it sound like vaccines don't work without actually establishing that they don't. If there's a better name for that than dishonesty, I'm all ears.

Appealing to a consensus of experts is not a fallacious argumentum ad populum, just as an appeal to authority is not automatically fallacious (it becomes fallacious when the authorities appealed to don't possess the requisite authority e.g. "My accountant says I don't have cancer, therefore I don't" or the appeal is taken to establish more than it can e.g. "My doctor says I don't have cancer and therefore it is logically impossible for me to have cancer"). You don't think overwhelming consensus among scientists counts as strong evidence for the truth of a proposition?

"As Tristan told you many times, we all defer to 'experts' when we choose. But sometimes it's not necessary and sometimes it's not wise. How many lost their life's savings after following the advice of experts? How many lost their life?"

- Plenty, and I've said all along that no-one, individually or collectively, is infallible. But what you and Tristan seem to think that you have your own epistemic resources to fall back on in cases where you don't want to trust experts. There may be relatively straightforward areas of knowledge where that holds true – like counting wheels on a car. But science quite simply isn't like that, and hasn't been for a very long time. We're talking about disciplines that have progressed well past the point where those without training, or even generalists with training, are in a position to assess the validity of claims made within those disciplines. You can see with your own eyes that a car doesn't have six wheels, but the more complex an area of knowledge the more unlikely it is that the untrained eye is trustworthy. There comes a point where you have to admit you simply don't have the resources (i.e. study) or defer to someone who does. Now, that needn't mean you're obliged to trust every individual expert – there's dodgy researchers just as there's dodgy mechanics – but any rational and workable practical epistemology would have to hold a prima facie (and defeasible) presupposition that expert opinion is more trustworthy than non-expert opinion. What you're doing here is more like storming out of the mechanic's saying "The entire field of auto mechanics is a scam! No-one knows, or can know, anything about cars at all!"

Like · 2 October 2013 at 15:26

Tristan Wells "You'll call people who have devoted their lives to study and research 'priests' and insist that education doesn't matter because you want to level all knowledge claims into one big relativistic puddle."

You don't like the idea of "equality" when it comes to knowledge Patrick? Just be careful because there is a guy who regularly posts on this site (a complete and utter fool as it turns out) who thinks such people are "jarringly unattractive" and "misanthropic".

Like · 2 October 2013 at 15:28

Patrick Stokes Seems to have touched a nerve, that comment. How interesting. Like - 2 October 2013 at 15:38

Tristan Wells Hahahaha! No. I just love using your own words to demonstrate what sort of a person you are. I will admit though that the comment you made about how I wanted my kids to die touched a nerve so feel free to high five your fellow SAVNites over that "victory".

"You don't think overwhelming consensus among scientists counts as strong evidence for the truth of a proposition?"

Patrick Stokes: Just followin' orders since 1970 (or whenever you were born).

Actually, I could ask you whether you support democracy given that presumably the last thing you would want is people unqualified in economics having a say in such things but we both know you only care about the whole "expertise" thing when it suits you.

Like · 2 October 2013 at 17:53

Tristan Wells "What you're doing here is more like storming out of the mechanic's saying "The entire field of auto mechanics is a scam! No-one knows, or can know, anything about cars at all!""

Not believing someone's belief is true = not believing anything is true. Got it.

Like · 2 October 2013 at 18:04



Greg Beattie "You're saying that in that example because someone's great-grandfather was a Nazi he, too, is therefore a Nazi? I'm sure that's not actually what you meant."

No. It's not. But it's my fault. I wasn't clear. What I was trying to saying was that if my opponent was not a Nazi it would be dishonest of me to say he was. But in the present case (the vaccine issue) he was (the claim was directly relevant). With the Nazi example it's relevance to the vote is something for voters to decide. Instead of "But in this case he was" I should have written "In the vaccines case the belief is directly relevant".

What you've done is take a few examples in which the claim is not directly relevant to the subject under question. Although, in each case, the relevance is ultimately judged by the audience, so the answer will be different for different people.

"And again you keep appealing to "some people may think otherwise." To be blunt: so what?"

To the people who think otherwise it's material. And you don't know who they are, nor how many they are. It could be everyone, and I assert that it probably is, for reasons I've already presented. Now you many think otherwise but, to be blunt: so what?

"You went before a committee of parliamentarians and tried to make it sound like vaccines don't work without actually establishing that they don't. If there's a better name for that than dishonesty, I'm all ears."

You're talking about intent, Patrick. You're saying that I intended to deceive. Unfortunately for you, you have no evidence of that. Absolutely none. And I'm sure if you could find evidence of intent to 'make it sound' like something it wasn't, you would have done so. The whole thing was published in writing. So if evidence exists you have free access to it. You have none so shut up. You're just being mischievous.

All you can reasonably do is disagree with me about the relevance of the information. That's your right. I say it's of great relevance because I think it influences our collective faith in vaccines. I can't prove that but you can't prove otherwise. So it's a question of relevance for each person who encounters the information. That's the only honest option.

"You don't think overwhelming consensus among scientists counts as strong evidence for the truth of a proposition?"

You don't think that official records establishing that they are wrong counts as strong evidence that they are in fact wrong?

"But what you and Tristan seem to think that you have your own epistemic resources to fall back on in cases where you don't want to trust experts."

They're not my own epistemic resources. They're publicly available official data. They are *the only record* available. Again, look at the graphs and tell me you still believe the claim of the experts. Go on.

I mean what's wrong with pointing this out? For crying out loud, do you really want it to be kept quiet! Are you frightened? If the truth hurts, let it burn. The more it hurts the more you needed to hear it.

"There may be relatively straightforward areas of knowledge where that holds true - like counting wheels on a car.... You can see with your own eyes that a car doesn't have six wheels, but the more complex an area of knowledge the more unlikely it is that the untrained eye is trustworthy."

Hallelujah! Look at the graphs. You can see it with your own eyes. It's like counting wheels on a car. Even you can do it.

"There comes a point where you have to admit you simply don't have the resources yourself to determine whether a claim is true or not."

Again, look at the graphs. Does it look too hard? If so, then give up and go home. But leave those of us who are not willfully blind to come to our conclusions. And let us share the evidence with others.

"...any rational and workable practical epistemology would have to hold a prima facie (and defeasible) presupposition that expert opinion is more trustworthy than non-expert opinion."

This has nothing to do with opinion. Again, look at the graphs. It's straightforward. The claim is false. If an expert tells you otherwise then that just proves their value expertise is worthless. They're obviously not an expert on this question.

"What you're doing here is more like storming out of the mechanic's saying "The entire field of auto mechanics is a scam! No-one knows, or can know, anything about cars at all!""

Not at all. But if mechanics banded together and started a mass marketing campaign aimed at convincing everyone that cars had six wheels, I'd say they would attract some attention. And when enough people see the vaccine graphs they will probably be similarly displeased.

Like · 2 October 2013 at 18:08

Patrick Stokes I didn't say you wanted your kids to die - you may be the poster boy for Dunning-Kruger

but I don't think you're a monster. And if some dim voice of conscience is telling you to stop putting your just-gotta-be-different hipsterish attachment to your anti-medicine views ahead of taking your kids to the doctor when they're sick, I'd suggest you listen to it. I suspect that if push came to shove - and I sincerely hope it does not - you would.

(Christ, 1970? Do I really look *that* old in my profile pic? That's depressing).

It's entirely reasonable to both endorse democracy as a means of answering questions of policy without believing that truth itself is determined by popular vote. In your example, there's an important difference between determining e.g. how much welfare the state will provide or whether public spending should be cut, and getting rid of the RBA and giving everyone a vote on whether to raise or lower interest rates. Like · 2 October 2013 at 18:19

A

Patrick Stokes Relevance is determined by reasoned argument, not by whatever a given audience happens to judge. 'Relevance' here is a normative term: not what people do in fact think is salient but what they should i.e. what is in fact logically connected to the issue at hand. Otherwise, again, we slip into relativism.

Actually I don't have to prove intent re: dishonesty. As I've said all along, I don't believe you were lying. But you did present a misleading case, and it was your responsibility not to do so.

And now you're back to arguing "But the graphs really do show I'm right!" And I haven't said otherwise (though it does seem you and Tristan both seem to have a lot of faith in cause-of-death data but none in notification data – are doctors only able to diagnose dead patients?), but again, whatever the graphs tell us, they're answering the wrong question. If vaccine efficacy has established – and again that's the current view and the onus is on you to show otherwise – then the graphs don't tell us anything relevant to the question of what contemporary policy should be. If you were presenting at a conference on the history of public health or sitting on a QI panel or something it might be relevant in that context, and good luck to you. When the question is "Should we be discouraging people from refusing to vaccinate their kids?" it's not merely a distraction, but a dangerous one. It instils a doubt that is not warranted. Like + 2 October 2013 at 18:36

Tristan Wells You could have worked out that what I meant was that my kids had up until this point never been sick enough to require taking to the doctor but you instead interpreted that as me being happy to see them die just to satiate my ego. If you weren't sure what I meant - which would have been obvious to anybody else - you could have asked rather than saying something so vile.

"It's entirely reasonable to both endorse democracy as a means of answering questions of policy without believing that truth itself is determined by popular vote." Que? You're the one who believes in consensus I was simply pointing out if you don't have an economics degree I can't see how by your logic you should be allowed to decide on anything as complex as economic policy. Oh wait! That's right. Whether or not things are simple or complex depends on if it suits Patrick.

Like · 2 October 2013 at 18:49

Patrick Stokes My exact words: "As you seem to boast above, you'll even put the health of your children at risk by not taking them doctors rather than have to admit that you're ever not the smartest guy in the room. I hope that's just more bluster, I really do." Nothing about anyone dying, and certainly nothing about your being 'happy to' see such a thing happen. But you've said you went to get CO forms i.e. you've backed your own beliefs ahead of medical consensus when it comes to your kids' health.

I already answered the point on economics. Like · 2 October 2013 at 19:04

Tristan Wells "Relevance is determined by reasoned argument, not by whatever a given audience happens to judge."

How do you do it Patrick? How is it that you cannot write one single sentence that doesn't completely beclown yourself? Here you are saying that people's opinions have no bearing on reality. But Greg never said that. He said that people's opinions have plenty of bearing on people's opinions. And call me biased but I actually agree with him. But do you know which complete and utter clown does think that people's opinions have a strong bearing on reality? You. Over and over and over you tell us that we should ignore real world data and instead focus on people's opinions to get to the truth of the matter. And when we tell you that is invalid you say "no it's fine I make up the rules of logic to suit myself". There are times it is OK to listen to authority but there are zero times when authority can be validly used to win an argument (ie to counter real world data). One person's opinion does not change reality. Lots of people's opinions does not change reality – therefore trying to win an argument (countering real world data) by appealing to authority is invalid - irrelevant. You can't even use it as an inductive argument. The moment someone points to a real world phenomenon then authority immediately loses what tiny smidgen of use it ever had (both for or against).

"Nothing about anyone dying, and certainly nothing about your being 'happy to' see such a thing happen."

You claimed that from my "bluster" my kids' welfare must be a trivial consideration relative to my own ego. I described your interpretation as "being happy to see them die just to satiate my ego". You know sometimes it is just easier to apologise rather than go through all this idiotic obfuscation. But never mind, I have completely disabused myself of any notion that you are capable of any sort of self-reflection or improvement. You have even taken to running back to the safety of the SAVN site to hurl abuse at us so you can feel better about yourself. Just a quality person all round. Like · 3 October 2013 at 10:30

KAL C

Greg Beattie "Actually I don't have to prove intent re: dishonesty. As I've said all along, I don't believe you were lying. But you did present a misleading case, and it was your responsibility not to do so."

Your accusation was one of intent. You said I "tried to make it sound like vaccines don't work without actually establishing that they don't". By using the words "you tried" you're attributing intent to me. But who said anything about *proving* it. I pointed out you have no evidence. And just to add the emphasis again, you have *absolutely no evidence*. Given the whole thing is recorded, it's quite interesting that no evidence exists for your accusation. It's all in your head. That makes it frivolous or, as I said, mischievous.

And the relevance bit... seriously! Tristan covered it well but I'll add more. We've already established that the belief has the capacity, by itself, to convince the committee members (and everyone else) that vaccines work. Therefore it's entirely relevant that it is corrected. It's up to them to decide individually how much the belief has influenced their position, and whether it's changed as a result of learning new evidence about it. It's not your decision to gauge the relevance for them.

Like · 3 October 2013 at 11:02

Patrick Stokes "[Greg] said that people's opinions have plenty of bearing on people's opinions." Yes, and what I said was that we don't base public policy on what the public happen to think but on what happens to be true. What's 'true'? For beings like us, the best approximation to Truth we can hope for with respect to complex empirical questions is whatever the current view is within the relevant field of inquiry. That's all there is.

When have I ever said "we should ignore real world data and instead focus on people's opinions to get to the truth of the matter"? What I've said consistently is that the opinions of untrained people on matters that require training don't carry weight. "Real world data" means nothing in the hands of people who aren't trained to know what to do with it. If you hand me an oboe I can probably get some sort of hideous noise out of it – but that doesn't mean then get to march to the nearest orchestra and tell the oboe player (oboist?) that they're obviously playing the sheet music wrong because it doesn't sound like what I'm 'playing.'

"There are times it is OK to listen to authority but there are zero times when authority can be validly used to win an argument (ie to counter real world data) [...]You can't even use it as an inductive argument." - Well "counter real-world data" is irrelevant if the significance of the data in question depends upon interpretation (ditto the invocation of 'real-world phenomena'). And of course you can use the opinions of epistemic authorities as evidence towards an inductive conclusion! It's still inductive and as such could still be wrong, but then empirical knowledge is pretty much always falsifiable. And as non-expert agents we're having to do just that all the time.

"You have even taken to running back to the safety of the SAVN site to hurl abuse at us" – I have? I've actually hardly posted over there lately, and on the two occasions I've mentioned you recently it's to say noone should name your employer. (Though I did suggest there's something hypocritical about a government economist who doesn't believe in government or economics).

Anyway, you can draw whatever conclusions about my character you see fit. But one thing I won't take is advice on "self-reflection and improvement" from someone who can't sustain an argument without abuse and invective, and will impugn the motives, impartiality and intelligence of everyone who disagrees with him rather than admit that the reason everyone disagrees with him might just be that, well, everyone else is actually right and he's actually wrong.

Like · 3 October 2013 at 20:22

Patrick Stokes "Your accusation was one of intent. You said I "tried to make it sound like vaccines don't work without actually establishing that they don't". By using the words "you tried" you're attributing intent to me."

So you're saying you weren't dishonest in introducing a misleading argument, merely negligent? Either way, intent doesn't ultimately matter: it was your responsibility not to submit a misleading argument, and yet that's precisely what you did.

" We've already established that the belief has the capacity, by itself, to convince the committee members (and everyone else) that vaccines work."

- Which, again, would only matter if the committee was rationally entitled to doubt the medical consensus that they do in fact work. They weren't, so it doesn't.

Like · 3 October 2013 at 20:23

Tristan Wells "For beings like us, the best approximation to Truth we can hope for with respect to complex empirical questions is whatever the current view is within the relevant field of inquiry. That's all there is."

And to think there are people out there claiming a university education is a complete waste of time and money.

Like · 4 October 2013 at 10:25 · Edited

Tristan Wells I don't believe in economics?

Que? Like · 4 October 2013 at 10:29

Patrick Stokes "I believe that were you to tally up the success rates of the hegemonic views in similar

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fields of knowledge (eg economics, astronomy, metaphysics) vs say engineering (and IT recently) throughout history you would find an astonishingly low success rate (in terms of things we would both agree were right or wrong). I doubt it would be above 1 per cent but that's just a guess." - Tristan, 31 August. Like · 4 October 2013 at 13:39

Tristan Wells Yes. nd? Not believing the hegemony on an issue isn't the same as saying t e study of s aid issue is illegitimate or even that everybody's thughts on the issue are wrong. In point of fact the cu rrent hegemonic vie on what is (stupidly) called micro-economics I actually don't mind (I d n't agree with some details and but in general the methodology is helpfl and the conclusions reasonable). But what we ca II macroconomics (generally Keynesian) is every kind of stupid. Anybody with an IQ over 50 should be able to understand why you can't aggregate somethirthat is by definition a relative concept. And if you think th at homeopathy contravenes every known law of physics I can't imagine how you could cope with the idea that natural disasters and war lead to economic prosperity - well actually I do know, you will tell yourself "Duuuuh, what do the experts think?" And if you want to describe the substitution effect as an economic law (which 'microeconomics' does) then you can't just pretend it doesn't exist when it no longer suits you.

Well I suppose you can - we could call it the Patrick Stokes rule! Experts are whoever Patrick Stokes decides them to be. Complex is anything Patrick Stokes couldn't be arsed reading up on. Logical fallacies are any argument that makes Patrick Stokes look foolish. Denying free speech is only immoral if it is Patrick Stokes' speech being denied. Questioning the character of people who disagree with you is only unfair if they also agree with Patrick Stokes. Picking a fight means you can't decide the tone of the debate unless Patrick Stokes is the one who did the picking. Dishonesty is whenever you lay out evidence that calls into question Patrick Stokes' beliefs. Irrelevance is bringing up facts that Patrick Stokes desperately wants to be covered up.

And FYI, you don't understand the meaning of the word "hypocrisy" either. It DOESN'T mean "not wishing to feather one's own nest".

Like · 4 October 2013 at 14:47 · Edited

Greg Beattie - "So you're saying you weren't dishonest in introducing a misleading argument, merely negligent?"

So we're back to the start? And now it's my turn to ask you why you think it's a misleading argument... again. Then you repeat what you said way back in the beginning, Then I repeat my responses. Why don't we just cut and paste?

Patrick, we've already established you have nothing to back your accusation that I was misleading. It was painful but I patiently responded to everything you could think of. We're not going over it again. Give up. You have nothing to back any of your arguments. Just tiresome obfuscation, over and over.

I'm actually disappointed. I really thought there was a chance of meaningful discussion with you. But you're just sticking around hoping to convince any who might be watching that you haven't really lost. But I bet you think everyone who hasn't been 'educated' to your level wouldn't know the difference between decent argument and the mess you've served up.

Like · 6 October 2013 at 01:01

Patrick Stokes Tristan: I appreciate the clarification of your views on macro vs. micro-economics, thanks. That's genuinely helpful.

Greg: you can continue to deny it all you like but any reasonable observer would conclude that you've failed to refute the argument I have clearly and consistently made here: you made an argument to a public committee that's only relevant if doubt about vaccine efficacy is warranted. We have no such warrant, therefore the argument is irrelevant. In the context, this is either dishonest or – to be very charitable – simply negligent. You've tried to wriggle out of this by invoking a bunch of similarly irrelevant concerns about the origins of whatever beliefs the public or the committee members might happen to hold. But none of it has touched the validity of the argument.

Free speech is a crucially important right. That right also carries equally serious responsibilities. One of these responsibilities is not asserting things to be true when those assertions are unwarranted, especially when the potential consequences of making these statements include real harm. If you're going to involve yourself in a public policy debate, particularly one with serious public health implications, you need to be extremely careful to make sure you say nothing unjustified and nothing that could cloud or distort the discussion. It's clear you've failed to meet that standard.

Like · 6 October 2013 at 21:38

Greg Beattie "One of these responsibilities is not asserting things to be true when those assertions are unwarranted, especially when the potential consequences of making these statements include real harm."

Patrick, the graphs tell the truth. The belief is a lie. To not correct that lie would be negligent at best, especially when it is so easily done. To argue for the lie's perpetuation is, in my opinion, bordering on criminal. Claiming I was 'dishonest' because I corrected the lie was a silly mistake. But to defend yourself in the lame way you have is a level of silly I wouldn't have believed had I not seen it with my own eyes.

You failed to substantiate your accusation in any way. No surprise there but, believe it or not, that was *your* job. All I did was ask for a decent reason. I'm still waiting for one that holds water.

So far all you've come up with is 'the graphs are not relevant'. That argument relies on them being of no relevance to any member of the committee. I don't know how you would establish that, but that's for you to

work out. Just to show you how difficult it might be, I've put forward a logical explanation as to why they are relevant (remember "if p, then q"). As long as one member of the committee has, to some extent, had their outlook on the value of vaccines influenced by the belief, the graphs are relevant. You haven't refuted that.

I actually go a bit further and reckon all members of the committee would have been profoundly influenced by the belief. I can't prove that but I don't have to. I can go on a hunch and present the graphs on the assumption that there was at least some degree of influence. There's nothing dishonest about that. The worst that can happen, if I'm wrong, is the committee learns something that they didn't personally find informative for the job at hand. I think that's highly unlikely but you've been welcome to show me otherwise for a few weeks now.

Another hunch I have is that you're desperately trying to paint me shady, because you know the graphs tell a powerful story and it's one you would rather not hear. In a way it's more comfortable for you to satisfy yourself that I'm dishonest. It's easier than facing the revelation that your beloved 'experts' have systematically lied to you for your entire life. As I said earlier, the truth sometimes hurts. Like · 9 October 2013 at 23:00

Tristan Wells But Greg we just have to trust people don't you know? Particularly nameless, faceless people that Patrick believes are omniscient. The beauty of these people though is that according to Patrick none of them exist. He has admitted that physicians, researchers and health bureaucrats aren't experts (because according to him a) to be an expert you need to take responsibility if your advice leads to damage; and b) he doesn't think any of these people should bear any responsibility for said damage) but he has also claimed that he doesn't trust pharmaceutical companies so who is he left with?

So we must all listen to the experts even though they don't exist. Like \cdot 10 October 2013 at 07:26

Patrick Stokes Again, Greg, you're trying to justify presenting graphs that demonstrate something irrelevant to the question by appealing to something else that's irrelevant: "As long as one member of the committee has, to some extent, had their outlook on the value of vaccines influenced by the belief, the graphs are relevant." But why the committee members happen to believe vaccines work is of no relevance if there is, in fact, no warranted doubt that vaccines work. And that's the whole point: your entire argument only has any significance if you smuggle in the unstated, undefended claim that there is warranted doubt. If you're going to make an argument that depends on, to put it very mildly, a highly controversial claim, you need to establish that claim first (which means doing some proper science). Unless and until you've done so, you can't legitimately present the graphs as significant for policy discussions. They tell us nothing we need to know for that purpose, and so presenting them in that context is simply prejudicial.

And if you're going to make expansive and morally problematic (again, putting it very mildly) claims like "your beloved 'experts' have systematically lied to you for your entire life" you'd better be prepared to back them up with something more than a few non-peer-reviewed graphs that can't establish anything like such a conclusion.

Tristan: when have I said doctors, researchers and health bureaucrats shouldn't bear any responsibility for damage?

Like · 10 October 2013 at 11:33

Tristan Wells You (Sep 17 5:11): "but if you want to be treated as experts then you have to earn it and to accept the responsibility that comes with that."

Me (Sep 18): "As for accepting responsibility – I can only assume you find it appalling that vaccine producers and doctors are shielded from liability for any damage their products cause then?"

You (Sep 18): "Should drug companies be responsible for the quality control of their product? Yes. I don't see that doctors should be liable if they administer properly however."

To put it another way, you think that in order to have your advice treated with authority you need to be prepared to accept responsibility if things go wrong as a result. But if a doctor tells you a vaccine is safe and he/she administers it correctly you don't think they should be held responsible ie you don't think they could be deemed authorities on the safety of (correctly administered) vaccines. In other words – according to your logic – their opinions on whether or not vaccines are safe are worthless. (I assume you also wouldn't think doctors should be liable if a vaxed child got the disease anyway so it would therefore apply to their opinions on vaccine efficacy as well.)

Now you did claim that pharma companies SHOULD be held responsible but of course they are not ACTUALLY legally liable so – according to your logic – they can't be authoritative either. What's more, you said on September 23: "that there's a kid with congenital rubella syndrome on every street corner and we just didn't notice because we're all in thrall to GSK and Merck." In other words you explicitly reject the notion that you are putting your trust in pharma companies.

True, you didn't mention non-pharma associated researchers and health bureaucrats but I figured that in omitting them you were saying that they shouldn't be held liable either. You are of course welcome to correct me on that but it is a moot point anyway because regardless of what you (and I) believe should be the case, they aren't liable and therefore can't be - according to your logic - authoritative.

How exactly do you think you can win this argument when I remember and understand what you say better than you do Patrick?

Like · 11 October 2013 at 07:38 · Edited



Tristan Wells "And that's the whole point: your entire argument only has any significance if you smuggle in the unstated, undefended claim that there is warranted doubt."

Translation: "I really really want to believe in vaccines so if you ever provide anything that might cause me to question my long-cherished beliefs you must be lying."

And to think you get upset when we compare vaccination to dogma.

Greg, are we absolutely sure that Patrick isn't just trying to parody the astonishing credulity and groupthink of the skeptics?

Seriously Patrick, that is one of the stupidest "whole points" I have ever read: You can't demonstrate something is or is not true unless somebody else has already done that (to your satisfaction) previously.

Although to be fair, it has a hell of a lot of competition on this thread. Like \cdot 11 October 2013 at 10:09 \cdot Edited

Patrick Stokes My point stands, Tristan: there is no serious question that vaccines work among anyone whose view on the topic actually matters. That's a very simple reality you seem singularly unable to get your head around - or, rather, you just don't want to accept the realities of social epistemology. You and Greg saying "nuh-uh" does not constitute warrant for serious doubt. If you want to call vaccine efficacy into question, you're wasting your time posting here - because funnily enough, "three random guys with no scientific training between them arguing about vaccines 214 replies deep on a comment on a thread from two months ago on an antivax activist group's Facebook page" is not one of society's more significant knowledge-producing structures.

Like · 11 October 2013 at 11:37

Greg Beattie Patrick, if you want your point of 'no relevance' to stick it's your job to demonstrate that the members of the committee are in no doubt about the value of vaccines.

Good luck with that. And remember, you have to discount the influence that the belief has had on it. As we know, the belief itself has the capacity to remove all doubt. So what you need to do is measure what's left of their faith after subtracting the contribution of the belief.

So... again, good luck! Let us know how you go. Like · 11 October 2013 at 17:39

Greg Beattie Remember, if someone is accused of something it's the job of the accuser to substantiate the case. Not the other way around.

Like · 11 October 2013 at 17:40

Patrick Stokes "Patrick, if you want your point of 'no relevance' to stick it's your job to demonstrate that the members of the committee are in no doubt about the value of vaccines."

Nonsense: as I said, whatever views the committee members might happen to hold about vaccine efficacy are utterly immaterial. It's not their job to determine whether vaccines work; it's their job to formulate policy responses taking the current state of empirical knowledge into account - and the content of that current state is determined by science. And again, given the current consensus within the relevant disciplines, there is simply no warranted doubt as to efficacy; and it's dishonest to pretend otherwise, or to lead an argument that depends on that being the case.

Like · 11 October 2013 at 22:22

Greg Beattie "...whatever views the committee members might happen to hold about vaccine efficacy are utterly immaterial."

Given they make the decisions, after weighing perceived value (among other things), their views are anything but immaterial. Not everyone believes 100% in the virtue of vaccination, Patrick. Sorry if you find that jarring (something tells me you will). There are a range of views. Are you so foolish as to pretend otherwise?

Given that our collective faith in the virtue of vaccines has been partly informed by a false belief, it is *very* relevant to expose and correct that belief. I think it's a mark of a mature community when we're able to do that without fear. And it's important that we identify and expose those who attempt to stop that from happening. Yes, I'm talking about you.

As I said, if you want to establish that the graphs have no relevance in the minds of the decision makers you will need some information to support that. Until then it's just pure conjecture. It's counter-intuitive and a desperate attempt to smear in order to prevent the truth from surfacing, and possibly protect your injured reputation. Unless Tristan's right about the parody. Tell me it's all a joke. I promise I'll laugh. Like · 12 October 2013 at 01:11

Tristan Wells "My point stands, Tristan: there is no serious question that vaccines work among anyone whose view on the topic actually matters."

Thanks Patrick. Good to know you a) know exactly what everybody thinks on an issue through your ability to read minds; and b) are the final arbiter in which people matter and which people don't.

I just love the fact that you hit 'enter' thinking to yourself: "Yep. I really climbed out of that hole".

But if it's alright with you I might employ my own omniscience here to tell you that you are - without any

equivocation – the worst philosopher in history.

"That's a very simple reality you seem singularly unable to get your head around - or, rather, you just don't want to accept the realities of social epistemology."

Aaaah, the "realities" of "social epistemology". How I can even get out of bed in the morning without them is one of the universe's great mysteries.

"If you want to call vaccine efficacy into question, you're wasting your time posting here - because funnily enough, "three random guys with no scientific training between them arguing about vaccines 214 replies deep on a comment on a thread from two months ago on an antivax activist group's Facebook page" is not one of society's more significant knowledge-producing structures."

So you do want us to call vaccine efficacy into question Patrick? Well in that case you can rest assured that many people have been persuaded/had their doubts on vaccines crystallised by Greg (and to a lesser extent myself) and many more will in the future irrespective of what happens here. But given that you have taken such an interest and you have such a band of lickspittles I reckon it only reasonable that we take the time to point out your fallacies, your ignorance, your wild accusations and your totalitarian proclivities. Having said that I (and I suspect Greg) do genuinely marvel at your ability to withstand the most abject humiliation over and over and still come back for more. So as long as we are dishing out advice then can I point out that people with such a proclivity can make an awful lot of money?

Like · 12 October 2013 at 08:11

2

Patrick Stokes "Not everyone believes 100% in the virtue of vaccination, Patrick." – True, but among those whose views actually matter there seems to be no real doubt. Lots of people believe lots of unwarranted things, but we don't think those views need to be taken seriously by policy makers. The committee members are, quite simply, not entitled to (or more accurately not morally entitled to act upon) their own views on vaccine efficacy, any more than Andrew Bolt is entitled to his own views on AGW or I'm entitled to my own views on nuclear physics or you're entitled to your doubts about vaccine efficacy. They're not properly equipped to make determinations of empirical fact, so the only rational option available to them is to rely on those who are. There is, quite simply, no other option than such reliance apart from a 'no-one knows anything!' epistemic suicide, the sort of global scepticism one can maintain for a few moments in a philosophy seminar room but not in any serious way once you walk out the door. (Antirealists who deny the existence of an objective external world still look both ways when they cross the street).

I think part of the confusion here is that you're taking 'relevant' as a purely descriptive concept: what's relevant is determined, in your view, by what the committee members happen to believe. I'm using 'relevant' here as a normative concept: what is relevant is what should matter in determining a policy response, not what might actually have an influence in any given case. In normative terms it doesn't really matter why the committee members happen to believe that vaccines work; what matters is that they act rationally, which here means acting upon the best available picture of the empirical facts, which means accepting the science. "Collective faith" means nothing, and your continually appealing to it is a furphy. It implies that absent such a popular 'faith' there's warranted doubt when there simply isn't. If you want to establish warranted doubt, go do some proper science. There is no other way. In the meantime, stop making arguments that rely upon assumptions you haven't properly established.

Like · 12 October 2013 at 12:46

Tristan Wells "I think part of the confusion here is that you're taking 'relevant' as a purely descriptive concept"

Actually I think the confusion lies in the fact that we are trying to deal with you as though you are a conscious being rather than a mindless vassal for other's thoughts. Well to be fair I haven't but Greg Beattie has because he is a lot nicer.

"There is, quite simply, no other option than such reliance apart from a 'no-one knows anything!' epistemic suicide"

It's funny you should say that, because suicide is exactly what I would commit if I believed I could never engage in my own thoughts. Like · 12 October 2013 at 16:03

Tristan Wells "The committee members are, quite simply, not entitled to (or more accurately not morally entitled to act upon) their own views on vaccine efficacy,"

So you do believe in mandatory vaccination?

What a shock! The totalitarian pathological liar lies through his teeth about not wanting to use violence to impose his views on others but slips up because he is as stupid as he is dishonest. Like · 12 October 2013 at 16:07

Tristan Wells "The committee members are, quite simply, not entitled to (or more accurately not morally entitled to act upon) their own views on vaccine efficacy, any more than Andrew Bolt is entitled to his own views on AGW or I'm entitled to my own views on nuclear physics or you're entitled to your doubts about vaccine efficacy."

"Sniff sniff, it's not fair mummy! The big bad meanies at the AVN have opinions that I don't agree with. They have no right! Make them stop please!

Everybody I work with has the exact same opinions as me, and my students had better have those exact

same opinions too unless they want a big fat 'F' on their papers so where do these evil nasty people get off thinking they can be any different?

What's that mummy? You think they might have a point? No! Say it ain't so! How dare you? You have no right either! You must have been brainwashed!

You don't count mummy! Your actions and opinions are irrelevant. Now go and fix all the world's problems for me."

Like · 14 October 2013 at 10:10

Greg Beattie We're not confused, Patrick. We know what you're saying. You feel the views that committee members hold about vaccination don't matter. The only thing that really matters is the truth. And I'm sure we all agree the truth would be great.

The trouble is we can't know entirely what the truth is. There are in fact a range of views about what it is. Your solution to this is to only take the views of experts: people 'qualified' to have formed a good view. And by 'qualified' you've selected...? (Actually, I'd like you to clarify exactly who you think fits the bill.)

But all of that neglects the the fundamental fact that the committee members *do* get to decide on this. That's their job. They get to weigh up all the info, including the views of 'experts'. In the end they make decisions based on what they believe to be true. If they're convinced 100% in the virtues of vaccines then that belief will inform their decision. If they believe only 50%, or 20%, or nil, again, that belief will inform their decision. There are a wide range of views and 'levels of belief' in the population. Even among the medically qualified there are a range of levels of belief in it.

To imagine that there is no doubt is naive in the extreme.

So our desire to have the absolute truth used as a basis for decisions does not change the fact that members of parliament will make those decisions. And integrity will likely lead them to do so in accordance with their beliefs.

The irony of all this is fantastic. When I presented the graphs I was presenting the truth. There was no opinion or belief in there. Just the truth. Anyone who can read graphs can see that truth. It doesn't have to come from the lips of a medical person, although it did in a way: it's their officially recorded data. But apart from that, it has nothing to do with medicine. It's just the truth. It's easily seen, and it's what *you* say is the only thing relevant to the committee.

So you've just destroyed your own argument.

Like · 15 October 2013 at 17:02

Greg Beattie "In proportion to a man's want of confidence in his own solitary judgment, does he usually repose, with implicit trust, on the infallibility of "the world" in general. And the world, to each individual, means the part of it with which he comes in contact; his party, his sect, his church, his class of society; the man may be called, by comparison, almost liberal and large-minded to whom it means anything so comprehensive as his own country or his own age. Nor is his faith in this collective authority at all shaken by his being aware that other ages, countries, sects, churches, classes, and parties have thought, and even now think, the exact reverse."

Like · 15 October 2013 at 17:39

Patrick Stokes Here's what we agree on, Greg: we have no unmediated, direct access to The Truth, and there are contexts where due to practical urgency we have to make decisions that involve making a commitment that goes beyond the certainty of the evidence available to us. If I'm 70% certain my house will be destroyed by an approaching bushfire I have to make the difficult decision whether to stay and defend, or get out, as I cannot 70% evacuate and 30% remain.

Now, if I decide to stay, I don't deem it true – let alone *make* it true – that my house will not be destroyed. I simply make a practical decision on the basis of the best information available to me. In other words, in making a policy choice I don't issue an edict that "it is a fact that the fire will not destroy my house," just that the odds are good enough for me to feel prudentially justified in staying. So far, I think, we're in agreement.

But my decision has to be rational one. Let's say that I am not in a position to determine whether my house will burn down, because to determine that I would need to possess both theoretical knowledge and practical experience that I do not in fact possess. That being the case, I have to rely on what people with the relevant experience – people working at the intersections of meteorology, firefighting, policing etc. tell me is the case if I want to make a decision that has any chance of being grounded in probabilities that do in fact obtain.

Now suppose all these experts tell me my house cannot be defended from this fire. Is there a chance they might be wrong? Sure; stranger things have happened. Would it be rational of me to take that bet and stay? No: not only do I have no grounds upon which to think they are wrong, I have no capacity to even assess the validity of their claims at all. And I don't have time to acquire the same level of expertise as them, because there is a bloody great fire on its way. Suppose my neighbour then tells me he's going to stay and defend his house because he doesn't trust the Fire Service, and besides he's read on the internet that you can protect your house from fires simply by painting a red circle around it – would I then be rational to conclude "Hmmm, I guess there is a range of beliefs on this topic" and decide to deliberate further?

That's where we find ourselves: with a consensus in all branches of medical science (including epidemiology, virology, immunology etc.) that vaccination is effective in reducing the incidence and severity of disease. Countervailing research sufficient to call that consensus into question has not materialised; the only critics

are more akin to the neighbour in the analogy. But what you're saying here is that the committee should have taken the neighbour's views into account alongside those of the fire brigade just in case everyone who actually knows what they're talking about has made some stunningly improbable mistake. Frankly, that would be silly at the best of times and negligent in a context of urgency.

You tell us your graphs present a 'truth.' I've made no claims either way about that – but by your logic, I could stand before a parliamentary committee on vaccination policy and read out a description of what I had for breakfast; if challenged as to why I was wasting everyone's time in this way I could simply reply "But it's the truth!" And if the committee then said "Well all the science tells us the benefits of vaccination outweigh the risks, but against that we have to weigh the fact that Pat had fruit and spice English muffins this morning," they'd be acting with about as much clarity as if they'd said "Well all the science tells us the benefits of vaccination outweigh the risks, but against that we have to weigh the risks, but against that We have to weigh the fact that Greg's graphs suggest mortality (though not morbidity) was reduced by things other than vaccines." We're back to walking along muttering "The earth is round!" – even if it's true, it tells us nothing relevant. Like · 15 October 2013 at 22:10

Greg Beattie Your example of the house and the fire is just a re-hash of the popularity argument. But let's bring it more into line with our vaccines issue.

Fires sometimes burn houses. Sometimes they burn them down to the ground. Sometimes they blow in from afar and other times they seem to just spontaneously occur. But never fear: there's a magic shield you can buy to prevent the fire taking hold... or, if it does take hold, prevent the total destruction of your home. You can't see it, and you can't touch it, but it's there protecting your home 24/7. You don't have to leave home just because there's a threat of fire! And even better, you don't have to buy it because we've already bought it for you with your taxes.

All the people who work in the industry agree that it's fantastic: all the engineers who design and make the shield, and all the professional installers. Well, nearly all of them. Many have disagreed but we've discredited them. The shield has been tested exhaustively and we're very happy with it. Not many have looked at the tests but that's ok because everyone involved with the shield is in agreement. Some people say they have looked at the tests and they're not happy with them but, again, we've discredited them.

These shields are so fantastic that they market themselves. One of the greatest things about them is they have reduced the housefire rate astronomically. This piece of info alone is enough to make the shield sell itself. 150 years ago we used to lose houses at a rate of 500 per million each year. Nowadays it's only about 10 thanks to the shield. Now we're aware that some people have tried to tell everyone that the drop was due to better land care, better building methods and materials, and an education program that encouraged people to keep flammable debris from the vicinity of their home. And sure these things have helped, but the big credit goes to the shield.

Problem: there's a guy out there who keeps pointing out that the shield was only invented 5 years ago, and well after the big drop occurred. Of course he's correct, but if we give him a platform it could severely damage the marketing campaign, not to mention hamper our efforts to make the shield compulsory. Should we let him tell the legislators? Or should we call him dishonest and hope the mud sticks? Like · 16 October 2013 at 09:57

Greg Beattie And what you had for breakfast is irrelevant, I agree. But the belief concerning vaccination's role in the falling deaths is not, because it influences a person's decision.

In a murder trial the beliefs of the jurors are crucial. They make the decision. Each side of the argument tries to convince the jury with all sorts of evidence (including expert opinion) and all sorts of argument. But neither the expert witnesses, nor the legal teams get to make the decision. That important task is reserved for the jury.

As I said, their beliefs are crucial. If there is a pre-conceived belief about the case - one that can have a prejudicial effect on the outcome - it can lead to jurors being rejected or replaced, changing venue, or a stay of proceedings, among other things. That's how important the beliefs of the decision makers are.

In this case the committee members are the 'jurors'. They will listen to everything and make their decision. Unfortunately they have a prejudicial belief concerning the value of vaccines. And I'm providing the information which, by itself, corrects that belief.

There can be nothing wrong with that. We obviously want the best info available to be on the table in front of the decision makers. You however seem to be supporting their manipulation. Like · 16 October 2013 at 10:04

Greg Beattie "There is the greatest difference between presuming an opinion to be true, because, with every opportunity for contesting it, it has not been refuted, and assuming its truth for the purpose of not permitting its refutation. Complete liberty of contradicting and disproving our opinion is the very condition which justifies us in assuming its truth for purposes of action; and on no other terms can a being with human faculties have any rational assurance of being right."

- John Stuart Mill

Like · 16 October 2013 at 10:08 · Edited

Tristan Wells "Sometimes the first duty of intelligent men is the restatement of the obvious."

George Orwell. Like · 16 October 2013 at 10:21



Greg Beattie "To discover to the world something which deeply concerns it, and of which it was previously ignorant; to prove to it that it had been mistaken on some vital point of temporal or spiritual interest, is as important a service as a human being can render to his fellow creatures." - John Stuart Mill

 \mbox{Like} \cdot 16 October 2013 at 11:11

Patrick Stokes Your attempt to re-work the fire analogy needs a bit of tweaking there Greg. For a start we'd have to note that it's not 'many' professionals who have expressed doubts about the shields but a mere fraction, that they've never been able to substantiate their doubts despite ample opportunity and incentive to do so, and the "professional installers" who have expressed doubts about the shield usually turn out to be installers of things unrelated to fire protection. There was this one installer a few years ago who made big claims about the fire shields not working, but it turned out his experiments were rubbish (and unethical), his findings unreproducible, and all the while he was accepting funds from an anti-fireshield group *and* held a patent on his own (less effective) type of shield. Even if his results hadn't been fraudulent, fire experts have since done much larger and more effective population studies that have found his concerns were ultimately unwarranted. Still, he sounded convincing, and a bunch of houses burnt down because people listened to him.

You'd also have to add that whether or not the shields caused the drop in house fires, we nonetheless know that they do in fact prevent further house fires. So again, their historical performance is irrelevant: what matters is that we know that they work and that without them homes would be damaged or lost that could otherwise be saved.

Only one of us is supporting manipulation here Greg: you, in trying to introduce prejudicial material to create a whiff of doubt where the science tells us none is warranted. If you could substantiate the claim that there's warranted doubt about vaccine efficacy, you would. But since you can't, but still really, really want people to believe they don't work, you pull out the graphs.

Genuinely pleased to see you're clearly enjoying "On Liberty" though. It's probably Mill's best work (though I think he somewhat fudges the connection between his liberalism and his utilitarianism). You'll note that nowhere does Mill say we should assume competencies to judge that we don't have. (And competency to judge is a big thing for Mill: it plays a very important role in "Utilitarianism" for instance). Like - 16 October 2013 at 16:52

Greg Beattie - "For a start we'd have to note that it's not 'many' professionals who have expressed doubts about the shields but a mere fraction,..."

So tell us 'wise one': what would that fraction be?

- "...that they've never been able to substantiate their doubts despite ample opportunity and incentive to do so..."

How do you judge that when you claim to not have the skills? Surely all you ever do is listen for the loudest and most regurgitated voices.

- "...and the 'professional installers' who have expressed doubts about the shield usually turn out to be installers of things unrelated to fire protection."

What do you mean by "installers of things unrelated to fire protection"?

- "There was this one installer a few years ago who made big claims about the fire shields not working, but it turned out his experiments were rubbish (and unethical), his findings unreproducible, and all the while he was accepting funds from an anti-fireshield group *and* held a patent on his own (less effective) type of shield."

Tell us more, wise one. Who was this fiend that suggested the shields didn't work? What experiments did he do, and why were they rubbish?

- "Even if his results hadn't been fraudulent, fire experts have since done much larger and more effective population studies that have found his concerns were ultimately unwarranted. Still, he sounded convincing, and a bunch of houses burnt down because people listened to him."

This is getting really interesting! How many houses burnt down because of him? And how much larger were the population studies that found his concerns unwarranted?

- "You'd also have to add that whether or not the shields caused the drop in house fires, we nonetheless know that they do in fact prevent further house fires."

The wisdom is bursting now. How do you *know that they do in fact* prevent house fires? And all the time professing you don't have the skills to evaluate this. Amazing! How do you do it?

- "Only one of us is supporting manipulation here Greg: you, in trying to introduce prejudicial material to create a whiff of doubt where the science tells us none is warranted."

Your comprehension is abysmal, Patrick. The prejudicial belief, and material, already exist. I'm following the only honest course by submitting the data that shows the belief to be false. By objecting to that you're supporting the incorrect and therefore manipulative belief.

- "If you could substantiate the claim that there's warranted doubt about vaccine efficacy, you would. But since you can't, but still really, really want people to believe they don't work, you pull out the graphs."

I'm interested in the truth being on the table. You're so against that. Why? There is absolutely no obligation on me to prove the level of doubt in anyone's (or any institution's) mind before doing so. You've utterly failed to come up with any decent reason why there is. Your only remaining motive is to perpetuate a lie designed to increase vaccination compliance. I'm assuming you're not so incredibly stupid as to fail to see the hopeless situation you've argued yourself into.

- "You'll note that nowhere does Mill say we should assume competencies to judge that we don't have."

And just what competencies are needed to judge the mortality data? Are you saying you don't have them? Or nobody has them?

Like · 16 October 2013 at 20:09

Tristan Wells The people who have the competency to judge them Greg are all the people who would be prepared to accept responsibility if their advice turned out to be false. Now, you may think that none of these people actually exist because Patrick refuses to name a single one and whenever we suggest someone he says "no, not him either", but rest assured these nameless, faceless, non-corporeal experts do exist and - well, whaddayou know? They all agree with Patrick.

Why don't you name one Patrick? Come on. Name a single person that we must trust because they a) make not a dime from vaccines or related fields; b) know what they are talking about; and c) will happily accept personal responsibility if things go wrong.

Actually, how about you just name someone who fulfills c)?

You never had much in the way of argument in the first place Patrick but you completely obliterated whatever sliver you may have thought you retained when you made this about accepting responsibility. NOONE accepts responsibility for children being killed or maimed by vaccines. The only people who are made to suffer are the parents, the children and, of course, the taxpayer.

You would think that anybody who pretended to believe in any sort of ethics other than "what do I need to rationalise to ingratiate myself to the status quo?" would be absolutely disgusted by the situation - irrespective of their feelings on the necessity of vaccines. But no. Patrick and the rest of the skeptics spit on the parents and mollycoddle the pharma industry because that is what they need to do to get a pat on the head from the authorities.

Like · 17 October 2013 at 09:48

Patrick Stokes "How do you judge that when you claim to not have the skills? Surely all you ever do is listen for the loudest and most regurgitated voices."

- I don't have to judge them, Greg. As a non-specialist I am both entitled and obliged to rely on what specialists tell me to be the case. To reduce their epistemic authority to "the loudest and most regurgitated voices" is typical, I'm afraid, of the anti-intellectualist relativism of antivaxxers and science-denialism more generally.

"What do you mean by "installers of things unrelated to fire protection"?"

- I was thinking of the occasions where researchers anti-vaxxers like to put forward as medical anti-vaccine voices who turn out to be publishing way outside their specialisation.

"Tell s more, wise one. Who was this fiend that suggested the shields didn't wrk? What experiments did he d o, and why were they rubbish? [...] This is getting really interesting! How many houses burnt down because of him? And how much larger were the population studies that found his concerns unwarranted? The wisdom is bursting now. How do you *know that they do in fact* prevent house fires? And all the time professing you don't have the skills to evaluate this. Amazing! How do you do it?"

- You know full well the problems with Wakefield and I'm not going to rehearse them for you. But by all means, if you have reasons to doubt vaccine efficacy, go forth and publish in the journals. I'll be first in line to shake your hand when you get your Nobel, eating humble pie. But until then, you don't get to declare the scientific consensus dubious and expect anyone to take such a claim seriously.

"Your comprehension is abysmal, Patrick. The prejudicial belief, and material, already exist. I'm following the only honest course by submitting the data that shows the belief to be false. By objecting to that you're supporting the incorrect and therefore manipulative belief."

- What's prejudicial is simply that you bring it up in a context where it can't tell us anything relevant and creates unwarranted doubt. But I tell you what, Greg: if you feel so strongly about correcting allegedly false beliefs about history – and in and of itself, that's a fine thing – go and do so. Just make sure that in doing so you don't "accidentally" instil unwarranted and dangerous doubts about vaccine efficacy in the process, ok? So maybe point out, at the end of all your presentations, that "Of course, all this is of purely historical interest. None of this can, does, or ever will alter the scientifically accepted fact that vaccination is effective, so don't let these graphs influence your vaccination-related decisions as they're not relevant." Will you agree to do that, Greg? Yeah, I'm not holding my breath. Like · 18 October 2013 at 14:45

Tristan Wells And why don't you give us a name Patrick? We need to know who to believe so give us just one person who we can trust who is prepared to take responsibility if things go wrong. Just one Patrick.

You're a joke. An absolute joke. Like · 19 October 2013 at 20:38

Greg Beattie For a start you didn't answer the first question, Patrick. What's the fraction? You claim some knowledge of the number of medical people who have expressed doubt about the virtues of vaccination. That's good, because you need to know that it's zero.... or that any non-zero number can be ignored for some substantial reason. Otherwise your position is without basis. So I asked you to give us the fraction. If you don't have one then you don't have a story at all.

- "I don't have to judge them, Greg. As a non-specialist I am both entitled and obliged to rely on what specialists tell me to be the case."

That was your response to my question about your ability to judge whether dissenters had been able to substantiate their concerns. Remember, you said "they've never been able to substantiate their doubts despite ample opportunity and incentive to do so". By answering in the way you have you've simply pointed out that you've heard some say the doubts haven't been substantiated. Wow. That's pretty solid.

- "You know full well the problems with Wakefield and I'm not going to rehearse them for you."

That's why I asked. I don't think you know much about him. I thought you may have been referring to Wakefield, but your knowledge of the story was so poor I had to wonder who it really was you were talking about. I mean, seriously, you had the basics wrong. You said he "made big claims about the fire shields not working". No. He was concerned MMR might have been leading to increased susceptibility to autism, so he called for more study to be done. That's very different to claiming MMR doesn't 'work'. Then you spoke about his 'experiments' but it was obvious you knew absolutely nothing about them. You claimed others had done larger population studies! Patrick, Wakefield didn't do a population study. He did a case series.

Why do you talk about things you have no knowledge of? Sure, you've heard others talk about him. But that's all. Why was his work rubbish? Why was it unethical? What do you mean when you say others have been unable to reproduce it? Who has tried to reproduce his work? TELL US. That's what the questions were for.

And the big one: you said a lot of houses burnt down because of him. How many? Show us the data.

And how do you "know that they do in fact" prevent houses burning down? You "know... in fact". I'm really interested in that one. Why didn't you answer it?

- "So maybe point out, at the end of all your presentations, that "Of course, all this is of purely historical interest. None of this can, does, or ever will alter the scientifically accepted fact that vaccination is effective, so don't let these graphs influence your vaccination-related decisions as they're not relevant." Will you agree to do that, Greg? Yeah, I'm not holding my breath."

Good. Don't hold it or you'll black out. The graphs are not purely of historical interest. They address a belief which has a direct and profound influence over how we think 'today'. The day that belief is no longer believed is the day the graphs will be purely for historical interest. I hope we at least get to the stage where the belief is no longer used to promote vaccines. That would be a start. But it's hard to imagine while people like you inhabit positions in academia. You don't promote thinking. You promote obedience and wilful blindness.

Lastly, Tristan has asked an extremely important question. Why would we be motivated to trust 'experts' who are not prepared to stand behind their product? I mean, everyone else actually warrants the things they make and the advice they give. Cars, aeroplanes, bridges, vacuum cleaners, calculators.... you name it. If it doesn't work you're entitled to your money back. If it harms you they are liable. If they don't want to warrant their advice they have to make that clear and ensure that no coercion is applied.

No one stands behind vaccines. No one! And no one stands behind the advice given out. As long as it's along the lines of the advice their buddies would have given it's deemed ok. How can we even contemplate mandating something that no one is prepared to stand behind? Or maybe you can point out just who does stand behind them.

Like · 20 October 2013 at 11:24

Patrick Stokes I'm sure there is some small number of doctors who either don't believe vaccines work or believe they cause more harm than they prevent (I don't know the number, and I'd be surprised if you did either). There's probably a number of geologists who believe the earth was created 6,000 years ago in six days too. But unless and until they present proper peer-reviewed research to back up their claims, their views are worthless. Even then, their research program has a long way to go before it demonstrates that it delivers real explanatory and predictive gains.

"By answering in the way you have you've simply pointed out that you've heard some say the doubts haven't been substantiated. Wow. That's pretty solid."

- Yes, I rely upon people working within a literature to tell me what the current state of that literature is. I'm not sure what else you expect any layperson to rely upon. Do you claim to be able to assess the validity (and respective merits) of scientific papers despite having no research training Greg? Amazing. Again, I look forward to your Nobel investiture – but only when you've done the work to earn it. You still haven't told us: why *hasn't* your work appeared in serious journals if you're so sure about its validity?

"You claimed others had done larger population studies! Patrick, Wakefield didn't do a population study. He

did a case series."

- Quite (and you know all the flaws in his studies, well before we get to the ethics of what he did) and large population studies have subsequently shown there is no correlation between autism and MMR. None. You know all this: the story is well-known, the flaws in Wakefield heavily discussed. And yet you continue to treat Wakefield as if his work has some credibility or significance. What does that say about your honesty as an interlocutor?

"how do you "know that they do in fact" prevent houses burning down? You "know... in fact". I'm really interested in that one. Why didn't you answer it?"

- Again, Greg, you know full well we have a century or more of epidemiological data that shows vaccines reduce incidence and severity. You presume to call that data into question, but you have done nothing so far on which to claim an entitlement to do so.

"The graphs are not purely of historical interest. They address a belief which has a direct and profound influence over how we think 'today'."

- And which is irrelevant because the 'belief' you take it to support is sound anyway. Around we go again...

"But it's hard to imagine while people like you inhabit positions in academia. You don't promote thinking. You promote obedience and wilful blindness."

- Utter codswallop. What you call 'obedience and wilful blindness' is simply admitting that you live in a world in which you are radically dependent upon other people and that knowledge-generation is a collective rather than individual enterprise. Critical thinking is, in my view, the most important mental skill we can acquire but that's just it, like every other skill it has to be taught and acquired. And a big part of it is accepting the limits of your capacities and your reliance on others.

"No one stands behind vaccines. No one! And no one stands behind the advice given out. As long as it's along the lines of the advice their buddies would have given it's deemed ok. How can we even contemplate mandating something that no one is prepared to stand behind?"

- Look, if someone makes a vaccine where their QA isn't up to scratch and bad things happen as a result, sue them into the ground, fine. Negligence is negligence. If someone's hiding data or whatever, throw the book at them (hello, tobacco industry). But if what you're saying is you want to actually hold individual people morally responsible for the current state of human knowledge itself, that's ridiculous. Like · 20 October 2013 at 13:18

Tristan Wells "Critical thinking is, in my view, the most important mental skill we can acquire - but that's just it, like every other skill it has to be taught and acquired. And a big part of it is accepting the limits of your capacities and your reliance on others."

Patrick Stokes pearl of wisdom #759: The most important component of being a critical thinker is ensuring you never actually do any.

"But if what you're saying is you want to actually hold individual people morally responsible for the current state of human knowledge itself, that's ridiculous."

Patrick Stokes pearl of morality #437: Anybody who agrees with him shares no moral responsibility for the negative consequences of their beliefs, anybody who doesn't shares 100 per cent moral responsibility.

How does your brain not explode from all the cognitive dissonance? You made a big song and dance about how Meryl, Greg et al wouldn't take responsibility and this therefore PROVES they had no right to even utter an opinion. But apparently the fact that nobody takes any responsibility for bad things from vaccines does not in any way detract from the fact that we must all believe nameless, faceless experts (who all agree with Patrick) without question when they tell us that vaccines are great.

But as you say - you fully support critical thinking. Just not when anybody is being critical of your precious beliefs.

Who's telling you to keep coming back here Patrick? You should probably check to ensure that they neither a) are on a lot of drugs; nor b) have a very large vendetta against you.

So again I ask Patrick. Give us a name. Tell us who we should trust. And please God don't tell us it is the bloody 'vibe'.

Like · 20 October 2013 at 21:23

Patrick Stokes And yet again, Tristan, you're invoking some sort of moral equivalence between trained people speaking out of the disciplinary consensus and people with no training and no expertise offering their unearned 'reckons.' And you'll keep doing that ad nauseum, presumably because you can't cope with the thought that, as a non-scientist, you have neither rational nor moral warrant to contradict scientists when it comes to scientific questions. (And neither do I. "Agree with Patrick"? Why the hell would I have my own 'beliefs' about medical science? How could I possibly have earned an entitlement to such beliefs?).

Believe me Tristan, I'd love to stop coming back to this thread, but you both keep saying silly things that need to be countered (the dreaded Siwoti Syndrome I guess). Look, believe whatever you want: germ theory denialism, AIDS denialism, vaccines faked the moon landings in an attempt to kill Diana, whatever.*

If you want to indulge your "I'm so much smarter than doctors!" fantasies, go right ahead. But when your epistemic hipsterism and denial of reality starts leading to disastrous real-world consequences, you better believe people will call you out on it.

Or, as I've been saying all along: if you want to be a legitimate stakeholder in the public discussion of vaccination, either stick to the ethics, or go do some science. Like \cdot 20 October 2013 at 21:45 \cdot Edited

Tristan Wells Give us a name Patrick. Just one. One solitary name.

Oh that's right I forgot, you're as much of a coward as you are stupid and dishonest.

"If you want to indulge your "I'm so much smarter than doctors!" fantasies, go right ahead"

Thanks Patrick. And would it also be ok if I indulged my "I'm so much smarter than homicidal maniacs" while I am at it? I mean, I have never actually trained to be a homicidal maniac or published anything in that field so I'm no expert but for some reason - presumably a lack of your highly refined ethics - I just can't abide their approach.

"- Quite (and you know all the flaws in his studies, well before we get to the ethics of what he did) and large population studies have subsequently shown there is no correlation between autism and MMR."

You know nothing about anything and everything you think you know is wrong Patrick. It is impossible to use statistics to show there is no correlation between two variables. It is called the fallacy of accepting the null hypothesis (ie argument from ignorance).

"You know all this: the story is well-known, the flaws in Wakefield heavily discussed."

But you're unable to point your finger at a single one. Wait. What am I talking about? It's the "vibe" isn't it?

"What does that say about your honesty as an interlocutor?"

Significantly less than about your intelligence.

You should probably stick to what you do best Patrick. No idea what that might be - it sure as hell isn't anything you have displayed here. Any good at ball sports?

Like · 21 October 2013 at 10:04 · Edited

Tristan Wells "You presume to call that data into question, but you have done nothing so far on which to claim an entitlement to do so."

I remember your ridiculous first foray into this issue where in your essay you said that you are only entitled to an opinion that you can argue for. That is how you tried to rationalise your totalitarian groupthink. But now here you are freely admitting that people outside the status quo are not entitled to an opinion no matter how well they argue for it.

"And yet again, Tristan, you're invoking some sort of moral equivalence between trained people speaking out of the disciplinary consensus and people with no training and no expertise offering their unearned 'reckons.'"

As above. Every time you try to find some criteria by which the 'experts' come out on top you end up deciding that the criteria only applies to those you want it to. Like \cdot 21 October 2013 at 10:13

Tristan Wells "but you both keep saying silly things that need to be countered"

Most people describe 'countering' as pointing out factual innacuracies rather than having a sook because we keep saying things you don't want to hear. But you can please yourself. Like · 21 October 2013 at 14:05 · Edited

Tristan Wells Aztec parents approved their children being sacrificed. Obviously such people were "critical thinkers" enough to realise they "needed to accept the limits of their capacities and their reliance on others." Good for them!

"But unless and until they present proper peer-reviewed research to back up their claims, their views are worthless."

It just occurred to me. Jury decisions aren't peer-reviewed (unless there is an appeal). And neither are judges for that matter. So I guess that means we should release all of our prisoners. I suggest the Stokes household take them all in given that a man of his extraordinary ethics would want to move heaven and earth to correct this gross injustice committed by the worthless opinions of judges and juries.

Sound fair Patrick?

Like · 21 October 2013 at 14:03 · Edited



Tristan Wells "Look, believe whatever you want: germ theory denialism, AIDS denialism, vaccines faked the moon landings in an attempt to kill Diana, whatever.*"

I can handle that. It is, after all, significantly more illustrious company than these guys: http://en.wikipedia.org/wiki/Milgram_experiment (the subjects not the experimenters). Can I just ask Patrick? If there were 100 men on an island and one woman would you support the moral superiority of the majority then? Would you trust those designated as 'experts' to setup a sound moral code? Or would it be fair to say you have never given any of your beliefs a moment's thought other than, as I say, "how many twitter followers will this bring me"? When you turn sideways can you actually see your reflection?

Like · 21 October 2013 at 17:22 · Edited

Greg Beattie - "I'm sure there is some small number of doctors who either don't believe vaccines work or believe they cause more harm than they prevent (I don't know the number, and I'd be surprised if you did either)."

My argument doesn't depend on knowing this, Patrick. But yours does. You claimed there was no real doubt. Remember? That's why you claimed you were free to accuse me of dishonesty.

I didn't think it was a good argument to start with but, that aside, it depends on you knowing something concrete about the level of doubt. As I said, you need to know it's zero or, if it's not, you need to explain why any doubt that does exist is not valid. And I imagine for the latter you would need to display knowledge and understanding of that doubt.

So far all we've heard is that you think it's a mere fraction. That's already more than zero, but I'm interested in what the fraction is. Or don't you know?

- "Yes, I rely upon people working within a literature to tell me what the current state of that literature is."

That was your justification for believing that no dissenters had been able to substantiate their concerns. So are you saying you've found out from some people who work in the area that there are no concerns with the efficacy of vaccines? Which people? Was it a cross section or just some 'mates'?

- "You still haven't told us: why *hasn't* your work appeared in serious journals if you're so sure about its validity?"

The belief-negating data and conclusions have already been published in peer-reviewed journals. They've never been in dispute. They're just not widely known. That's why I've presented it all in a format more suited to the general population. The 'experts' have had ample opportunity to adjust the stories they produce to sell vaccines, but they've let us down severely in that department. So my approach is to reveal it to the general population, including those who make decisions on our behalf.

Like · 22 October 2013 at 21:20

Greg Beattie -"Quite (and you know all the flaws in his studies, well before we get to the ethics of what he did) and large population studies have subsequently shown there is no correlation between autism and MMR. None. You know all this: the story is well-known, the flaws in Wakefield heavily discussed. And yet you continue to treat Wakefield as if his work has some credibility or significance. What does that say about your honesty as an interlocutor?"

Patrick, why don't you just come clean and say "Ok. I shot from the hip. I really don't know what I'm talking about with Wakefield. I've heard lots of people say he was shonky but I, myself, really have no bloody clue. I shouldn't have opened my mouth. I was just trying to repeat stuff I've heard and it looks like I ballsed it up."

Then tell me when it was you heard me say that his work had credibility or significance. I'm not saying it doesn't. It's just that I don't recall saying much about Wakefield. You were the one who brought him up. I suspect I know a lot more about his work than you do (judging by what you've written so far). I know that his co-convicted has since been totally exonerated in the courts, and the accusers chastised for their shoddy methods. I believe Wakefield himself is still awaiting his day in court.

What exactly does all this say about my honesty, Patrick? Spell it out please.

- "Again, Greg, you know full well we have a century or more of epidemiological data that shows vaccines reduce incidence and severity. You presume to call that data into question, but you have done nothing so far on which to claim an entitlement to do so."

I'm well aware of the amount of data. I've been looking at it for many years. And from someone who *has* looked at it to someone who hasn't, let me say that it's not as heartening as you might think.

That said, it may surprise you to know that I actually believe vaccines work. You would know that had you read the book I sent you a year ago. Although I believe they work I question their practical value, because I know that when assessed by that considerably higher bar they don't have nearly as much going for them. In fact, I'd say there's little evidence that they've been of any measurable practical value. But that's just *my* opinion. However I do believe they stimulate the production of antibodies.

But that's all another subject. I'm still trying to get to the bottom of this "Greg's dishonest because he shows graphs to members of parliament" skeleton that you're left trying to defend. Like · 22 October 2013 at 21:42

Greg Beattie - "And which is irrelevant because the 'belief' you take it to support is sound anyway. Around we go again."

And your entire case to support the belief being 'sound' is argumentum ad populum. That's it. Nothing else. Of course that doesn't make it wrong, but it also doesn't make it right as you well know. It's weak.

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https://www.facebook.com/...living.wisdom/posts/10151677624316925?comment_id=27392333&reply_comment_id=28896679&offset=0&total_comments=525[1/01/2014 8:37:42 PM]
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Unfortunately for you it's made considerably weaker for reasons I've already pointed out a couple of hundred times: another belief (one which we know is false) has been a factor in its popularising. How big a factor nobody knows.

- "Critical thinking is, in my view, the most important mental skill we can acquire..."

Sure. I believe you believe you believe that. It's a shame there's such a difference between your preaching and your practice, at least with this issue. I think you let others do your real critical thinking. All we see from you is "Hmmmm. Do I want to get off my arse and try to understand any of this? No. I'll just follow the herd." It's ok to do that but it's not exactly a shining example of critical thinking.

- "But if what you're saying is you want to actually hold individual people morally responsible for the current state of human knowledge itself, that's ridiculous."

So you're admitting the current state of human knowledge is not something you would stake anything on? In other words there's too much doubt? Can't be. You said earlier that there was no real doubt. According to you that's why I shouldn't have shown the graphs. Which is it: no doubt or too much doubt? If there's no real doubt why can't the experts be expected to stake a significant slice of themselves on the outcome, just like engineers and everybody else?

Like · 22 October 2013 at 22:07

Patrick Stokes Jesus, Tristan, you really do need to learn to not type when you're angry. Five posts across two days? You really want me to engage with all that? Where do you want me to start: your hilarious refusal to accept statistics as probabilistic evidence for accepting an absence of correlation, the failure to differentiate between the epistemic functions and outputs of juries and peer-reviewed science, the even more egregious failure to differentiate empirical and moral reasoning, the fact you dislike Milgram's test subjects more than Milgram (ok, refreshingly novel, I'll give you that) and whatever cack-handed analogies you were reaching for with homicidal maniacs and Aztecs? Or the fact that you seem to think some subset of humans should be personally liable for the total current state of science? (All topped off with that delightfully unfounded abuse you seem to love dishing out).

Fine, let's find something that's potentially productive and respond to that:

"I remember your ridiculous first foray into this issue where in your essay you said that you are only entitled to an opinion that you can argue for. That is how you tried to rationalise your totalitarian groupthink. ["totalitarian groupthink"? Dude, do you actually hear yourself when you talk?] But now here you are freely admitting that people outside the status quo are not entitled to an opinion no matter how well they argue for it."

- Go back to the original article: there are topics where everyone can credibly hold an opinion, and some that require specialist training. Now, you've basically been saying my argument is circular because it gerrymanders ahead of time what that training will consist in and which trained people will therefore carry epistemic authority. I'm happy enough admitting that, but I think the gerrymandering is rationally valid: science has outperformed every single other epistemic framework with respect to the physical so radically that we're obligated to accept it, and it has of necessity professionalised and specialised to a point where there's no real role for laypeople anymore. Specialisation is the price beings limited in cogitative power and lifespan pay for having an advancing knowledge base. That doesn't mean endorsing or accepting a perpetual status quo, it just means that changes are increasingly unlikely, and eventually practically impossible, to come from without.

And for the record, I will cheerfully admit that no, I suck at ballgames. I have roughly the grace, dexterity and hand-eye coordination of a squid on rollerblades trapped in an Ikea ball pit. (Hmmm, I wonder if I *am* actually good at anything? Oh, that's right: http://www.patrickstokes.com/?page_id=36)



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Like · Remove Preview · 23 October 2013 at 00:02

Patrick Stokes "...it depends on you knowing something concrete about the level of doubt. As I said, you need to know it's zero or, if it's not, you need to explain why any doubt that does exist is not valid. And I imagine for the latter you would need to display knowledge and understanding of that doubt."

- That really goes to the next point you zeroed in on Greg: "I rely upon people working within a literature to tell me what the current state of that literature is," to which you responded:

"That was your justification for believing that no dissenters had been able to substantiate their concerns. So are you saying you've found out from some people who work in the area that there are no concerns with the efficacy of vaccines? Which people? Was it a cross section or just some 'mates'?"

- So now you're expecting me – well, everyone, really – to personally conduct some sort of survey among professionals in a given discipline before I can claim to be satisfied that the literature in that discipline says what they say it does? This is precisely the sort of foundationalist empiricism Tristan always falls back on. What you're calling 'argumentum ad populum' is really just Social Epistemology 101.

"The belief-negating data and conclusions have already been published in peer-reviewed journals. They've never been in dispute. They're just not widely known."

- Which, given the way academia works, would imply one of two things: they weren't credible, or they weren't important enough to work with.

"Patrick, why don't you just come clean and say "Ok. I shot from the hip. I really don't know what I'm talking about with Wakefield."

- So, you deny that Wakefield produced no reproducible results, that he had lumbar punctures and colonoscopies performed *on children* without ethics approval (for what was basically a fishing trip), that he didn't have an untenable COI given who was funding him and what his undeclared commercial interests were? How's that for a start, Greg? And that's before we get to the fact we're talking about a retracted paper. Credibility: worse than nil. You're right though, I don't claim to know as much as you about Wakefield – a fact which does your organization's refusal to repudiate both his work and the Autism-MMR claim no credit at all. Which brings me to:

"Then tell me when it was you heard me say that his work had credibility or significance. I'm not saying it doesn't. It's just that I don't recall saying much about Wakefield."

- But you're President now, Greg. You're not just speaking for yourself anymore. I can accept that not every single statement you make here needs to be taken as an ex cathedra proclamation of official AVN policy, but when your office bearers *representing the AVN* go on, say, Radio National and trumpet nonsense like '80 studies vindicate Wakefield,' (or tell weekend breakfast TV viewers that 'a thousand people die a week because of doctors') guess whose responsibility it is to either substantiate or retract these claims?

"What exactly does all this say about my honesty, Patrick? Spell it out please."

- Well you either aren't in control of your organisation's message or you're happy for your office bearers to make ridiculous statements knowing full well these statements may influence people not to vaccinate.

"And from someone who *has* looked at it to someone who hasn't, let me say that it's not as heartening as you might think."

- Well don't tell me, Greg. King Carl XVI Gustaf of Sweden is waiting with your Nobel medal.

"That said, it may surprise you to know that I actually believe vaccines work. [but] I'd say there's little evidence that they've been of any measurable practical value. But that's just *my* opinion." - Indeed. An opinion your whole argument relies upon (because if it's untrue the historical point is moot) but which you've not established in the literature.

"But that's all another subject. I'm still trying to get to the bottom of this "Greg's dishonest because he shows graphs to members of parliament" skeleton that you're left trying to defend." - Well admitting that vaccines work, at least on the level of stimulating the generation of antibodies, isn't doing you any favours there; nor is admitting that it's just your (unqualified) opinion that they don't work very well, because without the doubt that would warrant you're left making a claim you know tells us nothing about efficacy, which is what actually matters in policy terms.

"And your entire case to support the belief being 'sound' is argumentum ad populum." - No, my entire case is that we have no real access to empirical truth about the physical world outside of science. There's plenty of other stuff you don't need science for, but if you're interested in the material world, the current state of scientific knowledge is all there is.

"I think you let others do your real critical thinking. All we see from you is "Hmmmm. Do I want to get off my arse and try to understand any of this? No. I'll just follow the herd." It's ok to do that but it's not exactly a shining example of critical thinking."

- As my arse is too otherwise occupied with my own research to go back and do the two science degrees minimum necessary to have a view worth listening to on this topic, I defer to my learned colleagues. An important part of critical reasoning is precisely knowing what you are and are not equipped to do, and when you simply have to rely on others if you're not to fall into a big epistemic hole.

"So you're admitting the current state of human knowledge is not something you would stake anything on?"

- Actually I'm saying there's nothing else *to* take anything on. I am also saying is that you cannot hold people morally responsible for being born at the point in scientific history at which they are. If we find out twenty years from now that Redbull causes zombification in the long-term we don't get to go back and sue the makers of Red Bull for not anticipating things that were outside the current scope of knowledge. What both you and Tristan seem to be saying – but correct me if I'm wrong, as if I could stop you – is that someone should accept liability in that way for things no-one could possibly have foreseen –akin that Italian court prosecuting seismologists for failing to do something that seismology can't do yet.

"If there's no real doubt why can't the experts be expected to stake a significant slice of themselves on the outcome, just like engineers and everybody else?"

- hey already do, in ways I described above: malpractice, manufacturing sandards etc. But you're d emanding something more than that: yore asking individuals to take individual responsibility for whahum



equivocating between blaming people for actual misconduct and blaming them for not being omnipotent.

You're also applying an apodictic sense of 'disprove' to probabilistic reasoning Like · 23 October 2013 at 12:56



Tristan Wells "Seriously, you're saying the guys who built the first jet airliner were not experts because they did not know something that *no-one* knew at the time. That is simply nuts."

I note that you can't even wait 5 minutes for me to explain what I meant before you continue with your mischaracterisation.

Like · 23 October 2013 at 12:57

Tristan Wells "You're also applying an apodictic sense of 'disprove' to probabilistic reasoning."

Firstly, you were the one who said this: "have subsequently shown there is no correlation between autism and MMR" Note the word "shown" - rather than indicated/guessed/wildly speculated.

Secondly, you just don't understand what you are talking about. You know how you obsess over authority? Well it just so happens that I - at least compared to you - know an awful lot about statistics. The problem with using statistics to prove that there is no correlation *isn't* that all you can do is show it is highly likely rather than definitive. The problem is in the fact that statistics (at least in this case) are only about taking *a* sample. Not *the* sample. You can never say that another sample wouldn't have provided you with a correlation.

Now, with highly common events being correlated with other highly common events this might not be a problem or, if the sample size is enormous again you might be fine. But if the event your looking to correlate for is unusual relative to the sample size then your test is useless.

To give an illustration: imagine that one out of every ten autism cases are caused by vaccines and one in 50 kids will be autistic. That means that one in 500 kids will be autistic as a result of vaccines (well close enough as the unvaxed population is tiny). Now, one in 500 might be an insignificant number (although not for those who experience it) from the point of view of public health if the number of people protected from death and disability due to disease as a result of the course of vaccinations was - say, one in twenty (or better). (And please don't embarass yourself further by pretending that autism is something to be celebrated whereas vaccine preventable diseases are evil). But if that number was only say one in 200 then the cost of autism due to vaccines would definitely be real relative to their benefits. Indeed, given the costs of the vaccines themselves it would be very hard to justify giving them to anyone - let alone subsidising them, and let alone mandating them.

So one in 500 could quite reasonably be a very real cost (well it is a real cost no matter what but relative to the efficacy of vaccines). But if you were to do a population study trying to determine this number you would be trying to determine a significant difference between a population with 10 cases of autism per 500 vs a population with 9 cases per 500. In order to get a significant difference (and therefore useful answer) the sample of both vaccinated and unvaccinated would have to be staggeringly large. There was a German study that involved the grand total of 92 unvaccinated children in its sample. This has been used as propaganda for the fools on the pro-vaccine camp and this is idiotic method is exactly what the study used. It couldn't find any significant differences by virtue of the fact that the unvaccinated camp was simply too small to allow them to find one! (There were further problems but they are immaterial here).

Like · 23 October 2013 at 13:22

Tristan Wells "Except that in that case you're positing someone who had anticipated metal fatigue from square windows and actual lying on the part of the engineers, neither of which was the case."

Ummm, yes. Well spotted. Maybe detective work is your thing Patrick!

"You keep equivocating between blaming people for actual misconduct and blaming them for not being omnipotent."

Just a heads up Patrick. Most people use the phrase "you keep..." to mean that they do something continuously rather than that they have never done ever. Like · 23 October 2013 at 13:29

Patrick Stokes "Ummm, yes." Aaaannnd? C'mon, just say it Tristan, I know you're dying to.

And yes, like it or not that's exactly what you're doing. In the one breath you're blaming people for not knowing things no-one knows, in the next you're accusing them of knowing, but lying. Like · 23 October 2013 at 13:33

Tristan Wells I was making a hypothetical Patrick. I would never in a million years have thought that anybody would infer that I actually believe the Comet guys said any such thing.

I honestly thought it was pretty clear.

The Comet guys had every right to be treated as highly knowledgable ON SOME THINGS. But they would have been pretty bloody stupid to claim that they knew everything. Now, I'm sure they didn't make such a claim which is why I don't believe THEY should have gone to jail for this. But the crux of the matter is - and I don't know how this could be more blindingly obvious - if you are not prepared to sacrifice your own money/liberty/life for something then you can't complain when people don't take your words as gospel

Now I should note here that I use the word gospel in a figurative way to mean must be true because someone said so not because I believe the Comet makers think that people will go back in time and ask Matthew, Mark, Luke and/or John to write it in for them.

To bring it all back to the issue of vaccines. The claim is that vaccines are sufficiently safe for our children. We are expected to believe this because the experts tell us this. But none of the so-called experts are prepared to put their hand up and say "don't worry if things go wrong - it happens so rarely that it won't be a significant cost to us to help such people out and what's more we will be happy to hand over investigation of all such occurrences to people with no vested interest in the outcome".

Remember that this was *your* criteria to evaluate whether somebody could be described as an 'expert'. The moment I turned it against you you decided that it didn't matter any more. I am not averse to the idea that *all* defenders of vaccines are unprepared to back their statements up with actions - but even if I thought they genuinely believed it I still wouldn't want to run with the herd.

Like · 23 October 2013 at 14:03

Tristan Wells "that he didn't have an untenable COI given who was funding him"

http://www.reactiongifs.com/tag/castle/ Like · 23 October 2013 at 17:24

Greg Beattie - "So now you're expecting me – well, everyone, really – to personally conduct some sort of survey among professionals in a given discipline before I can claim to be satisfied that the literature in that discipline says what they say it does?"

No. Not everyone, Patrick. Only those who want to make grand claims that depend on it. If you don't have the knowledge then don't open your mouth. You see you're the one making the claim, and you say it's justified on the grounds there's no valid doubt. So do you or don't you know whether there's valid doubt? Or is it that you're not sure how much there is?

- "Which, given the way academia works, would imply one of two things: they weren't credible, or they weren't important enough to work with."

At first you rejected it because it wasn't published in a journal. Now you reject it because it isn't widely known. You're making this up as you go.

- "So, you deny that Wakefield produced no reproducible results, that he had lumbar punctures and colonoscopies performed *on children* without ethics approval [etc etc]"

No, I was wasn't denying any of that. I wasn't accepting it either. If you read what I wrote you'll find I was having a laugh at your knowledge of the basics. Perhaps a bit unkind, but not out of place given the stance you've taken on such things as 'honesty' and 'authority'.

Your entrance into the Wakefield issue was to tell us that he claimed the vaccine didn't work. That was like shooting from the hip with your gun pointing backwards. Then you explained others had done much larger population studies and had failed to reproduce his findings. (You don't know the difference between qualitative and quantitative research for a start, but I for examples of attempts to reproduce *his* findings.) Then you finished it off by claiming that many houses had burnt down (i.e. many had died from measles) because of him. By this stage I think you'd even dropped the gun but I gave you an opportunity to tell us how many, and where we might find the data.

The difference between all those things and the questions you asked me above about lumbar punctures etc, is that the former were incorrect and the latter, contentious. I'm not going to engage in a debate over the contentious issues surrounding Wakefield but I'll happily point out your *mistakes on the basic facts* when you do wander into unfamiliar territory. And while I'm at it I'll also happily point out that it takes a special type of 'irresponsible' to open one's mouth about things when one is so ignorant of the basics.

If you truly want to explore the issues you raised have a look at some of the resources available. These are movies, so you don't even have to get off your arse, so to speak. http://goldenhawkprojects.blogspot.com.au/

Like · 24 October 2013 at 13:10

Greg Beattie - "...but when your office bearers *representing the AVN* go on, say, Radio National and trumpet nonsense like '80 studies vindicate Wakefield,' (or tell weekend breakfast TV viewers that 'a thousand people die a week because of doctors') guess whose responsibility it is to either substantiate or retract these claims?"

Another attempt at obfuscation. I don't have a problem with the two examples you mention. To me each is a shorthand statement on a complex and contentious conundrum. And, for the record, you left out "up to" just before the second one. (I don't even recall the first example so I'll take your word it's accurate.)

I note the breakfast show didn't have a problem. Neither the interviewers nor the medical expert even reacted to the claim, let alone asked for substantiation. But if *you* think there's a problem why don't *you* do something about it? Get the breakfast show to ask Meryl to produce the information on which she based the statements. Mind you, they might be a bit like you and disregard everyone who's not qualified. I don't know. So you run the risk of not being taken seriously. Actually I don't even understand why someone who claims no right to engage in scientific discussion would even want to form an opinion on the statements. Oh, that's right. You heard your mates' opinion.

- "There's plenty of other stuff you don't need science for, but if you're interested in the material world, the current state of scientific knowledge is all there is."

Ah yes! Scientism in all it's glory. You religious fanatics find discussion difficult. http://www.naturalnews.com/042613_Theory_of_Evolution...

The 'current state of scientific knowledge' when it comes to health is bit of a worry for many of us (although I'm sure your congregation is happy to trust it). In terms of maturity we're somewhere this side of conception but just where we are is purely a matter for speculation. That's why your 'authority' argument is invalid. Here's a published comment from BMJ editor Richard Smith:

["Where is the wisdom we have lost in knowledge, and where," asked T S Eliot, "is the knowledge we have lost in information?" There are perhaps 30,000 biomedical journals in the world, and they have grown steadily by 7% a year since the seventeenth century. Yet only about 15% of medical interventions are supported by solid scientific evidence, David Eddy, professor of health policy and management at Duke University, North Carolina, told a conference in Manchester last week. This is partly because only 1% of the articles in medical journals are scientifically sound and partly because many treatments have never been assessed at all. "If," said Professor Eddy, "it is true, as the total quality management gurus tell us, that 'every defect is a treasure' then we are sitting on King Soloman's mine."]

Maybe you'd like to read this:

http://www.theatlantic.com/.../lies-damned-lies.../308269/2/

Do *something*. Don't just sit on the outside and say "Your wrong! But don't show me evidence because I'm not allowed to even look at that stuff. That's the rules." If you don't want to put some effort in that's fine. Let others tell you what to do. But don't start thinking everyone should be like that. Not many will buy your argument. Only the fanatics. ("The priest tells me what to do, and I trust him. This way I don't have to think.")

- "As my arse is too otherwise occupied with my own research to go back and do the two science degrees minimum necessary to have a view worth listening to on this topic, I defer to my learned colleagues."

See above. One question: which two science degrees do you think are necessary? Like · 24 October 2013 at 13:31

Greg Beattie - "What you seem to be saying is the engineers who built the first Comet should have gone 100 to prison for being unaware of engineering principles that hadn't been discovered yet."

Tristan has already covered this very well, but I'll just add my bit. With vaccines, the problems have been discussed continuously, at all levels of the scientific hierarchy, since the beginning (more than 200 years ago). No one can claim ignorance.

You want us to rely on expert judgement that the problems don't exist. Tristan was asking if there are really any experts prepared to stake themselves on such a judgement call. If it's a call they're not in a position to make then they shouldn't be making it. Instead they should say "We don't know for sure. We believe there is no problem however the research is not definitive." That's the way people talk when they want to be protected from others acting on their statements. You'll even see that sort of approach in vaccine package inserts

Another problem with the analogy is I imagine there was never any coercion used to make people board the Comet

But you completely avoided the point. By saying the experts shouldn't be responsible because there's too much doubt, you put your foot in your mouth. That statement directly conflicts with your earlier claim that there's *no* doubt. So which is it, Patrick?

Like · 24 October 2013 at 13:41

Tristan Wells "But you completely avoided the point. By saying the experts shouldn't be responsible because there's too much doubt, you put your foot in your mouth. That statement directly conflicts with your earlier claim that there's *no* doubt. So which is it, Patrick?"

That's simple Greg, there is the perfect Goldilocks level of doubt such that everybody should trust the experts but nobody should expect them to be right.

Like · 24 October 2013 at 14:17

Greg Beattie - "The problem with using statistics to prove that there is no correlation *isn't* that all you can do is show it is highly likely rather than definitive. The problem is in the fact that statistics (at least in this case) are only about taking *a* sample. Not *the* sample. You can never say that another sample wouldn't have provided you with a correlation.

Goldilocks' predicted response: http://xkcd.org/892/ Like · 24 October 2013 at 14:19

Tristan Wells You've just fed him his next dozen posts Greg!

The thing is I only gave half the story too because I was simply talking about the difficulties in finding significant (differences in) correlation being found rather than a more fundamental problem which is that statistics have no power to look at the nature of cause and effect. For example if you regressed crime vs

poverty in the states of America you might not find a significant correlation - but it would be absurd to claim from that that a low income never encouraged someone to choose to become a drug dealer or burglar. Such a regression might be sufficient to give policy makers pause in thinking that a reduction in poverty (however it is measured) will lead to an overall decrease in crime, but it can't possibly be used to make inferences about the mental state of every single one of the 300 million people living in that country.

Even if a valid sufficiently large study found NO significant difference in autism between vaccinated and unvaccinated it would still be completely invalid to conclude vaccines *can't* cause autism - for that we need to rule it out in every single case. Vaccine defenders might reasonably infer from such a study (were it ever done) that eliminating vaccines probably won't lead to a massive change in overall autism but they absolutely *cannot* use such a study as cause to dismiss those cases where the parents blame the vaccines. Like · 24 October 2013 at 14:37

Greg Beattie Sorry. It's a very good explanation. I was just trying to preempt the obfuscation. I wasn't all that confident of that prediction anyway. Perhaps this one: http://xkcd.com/795/

Like · 24 October 2013 at 14:57

Vaccines Didn't Save Us Patrick tokes, if I could just butt in here. Tistan Wells I believe touched onth is earlier in the thread but I'm not going to bother to find the refrence. Theideo I've linked to features Dr D eepak Chopra inter iewing Dr Rupert Sheldrake. If youhaven't got the time to listen to it i its entirety I draw y ur attention to the conversation commengi @ 4.30 and finishing @ 7.15 approx. It draws distincti on betweenestific achievements in technologies using the current scientific ethod, and the shortcoming s of it when applying it to biological systems. It also highlights the unwarranted veil of credibility that rapid technological advances have lent to other scientific endeavours, such as the study of biological systems. I would suggest this book should be on every philosopher's book list.

Like · 24 October 2013 at 16:46

Vaccines Didn't Save Us http://www.youtube.com/watch?v=G0YWV7rTewQ Like · 24 October 2013 at 16:47

Patrick Stokes Greg you've basically just said that no-one is ever entitled to rely prima facie on experts reporting on their own area of expertise unless they have satisfied themselves by talking to some unspecified large number of experts as to what the current state of that discipline is. That's quite silly: it suggests that while experts are reliable sources of information about what their field studies, they are somehow not reliable sources of information about that field itself, such that we have to validate their views on that.

On Wakefield: I was using 'reproduce' in the non-technical sense to refer both to the studies that failed to reproduce (in the technical sense) his results and the population-level quantitative work that found, quite simply, that there is no evidence that autism is correlated with MMR. None. That means that ex-Dr Wakefield is, simply, wrong. And that's fine, except he's now making quite a tidy living insisting he's right. As for whether he caused further outbreaks of measles: I doubt anyone could prove that to a level of direct culpability, but I also don't think we'd still be talking about an autism-MMR link today if it wasn't for Wakefield, meaning there wouldn't be so many parents swayed by this nonsense.

"At first you rejected it because it wasn't published in a journal. Now you reject it because it isn't widely known. You're making this up as you go."

- Plenty of papers are met with a shrug. Beyond historical interest (which is valuable in itself) what would be significant about such a finding? What further papers do you expect it to generate? It tells us nothing about mortality, and nothing about efficacy. I've said all along that even if the historical point is proven it tells us nothing significant – what you need to establish is that efficacy is dubious. You've made that claim, but you need to validate it.

"Another attempt at obfuscation. I don't have a problem with the two examples you mention."

- You don't have a problem with your representatives saying factually untrue things in public? Wow. (You get that 1,000 a week is over a third of all deaths in Australia each week, right? Yet you're happy for representatives of your organisation to say such things? As you're apparently happy with it I'll do you the courtesy of not simply assuming it was out of your control - but either way, it's yours now).

"Actually I don't even understand why someone who claims no right to engage in scientific discussion would even want to form an opinion on the statements. Oh, that's right. You heard your mates' opinion."

- See above re: epistemic authority of experts with respect to the states of their own field.

"Ah yes! Scientism in all it's glory. You religious fanatics find discussion difficult. http://www.naturalnews.com/... "

- Well I'm on public record as criticising scientism (construed as scientific intrusions into non-empirical areas of inquiry) and – wait, did you just link to Natural News? Oh my. That's just adorable.

"The 'current state of scientific knowledge' when it comes to health is bit of a worry for many of us [...] In terms of maturity we're somewhere this side of conception but just where we are is purely a matter for speculation."

- We agree entirely on that. In fact that is going to be trivially true of any stage in human history: we're moving forward and can see how far we've come but have no idea how far we have to go (assuming there's an end, and there is no particularly good reason to assume there is). So, in making your decisions, you can

either choose to rely upon a (permanently) incomplete but progressive body of knowledge, or you can choose to rely upon... what, exactly? What else do you propose? The current state of knowledge is what it is. You can curse the gods that you were born too soon to see hoverboards, organ regeneration and a cure for the common cold, or you can thank them for being born late enough that you've got access to antibiotics, neurosurgery and the iPhone.

"Do *something*."

- I'm doing what I can, Greg: I'm doing whatever I can in my own little way to counter the anti-education, anti-intellectual, anti-expertise 'every opinion is just as valid and all value is subjective' nonsense that characterises so much of our public discourse. But I'm clearly wasting my time here, because as Tristan admits above, it's all about being different and not 'going with the herd' for you guys. That and just resenting people who know more about something than you do.

"You want us to rely on expert judgement that the problems don't exist."

- Well, again, what else are you going to rely on? What other viable options are there?

"Tristan was asking if there are really any experts prepared to stake themselves on such a judgement call. If it's a call they're not in a position to make then they shouldn't be making it."

- But what you're actually saying is they have to somehow be personally liable for that i.e. you want it to be the case that if they turn out to be wrong they take the blame. In other words you're not talking about people being incompetent or negligent or engaging in wilful misconduct, you're saying they should be liable for not being omnipotent.

"Another problem with the analogy is I imagine there was never any coercion used to make people board the Comet."

- True. And nor did refusing to board the Comet put others at risk, nor imperil collective goods.

"But you completely avoided the point. By saying the experts shouldn't be responsible because there's too much doubt, you put your foot in your mouth. That statement directly conflicts with your earlier claim that there's *no* doubt. So which is it, Patrick?"

- I didn't say that – or anything like that – at all. I said that no-one is responsible for the current state of a knowledge discipline being incomplete. We haven't invented the hoverboard yet: that sucks, but whatever Seth Sentry says (http://www.youtube.com/watch?v=eOH15_pqWZ4, language warning), it is in fact no-one's fault.

One thing we do all agree on it seems: xkcd is just all kinds of awesome. Like \cdot 24 October 2013 at 22:25

Patrick Stokes "...a more fundamental problem which is that statistics have no power to look at the nature of cause and effect"

- That's basically true Tristan but it can tell us where to look and where is more likely to be a dead end. In fact we could go full Humean here, as many do, and say that we *never* in fact observe causality in itself but only ever regularity of association: hit the cue ball on this angle and it'll go that way etc. That doesn't mean (and Hume didn't think it meant either) that there are no natural laws or that we can't learn anything about them, just that we don't ever see causality per se.

"Even if a valid sufficiently large study found NO significant difference in autism between vaccinated and unvaccinated –"

- Vaccines in general or just MMR?

"- it would still be completely invalid to conclude vaccines *can't* cause autism - for that we need to rule it out in every single case."

- Actually even that wouldn't prove *can't* - only 'hasn't'. But again we need to be extremely careful not to demand apodictic certainty where only probabilistic certainty is available.

'Vaccine defenders might reasonably infer from such a study (were it ever done) that eliminating vaccines probably won't lead to a massive change in overall autism but they absolutely *cannot* use such a study as cause to dismiss those cases where the parents blame the vaccines."

- Again, true if you're looking for apodictic certainty. But again, if there's no correlation at population level, that makes it that much more unlikely. At some point, coincidence (i.e. the fact autism tends to manifest during parts of the vaccination schedule) is simply going to be the more parsimonious explanation than a connection that's unattested at the population level. Nothing makes it logically impossible, sure. But I'm not sure why we'd ever expect inductive reasoning to yield logical certainty anyway.

Like · 24 October 2013 at 22:30

Tristan Wells "That's basically true Tristan but it can tell us where to look and where is more likely to be a dead end."

On a total population level that MAY be true but in a sampling sense it is most certainly not.

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https://www.facebook.com/...living.wisdom/posts/10151677624316925?comment_id=27392333&reply_comment_id=28896679&offset=0&total_comments=525[1/01/2014 8:37:42 PM]
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"Vaccines in general or just MMR?"

Both. Lots of people have claimed CDR stories without receiving the MMR (eg for DTaP). The MMR may be the most significant - but I wouldn't make that claim.

"Again, true if you're looking for apodictic certainty. But again, if there's no correlation at population level, that makes it that much more unlikely."

But there *is* a correlation at population level. That is the whole point. There has been an increase in autism diagnoses and an increase in the number of people receiving vaccines (and number of vaccines they have received). *That* is a correlation on a population level. It can't just go away because you have taken samples that don't find a correlation.

And that is precisely why you can't use stats that don't find a correlation to conclude anything - no matter how tenuously. It is like asking Johnny Cochrane to find his client's murder weapon. He could 'look' for a million years he would never find it - doesn't mean it isn't there. Asking researchers with a pro-vaccine bias to 'look' for evidence that everything they so desperately want to believe is wrong is equally worthless. It tells us absolutely nothing. And if a million researchers with the same bias do a similar study the sum total worth of all the studies is a million times nothing (that's nothing by the way).

A study that doesn't find a correlation in its samples just gets chucked out as it serves no analytical purpose whatsoever. Or at least it should be chucked out. For example, how do you know that researchers haven't taken thousands of samples, many of which *do* show a correlation, but the researchers just didn't write them up? It would be good if such a faith in humanity was warranted but I just think is a little naive.

At any rate I never demanded apodictic certainty I am merely pointing out the dishonesty/stupidity of those who have claimed such a thing in relation to vaccines and autism. Let me find one example: "and large population studies have subsequently shown there is no correlation between autism and MMR. None."

Note the reiteration of the word "none". But a twelve year old could see the stupidity of such a claim. I could go out and find for myself a sample that did show a correlation. It would be easy to do. It may not be valid or unbiased and it wouldn't prove causation even if it was but there would still be a correlation wouldn't there? And I could do it for thousands of different samples. Just as I could go out there and find samples that don't show a correlation - all I have to do is pick and choose what part of each sample I use.

But that guy isn't the only one foolish enough to make such an 'apodictic' claim: here is someone I imagine you have complete deference for - Peter McIntyre - who said "That only took hours or days to become a big deal, but took about 10 years to completely disprove, and in the mean time, there was measles outbreaks and death. Unfortunately the damage from this is only just being undone now." http://sixtyminutes.ninemsn.com.au/.../chat-peter-mcintyre

Note the "completely disprove" rather than, say, "haven't found sufficient evidence to support yet".

I could go on of course with examples, with practically everybody on your side of the fence making definitive statements with the specific purpose of deceiving those who fear there may be a connection.

"At some point, coincidence (i.e. the fact autism tends to manifest during parts of the vaccination schedule) is simply going to be the more parsimonious explanation than a connection that's unattested at the population level."

As I said above it *is* attested at the population level. It might not be attested for in some samples collected by people with a massive vested interest in the program but that is meaningless. And you can't say it is likely just a coincidence that autism diagnoses occur at the same time as most vaccines are given unless you regress it against the likely age of autism diagnoses *before* vaccines were widespread. Given that autism diagnoses were vanishingly rare back then to make a claim about proximate injuries to vaccines being a function of the age they are given is baseless speculation.

And I should also say that the most famous study of all (the Danish study) actually *did* find a significant correlation between autism and MMR. Indeed there was a 50 per cent increased chance of having an ASD if you had received the MMR - and that is despite the non-MMR group more than likely having every other vaccine (and most would have received the measles etc shots individually). But then the authors decided that they would fudge, sorry, 'adjust' the data somehow to bring about the opposite conclusion. Of course, you might argue that all their fudging was perfectly justified because the likes of Poul Thorsen are experts and they would never lie, cheat or steal, however, the fact remains that there *was* a correlation.



Chat: Peter McIntyre

sixtyminutes.ninemsn.com.au 60 Minutes presents a live interview with Professor Peter McIntyre.

Like · 25 October 2013 at 09:39

Tristan Wells "we're moving forward and can see how far we've come "

This is merely unfounded speculation.

"Well I'm on public record as criticising scientism (construed as scientific intrusions into non-empirical areas of inquiry) and – wait, did you just link to Natural News? Oh my. That's just adorable."

And I'm on record saying I will never drink alcohol again. But nobody believed it at the time - least of all me. And for all the hyperbole of Natural News (and there is an awful lot) I still reckon it beats 99 per cent of mainstream news sites on credibility - which to be fair isn't saying much.

At any rate I value the claims in a news site in the same way the market values people who make stock market predictions. If you go with the flow and end up being right you won't make much money anyway. But if you go against the grain and end up being right then you make a motza. The former may be more likely to be right each time but their statements/predictions hold little value. Those who tell us something extraordinary and turn out to be right - well that is something.

"But what you're actually saying is they have to somehow be personally liable for that i.e. you want it to be the case that if they turn out to be wrong they take the blame. In other words you're not talking about people being incompetent or negligent or engaging in wilful misconduct, you're saying they should be liable for not being omnipotent."

Firstly, I'm pretty sure it is 'omniscient' in this context. Secondly, we never said anything like this. Thirdly, it was your bloody claim that started this in the first place Patrick!

You have two choices: Either admit that your initial foray into this sphere was a load of crap and you had no right to argue that Greg and Meryl exclude themselves from the public debate as a result of not wanting to take responsibility for their advice or you admit that your faith in these particular 'experts' is completely unwarranted.

Well, there is the more likely third option whereby you continue to lie and obfuscate as you attempt to climb out of the hole you dug for yourself.

"But I'm clearly wasting my time here, because as Tristan admits above, it's all about being different and not 'going with the herd' for you guys."

I do enjoy being different but that doesn't mean I believe that the sky is green or black is white or red means go. The fact that I enjoy being different gives me courage (or at least the appearance of it) when most would demur from an argument. Enjoying being different doesn't mean I like lying or being made to look a fool by defending the indefensible. I just don't like being different that much. On the other hand, in my experience, people who want to fit in often are prepared to go to such lengths.

Being prepared to be different and being prepared to lie just to be different are not the same thing. Like · 25 October 2013 at 10:03

Greg Beattie Hi "Vaccines...". Thanks for your thoughts and the link to the Sheldrake interview. Amazing that his TED talk was banned and the flag of objectivity continues to be waved. Like · 28 October 2013 at 11:27

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Greg Beattie - "Greg you've basically just said that no-one is ever entitled to rely prima facie on experts reporting on their own area of expertise unless they have satisfied themselves by talking to some unspecified large number of experts as to what the current state of that discipline is. That's quite silly..."

You're not following the conversation, Patrick. We've been squeezing this 'the graphs are dishonest' thing into a corner for a while. All that's left of it is you feel it's justified because there's 'no doubt' about the effectiveness of vaccines. Now I've been asking you to substantiate that. I mean, it's a pretty grand claim. A normal person wouldn't make such a claim without some knowledge of it. So this is about *you* substantiating your claim. No one else has been asked to provide the info because no one else has made such an unlikely claim (and I use the word 'unlikely' because the likelihood of there being *no* doubt is slim... I think most of us can name at least one doctor who has doubt).

So I think we can all now acknowledge that the last vestige of your argument is unsubstantiated opinion. And for you that's enough to accuse someone of dishonesty. I hope you don't teach ethics. At least, I hope you preach better than you practice.

- "Plenty of papers are met with a shrug. Beyond historical interest (which is valuable in itself) what would be significant about such a finding? What further papers do you expect it to generate?"

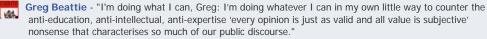
You wanted the correction published. You got it. Now you're back to saying 'so what'. And I've already explained 'what'. I'm taking the info to the people (and I'm certainly not the first to do so) because those who should have done so have failed to. In fact they're still actively perpetuating the falsehood. In relation to the current debate about vaccines I can't think of a more important issue to address. Like · 28 October 2013 at 11:41

Greg Beattie - "You don't have a problem with your representatives saying factually untrue things in public? Wow."

If you think something is factually untrue then *do something* concrete about it. I understand you might not want to because you've spent so long telling everyone that you will never get involved in debating the 'science' because you don't have the skills. But you can't have it both ways: jump in and disagree but then jump back out and say "but I can't do anything because I'm not qualified to form an opinion". I've already told you I'm comfortable with those two statements, so there's nothing for me to do. I didn't see that they generated any further discussion in the arena they were presented in so I guess I'm not the only one comfortable with them. If you have further relevant info, or at least some reasonable argument about them, go ahead and follow it up.

- "...wait, did you just link to Natural News? Oh my. That's just adorable."

Thank you. I'm not sure what your point is, but I'll take a stab. I imagine your mates have drummed into your head that Natural News is full of unsubstantiated anti-medical opinion? And being the self-confessed groupthinker that you are you squealed with delight when you saw me link to it. But I was hoping you would read the article. I think it's a well written piece about the the dangerously arrogant pathway that some factions in 'science' are heading down. I don't know whether you saw the Catalyst piece recently about cholesterol and saturated fats? I've spoken to many ordinary people who were shocked by that program. They honestly had no idea that medical 'science' was capable of being wrong on such a scale. Like · 28 October 2013 at 11:50



Well why don't you do your bit and help me counter the fundamental misinformation? At the very least, stop trying to get in the way. You know damned well what the graphs tell us, and you know that they counter a very influential story that's perpetuated to glorify vaccines. If you're really interested in honesty then start by getting yourself on the right side of it.

Like · 28 October 2013 at 11:54

Tristan Wells "I don't know whether you saw the Catalyst piece recently about cholesterol and saturated fats?"

Nah Greg you have interpreted that event all wrong. The fact that the pharma companies have lied, cheated and stolen their way to billions of dollars in profits whilst poisoning tens of millions of people and the doctors just all ran with it without asking a single question but now, as their patents run out, are deciding to ditch the whole thing without any compensation just proves that Science (TM) is a wonderful self-correcting institution whose protagonists are always objectively seeking the truth without fear or favour. Remember, the fact that we can fly in jumbo jets proves beyond a shadow of a doubt that cholesterol drugs are a good idea.

You know it makes sense.

Like · 28 October 2013 at 13:58 · Edited

Tristan Wells Loving some of the quotes from that Catalyst program:

"I think there are some very telling pieces of evidence which have been used to establish the importance of avoiding saturated fat. If saturated fat is completely benign, if it's actually beneficial, where's the evidence in support of that? Where's the evidence of an alternative cause? We are particularly keen to get some dietary advice, because otherwise what do we offer people?"

So this guy doesn't care if he gives out the wrong advice just as long as he gives out *some* advice he feels like he is doing his job. After all, he is a professor and he can't have lesser beings thinking he doesn't know what he is talking about can he?

"Keys withheld data for 16 other countries."

"He more or less cherrypicked countries. You could show just the opposite. You could show that the more saturated fat people ate, the less heart disease they had, if you cherrypicked the right countries."

I don't know about this. Surely researchers wouldn't just write up those samples whereby they found the relationship they hoped they would see (or wouldn't see)? After all, researchers are angels amongst men. They have degrees and stuff. And peer-review. And published.

"Dr Sinatra says blaming cholesterol for causing plaques is like blaming firemen for causing fires, just because they're always at the scene."

Yep. Just like germs and so called infectious disease.

"It took decades to really entrench this myth. It's probably going to take a few more decades to get us out of this myth. But to vilify saturated fats I think is one of the worst things the medical profession has done."

No. As catastrophic as this idea has been it would barely be in the top 20. Like · 28 October 2013 at 13:08 · Edited

Greg Beattie - "I don't know about this. Surely researchers wouldn't just write up those samples whereby they found the relationship they hoped they would see (or wouldn't see)?"

No way, Tristan. It was checked and given the authoritative stamp of approval. Buddy review - beautiful one day, magnificent the next.

Like · 29 October 2013 at 01:30

Greg Beattie Oh and Patrick, I'm still wondering which two science degrees you feel are necessary. Like - 29 October 2013 at 01:31

Patrick Stokes "But there *is* a correlation at population level. That is the whole point. There has been an increase in autism diagnoses and an increase in the number of people receiving vaccines (and number of vaccines they have received)."

- Which at that level of generality is no more impressive than the 'correlation' between organic food an autism diagnoses. And yes, if you take sufficiently large samples and the 'correlation' doesn't appear, then yeah, it's a non-starter for a suspected causative relationship.

"Asking researchers with a pro-vaccine bias to 'look' for evidence that everything they so desperately want to believe is wrong is equally worthless. [...] For example, how do you know that researchers haven't taken thousands of samples, many of which *do* show a correlation, but the researchers just didn't write them up? It would be good if such a faith in humanity was warranted but I just think is a little naive."

- Meaningless ad hom; you'll dismiss anyone as corrupt if you don't like their findings. And as a basic ethical precept I'd suggest 'faith in humanity' has to be the default position – i.e. most people are telling the truth most of the time – but that's an argument for another time.

"here is someone I imagine you have complete deference for - Peter McIntyre - who said "That only took hours or days to become a big deal, but took about 10 years to completely disprove" [...] Note the "completely disprove" rather than, say, "haven't found sufficient evidence to support yet"."

- Yes, it's unfortunate when scientists have to use the language of logical certainty when they're talking inductive probability, but then when they do speak in the qualified, reserved language of their discipline people take that as evidence of uncertainty that doesn't actually exist. ("Evolution is only a theory!")

"And you can't say it is likely just a coincidence that autism diagnoses occur at the same time as most vaccines are given unless you regress it against the likely age of autism diagnoses *before* vaccines were widespread."

- Which we both know would be impossible, as Autism doesn't even begin to be used in its modern sense until the 1940s and doesn't become a settled diagnosis until the late 1960s, and even the number of adults still being diagnosed suggests it was being under-diagnosed long after that. (Especially if we're including Asperger's - plenty of people get to adulthood and even middle age without being diagnosed. Gary Numan springs to mind. And now I'll have 'Cars' stuck in my head for the rest of the day. No bad thing). But again, if we don't find significant correlations then, as with autism and organic food, we're stuck with coincidence.

"the most famous study of all (the Danish study) actually *did* find a significant correlation between autism and MMR. [...] Of course, you might argue that all their fudging was perfectly justified because the likes of Poul Thorsen are experts and they would never lie, cheat or steal, however, the fact remains that there *was* a correlation.

- Can't find anything online about it actually finding a correlation – do you have a link to more info? Interesting you chose to mention Thorsen, even though he's way down the list of authors on Madsen et al (actually there are two such studies, I assume you're talking about the second). I wonder why? Oh that's right, his unrelated prosecution for fraud. Don't drink from the well, folks.

(By the way: having lived in DK I can confirm it's a great place to do any sort of population-scale health study as you basically can't fart without it being logged somewhere within the Sundhedsministeriet. My eldest had a national ID number before she'd even left the delivery room).

"This is merely unfounded speculation."

- You consider it 'unfounded speculation' that our understanding of the human body is better now than it was, say, two hundred years ago? Back to hysterical wombs and unbalanced humours then?

"Firstly, I'm pretty sure it is 'omniscient' in this context."

- Cheerfully conceded.

"Secondly, we never said anything like this."

- Yeah, you did, with all this 'why won't they take personal responsibility?' stuff. You're basically asking people to be personally liable for global limitations in human knowledge. Which brings us to:

"You have two choices: Either admit that your initial foray into this sphere was a load of crap and you had no right to argue that Greg and Meryl exclude themselves from the public debate as a result of not wanting to take responsibility for their advice or you admit that your faith in these particular 'experts' is completely unwarranted."

- While it's true they don't seem to take responsibility for the veracity of their remarks (no retraction of the ridiculous claim of 1,000 dead a week due to doctors I see) that's not the responsibility I want them to take. I want them to live up to their basic moral responsibility of not pretending to speak with expertise on topics they're not experts in given the risks in presenting non-expert opinion as if it was at all credible. That's a very different thing to someone who does actually have the training and expertise reporting on the current state of global knowledge. Basically: go back to uni and then start publishing, or sit down.

"I do enjoy being different but that doesn't mean I believe that the sky is green or black is white or red means go."

- Just that germs don't cause disease apparently.

"Enjoying being different doesn't mean I like lying or being made to look a fool by defending the indefensible."

-Do feel free to point out where – anywhere, ever - I've lied. You seem to like flinging that accusation around, so maybe it's time you actually put up? Like · 31 October 2013 at 18:18

Patrick Stokes "Now I've been asking you to substantiate that. I mean, it's a pretty grand claim."

- Except Greg that I'm not making any such claim, nor is it up to me to 'substantiate' it. All I am doing is what, as a non-expert, I am both entitled and rationally (and prudentially) required to do, namely, relying on the testimony of people who, by virtue of training and of working in the relevant disciplines, know their stuff. That's it. It's not up to me to say whether vaccines work, or what the current view is within the relevant disciplines, and it's not up to you either.

"So I think we can all now acknowledge that the last vestige of your argument is unsubstantiated opinion."

- You regard it as 'unsubstantiated' because you basically refuse to accept that experts are experts. As I say, that's pure epistemic suicide.

"And for you that's enough to accuse someone of dishonesty. I hope you don't teach ethics. At least, I hope you preach better than you practice."

- So let's review: you're "comfortable" accusing doctors of being responsible for a third of all deaths in Australia, a statement as ridiculous as it is slanderous. You are the leader of an organisation that has regularly presented factually false information with potentially disastrous consequences. And yet, when I point out that you've tried to misdirect a parliamentary committee with irrelevant material in order to create doubt you know isn't justified (again, with disastrous real-world consequences), when I point out that your crusade to tell people the 'truth' about historical mortality is simply a diversion designed to make the untrained doubt a consensus they have no legitimate grounds to doubt, I'm told that my ethics are dubious. Fascinating.

"I'm taking the info to the people (and I'm certainly not the first to do so) because those who should have done so have failed to. In fact they're still actively perpetuating the falsehood. In relation to the current debate about vaccines I can't think of a more important issue to address."

- And why do you think 'the people' need to know this so desperately Greg unless you also believe, despite a clear scientific consensus to the contrary, that vaccines aren't effective? What do you hope to achieve other than promulgating unscientific doubt?

"I imagine your mates have drummed into your head that Natural News is full of unsubstantiated anti-medical opinion?

- It is, and worse. Did you see Adams on Angelina Jolie's mastectomy? Repulsive.

"And being the self-confessed groupthinker"

- Oh God, there's another one! You'll call me a 'sheeple' next.

"I don't know whether you saw the Catalyst piece recently about cholesterol and saturated fats? I've spoken to many ordinary people who were shocked by that program. They honestly had no idea that medical 'science' was capable of being wrong on such a scale."

- I did indeed watch that (and I remember thinking you guys would be enjoying it). One on level I'd love it to be true given my rather atrocious dietary choices. But before we rush out to KFC and order the biggest bucket they have, three or four rather excitable doctors, some with books to flog and weird beliefs about electrically 'grounding' the body, does not overturn a longstanding medical consensus. I note that Tristan was complaining above about people with what he perceives to be vested interests making definitive statements, but apparently when a doctor who writes books telling people cholesterol is fine (funnily enough I dare say there's a market for that!) and sells his own range of diet supplements makes huge declarative statements without a hint of nuance or qualification, apparently that's some good science right there.

So I suspect this story will turn out to be precisely what it sounds like i.e. too good to be true. But one thing I did notice is that, at the very least, everyone they interviewed was an actual doctor and at least some of them were publishing papers. At no point did they say "and now we cross to someone with no qualifications who's read a lot of Natural News and Mercola for their 'informed' view."

"Oh and Patrick, I'm still wondering which two science degrees you feel are necessary."

– I dare say there's several possible combinations. BSci and PhD in virology, immunology or epidemiology would be a good start, but there may well be other educational pathways to the relevant expertise. You'd have to ask a scientist. A real one.
Like · 31 October 2013 at 18:29



Tristan Wells "Which at that level of generality is no more impressive than the 'correlation' between organic food an autism diagnoses. And yes, if you take sufficiently large samples and the 'correlation' doesn't appear, then yeah, it's a non-starter for a suspected causative relationship. "

Right. So sufficiently large samples that show a correlation are worthless but sufficiently large samples that don't are proof positive.

You've got this all figured out haven't you?

"Meaningless ad hom; you'll dismiss anyone as corrupt if you don't like their findings. And as a basic ethical precept I'd suggest 'faith in humanity' has to be the default position – i.e. most people are telling the truth most of the time – but that's an argument for another time."

Right. So not taking the word of an accused felon = fallacious reasoning. The world according to Patrick Stokes: 100 per cent of prisoners are innocent! Release them all!

You've got this all figured out haven't you?

"Yes, it's unfortunate when scientists have to use the language of logical certainty when they're talking inductive probability,"

Poor darlings. Having to lie, cheat and steal for the greater good. Which, by sheer unadulterated coincidence, just so happens to be the same as their own self-interest.

"but then when they do speak in the qualified, reserved language of their discipline people take that as evidence of uncertainty that doesn't actually exist."

Ummm, but you have just spent the past dozen or so of your posts telling us that scientists can *never* have certainty.

"Which we both know would be impossible,"

So don't make the claim. It is called integrity. It's ok, I wouldn't expect you to understand.

"But again, if we don't find significant correlations then, as with autism and organic food, we're stuck with coincidence."

That statement makes no sense.

"Can't find anything online about it actually finding a correlation - do you have a link to more info?"

Do you still get mummy to tie your shoelaces for you Patrick?

And I love how you claim to be in thrall to a maths website!

Hahahahahahahahahahahahahahahahahah!!!!! What happens when they use numbers greater than your fingers and toes Patrick?

"Interesting you chose to mention Thorsen, even though he's way down the list of authors on Madsen et al (actually there are two such studies, I assume you're talking about the second). I wonder why? Oh that's right, his unrelated prosecution for fraud. Don't drink from the well, folks."

Patrick says Greg Beattie's a very naughty boy and therefore the government sourced statistics he writes up are meaningless – not poisoning the well according to Patrick.

Tristan says fudged data from a criminal can't be trusted – poisoning the well according to Patrick.

Have you ever said anything that wasn't completely stupid?

"(By the way: having lived in DK I can confirm it's a great place to do any sort of population-scale health study as you basically can't fart without it being logged somewhere within the Sundhedsministeriet. My eldest had a national ID number before she'd even left the delivery room)."

Sounds like the totalitarian paradise the modern day humanities academic would love.

"You consider it 'unfounded speculation' that our understanding of the human body is better now than it was, say, two hundred years ago? Back to hysterical wombs and unbalanced humours then?"

As far as Greg and I are concerned we used to believe in lunacy and we still believe in lunacy. So you can't resort to such appeals to win us over.

"Yeah, you did, with all this 'why won't they take personal responsibility?' stuff. You're basically asking people to be personally liable for global limitations in human knowledge."

It wasn't my stuff it was yours. Now you just lie about me being the one who brought it up.

"I want them to live up to their basic moral responsibility of not pretending to speak with expertise on topics they're not experts in given the risks in presenting non-expert opinion as if it was at all credible."

And all you have to do is point to where Greg, Meryl etc have said words to the effect of "trust me I wouldn't lie to you on the science" and this whole charade will be over and you will have won.

"That's a very different thing to someone who does actually have the training and expertise reporting on the current state of global knowledge."

I don't think they are that different. Except that one is real and one is purely a product of your delusions.

"Basically: go back to uni and then start publishing, or sit down."

No.

"I do enjoy being different but that doesn't mean I believe that the sky is green or black is white or red means go."

- Just that germs don't cause disease apparently.

Are you trying to defeat my argument by poisoning *my* well?

Worst philosopher ever.

"Enjoying being different doesn't mean I like lying or being made to look a fool by defending the indefensible."

"Do feel free to point out where - anywhere, ever - I've lied. You seem to like flinging that accusation around, so maybe it's time you actually put up?"

See above about how you claimed the personal responsibility was my thing. I won't go over the many other instances on this thread but from the top of my head in a previous discussion you made the claim that you had criticised people who spread disease (such as those who visit doctor's offices) as vociferously as you do non-vaxers. Come to think of it you still haven't criticised any of these groups even now. Like · 2 November 2013 at 19:58 · Edited



Tristan Wells "All I am doing is what, as a non-expert, I am both entitled and rationally (and prudentially) required to do,"

Wow! So not thinking for yourself is rational and prudent.

You're a good philosopher.

"As I say, that's pure epistemic suicide."

The world according to Patrick. Mutilating yourself = not at all self-destructive. Thinking for yourself = the worst kind of self-destructive.

You can only gaze on and marvel at your willingness to beclown yourself over and over again. If only you could see the encouragement that your "mates" give you over at the SAVN for the act of sheer cruelty that it is. But then I wouldn't be having half as much fun would I?

"I'm told that my ethics are dubious. Fascinating."

Not particularly. A philosopher who hates the idea of thinking for yourself is though. Well, unfortunately in today's academic climate it isn't that fascinating.

"It is, and worse. Did you see Adams on Angelina Jolie's mastectomy? Repulsive."

I have to say I agree with you there Patrick. Nothing more repulsive than the idea that we shouldn't regularly mutilate perfectly healthy parts of our body.

Although I should say your beef is with far more than just the Natural News set. You should go tell psychiatrists that all the cutters they counsel are actually the cogent ones.

"Oh God, there's another one! You'll call me a 'sheeple' next."

This thread is around 300 posts long and every entry of yours has been to plead with us not to think for ourselves and you have a sook about being labelled a groupthinker?

You're a good philosopher.

"I note that Tristan was complaining above about people with what he perceives to be vested interests making definitive statements, but apparently when a doctor who writes books telling people cholesterol is fine '

You observing people engage in independent thought is something akin to when Indigenous peoples first encountered European civilisations. I had never heard of any of these guys and had looked into it myself and drawn my own conclusions. You assume that I must have simply heard it on Catalyst and believed it completely on that basis because you have absolutely no concept whatsoever of engaging in your own independent thought.

"So I suspect this story will turn out to be precisely what it sounds like i.e. too good to be true."

You have no idea. Following a low carb diet is much harder taste wise and more expensive/time consuming than a high carb one. Yes the saturated fats are nice but most people like sugar more than any other taste.

"But one thing I did notice is that, at the very least, everyone they interviewed was an actual doctor and at least some of them were publishing papers. At no point did they say "and now we cross to someone with no qualifications who's read a lot of Natural News and Mercola for their 'informed' view.""

What a great insight! The thing I noticed was the amount of completely idiotic things said by those who stick with the cholesterol theory irrespective of how many degrees they held.

If Catalyst had interviewed people with sound arguments it wouldn't have made the slightest difference to me how many qualifications they had. But I suspect those involved in the story know that people like you vastly outnumber people like me. You are incapable of reason you only care about authority. That is why my arguments here consist of a) telling you that there are no real authorities; b) telling you that there are those who you should deem to be authoritative who agree with us; and c) humiliating you. I provide the logic intermittently too for the benefit of others who read this but I understand it means nothing to you.

"I dare say there's several possible combinations. BSci and PhD in virology, immunology or epidemiology would be a good start, but there may well be other educational pathways to the relevant expertise. You'd have to ask a scientist. A real one."

Hahahahahahaha!!!!

You should sell life insurance with Daffy Duck. http://www.imdb.com/title/tt0044627/reviews

And by the way, here is a virologist and microbiologist http://www.neue-medizin.com/lanka2.htm. But don't worry. I'm sure your comrades will happily assure you that he is just a paranoid conspiracy theorist or witch or some such and you can safely ignore him.

Oh and here's another one. It seems that the great Orac doesn't care too much for Nobel Prizes if they are being handed to people who disagree with him http://scienceblogs.com/.../luc-montagnier-hits-a-new.../

And I should probably also mention Kary Mullis who claims that anybody who uses PCR to prove that a virus is causing an infection is absolutely clueless. In case you don't know who Mullis he won a Nobel Prize for guess what? The invention of the PCR. Obviously the great Orac would think he was a loony though so you can easily dismiss him.

I know these aren't strictly about vaccines but the point remains. There is controversy amongst people with qualifications. http://www.virusmyth.com/aids/group.htm

The vast majority of them believe it but then the vast majority have a very large vested interest in it (oh that's right there is no such thing as vested interests is there Patrick? Everybody tells the truth 100 per cent of the time (except of course anybody who disagrees with Patrick who are all chronic liars).

Indeed, if you were to actually make this about the characters of the qualified people who agree with us versus the characters of the most vocal on your side (of course I wouldn't) I would vastly prefer to stick with my views.



Fool Coverage Reviews & Ratings - IMDb

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Like · 1 · 2 November 2013 at 10:41 · Edited

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Tristan Wells "And as a basic ethical precept I'd suggest 'faith in humanity' has to be the default position – i.e. most people are telling the truth most of the time – but that's an argument for another time."

FMD your arguments are wretched.

I defeat most of my opponents at the local squash club. Ergo, if I play a World Cup event I should beat most of my opponents there too.

Who the hell cares whether in totality people generally tell the truth? What matters is whether people generally tell the truth even when saying such involves a great cost.

Why do you argue like a 13 year old?

(I thought I would throw in a loaded question just so you can tell yourself that I have made one fallacy on this thread).

Like · 2 November 2013 at 10:13

Patrick Stokes So, a quick summary for those of you playing along at home:

- Tristan made a (fairly contentious) claim that Madsen et al fudged their data. Patrick went looking for something to substantiate this claim, and couldn't find anything. Rather than simply assuming Tristan was pulling this claim out of thin air, Patrick, mindful as he is of the basic tenets of good argument (even when you're arguing with a dick) generously gave Tristan the opportunity to substantiate his claim. Tristan refused to do so, and, reverting to type, attempted to paper over the vacuity of his position with pointless mockery. Conclusion: Tristan's claims re: Madsen remain out of play, and Tristan remains a dick.

I'd add that to the pile of "Shit Tristan Has Gotten Wrong" but at this point it's so tall the neighbours are starting to complain.

- Tristan also seems to think that 'autism diagnoses are increasing' and 'vaccination rates are increasing' counts as noticing a positive correlation within a sample, because 'the whole world' is a sample apparently. He also thinks that when the fourth or fifth author on a paper (and in science unlike in humanities authororder actually means something rather important) commits an unrelated crime *after* the paper has been written, that means the whole paper is unreliable. (I guess I should stop believing anything they say on QI, seeing as Stephen Fry is a convicted felon and all). Oh and scientists "lie, cheat and steal" (Tristan's either been reading the West Point oath or listening to Tool's first EP, which I heartily endorse) although, as usual, he has nothing to back this up with other than his own rather paranoid view of the world.

At this point I think the pile should probably be given its own postcode.

- Tristan also thinks that I introduced the idea of scientists taking personal responsibility, which he himself raised first with his 'Find me just one person...' schtick. Apparently Tristan having a bad memory = other people lying. Hence he accuses me of lying, except the only instance he can point to is that I don't spend my time arguing with other disease-spreading groups (because apparently in Tristan's mind there are also 'people who sit in waiting rooms in order to spread disease' Facebook pages I should be commenting on). In short, he can't name a single instance of my lying. And there's a good reason for that: I haven't lied. Not once. But of course the unethical always assume everyone else is too.

The pile is now generating its own weather.

- Tristan also seems to think that I need to "point to where Greg, Meryl etc have said words to the effect of "trust me I wouldn't lie to you on the science" – which makes no sense at all, given my whole point is simply that Greg and Meryl, not being scientists, simply shouldn't pretend to know what they're talking about. It's not about them lying, it's about them presenting as experts when they're not. Ah, but for Tristan, there are no experts, because he lives in a solipsistic universe where everyone has to recreate the entire edifice of human knowledge for themselves or they don't know anything. He likes to 'think for himself,' just so long as that "thinking" (note the scare quotes) never penetrates into his own limitations nor into his epistemic dependence upon others. In fairness, I can imagine why he might want to avoid the former.

Seriously, Tristan, do you have anything other than self-aggrandising denial of reality to offer? This is all getting rather dull.

Like · 1 · 4 November 2013 at 13:52

Greg Beattie "Except Greg that I'm not making any such claim, nor is it up to me to 'substantiate' it."

Yeah you are. You claim it's dishonest to raise the issue of the non-role vaccines played in the massive drops in mortality, and your (incredibly watery) reasoning for that is that there is *no doubt* about the value of vaccines. That's your claim, Patrick. Would you prefer to disown it now? I don't blame you. I would too. But then I wouldn't have made such a silly statement to begin with.

At present you're attempting to save face by watering it down (further) to "the medical profession presents a united official position on the value of vaccines". I'm sure you can see that's substantially different to your first claim. It doesn't take into account the fact that there *is* doubt, even within the profession that essentially retails the service. Such doubt exists and is documented.

So you're left saying that if the medical profession presents a united official position about something that means there must be no doubt, and anyone who claims there is is dishonest. I'm sorry but that's Mummy's boy logic.

I can't stress enough the importance of addressing this belief about the historical role of vaccines. The effect it has on people's capacity to think rationally is really concerning.

The average person (and I'm including doctor's here) ultimately find their support for vaccines in this belief. If you ask them why they believe in vaccines they ultimately point to the role they played in history. Sure some may start off by saying something along the lines of "scientists have proved how good they are" but after it's emerged that they have never actually seen this 'proof' they always come back to the old old story. There are very few people who have really looked at the research body on the track record of vaccines. So the story ends up being extremely influential.

That's why it must be addressed. And people like yourself who resist having it addressed are a problem for our collective integrity. You actively try to smear those who present the data which directly (and simply) addresses this influential story. Notice I added *and simply*? There is no expertise needed. This data is easily interpreted by anyone with a modest education. A medical degree is of no consequence. So the

expertise argument (apart from being Mummy's boy logic) simply doesn't apply.

In fact, that point needs to go a step further. What good is medical (or even scientific) expertise when it produces people who promote a belief which is both fundamentally influential and utterly false? I think that's a good reason to throw all their advice out the window and make them get down on their knees and show cause why they shouldn't be treated in the way we treat other corporate breaches of responsibility. Of course there will be those 'experts' who genuinely weren't aware that the story they were promoting was not sound, and they probably represent the vast majority of the guilty. But... I guess they're not really experts. Just parrots.

Like · 5 November 2013 at 12:39



Greg Beattie "You regard it as 'unsubstantiated' because you basically refuse to accept that experts are experts. As I say, that's pure epistemic suicide."

Patrick, you need to define 'experts' in the current context for that to mean anything. Who's an expert on the track record of vaccination? And why? Then... where have I refused to accept their expertise? Or are you conflating that with refusing to accept one or more of their conclusions?

"...you're "comfortable" accusing doctors of being responsible for a third of all deaths in Australia, a statement as ridiculous as it is slanderous. You are the leader of an organisation that has regularly presented factually false information with potentially disastrous consequences."

Will you stop banging on with intangible accusations about this? If you have some knowledge of the issue then bring it out. I'm reluctant to discuss anything that even resembles 'science' with you because you immediately retreat claiming it's the realm of 'experts'. YOU CAN'T HAVE IT BOTH WAYS. If you want to discuss the data on something then present your case. Don't just make wispy accusations. Like · 1 · 5 November 2013 at 12:45

Greg Beattie "Tristan also seems to think that 'autism diagnoses are increasing' and 'vaccination rates are increasing' counts as noticing a positive correlation within a sample, because 'the whole world' is a sample apparently."

No. That's a census. Vastly superior to a sample.

"But of course the unethical always assume everyone else is too."

And is that why you initially accused me of being dishonest? Like · 5 November 2013 at 12:54

Greg Beattie I agree with Tristan's summary of your arguments here, Patrick. He was perhaps a bit more blunt than I would have been, but given your own tendency to dish out insults (albeit while trying to camouflage with smiles and jokes) it was probably not out of place. (And I see you've lost the smiles and jokes in your response anyway.)

I would characterise your argument as follows:

Mummy ays we should wear long socks. Some people don't want to wear them. Tey say silly things like " They restrict blood flow, irritate the skin, andon't do any good." But Mummy says that's all rubbish. She sa ys the protect the legs from scratches, abrasions and prying eyes. I think Mumin right. She's always been right and she knows a lot more than I do abut all sorts of stuff. In fact I hate people who doubt her. Who d o they think they are? They aren't my Mummy. That's for sure. Now... some of them say that Mummy even lied about who my Daddy is, and they show people the DNA evidence. But I don't want to look at that. I just call them dishonest. Mummy would never lie. So I don't even need to see any evidence that she did.

In my opinion you're a perfect example of why we should discard your own argument. You teach philosophy. That means you're an 'expert' in critical thinking and rational argument. But you haven't displayed that here. In my opinion you've managed less of that skill than I would expect from an 'average' person. Hence I question the *value* of your expertise. I will listen to what you say but I'll evaluate it myself. I believe that's what experts are for. Advising and informing. But *we* set the rules as to the form and extent of their input to *our* decisions.

Like · 5 November 2013 at 13:16

Patrick Stokes "It doesn't take into account the fact that there *is* doubt, even within the profession that essentially retails the service. Such doubt exists and is documented."

- So you're trying to interpret 'no doubt' to mean 'absolutely no-one disagrees'? If so, the reason why what I've said looks 'watered down' to you is that you were reading your own absurdly strong construal into the discussion. Obviously you can find people with fringe beliefs in any discipline. You can find geologists who insist the world is only 6,000 years old – but that does not mean there is serious debate within geology. So simply saying that vaccine denialist doctors and scientists do in fact exist doesn't mean there's 'doubt' any more than the existence of creationist geologists mean there's 'doubt' that the earth is more than 6,000 years old.

And again, seeing as you don't seem to have understood my point: an expert in a field is also (defeasibly, yes) going to be sufficiently qualified to comment on the state of that discipline. So you don't necessarily need to do some sort of survey of the relevant experts, you simply need to ask one (or if you prefer some) of them what the state of the literature is.

"The average person (and I'm including doctor's here) ultimately find their support for vaccines in this

belief."

- And who cares what "average people" think about why vaccines are a good thing? Why should that be of any relevance? Most people can't tell you how a plane stays up in the air, but they'll happily get in one, and planes would continue to fly even if it turned out most people were completely wrong about what held them aloft. Since when has public opinion been the arbiter of scientific truth-claims?

"You actively try to smear those who present the data which directly (and simply) addresses this influential story. Notice I added *and simply? There is no expertise needed. This data is easily interpreted by anyone with a modest education. A medical degree is of no consequence."

- And once again, if you want to pull out the graphs at your local historical society or pub trivia night, great. But you're trying to use it to create unwarranted doubt: for it to matter in terms of present policy there would have to be warranted doubt, and arguing for such doubt *does* require expertise. If pointing that out counts as 'smearing' you, I'm really not sure what you'd recognize as reasonable criticism.

"Who's an expert on the track record of vaccination?"

- Why does that matter? Historical track record – especially when you ignore morbidity – isn't the relevant expertise here, because the questions relevant to policy issues aren't the historical ones. Again, you insist on asking the wrong question because you know you can't answer the right one the way you want to.

"Will you stop banging on with intangible accusations about this?"

- What's intangible about it? The claim that doctors are responsible for one-third of all deaths is beyond silly. It's also utterly slanderous. But instead of retracting your predecessor's public claims, you stood by them. I don't believe you're irrational enough to believe that a third of all deaths are somehow due to iatrogenic factors. So, do you simply not have control over the media pronouncements of your own office bearers?

"No. That's a census. Vastly superior to a sample."

- A census of the whole world eh? How delightfully biblical. Did anyone have to ride to their home town on a donkey for this purpose? Seriously: no. Simply noting "there are more autism diagnoses in the world" and "there are more vaccines in the world" (or even just restricted to the developed world if you prefer) is in no sense a 'sample.'

"And is that why you initially accused me of being dishonest?"

- I accused you of being dishonest because you made a dishonest argument. As I've said, you didn't lie, and I don't think you've said anything you don't sincerely believe. But knowingly making an argument that has no material relevance to the only question that matters i.e. whether vaccines work is, indeed, dishonest. I'm really not sure what to call it. If the charge sits uncomfortably with you, there was a simple way to avoid it: "Not being a scientist, I'm not equipped to debate the science. Hence I will confine my remarks today to the ethical and policy issues raised by the science and the economic and social factors involved." Now, given that by your own admission raising the historical mortality data can't displace the scientific consensus on vaccine efficacy, what then does the mortality data tell us that's relevant to those ethical and policy issues? (And again, 'relevant' doesn't mean 'what people happen to be interested in').

"given your own tendency to dish out insults (albeit while trying to camouflage with smiles and jokes) it was probably not out of place. (And I see you've lost the smiles and jokes in your response anyway.)"

- I think I've been pretty polite really, especially considering the frankly abusive and childish way Tristan likes to "argue." I've certainly tried to be as civil and good-natured as the context allows. But yes, arguing with people incapable of admitting their own epistemic limitations does tend to get frustrating.

"You teach philosophy. That means you're an 'expert' in critical thinking and rational argument. But you haven't displayed that here. In my opinion you've managed less of that skill than I would expect from an 'average' person. Hence I question the *value* of your expertise. I will listen to what you say but I'll evaluate it myself. I believe that's what experts are for. Advising and informing. But *we* set the rules as to the form and extent of their input to *our* decisions."

- You can think what you like about my arguments Greg. Apart from the odd quote here and there for flavor I've not appealed here to the areas in which I can credibly claim expertise, as none of those areas are relevant. (Though given you seem quite content to tell scientists they're wrong about science I'm not at all surprised you think yourself equipped to critique philosophers about philosophy too).

But your comments about what you think experts are 'for' is telling. You run two different things together: working out how to act on what experts tell you, and evaluating what they tell you as to its validity. The whole point of their being experts is that while you can and must do the former, you cannot do the latter without being an expert yourself – or at least not with any reasonable expectation of success. You claim to know something about critical thinking and rational argument. Fine. But you will never be an effective critical thinker if you don't turn that critical apparatus back on yourself, and thereby determine what you are and are not capable of forming views on. (You can make all the 'mummy' analogies you like, but the true lack of intellectual maturity is a refusal to accept the limits of your own capacities and the extent of your epistemic indebtedness to others). You are, as far as I know, not trained in science. As such, why would you think your views on scientific questions (not the meta-scientific stuff, not the policy stuff, but the science itself) are likely to be of any value? Has that honestly never occurred to you? Yes, you restrict yourself to the graphs, which you claim don't require specialist training or knowledge. But if vaccine efficacy isn't in question, and if

you're not in a position to call it into question, then the graphs don't matter in practical or policy terms. And hence your whole position is, ultimately, incoherent. Like · 5 November 2013 at 18:00

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Greg Beattie - "And once again, if you want to pull out the graphs at your local historical society or pub trivia night, great. But you're trying to use it to create unwarranted doubt:"

No. I'm not at all trying to *create* doubt. I'm simply removing a factor from the field; one that gives the illusion there's no doubt. If it turns out that factor was neither here nor there for our decision makers then no harm was done. But if removing it leads them to re-evaluate their position then its removal was extremely important. What we want to avoid is leaving the factor in place, because it *may* have influence. NB: you say it has no influence - I say it has great influence. Which one is right? We don't know, but the only right thing to do is remove the faulty factor from the table.

- "If pointing that out counts as 'smearing' you, I'm really not sure what you'd recognize as reasonable criticism."

Reasonable criticism would be just what is says: something founded in reason. I've interrogated you as far as possible for that reason but all you keep saying is that I'm somehow trying to *create* doubt where none exists. The graphs don't create the doubt. All they do is expose the doubt that exists if the false story is removed. That's not at all dishonest.

"Why does that matter? Historical track record – especially when you ignore morbidity – isn't the relevant expertise here, because the questions relevant to policy issues aren't the historical ones. Again, you insist on asking the wrong question because you know you can't answer the right one the way you want to."

That doesn't make any sense at all, Patrick. "Historical track record" is the only way to retrospectively assess what something has done for us. Policy relates to the future but it's informed by the past.

"What's intangible about it? The claim that doctors are responsible for one-third of all deaths is beyond silly. It's also utterly slanderous..."

Are you not aware of the contentious discussion that's been taking place over the past two decades concerning this? If you're not that would explain why you're surprised by Meryl's comment. If you are then why don't you make some sort of decent contribution? If you want to dispute something that's been said start by showing an appreciation of where the statement has come from, then put an alternative claim forward, along with your evidence. If you don't know where the info has come from then ask her. You see, this issue is dogged by a lack of good data. That's why each camp will make claims that seem absurd to the other. There is however some data available. Are you speaking with the backing of some data or just making intangible accusations?

- "A census of the whole world eh? How delightfully biblical. Did anyone have to ride to their home town on a donkey for this purpose? Seriously: no. Simply noting "there are more autism diagnoses in the world" and "there are more vaccines in the world" (or even just restricted to the developed world if you prefer) is in no sense a 'sample."

Sorry, I don't see the joke. You said "because 'the whole world' is a sample apparently". I was merely letting you know that no, that's not called a sample. In statistics, when an entire population is measured for some variable it's called a census. When the measurement is restricted to a smaller group it's a sample. All else being equal a census is vastly superior to a sample. The mortality graphs are from census data.

- "If the charge sits uncomfortably with you, there was a simple way to avoid it: "Not being a scientist, I'm not equipped to debate the science. Hence I will confine my remarks today to the ethical and policy issues raised by the science and the economic and social factors involved.""

Think about this, Patrick. I've told you many times but for some reason it hasn't landed. This time I really hope it does. *I did not debate the science*. The info that I presented I was entirely equipped to present and discuss. There is no special training needed to interpret the graphs and assess their relevance. Each person, be they plumber, shopkeeper, doctor, or member of parliament, can assess them and determine whether they've been inspired to reconsider their position.

Did I say "reconsider"? Shock!! Why? Because although the graphs don't tell us whether vaccines are any good, they do remove a huge obstacle to objective evaluation of their worth. They tell us that what we used to believe about them is false: i.e. the story that possibly helped form our opinion is false. So... a reasonable person might ask themselves "What's left?" For some there may still be plenty of reason left to believe in them. But for others there may be very little. They may start to demand a higher level of evidence, or at least a higher level of scrutiny of the evidence.

- "(Though given you seem quite content to tell scientists they're wrong about science I'm not at all surprised you think yourself equipped to critique philosophers about philosophy too)."

Tell me where I've told scientists they're wrong about science. I'm not saying I've never done it. I do remember correcting an epidemiologist's basic maths repeatedly before he finally conceded maths was not his strength. The point is it wasn't wrong to correct him; it was wrong to believe him on faith. If someone says something that's questionable I'm happy to ask that question, be they Nobel prize winners, priests, or whatever. Authority doesn't, and shouldn't come into it. Either you learn something or they do. Either way it's positive. And yes, if you make poor arguments I'll happily point out that I noticed them. Do you prefer that I don't draw attention to them?

- "Apart from the odd quote here and there for flavor I've not appealed here to the areas in which I can credibly claim expertise, as none of those areas are relevant."

That explains it. So you're not here to show your badge. But I suspected at first that that was your intention. Why? Well why would a philosopher with no claim to relevant expertise write an article (as Patrick Stokes, lecturer in philosophy) for The Conversation, telling everyone they were not entitled to an opinion, if not to appeal to folks with a "Trust me.... I know how to think about this stuff and I have a terribly rational case to present"? But I obviously had you pegged wrong and I apologise for that.

- "The whole point of their being experts is that while you can and must do the former, you cannot do the latter without being an expert yourself..."

Yes you can. If an 'expert' says "This window will not break" you're certainly within your rights to hold up the broken window; not only to them, but also to others who make decisions about the use of the window. In the case of the graphs, if the 'experts' say vaccines brought about the decline in deaths, I will produce the evidence which shows clearly they are wrong. As long as the story remains an influential part of the promotional campaign it will be necessary to correct it. If you think that's disrespectful to the experts I think you need to rearrange your values.

Like · 5 November 2013 at 22:10

Patrick Stokes "No. I'm not at all trying to *create* doubt. I'm simply removing a factor from the field; one that gives the illusion there's no doubt."

- Ok, so say you've made your case and 'removed that factor from the field' – what then? Oh, look: there's a massive consensus in the literature that vaccines work. And again, that consensus is not open to you qua non-scientist to question. So we strip away what you call the "illusion there's no doubt" and it turns out that underneath there's no doubt anyway. So what, exactly, is the practical upshot for policy makers? They now believe exactly what they believed before, just for different reasons.

"The graphs don't create the doubt. All they do is expose the doubt that exists if the false story is removed. That's not at all dishonest."

- Except, again, you know that there is no such doubt in the relevant literature. Remove what you take to be a false belief and we're left believing exactly the same thing as before, if on different grounds.

""Historical track record" is the only way to retrospectively assess what something has done for us. Policy relates to the future but it's informed by the past."

- I agree wholeheartedly with the second sentence. But you're implying that the *only* evidence we have for vaccine efficacy is the historical drop in mortality, which is false.

"Are you not aware of the contentious discussion that's been taking place over the past two decades concerning this?"

- I'm aware in general terms of the debate over medical error, which is of course an important issue. (And which demonstrates why having an adverse events reporting system is so important 'cough*chiropractors*cough*). Even if you leave aside the fact that "1000 deaths a week or more" is based, according to the source Meryl links it to, on a claim that the figure is somewhere between 18,000-54,000 deaths, so even if we left things there it's already an unsustainable exaggeration, as I understand it (and obviously it's not my field at all and I'm open to correction on this) such figures are based on 'a patient experienced a medical error and also died' rather than 'a patient died *from* a medical error.' That people die in hospital or under the care of doctors doesn't automatically mean it's the fault of doctors when they do: people tend to go into hospital because they're seriously ill.

In any case, just to jump back on my Lakatos kick from above, the "a third of deaths are caused by doctors" theory is one that can only be defended by building in more and more auxiliary hypotheses that offer no explanatory or predictive gain. For a start, you need to explain why ABS and coronial data are so much lower. Ah, so the doctors must be covering it up ('A doctor can bury his mistakes, but an architect can only advise his clients to plant vines' - Frank Lloyd Wright) so that the ABS and the coroner never find out. But of course there's no evidence for that, and it makes no successful predictions (where are all the whistle-blowers telling us that one third of all deaths are due to medical stuff-ups?). In short you've just accused tens of thousands of people of incompetence *and* systemic corruption on a massive scale purely to support a pet theory based on, at best, sloppy reasoning from dodgy data. (I'm writing up a paper on this at the moment, albeit slowly; there should be a pop version as well in The Philosophers Magazine in a few months).

"Sorry, I don't see the joke."

- It was a reference to Luke 2:1-7 (the 'census of the whole world')

"I was merely letting you know that no, that's not called a sample. In statistics, when an entire population is measured for some variable it's called a census. When the measurement is restricted to a smaller group it's a sample. All else being equal a census is vastly superior to a sample. The mortality graphs are from census data."

-Fair enough, though doesn't effect my point.

"Think about this, Patrick. I've told you many times but for some reason it hasn't landed. This time I really hope it does. *I did not debate the science*. The info that I presented I was entirely equipped to present and discuss. There is no special training needed to interpret the graphs and assess their relevance. Each

person, be they plumber, shopkeeper, doctor, or member of parliament, can assess them and determine whether they've been inspired to reconsider their position."

- And once again, I'm not arguing with that; I'm saying that what you're doing with the graphs is irrelevant in policy terms given scientific consensus on efficacy (which is not based on the historical mortality figures) – and you can't argue with *that* except scientifically.

"So.... a reasonable person might ask themselves "What's left?" For some there may still be plenty of reason left to believe in them. But for others there may be very little. They may start to demand a higher level of evidence, or at least a higher level of scrutiny of the evidence."

- See above. I'm struggling to see on what basis a 'reasonable person' could dismiss a scientific consensus. (Though I believe a certain J.W. Howard did just that last night, telling a group of climate deniers that he preferred to trust his 'instinct.' The arrogance of thinking 'my gut trumps your decades of formal education and research' never ceases to astound me.)

"Tell me where I've told scientists they're wrong about science."

- You've questioned efficacy. Gingerly, I'll admit, but you still have.

"The point is it wasn't wrong to correct him; it was wrong to believe him on faith."

- Deferring to people with greater education in one of those fields that requires education in order to understand and evaluate is not taking things 'on faith' (which is why your frequent priest analogies are wrong), it's a simple prudential calculation based on recognizing your own limitations. I can't learn everything, so my only real option is to rely on others. I don't believe what my accountant tells me 'on faith;' he's done training that I haven't, his mind has been formed by the educative process and subsequent experience in 'accountanty' ways that mine has not, and I don't have time in this all-too-finite life to spend however many years it takes to study accountancy.

"And yes, if you make poor arguments I'll happily point out that I noticed them. Do you prefer that I don't draw attention to them?"

- No, please do; we only improve our arguments by subjecting them to criticism. That is, after all, one of the reasons why we have to run the gamut of peer review

"But I obviously had you pegged wrong and I apologise for that."

- No need to, but appreciated nonetheless.

"If an 'expert' says "This window will not break" you're certainly within your rights to hold up the broken window; not only to them, but also to others who make decisions about the use of the window. In the case of the graphs, if the 'experts' say vaccines brought about the decline in deaths, I will produce the evidence which shows clearly they are wrong. As long as the story remains an influential part of the promotional campaign it will be necessary to correct it."

 And "that window is broken" is the sort of claim anyone can credibly make, whereas most scientific claims reach to a level of complexity where that's no longer the case (there's a useful piece of terminology here but I can't recall it, which is really irritating). Now I've allowed that the graphs might fall into that first category. But again, that alone doesn't displace the consensus on efficacy. To do that, you need to go do some science.

Like · 6 November 2013 at 16:35

Tristan Wells I made a claim about data fudging. You could have asked me how I came to those calculations or even, gasp! done the calculations yourself. But instead, like the intellectual Pygmy you are you went to seek solace in the opinions of those who share the same prejudices as you. Hence the mocking. I could do the calculations for you but if you can't use multiplication and division you wouldn't be able to follow it anyway. I mean we are not just talking about a run of the mill fool with you but a full blown imbecile. You even think a census is a methodologically inferior method of determining what is happening in a population than a sample!

Like · 7 November 2013 at 08:27

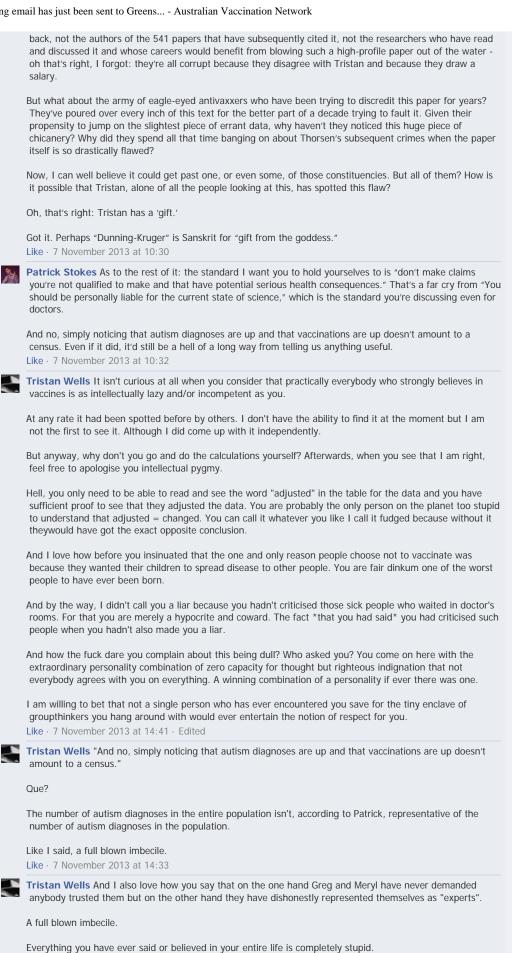
Tristan Wells And no I didn't say you introduced the idea of scientists taking responsibility. I said you came up with that criteria to judge us. Of course you had no intention of using that criteria consistently because as we have established many times you are a hypocrite.

Like · 7 November 2013 at 08:29

Patrick Stokes "I made a claim about data fudging. You could have asked me how I came to those calculations or even, gasp! done the calculations yourself."

Ah, so *that's* why I couldn't find anything. This isn't a claim that's been made publicly, one that's been argued over, tested, validated, published – no, this is just Tristan dicking around with a calculator. Tristan, and Tristan alone, has spotted the glaring error in Madsen et al, one of the most heavily discussed vaccination papers of the last ten years. I'm impressed. Can't wait to read your stunning takedown in New England Journal of Medicine.

Curious, is it not, that *no-one* else spotted this glaring error, so simple that apparently it just takes some basic mathematics to see it? Not the peer reviewers whose job it was to find reasons to knock the paper



What a mistake it was for someone of your intellectual arrogance but brittleness to come and debate Greg and me. And what cruely that you feel as though you can't back down as you have a bunch of lickspittles demanding you keep this humiliation going.



Like · 7 November 2013 at 21:50 Greg Beattie - "[About Meryl's claim] ... (and obviously it's not my field at all and I'm open to correction on this)" Then why are you making accusations about it? If you're man enough to accuse then be man enough to stand up and present your case properly. Otherwise shut your mouth. - "For a start, you need to explain why ABS and coronial data are so much lower." What data? Do you have ABS data on medical error? If you are talking about real data then link to it. If that's not possible then at least tell us what it is and where it comes from. - "In any case, just to jump back on my Lakatos kick from above, the "a third of deaths are caused by doctors" theory is one that can only be defended by building in more and more auxiliary hypotheses that offer no explanatory or predictive gain. For a start, you need to explain why ABS and coronial data are so much lower. Ah, so the doctors must be covering it up ('A doctor can bury his mistakes, but an architect can only advise his clients to plant vines' - Frank Lloyd Wright) so that the ABS and the coroner never find out. But of course there's no evidence for that, and it makes no successful predictions (where are all the whistleblowers telling us that one third of all deaths are due to medical stuff-ups?). In short you've just accused tens of thousands of people of incompetence *and* systemic corruption on a massive scale purely to support a pet theory based on, at best, sloppy reasoning from dodgy data. (I'm writing up a paper on this at the moment, albeit slowly; there should be a pop version as well in The Philosophers Magazine in a few months)." Actually this whole paragraph is just a touchy feely weepy bit of dribble. All you're saying is you don't like anyone suggesting there is so much harm done. So? That doesn't tell me what's wrong with Meryl's statement. And you haven't heard the whistleblowers? Again, so what? You've been jumping up and down demanding that I do something about what Meryl said on TV, but when I ask you why we find out you're just upset about it. No good reason. Just don't feel right. Like · 1 · 7 November 2013 at 21:58 Greg Beattie - "I'm struggling to see on what basis a 'reasonable person' could dismiss a scientific 100 consensus. (Though I believe a certain J.W. Howard did just that last night, telling a group of climate deniers that he preferred to trust his 'instinct.' The arrogance of thinking 'my gut trumps your decades of formal education and research' never ceases to astound me.)" 1. There is a scientific consensus that vaccines brought about the great declines in death. One reasonable person can dismiss this easily. 2. Need more hints? 3. "your decades of formal education and research" was behind that false consensus. 4. Need more hints? 5. What's a climate denier? One who denies climate? And is there a consensus among them? Like · 7 November 2013 at 22:04 Greg Beattie - "Deferring to people with greater education in one of those fields that requires education 12th in order to understand and evaluate is not taking things 'on faith' ... " My word it is. Don't you even know what 'faith' is? - "And "that window is broken" is the sort of claim anyone can credibly make, whereas most scientific claims reach to a level of complexity where that's no longer the case ... " You'd be surprised. But first you'd have to look at the info. You're reluctant to do that. You prefer to defer. That's fine. But don't judge those who prefer to look for themselves. People can work out what is easily understood and what isn't. Like · 7 November 2013 at 22:09 Greg Beattie - "...the standard I want you to hold yourselves to is "don't make claims you're not qualified 122 to make and that have potential serious health consequences." I don't. Is there still a problem? - "The number of autism diagnoses in the entire population isn't a census; you're not checking every single person for autism are you?" Have a read, Patrick. It's never too late. http://www.abs.gov.au/.../statistical+language+-+census... Statistical Language - Census and Sample www.abs.gov.au

Like · 7 November 2013 at 22:16



Greg Beattie "(And which demonstrates why having an adverse events reporting system is so important *cough*chiropractors*cough*)"

Don't cough, Patrick. Spit it out. What's your point? Like · 7 November 2013 at 22:24

Patrick Stokes Oh good grief: "The number of autism diagnoses in a population is exactly equal to the number of autism diagnoses in the population." Yes, and that is NOT a census!! How hard is this?? Here, from the ABS link that Greg just provided: ""A census is a study of every unit, everyone or everything, in a population. It is known as a complete enumeration, which means a complete count." If you do not have relevant data on every head (or, being charitable, as near as practically attainable) in a population you do not have a census.

Again, Tristan, ask yourself: why has no-one else ever pointed out this flaw in Madsen before? Leave aside the researchers you take to be corrupt: how come no anti-vaxxers have picked this up? What's more likely: that you've noticed some dramatic flaw that no-one else has, or that you've simply misinterpreted something? Actually, don't bother. You're clearly incapable of asking yourself anything of the sort.

And yes: "Because science." Because the current state of scientific knowledge *is* the current state of empirical knowledge. That's the basic methodological assumption of modern civilisation; it's not an arbitrary double-standard, it *is* the standard for anything being taken seriously as an empirical truth-claim at all. Are you under the impression there's some sort of open contest between competing knowledge frameworks? It's been over for at least two hundred years: the enlightenment happened, science won, and anyone making non-scientifically validated claims with respect to empirical matters loses. No, it doesn't and cannot tell us everything, which is why it annoys me when the likes of Sam Harris or Lawrence Krauss think they can derive normative or metaphysical claims from empirical data. But on the way physical reality works, there is no other admissible standard.

Like · 7 November 2013 at 23:00

Patrick Stokes "No, I don't know that. Is that something *you* know, Patrick? Can't be. You claim to not have the skills to read the literature. Again, from someone who *has* looked to someone who hasn't, let me tell you there definitely is doubt in the literature. But you couldn't have known that. I'll grant you that."

- So now you're telling scientists they're wrong when they report the state of their own literature as well? It never stops, does it?

"You know it's true because Patrick says so. And he's not responsible for backing it up because he doesn't do his own thinking. Others do the thinking. Patrick tells us the answer. But he's not responsible for it."

- Funnily enough, that's roughly correct. Science determines what we take to be empirically true. If I want to know the state of the scientific literature, I ask a scientist. If I want to know the state of the literature in anthropology, sociology or linguistics, I ask an anthropologist, a sociologist or a linguist. If you wanted to live in an era where human knowledge wasn't hyperspecialised and professionalised to the point where we're reliant on specialists, you've been born at least 120 years too late I'm afraid.

"Find where I've ever said anything like that."

- It's implicit in your saying that the mortality graphs matter. If you accept vaccine efficacy as a scientifically established fact, then in practical terms they don't.

"Then why are you making accusations about it? If you're man enough to accuse then be man enough to stand up and present your case properly. Otherwise shut your mouth."

- Well I've already pointed out why "1,000 a week or more" isn't sustainable even on the figures Meryl links to. The only source you'd get anything even like the lower end of the figures she's looking at is a non-peer-reviewed 1995 government study that's been quite seriously shredded – at the very least, if it were true we'd expect to see massively more evidence than we have. But we don't even need to go that far: 'doctors kill one-third of all people who die in this country' is simply ludicrous on the face of it, unless you want to posit a massive and highly effective cover-up. And when you have to do that to save a theory it's usually a sign that said theory is circling the drain.

"What data? Do you have ABS data on medical error? If you are talking about real data then link to it. If that's not possible then at least tell us what it is and where it comes from."

- Here you go: http://www.abs.gov.au/.../abs@.nsf/DetailsPage/3303.02011...

I believe ICD-10 codes Y60-Y84 in sheet 1.1 of the first Excel document are what you're looking for.

Actually this whole paragraph is just a touchy feely weepy bit of dribble. All you're saying is you don't like anyone suggesting there is so much harm done.

- I'm saying it's more than a little ethically on-the-nose to make accusations of corruption not because you have any evidence of it, but purely to bolster a dying theory. Simply, it's not a strong enough reason to overcome the basic presumption of innocence we owe to others. If you're going to accuse someone of killing people, you'll need a lot better than that.

"Have a read, Patrick. It's never too late."

- Well, ok, let's see what we – oh, will you look at that: "A census is a study of every unit, everyone or everything, in a population. It is known as a complete enumeration, which means a complete count." So yes, not what Tristan is talking about at all.

"Don't you even know what 'faith' is?"

- Ah, now you *are* getting into my area actually, but I'll accept the word 'faith' is used in many different ways. But in general what's distinctive about faith is that it's a belief that goes beyond probabilistic, prudential calculation. I don't have 'faith' that the plane won't fall out of the sky, I have a probabilistic belief that it won't, based on a number of factors. Same goes for deferring to experts when it comes to their topic of expertise. I don't take fideistic leap that my accountant knows what he's talking about; I can see his certificate on the wall.

"But don't judge those who prefer to look for themselves. People can work out what is easily understood and what isn't."

- And on what basis do you think people are capable of doing so? Seriously, what happens the first time you come up against a counter-intuitive claim you can't satisfy yourself over? Do you simply say "Ok, you know this stuff better than me" and accept what you're being told, or do you

"Don't cough, Patrick. Spit it out. What's your point?"

- That chiros don't have an adverse events reporting system, and they should.



3303.0 - Causes of Death, Australia, 2011 www.abs.gov.au

Like · Remove Preview · 7 November 2013 at 23:05

Tristan Wells "- It's implicit in your saying that the mortality graphs matter. If you accept vaccine efficacy as a scientifically established fact, then in practical terms they don't. " Firstly, terms like scientifically established fact is the stuff of children and secondly I am reasonably sure many people would describe life saving as a practical benefit.

And I dare say you would find it impossible to give an accurate exigesis of what I was saying with the census thing so I will tell you. YOU claimed nobody had ever found a correlation between autism diagnoses and vaccination. I said that was absurd as there was one at the population level. You said that didn't count because it wasn't a sample which is true it was much better than that but you somehow managed to persuade yourself that a sample was a more accurate representation of a population than the population itself. A fairly extraordinary claim - well for anyone else anyway - so we pointed out that was absurd. You should have either left it or admitted that there are in fact correlations out there irrespective of whether you think they prove causation. But you chose a far more self destructive path for some reason. You also did the same for the Madsen paper and boy did you look bad as a result.

Like · 8 November 2013 at 06:24 via mobile



Tristan Wells And I love your spiel about faith. Apparently the guy who despises the idea of questioning opinions on the nature of the universe thinks it's perfectly ok for him to come to his own unique definition of words. I can't make you up. Which dictionary gives your definition Patrick? And even if the Stokes definition made any sense it still wouldn't differentiate science from religion. If Christians, Muslims and others who believed in a paradise afterlife held their beliefs with an effective 100 per cent certainty then NONE of them would be afraid of death. That is absurd. Indeed they would all just give all their resources to their church or mosque and wait for that glorious day they got hit by a bus. Of course some believe with more certainty than others - suicide bombers would presumably feel as though the probabilities are overwhelmingly in their favour but very very few act as though that is the case. Of course not many religious people would say "I believe Christ rose from the dead with 82.1 per cent certainty" but that us how they generally act (thank God) and indeed many would happily admit to their own doubts. In other words the only way that our comparison of vaccine science to faith is unfair is that very few religious people are as dogmatic as the believers in vaccines.

I also note how before you claimed that for a theory to be useful it needed to make predictions. I would have thought that was a very dangerous position for someone who believes in anthropogenic global warming to hold. And we have already established that the germ theory/ vaccine paradigm has never done anything other than self-fulfilling prophecies. So I guess the only reasonable criticism we can level at our former PM - at least on this issue- is lack of courage. Having said that I do appreciate that you would find it very difficult to envision how people can engage in independent thought. Of course if I were you I wouldn't be advertising it.

Like · 8 November 2013 at 06:58 via mobile · Edited

Patrick Stokes If you don't have information on both variables for each person in the population you do not have a census. It's that simple. All you have is two observations: autism diagnoses are up in this population, and vaccination rates are up in this population. That, on its own, tells us nothing. It's a 'correlation' in the same sense as 'video games and allergies are both on the rise' is a correlation. You can bluster all you like about this, but you got it wrong. Badly.

The definition of 'faith' I used above is a pretty standard one in philosophy of religion. But of course, "there's a substantial body of knowledge I'd have to study here in order to know what I'm talking about" has never

stopped you from declaring "No, that's all wrong, you're so dumb!" before, so I'm not at all surprised you waded in with that fear-of-death objection. However, it's a non-starter for three, fairly obvious reasons:

1. It assumes that fear is always rationally connected with and proportioned to beliefs, which clearly isn't the case. (If fear did work like that, phobias would be impossible).

2. It assumes that "fear of death" refers to a fear of one thing in particular. But in fact there's several different fears involved in fearing death: fears regarding an afterlife, fear of what will happen to your survivors, fear of the deprivation of life experiences you would otherwise have enjoyed, fear of the pain of dying, fear that your practical identity will cease to be operative in the world – there won't be anyone who carries out your projects and attends to the things you care about – and a very different fear that this particular locus of consciousness (this 'arena of presence and action' as Mark Johnston puts it) won't exist anymore. All but two of the fears I've just listed (and there may well be others but those are the ones discussed in the literature on this) are rationally compatible with holding an certainty that there's a good afterlife.

3. It ignores soteriology. Christianity and Islam give their adherents a pretty good additional reason to fear death: the prospect of eternal damnation. (Judaism is a bit vaguer on the soteriological character of the afterlife, but that's precisely because it's resolutely focused on this life – which in turn reinforces reasons to fear the loss of this life as a deprivation harm).

But I'm glad you made that attempt, because it's neatly emblematic of the way you operate. At no point did it occur to you to think "Now, wait a minute. Stokes works in philosophy, he works on the guy most closely associated with the notion of 'the leap of faith' [though in fact Kierkegaard never uses that exact phrase], maybe he knows something I don't know here." (In fairness, you weren't to know I also work on philosophy of death and dying). Perhaps thinking that would have led you to see that you're operating with the assumption, long-since abandoned in the literature, that religious beliefs are structurally the same as ordinary beliefs ("It's 11am, the capital of Peru is Lima, Jesus died for my sins, it's raining outside") and that a statement like "I believe 82% in God" or whatever simply wouldn't be an example of faith at all. But no, what I said didn't instantly ring true to you, Tristan Wells, the One-Man Arbiter of All Truth, and therefore it must be wrong. And so you rushed in with some knee-jerk 'logical' objection and fell flat on your face. Again.

That, as I say, is precisely what you've done with Madsen. "I've noticed something that doesn't look right to me therefore everyone else must be wrong." So yes, one of us does look very, very silly on that topic. Hint: his name rhymes with 'Tristan Wells.'

Like · 8 November 2013 at 11:00 · Edited

Tristan Wells "If you don't have information on both variables for each person in the population you do not have a census."

You still trying to dig your way out of a hole? You said categorically there were absolutely no correlations to be found and nobody had ever found any. Turns out there were. Indeed very obvious ones. Now you actually admit that there are in fact correlations but that doesn't prove you were hopelessly wrong because I don't worship authority something something.

I repeat: you claimed there had been *no* correlations found. I said there were correlations and made no claims whatsoever of their causative or non causative nature. Now you finally admit there were in fact correlations but apparently I got it wrong. Badly.

Hahahaha!!!

Like · 8 November 2013 at 17:19 via mobile · Edited

Patrick Stokes You insisted something was a census when it demonstrably wasn't a census, that's what you got wrong (but I gotta hand it to you, you really did persist doggedly in your error). But beyond that the 'correlations' you appeal to aren't correlations in any usable sense of the word, unless we're going to talk about, say, the correlation between the rise of eBooks and the popularity of Justin Beiber seeing as both happened at roughly the same time. Noticing that two random facts arise at the same time and calling that a 'correlation' is draining that term of any meaning whatsoever.

Like · 8 November 2013 at 17:05

Tristan Wells 1 phobias are like preferences for sugary food. We have limited, if any, autonomy over them. They are not conscious choices like the decision to believe or not believe in a deity. Hence that point is irrelevant.

2 this point is true but obvious and i am on an iPhone so I don't want to do too much caveating when it is clear such things most definitely could not adequately explain the full gamut of behaviours we witness of people approaching death.

3 don't get this point. Christians may believe others face eternal damnation but they certainly don't fear it for themselves, or at least if they do that would be an indication of doubt they had chosen the correct creed. I agree there might be issues about suicide but I didn't mention that.

I am perfectly aware you study this what you could not understand is just how low I rate your analytical competence. Even if I thought authority had any meaning in such fields I would be reluctant to recognise *your* expertise over your birthdate.

Like · 8 November 2013 at 17:12 via mobile

Patrick Stokes On 1. I've yet to meet anyone who says they 'chose' to believe in a deity in a straightforward sense. (Actually it's controversial whether *any* beliefs, religious or otherwise, can be consciously chosen; I'd argue at least some beliefs are volitionally ambiguous, including so-called 'leaps of

faith' which still seem to involve *some* element of compulsion). Note that your response also leaves open the possibility that the fear of death might also be a fear we have no autonomy over, so it's still not clear that an unconditional believer would necessarily cease to fear death.

On 3, you do meet some Christians who seem absolutely convinced of their salvation, but most denominations take it that whether the adherent is saved or not is either beyond the ken of humans (particularly those forms of protestantism for whom 'the elect' have already been chosen) or remains indeterminate until death. So again, still plenty of reason for those who believe in these religions to fear damnation.

Like all philosophers I consider nothing more important than the judgment of economists on my professional abilities, so I simply don't know how I'll go on.

Like · 8 November 2013 at 17:28

Tristan Wells And I note with the Madsen paper you are still running with your feeble "I don't need to look at what's in front of my face the other guys have already told me to move along nothing to see here" like Frank Drebbin in front of an exploding fireworks shop. If only he had said "this exploding fireworks shop hasn't been peer reviewed" everybody would have walked away.

Like · 8 November 2013 at 17:28 via mobile

Patrick Stokes You still haven't explained why you think it's likely - or frankly even possible - that you're the only one to spot it, even among your antivaxxer mates. But as I've said you're incapable of answering questions like that, because your entire cognitive architecture seems to be geared to preserving you from too much self-insight. You're Alan Partridge, basically.

Like · 8 November 2013 at 17:35

Tristan Wells "that religious beliefs are structurally the same as ordinary beliefs"

Yep. Exactly like how skeptics believe in "science".

But given that you are the greatest mind on the planet in this field Patrick why don't you do us a favour and specify exactly why the skeptic view of science is fundamentally different to that of religious people's faith in their priest. I'm sure us feeble minds won't be able to appreciate it in all it's glory but at least you will have it out there for all your intellectual equals.

Like · 8 November 2013 at 17:40 via mobile

Patrick Stokes Frankly I have no idea why religious people have faith in *priests* (though I guess in some religions they're theologically committed to the idea that priests have some sort of divine authority). Nor do I identify as a skeptic and I'm not sure I can identify a distinctive "skeptic view of science."

But in terms of the difference between religious faith and the adoption of science as the default epistemic framework, roughly, the former involves a commitment to something unfalsifiable, while the latter is ultimately grounded in a pragmatic (and falsifiable) judgment that scientific method has yielded massive explanatory, predictive and interventionary power. That said, there are grounding assumptions to science that science itself therefore can't justify: nomological regularity (natural laws hold at all times and places), methodological naturalism (no admissible explanations in terms of violations of natural laws) etc. which is where Philosophy of Science kicks in.

Like · 8 November 2013 at 17:54

Tristan Wells That's it? That is all you could give us? Science is falsifiable religion isn't. But vaccines aren't falsifiable. Ergo you just destroyed your position for the umpteenth time giving me and Greg much joy watching you try to squirm out of this as well. Still, maintaining the veneer of confidence even as every one of your arguments are obliterated seems to be a talent of yours.

Like · 8 November 2013 at 20:29 via mobile



Patrick Stokes Who ever said vaccines aren't falsifiable? Like · 8 November 2013 at 20:39

Patrick Stokes No, don't tell me: you're back on your 'you can't prove/disprove anything with stats' kick again, right? So now we have to go another ten rounds on certainty and inductive reason. Fabulous. Like · 8 November 2013 at 20:45

Tristan Wells "You still haven't explained why you think it's likely - or frankly even possible - that you're the only one to spot it, even among your antivaxxer mates." If I am the only person on the planet who noticed that the table involved adjusted figures then clearly you should make me king. At any rate http://www.ageofautism.com/.../social-media-autism-friend.... See the post by "Greg" and his discussions on this very issue with Orac's mates all of whom acknowledge the data was adjusted (rightly or wrongly).

If had better be one hell of an apology.



Social Media, Autism Friend or Foe? - AGE OF AUTISM

www.ageofautism.com

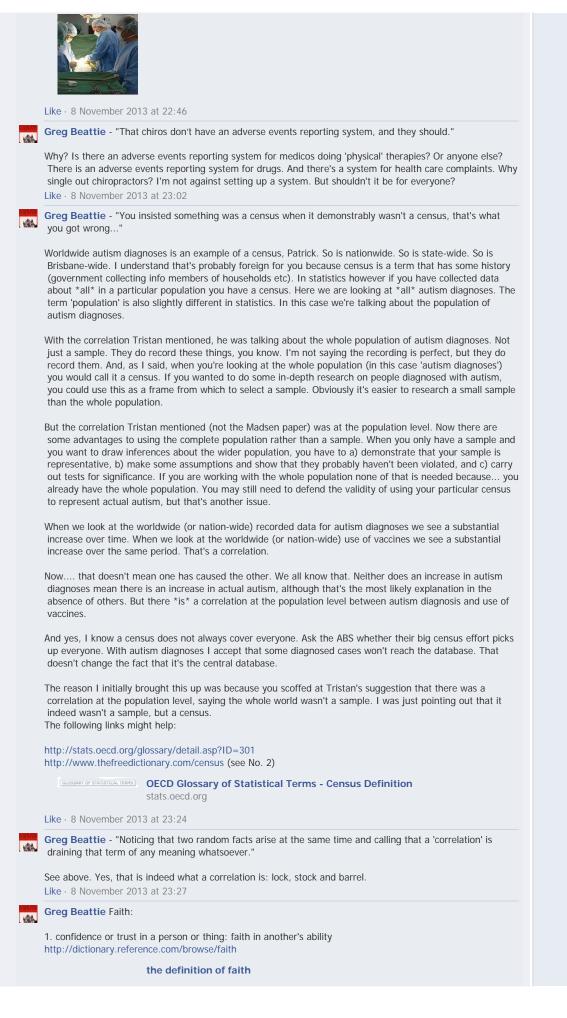
By Cathy Jameson I saw a notice posted in a doctor's office a few weeks ago. It

See more

Like · 8 November 2013 at 20:52 via mobile

Tristan Wells I'm using the term correlation exactly how it is supposed to be used in statistics ie two sets





https://www.facebook.com/...living.wisdom/posts/10151677624316925?comment_id=27392333&reply_comment_id=28896679&offset=0&total_comments=525[1/01/2014 8:37:42 PM]

See more.

See more



dictionary.reference.com Faith definition, confidence or trust in a person or thing: faith in another's ability.

Like · 8 November 2013 at 23:31



Greg Beattie - "You still haven't explained why you think it's likely - or frankly even possible - that you're the only one to spot it, even among your antivaxxer mates."

He can't explain it because it's only in your head, Patrick. I'm well aware of the correlation too. Anyone who's read the Madsen paper properly would have noticed it. I know.... you don't do that. Not your area. http://www.ageofautism.com/.../round-2-cdcs-poul-thorsen...



Round 2: CDCs Poul Thorsen Lying in Plain Sight - AGE OF AUTISM www.ageofautism.com

By John Gilmore A US government-financed research group in Denmark lied about th...

Like · 8 November 2013 at 23:36

Tristan Wells So they did adjust the data and other people did see it. And for that you give a partial apology. I think if is safe to say that nobody with even a speck of decency could have any remaining delusions about your integrity.

And are you still going on about your maybe, perhaps, hopefully nonsense with eternal life? You can go on believing that people would act exactly the same if they were 100 per cent certain paradise waited for them than if they were merely confident or even just hopeful but that seems to me to be more a matter of, well, faith.

And you did say a smaller sample was better - when you pejoratively talked about the whole world as a sample - and your nitpicking about what a census is was irrelevant. But that's about as right as you will ever be so well done.

Like · 9 November 2013 at 05:53 via mobile



Tristan Wells Thanks for that Greg but I should point out that while Patrick thinks all political, economic and scientific views should be centrally dictated he thinks that we all have complete autonomy over the definition of words.

You know it makes sense.

Like · 9 November 2013 at 09:25 via mobile

Tristan Wells From the ABS: "If the correlation coefficient has a positive value (above 0) it indicates a positive relationship between the variables meaning that both variables move in tandem, i.e. as one variable decreases the other also decreases, or when one variable increases the other also increases."

Stupid ABS. They've drained the term 'correlation' of any meaning whatsoever.

http://www.abs.gov.au/.../statistical+language...

Statistical Language - Correlation and Causation www.abs.gov.au

Like · 9 November 2013 at 18:56 via mobile

Patrick Stokes So, now you're going to defend the "one third of all deaths" claims, despite its being so radically at odds with the ABS data, on the basis that if you extrapolate from a single US study you get figures that look sort of like the ones Meryl relied upon? (And that cuts knife cuts both ways: if you're going to assume that US and Australian rates will be similar, then you're also going to have to deal with the US studies using comparable methodology as the QAHCS study that seems to underlie Meryl's sources and which found much lower rates than QAHCS. So you either rely on the US studies and ditch QAHCS, or you ditch the new one and keep QAHCS – in which case you're still stuck with the discrepancy between those figures and the ABS and the courts).

Again, Meryl didn't say 'doctors are responsible for many deaths' or 'there's a suspicion that...' or whatever. No, she came write out and asserted they're killing a thousand people a week. She might as well have said they like to shoot puppies; it'd be about as credible and mildly less slanderous.

"I'm not against setting up a system. But shouldn't it be for everyone?" - Sure. And at least medicine acknowledges that errors happen and works to identify and correct them [pause for scoffing from Tristan who will refuse to accept that because it sounds wrong to him and so it must be wrong], while chiropractors simply refuse to note when anything untoward happens so they can insist that nothing untoward ever has happened.

A census that contains nothing but every autism diagnosis won't allow you to note *any* correlations,

because it contains only one data point on each head. So while you can see that the ASD population is growing over time, the only 'correlation' you could derive would be that "100% of people diagnoses with an ASD have been diagnosed with an ASD" – hardly a shocking finding. Noticing that autism rates are increasing and that vaccinations are also increasing, which is what Tristan is talking about, is not a census however, because you do not have data on each variable on each head. A census that might allow you to draw correlations would include all heads with two data points on each: ASD status and vaccination status. That's the sort of data set Madsen had available (and at national population level), because the health record keeping in Denmark is extremely thorough. But simply noticing that two variables are rising within a given population (in the geographic sense) is not a census unless you have data on each variable for everyone within the census.

On dictionary definitions: I've already explained this once but perhaps I didn't do a good enough job, so here goes again: you cannot use a dictionary definition to explicate the necessary features of a concept. To do that you have to do the hard yards of conceptual analysis. To make this point clearer, and regardless of whatever your views on the issue might be, consider the current debate over same-sex marriage. Many people oppose same-sex marriage on the grounds that 'marriage means a man and a woman etc.' Now, if all they meant by that was 'it says in the dictionary that marriage is a man and a woman etc.' then they'd have to drop their opposition when dictionaries change their definitions (as some already are) to accommodate the fact that the word marriage is being used in many places to refer to same-sex unions. But that's not what they mean: they mean there's a substantive meaning to marriage, and that changing laws, word usage and dictionaries therefore cannot make a same-sex union a marriage in that substantive sense. If we're going to argue over what a 'real' marriage is, therefore, we can't rely on dictionaries but must instead critically unpack the idea and see which features are conceptually necessary and which are not. Now, what I've given a few posts above is a pretty uncontroversial account of the essential features of the concept 'faith' as developed through just that sort of conceptual analysis as undertaken in the relevant literature. That doesn't mean its unarguable by any means, but you can't refute it using a dictionary any more than you can insist the seventh decimal place of pi is 7 rather than 6 because your calculator only goes to seven places and so rounds 3.14159265 up to 3.1415927.

"Anyone who's read the Madsen paper properly would have noticed it." - And yet despite the huge number of researchers who read that paper, none of them seem to have published that objection in a leading journal, despite the fact doing so would give their career a huge shot in the arm (ok, poor choice of words). I guess they're all just corrupt or deluded then.

Like · 10 November 2013 at 16:25

Tristan Wells So I guess we know how your next Conversation drivel will go: "Patrick Stokes follows up his essay explaining why only he is allowed an opinion by explaining why only he is allowed to use words."

It really is quite hilarious watching your contortions - apparently the only reason your arguments are being obliterated are because the entire world uses words the wrong way!!!

But anyway good try on the Madsen paper. I seem to recall that back in kindergarten kids would use the same rationalisations as to why Santa Claus must have been real.

We never said that people who like to inject poisons into babies objected to these adjustments of the data. Indeed I specifically said that such people thoroughly approved of such adjustments - even if they didn't know how it was done. I was arguing with a Henry Tander on this issue and his response was merely that data should be adjusted. Henry isn't a pathological liar mind so it is probably a little misleading to try and pass him off as representative of vaccine fanatics in general.

Regardless, Madsen et al adjusted the data and the fact that you are trying to continue this charade is... well... you're a good philosopher Patrick.

Like · 12 November 2013 at 09:31 via mobile · Edited

Tristan Wells And by the way - not that it matters because you will decide that every single word I write means "Ilamas" - I think you will find that in Denmark they have also seen an increase in ASDs at the same time as an increase in vaccine use.

Like · 12 November 2013 at 08:23 via mobile · Edited

Tristan Wells The relevant parts of the terms "census" and "faith" in this thread are, respectively, that a sample is better the larger it is all else equal and that there is no objective criteria to delineate trust in immunologists vs trust in priests - or at least you haven't provided anything of that nature and indeed have conceded defeat on such a task. So no matter whether we subscribe to your secret handshake view of the definition of words or just stick with the conventional we find that your arguments are ridiculous. Like - 13 November 2013 at 08:57 via mobile

Tristan Wells "A census that contains nothing but every autism diagnosis won't allow you to note *any* correlations, because it contains only one data point on each head."

Excuse me? Are you seriously saying that unless the data for the variables were collected the same time in the same way then absolutely no analysis is permitted of said data.

Hahahahaha!!!!

I guess we can *definitely* throw out notification data as a means to support the use of vaccinations then can't we?

Please please Patrick. I'm begging you. Think before you post. Like · 13 November 2013 at 09:15 via mobile



Patrick Stokes Shorter Tristan: "I don't understand philosophy, therefore philosophers are wrong." Pretty much your standard argument against everything actually, because you're incapable of accepting your own limitations. Which are considerable.

"a sample is better the larger it is all else equal" - No-one's disagreeing. Nice bit of deflection though: "I got the meaning of 'census' wrong but I've decided that what matters is this other thing no-one disputes. I win!"

"there is no objective criteria to delineate trust in immunologists vs trust in priests" - more deflection (who 'trusts in priests'?) and I've already explained how the basis for belief in science differs from belief in religion. But that was a bit too hard for you both so you just ran back to the dictionary, because apparently you can settle philosophical questions (e.g. the nature of faith) with ordinary language usage.

"Are you seriously saying that unless the data for the variables were collected the same time in the same way then absolutely no analysis is permitted of said data." - No. Oh that's right, you have two moves: read your own nonsense into what other people say and then crow about how they're wrong.

"people who like to inject poisons into babies" - actually you should've just said 'llamas'. At least they actually exist, and it would have made you sound considerably less deranged. Like · 13 November 2013 at 09:25

Greg Beattie - "So, now you're going to defend the "one third of all deaths" claims, despite its being so radically at odds with the ABS data, on the basis that if you extrapolate from a single US study you get figures that look sort of like the ones Meryl relied upon? ...she came write out and asserted they're killing a thousand people a week."

No. I'm not defending anything. I'm not even interested in discussing it with you. One reason for that is you claim you aren't qualified to form a decent opinion on the 'science'. All that's happened here is you've jumped up and down demanding that I do something about Meryl's statement, and now you're trying to tell me *why*. You have a long way to go.

For a start, the statement is published by Medical Error Australia and I gave you a link to it. If you think it's really really bad then why don't you tell them? I'm sure they'd be happy to hear from a philosopher who declares he's incapable of forming a decent opinion on anything to do with science. It's worth a try. They might agree with you (on one or the other of those).

But also, that's not the only relevant US study. There are quite a lot of studies that have examined this issue... including an Aussie one, and you know that. I consider it a little dishonest that you pretend otherwise. Also that you leave the words "up to" out of Meryl's statement when I've already pulled you up once about it once.

But go for it. After all, the relevant studies are "so radically at odds" with your conclusions from some ABS data. But I suggest you need to work out why that is first. Especially if you're going to write a 'pop' piece about it. One hint I can give you is the ABS data is not a 'study'. The others are. A study involves looking critically at the data you intend to use and asking whether it is a valid measure of what you want to analyse. Have a look into what others have written about the wisdom of relying on a profession (especially at the 'individual' level) to report on its own failings. Or just take another look at the difference between your data and the studies. Have a look into why the Australian hospitals study was even carried out in the first place. And note, from the link I gave you, "But there is no systematic collection and linking of treatment error data, so it is impossible to know for sure how many medical mistakes cause serious harm or death."

Just some suggestions. But again, I'm not interested in discussing this with you. If you think Meryl has broken some sort of rule then put something decent together and do something with it. I'm not here to critically review your abortive attempts.

Like · 13 November 2013 at 14:41

榆木

Greg Beattie - "A census that contains nothing but every autism diagnosis won't allow you to note *any* correlations, because it contains only one data point on each head... [etc]"

Patrick, you really waste everyone's time. As Tristan said, for God's sake, please *think* before you post. When people say there's a correlation between opening hours of licenced premises and rates of alcohol-fueled violence in a certain area, it's not because they've looked at one dataset. They've obviously looked at more than one. In the autism case, a correlation at the population level means, in this case, that a census of autism diagnoses, together with other data estimating vaccine use, has shown a correlation between the two. That's prompted a call for further evaluation.

And, as Tristan brought up, do you tell people who notice a correlation between use of vaccine and lower notification of illness that that's not a correlation? Your understanding of this issue is weak. Why do you want to argue about something you don't understand?

And why would you want to evaluate the studies on medical error.... for a article?? That's got me stumped. Are you going to get your Conversation article retracted first? Bit of a conflict otherwise. Like · 13 November 2013 at 14:56

Greg Beattie - "And yet despite the huge number of researchers who read that paper, none of them seem to have published that objection in a leading journal, despite the fact doing so would give their career a huge shot in the arm..."

And just what sort of "huge shot in the arm" would that be, Patrick? The sort Wakefield got? I can't think of a

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https://www.facebook.com/...living.wisdom/posts/10151677624316925?comment_id=27392333&reply_comment_id=28896679&offset=0&total_comments=525[1/01/2014 8:37:42 PM]
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more convincing reason to *not* speak up. Your arguments started out weak but have now become ridiculous.

Like · 13 November 2013 at 15:00

124

Greg Beattie And about dictionary definitions: we defer to experts because we believe they have expertise. Yes, the word is 'believe'. We don't *know* they have expertise, or, to be more precise, we don't know that any 'expertise' they might have is of value to us unless we ourselves have sufficient expertise to evaluate it. (NB - 'sufficient expertise' here may simply be the skills necessary to evaluate their outcomes.)

And at the risk of offending please let me say up front that I'm not interested in your response. You'll probably say we have to trust that 'others' have evaluated their expertise because that's all we have to go on. But with 'trust' we're back to square one. Expertise (in others) is always something we take on faith unless we're equipped to evaluate it ourselves. Sure there are different 'situations' for faith, so unpack all you like. It's an interesting academic exercise but it doesn't matter in a practical sense. And I'm not going to argue the merits of your call to amend the dictionary.

Like · 13 November 2013 at 15:23

Tristan Wells ""a sample is better the larger it is all else equal" - No-one's disagreeing.

But you did claim that large samples are inferior ("because 'the whole world' is a sample apparently"). Remember that's how this whole thing started. When we tried to explain that analytically speaking this is a census and is therefore all else equal superior you then went on a tangent about the finer points of a census.

""there is no objective criteria to delineate trust in immunologists vs trust in priests" - more deflection (who 'trusts in priests'?) and I've already explained how the basis for belief in science differs from belief in religion. But that was a bit too hard for you both so you just ran back to the dictionary, because apparently you can settle philosophical questions (e.g. the nature of faith) with ordinary language usage. "

No. You came up with some wild speculation that religious beliefs were never matters of choice nor could they be held with any level of doubt. Regardless of your views on the plausibility or otherwise of both of these premises you still couldn't specify how you could be so sure that the same accusations weren't to be levelled at those who put their trust in vaccine 'science'.

""Are you seriously saying that unless the data for the variables were collected the same time in the same way then absolutely no analysis is permitted of said data." - No. Oh that's right, you have two moves: read your own nonsense into what other people say and then crow about how they're wrong. "

But you did say it. You claimed that finding a correlation in such a way was analytically meaningless. And I notice that you didn't address my point about Danish data showing the exact same correlation.

""people who like to inject poisons into babies" - actually you should've just said 'llamas'. At least they actually exist, and it would have made you sound considerably less deranged."

I imagine I sound exactly as deranged as those people in the 17th century saying "what on earth are you clowns doing burning these women for? Surely you can see that if such women truly were witches they would have turned you into frogs long before you got them anywhere near a pyre."

If only Hans Christian Andersen were available to rewrite his book to take into account the modern day academic process. The kid, after having suspected that the Emperor had no clothes should have spent 6 years learning everything there was to know about textiles. He then should have published his observations in a peer-reviewed textile journal. Only then would it be remotely conceivable that the Emperor may indeed have been naked after all.

Like · 15 November 2013 at 12:07 · Edited

Patrick Stokes "No. I'm not defending anything. I'm not even interested in discussing it with you."

- Fair enough, I'll be brief then, and consider yourself under no obligation to reply.

"For a start, the statement is published by Medical Error Australia and I gave you a link to it. If you think it's really really bad then why don't you tell them?"

- Because I'm not talking to their president right now, I'm talking the president of an organisation which has publically made the ridiculous slander that doctors are so incompetent and/or corrupt that they're responsible for up to a third of all deaths (there you go, there's the 'up to' – so are you going to try to weasel out of this by saying Meryl was merely saying it's a number above zero?). The statement is out there, in remains uncorrected as of now, and it's on your head, Mr President.

"There are quite a lot of studies that have examined this issue... including an Aussie one, and you know that. I consider it a little dishonest that you pretend otherwise."

- How am I pretending otherwise? I've already mentioned that study and how heavily contested its methodology was even at the time (which was 1995 by the way. I was in my last year of high school, so, you know, that's a while ago). As a basis on which to go on telly and say doctors are killing up to a thousand people a week through incompetence it's worse than inadequate. It also seems like the sort of statement "that may cause general community mistrust of, or anxiety toward, accepted medical practice" – hmmm, that's as interesting phrase, where have I heard that recently?

"Especially if you're going to write a 'pop' piece about it.

 I'm not writing a pop piece about medical error. (The piece I was referring to above is on conspiracy theories and the ethics of accusing people of malfeasance purely so you don't have to admit your pet theories are nonsense).

"One hint I can give you is the ABS data is not a 'study'."

- Of course not. But a study that throws up results so radically at odds with the ABS data, coronial findings, court outcomes and the sheer fact that a world in which doctors are responsible for a third of deaths is going to be radically different from the world we live in is not going to be a strong enough basis on which to make an accusation like that.

"When people say there's a correlation between opening hours of licenced premises and rates of alcoholfueled violence in a certain area, it's not because they've looked at one dataset. They've obviously looked at more than one."

- Yes (in which case, again, they don't have a census or even a sample), and the reason you've chosen that particular example is that there's something there which already suggests a meaningful (causal) relationship. If you looked at the same area and noticed both cycling and sales of bubblegum were up over the same period, would you still be willing to call that a 'correlation'? If so, as I said above, we're draining the word of any meaning.

"And, as Tristan brought up, do you tell people who notice a correlation between use of vaccine and lower notification of illness that that's not a correlation?"

- It's a correlation in the thin sense you're using it, though at least it would be salient in the way the licensing/violence example is and the cycling/bubblegum example is not i.e. we'd already suspect a causal relationship given what we know about the immune system.

"And just what sort of "huge shot in the arm" would that be, Patrick? The sort Wakefield got? I can't think of a more convincing reason to *not* speak up."

- Clearly you've never worked in research. You make a name for yourself by telling other people why they're wrong. Wakefield wasn't pilloried because he disagreed with a medical consensus, he was pilloried because his work was unscientific, unethical and fraudulent.

"we defer to experts because we believe they have expertise. Yes, the word is 'believe'. We don't *know* they have expertise, or, to be more precise, we don't know that any 'expertise' they might have is of value to us unless we ourselves have sufficient expertise to evaluate it. (NB - 'sufficient expertise' here may simply be the skills necessary to evaluate their outcomes.) And at the risk of offending please let me say up front that I'm not interested in your response."

- A pity as I pretty much agree with all that – except I'm not sure what you hope to achieve by distinguishing 'believe' and 'know' in this context; outside of mathematics and logic there's arguably just degrees of belief. If anything you've pretty much just described why trust is a baseline condition for epistemology: precisely because we can't know everything and so have to rely to a very large extent on the testimony of others and knowledge-generating mechanisms we're not in a position to personally evaluate. Like · 15 November 2013 at 17:47

Patrick Stokes "But you did claim that large samples are inferior ("because 'the whole world' is a sample apparently")."

- Yeah, see that 'apparently' on the end there, sport? I was pointing out your error, not endorsing it.

"You came up with some wild speculation that religious beliefs were never matters of choice nor could they be held with any level of doubt."

- And here we go again: I report on the state of the literature, you don't agree with it, therefore it's 'wild speculation.'

" you still couldn't specify how you could be so sure that the same accusations weren't to be levelled at those who put their trust in vaccine 'science'."

- And by 'couldn't specify' we mean 'explained the difference between the pragmatic judgment that science works and the essentially non-rational basis of faith in religious propositions fairly clearly.' Remind us which one of us is playing fast and loose with the meaning of words again?

"But you did say it. You claimed that finding a correlation in such a way was analytically meaningless."

- I said nothing about data being collected at the same time or in the same way, which is what you were claiming I'd said.

"And I notice that you didn't address my point about Danish data showing the exact same correlation."

- I know, right? It's almost like I don't take your claim to have spotted something no-one who actually knows what they're doing has spotted or has a problem with seriously. How outrageous. Like · 15 November 2013 at 17:49

Tristan Wells "- It's a correlation in the thin sense you're using it, though at least it would be salient in

the way the licensing/violence example is and the cycling/bubblegum example is not i.e. we'd already suspect a causal relationship given what we know about the immune system. "

And we already suspect a causal relationship of vaccines and severe reactions amongst some people based on a) challenge, dechallenge, rechallenge; b) everybody accepts that minor reactions happen all the time. (Given that minor reactions happen in the vast majority of people it doesn't seem particularly strange to us that at least *some* people would have severe reactions); and c) the whole point of vaccines are to trigger a bodily reaction. To turn around and then claim that these things are nonetheless completely inert are the sorts of things I would expect a good philosopher to say.

And we don't know Jack about the immune system.

"- Clearly you've never worked in research. You make a name for yourself by telling other people why they're wrong. Wakefield wasn't pilloried because he disagreed with a medical consensus, he was pilloried because his work was unscientific, unethical and fraudulent."

So consensus amongst experts is meaningless then because, by definition, all the people who share in it don't have a name for themselves. Sorry Patrick but I don't see how you could have any feet left considering the number of times you have shot them.

"- Yeah, see that 'apparently' on the end there, sport? I was pointing out your error, not endorsing it."

Ummm, of course I saw the 'apparently' on the end. That is precisely the part where you disparage the notion that a large sample has worth.

"- And here we go again: I report on the state of the literature, you don't agree with it, therefore it's 'wild speculation."

I don't have a problem claiming that just because lots of people regurgitate it it doesn't prove it has any substance to it. And, as astonishing as this sounds, I can't claim to have a massive respect for most philosophy academics.

"- And by 'couldn't specify' we mean 'explained the difference between the pragmatic judgment that science works and the essentially non-rational basis of faith in religious propositions fairly clearly.' Remind us which one of us is playing fast and loose with the meaning of words again?"

But I *don't* believe vaccines work Patrick and therefore it is no good trying to use such a definition to persuade me to accept that vaccines are a science. You tried it with falsifiability and then when I pointed out to you that vaccines weren't falsifiable you raised the white flag on that option – now you just go for your oldest and dearest friend: begging the question.

"- I said nothing about data being collected at the same time or in the same way, which is what you were claiming I'd said."

Hahahahaha!!! Talk about feeble. I am sure you understand but just in case, the point is you make this all up as you go along as to which data sets can be used and which can't, depending on how consistent they are with your beliefs.

"- I know, right? It's almost like I don't take your claim to have spotted something no-one who actually knows what they're doing has spotted or has a problem with seriously. How outrageous."

Hahahahahaha!!!! More pathological lying from Patrick. I love how you have changed from "nobody else noticed any sort of adjustment whatsoever even amongst those who question vaccines and there is a zero per cent chance that your claim is true" to "well sure it probably *was* adjusted but none of my mates are concerned by it and that is all that matters and therefore you are still completely and utterly wrong".

Whatever helps you sleep at night I suppose.

At any rate I wasn't referring to the Madsen paper I was referring to the fact that you believed Danish data in general was perfect and that you will find that their autism rates have increased in the past say 60 years at the same time as the number of vaccines their children have received has increased too. I thought that was obvious actually but, alas, it seems little is.

Like · 16 November 2013 at 07:04

100

100

Greg Beattie - "How am I pretending otherwise?"

By saying this: "So, now you're going to defend the "one third of all deaths" claims... on the basis that if you extrapolate from a single US study you get figures that look sort of like the ones Meryl relied upon?"

Note your use of the word 'single'.

Anyway, as I said, come up with a decent argument and I'll respond. All you're doing now is having a whinge. You don't like this and that. You think it's outrageous or slanderous, or something. You need to do better than that. I'm open to following it up if you can demonstrate that the statement is wrong. At present you have virtually nothing.

Like · 16 November 2013 at 08:50

Greg Beattie - "If you looked at the same area and noticed both cycling and sales of bubblegum were up

over the same period, would you still be willing to call that a 'correlation'?"

Yes, assuming there was more than one measurement taken and there was an apparent pattern i.e. down together and up together. But don't blame me. It's that bloody dictionary again.

- "If so, as I said above, we're draining the word of any meaning."

Give up. You don't understand this well enough to make any sense. Ask your mates. They'll tell you correlation does not equal causation. You spot the correlation first. Whether you decide to investigate it for causation is something else.

- "Clearly you've never worked in research. You make a name for yourself by telling other people why they're wrong. Wakefield wasn't pilloried because he disagreed with a medical consensus, he was pilloried because his work was unscientific, unethical and fraudulent."

We disagree on all that, Patrick. Again, it's not something I relish discussing with you though.

- "...precisely because we can't know everything and so have to rely to a very large extent on the testimony of others and knowledge-generating mechanisms we're not in a position to personally evaluate."

Where I can evaluate outcomes, and they're at odds with 'expert' predictions, I'll discard the latter on the basis that, whether or not their 'science' was good, their predictions were wrong. I don't need to know what happens at the micro level. If it doesn't shape up at the macro level there's no need to look further, let alone 'trust' in anyone.

As Tristan said, does the kid need a minimum two degrees in textiles before making his own decision about the Emperor's clothes? Should we make a law that only qualified motor mechanics can buy cars? Or that only podiatrists can truly give evidence as to whether a person was walking at the time of the crime? Like · 16 November 2013 at 08:59

Patrick Stokes "And we"

- Who? Oh, you mean a bunch of people with no training. Got it. Carry on.

"already suspect a causal relationship of vaccines and severe reactions amongst some people based on a) challenge, dechallenge, rechallenge;"

- How many people have to point out to you that you're using that terminology wrong? I know I'm not the only one who has.

"b) everybody accepts that minor reactions happen all the time. (Given that minor reactions happen in the vast majority of people it doesn't seem particularly strange to us that at least *some* people would have severe reactions); and c) the whole point of vaccines are to trigger a bodily reaction. To turn around and then claim that these things are nonetheless completely inert are the sorts of things I would expect a good philosopher to say."

- No-one is saying they are completely inert - do you have a huge stockpile of straw somewhere that you're trying to get rid of? – but that is a hell of a long way from saying they can cause anything like ASDs. Even so, the suggestion was investigated post-Wakefield, but you'll refuse to accept the outcome of those investigations because you believe every researcher to be biased, bought or bewildered.

"And we don't know Jack about the immune system."

- Well, you mightn't. Again, I don't know why you think your assessment of bodies of knowledge you're not trained in carries any wait. Oh yeah, I forgot: your 'gift.'

"So consensus amongst experts is meaningless then because, by definition, all the people who share in it don't have a name for themselves."

- I genuinely like that attempt. It fails, though: for one thing it assumes that *every* expert has to be a *leading* expert for an expert consensus to have weight. But again, it's a very nice move.

"Ummm, of course I saw the 'apparently' on the end. That is precisely the part where you disparage the notion that a large sample has worth."

- Once more with feeling everybody: I was saying that the whole world is not a sample. That's how we got into the whole farrago of you and Greg misusing the word 'census,' remember?

"I don't have a problem claiming that just because lots of people regurgitate it it doesn't prove it has any substance to it. And, as astonishing as this sounds, I can't claim to have a massive respect for most philosophy academics."

- Once again, Tristan is apparently able to evaluate and dismiss entire fields of knowledge he has no training in, because Tristan has magic powers. The burden of being the One True Human must be dreadful. I hope the squash helps you unwind after a hard day of arbitrating all knowledge claims.

"But I *don't* believe vaccines work Patrick and therefore it is no good trying to use such a definition to persuade me to accept that vaccines are a science."

- It's no good trying to persuade you of *anything* Tristan because you are incapable of seeing what you are incapable of seeing.

"the point is you make this all up as you go along as to which data sets can be used and which can't, depending on how consistent they are with your beliefs."

- No, the point is you claiming I'd said things I never said. Two points of data on each head for a census.

That's what I said. Nothing about time of collection.

"Hahahahahahaha!!!! More pathological lying from Patrick."

- Do you actually know what 'lying' is, Tristan? Or do you just think everyone who points out why you're wrong is 'lying'?

"I love how you have changed from "nobody else noticed any sort of adjustment whatsoever even amongst those who question vaccines and there is a zero per cent chance that your claim is true" to "well sure it probably *was* adjusted but none of my mates are concerned by it and that is all that matters and therefore you are still completely and utterly wrong"."

- So you're not the only anti-vaxxer who noticed it, great. My claim that you were the one and only person who had noticed this apparent problem is thus refuted. *golfclap* But you're still in exactly the same place: having a couple of antivaxxers agree with you hardly helps to establish your case. You still can't point to a single person who actually knows what they're talking about who thinks there's a problem there, and in Tristanland, that must mean that they're the ones who are wrong, not you.

"At any rate I wasn't referring to the Madsen paper I was referring to the fact that you believed Danish data in general was perfect"

- Nothing is perfect. Very, very good compared to what else is available though. (Side note: seeing as you've indicated that the Danes should have looked at all vaccines, not just MMR, I wonder when you think this vaccination-related trend towards greater ASD incidence would have begun? The reason I wonder this is that I recently came across Kierkegaard's smallpox vaccination certificate: http://sks.dk/Dok/dok_2.pdf. Apparently Denmark started doing universal vaccination with live cowpox in 1810. Odd that the doctors at the time don't report a sudden epidemic of ASD-type symptoms in the years following).

"and that you will find that their autism rates have increased in the past say 60 years at the same time as the number of vaccines their children have received has increased too. "

- As have a whole bunch of other things. I genuinely do commend you for at least trying to claim why we might suspect a causal relationship, but if the data doesn't bear it out on close examination then at some point simply gesturing towards two upwards-trending lines is flogging a dead horse. Like · 20 November 2013 at 15:09

Patrick Stokes "By saying this: "So, now you're going to defend the "one third of all deaths" claims... on the basis that if you extrapolate from a single US study you get figures that look sort of like the ones Meryl relied upon?" Note your use of the word 'single'."

- As I said before, if you're going to rely on the study you pointed to you cannot consistently rely on the 1995 Australian study as well, because the assumption that would allow you to rely on the former (i.e. rates should be roughly similar in the US and Australia) invalidates the latter (because the same methodology applied in the US gave much lower figures). You can choose one or the other, but not both.

"Anyway, as I said, come up with a decent argument and I'll respond. All you're doing now is having a whinge. You don't like this and that. You think it's outrageous or slanderous, or something. You need to do better than that. I'm open to following it up if you can demonstrate that the statement is wrong. At present you have virtually nothing."

- It's not my job to justify your accusations, Greg. If you can't back them up with the degree of evidence necessary to make the accusation – which would need to be a hell of a lot more than 'there's an old study and a group of fellow amateurs agrees with us and the reason the courts aren't clogged with tens of thousands of wrongful death suits a year must be that doctors are systematically covering it up' – then don't make it. And as president, if one of your office bearers makes an unjustified accusation in the media in their AVN capacity, then publically disown the statement. And you guys want to lecture me on ethics and integrity...

"You spot the correlation first. Whether you decide to investigate it for causation is something else." - Thing is, we never get direct access to 'facts' that somehow exist wholly independently of our prior theoretical commitments. And that means that the data conjunctions that jump out of the noise at us are ones where we're already going to detect a whiff of meaningful correlation. That's not to say that observers only see what they want to see in light of what they already believe, just that the empirical base of a theory is never wholly theory-free to begin with.

"Where I can evaluate outcomes, and they're at odds with 'expert' predictions, I'll discard the latter on the basis that, whether or not their 'science' was good, their predictions were wrong. I don't need to know what happens at the micro level. If it doesn't shape up at the macro level there's no need to look further, let alone 'trust' in anyone."

- But note the first condition there: you're assuming you can evaluate the outcomes. When even macro-level outcomes require training to assess that policy is going to fall down pretty quickly.

"As Tristan said, does the kid need a minimum two degrees in textiles before making his own decision about the Emperor's clothes?"

- See above. You're assuming that you have the same capacity as the kid in Andersen's story to make an assessment. Epidemiology is not nude-monarch-spotting. (Which sounds like a fun day out in itself actually). Like \cdot 20 November 2013 at 15:12

Tristan Wells "How many people have to point out to you that you're using that terminology wrong? I know I'm not the only one who has."

And that is the difference between me and you. I point out *why* you are wrong. You just say I am because other people said so.

If you want to exclude CDR then tell me a) why CDR is considered sufficient proof of causation for, say, antibiotics (don't tell me the process tell me why it is meaningful); and then b) explain why that meaning disappears when it is associated with vaccines.

Now, my claim about CDR is that the reason we consider it sufficient is because of the high temporal associations. In other words, the timing of such reactions remove any reasonable doubt that it might just be a coincidence. This is true for vaccines no less than for antibiotics therefore CDR for vaccines is just as sound as CDR for antibiotics. But if you have an alternative reason why we think so highly of CDR then you are welcome to provide it. I very much doubt you will though even with heaps of help.

"- No-one is saying they are completely inert - do you have a huge stockpile of straw somewhere that you're trying to get rid of? – but that is a hell of a long way from saying they can cause anything like ASDs."

If you gave 1000 rats a small dose of arsenic would you expect every single one to react the exact same way? I wouldn't. I would expect some to remain healthy, some to get moderately sick and some to get very sick. If we upped the dosage then we would expect the proportion who remain healthy to get smaller and those who get very sick to get higher – and some of those who got very sick might even die. At least I would. I assume you will have to ask someone else for what you should think on this.

At any rate as far as I am concerned it is barefaced lunacy to accept that most kids react to vaccines whilst arguing that it is inconceivable that some could react very badly. But of course I consider barefaced lunacy to be what cannot possibly be true based on logic you consider barefaced lunacy to be what isn't de rigeur amongst the twitterati.

"Even so, the suggestion was investigated post-Wakefield, but you'll refuse to accept the outcome of those investigations because you believe every researcher to be biased, bought or bewildered. "

All researchers who find what Patrick wants them to find are completely beyond reproach and to suggest otherwise is delusional conspiracy mongering. All researchers who find what Patrick doesn't want them to find are evil liars.

We can go and on and on.

And it seems we will.

"- Well, you mightn't. Again, I don't know why you think your assessment of bodies of knowledge you're not trained in carries any wait. Oh yeah, I forgot: your 'gift.' "

No. I asked. Some immunologists give nonsensical answers but under scrutiny admit they don't know Jack. One very senior immunologist I spoke to didn't even bother with the nonsense he just came right out and admitted it straight away.

Sorry Patrick. But they don't know Jack. You could do the same thing as me and ask them some difficult questions but we both know that you couldn't shed your fawning sycophancy if your life depended on it. Like \cdot 22 November 2013 at 08:06 \cdot Edited

Tristan Wells "- I genuinely like that attempt. It fails, though: for one thing it assumes that *every* expert has to be a *leading* expert for an expert consensus to have weight. But again, it's a very nice move."

Hahahahahahahaha!!!! So apparently, in order for Patrick's little fairy tale to be true, we now have to accept that experts can be any old people who have absolutely no *name* or, presumably, applicable credentials whatsoever in their field. But we still all have to believe these uncredentialled nameless people because something conspiracy!

Remember Patrick this is what you said "You make a *name* [emphasis mine] for yourself by telling other people why they're wrong."

So sorry Patrick, but I can't say I liked your attempt. It was probably better than most of your arguments, but we both know that isn't saying much is it?

"- Once more with feeling everybody: I was saying that the whole world is not a sample. That's how we got into the whole farrago of you and Greg misusing the word 'census,' remember?"

Ummm yes. Why do you keep trying to correct us by pointing out how everything we said was true?

How about we go through this very slowly Patrick?

1) I said that at the macro level there were correlations so it was ridiculous to claim there were *no* correlations as you had claimed.

2) You scoffed at this and said "Pfft! Who cares about the macro level what matters are samples, don't give me data for the "entire world" - having complete data as opposed to a sample is useless analytically!"

3) Greg said "Ummm, how could you possibly prefer a "sample" to a "census"?"

4) You said "That wasn't a census because the data wasn't complete".

5) We just shook our heads.

"- Once again, Tristan is apparently able to evaluate and dismiss entire fields of knowledge he has no training in, because Tristan has magic powers."

Cool.

Unfortunately I don't feel that special though because all people who dismiss homeopathy, phrenology, astrology and a whole bunch of other beliefs must also share those same magic powers.

No seriously Patrick, is there a 12 year old child who regularly hacks your facebook account and puts this facile nonsense together? You can tell them that they have excellent vocab and punctuation but their willingness to deny the bleeding obvious and complete inability to judge their own views the way they judge others gives the game away. Come to think of it, when I was 12 I would have done the former more poorly but I reckon I would still have been embarassed by the latter.

"The burden of being the One True Human must be dreadful."

Don't know about the One True Human but it is pretty frustrating that people like you are allowed to vote.

"I hope the squash helps you unwind after a hard day of arbitrating all knowledge claims."

Not sure what this is. Are you upset that I can play racquet sports? I think I'm starting to get a feel for why skeptics put getting obscure nonsense published up on such a pedestal, particularly as this is by no means the first time I have seen you skeptics bring up the fact that I can play sport in a pejorative manner.

"- It's no good trying to persuade you of *anything* Tristan because you are incapable of seeing what you are incapable of seeing. "

Going by that "logic" nobody could ever be persuaded of anything.

You're a good philosopher Patrick.

"- No, the point is you claiming I'd said things I never said. Two points of data on each head for a census. That's what I said. Nothing about time of collection."

Note the following quote from you:

"A census that contains nothing but every autism diagnosis won't allow you to note *any* correlations, because it contains only one data point on each head. [...] Noticing that autism rates are increasing and that vaccinations are also increasing, which is what Tristan is talking about, is not a census however, because you do not have data on each variable on each head. A census that might allow you to draw correlations would include all heads with two data points on each: ASD status and vaccination status."

Then I said ""Are you seriously saying that unless the data for the variables were collected the same time in the same way then absolutely no analysis is permitted of said data."

Note that mine was asked as a question (although my punctuation was poor) just to check to see if you wanted to take the opportunity to clarify when people could or could not do any meaningful analysis. You declined this opportunity and instead had a sook. I took your refusal to clarify as a signal that you had no intention of being consistent so my following comment was about how you intended to shift the goalposts.

"Or do you just think everyone who points out why you're wrong is 'lying'?

Well the correlation does seem to be very high. At any rate, as I said before, when you try and point out why someone is wrong your only method is to say "but the majority of these people don't agree with you". Like · 22 November 2013 at 08:11 · Edited

Tristan Wells "- So you're not the only anti-vaxxer who noticed it, great. My claim that you were the one and only person who had noticed this apparent problem is thus refuted. *golfclap*But you're still in exactly the same place:"

Well yes, in the exact same place except that my statement was completely right and yours completely wrong. Other than that you win!

"having a couple of antivaxxers agree with you hardly helps to establish your case."

It establishes the case that you have no idea what to look for and wouldn't know if you found it. It establishes the case that in your desperation to cling to whatever the status quo tells you to cling to you will say the most outrageous things. It establishes that you can't read, do maths or argue in good faith. It establishes that you are a pathological liar. But to be fair, none of those are particularly novel.

"You still can't point to a single person who actually knows what they're talking about who thinks there's a problem there, and in Tristanland, that must mean that they're the ones who are wrong, not you."

Go back and read my original comment. I never said people who defend vaccines claimed to have a problem with it. Indeed I specifically said that defenders of vaccines would probably say they were perfectly reasonable adjustments to make. I have absolutely no respect for your intelligence or integrity but even I was shocked that you went down such a ridiculous path as to deny what was right there in front of everybody's faces. But you did.

You should have just said. "Oops, sorry Tristan that was a massive mistake on my part. Clearly they did adjust the data just like you said, but again, just like you intimated, it doesn't follow that I have to believe their adjustments were invalid. However, it does mean that my initial statement of there being absolutely

no correlations was completely spurious. What's more, I have learnt a valuable lesson so that, in future when someone makes a claim, I will evaluate this claim for myself to the best of my abilities rather than just assume that it must be false because it doesn't show up in the first page of google search". But you couldn't allow yourself to do that. So instead, even after you hit rock bottom, you just kept on digging.

"Odd that the doctors at the time don't report a sudden epidemic of ASD-type symptoms in the years following)."

I'm sorry? Are you now admitting that ASD type symptoms *aren't* an old affliction and they are in fact very novel (at least at the proportions we are seeing)?

At any rate you are clutching at straws. Firstly, smallpox vaccine was given at all ages. Secondly, people only got that one vaccine. The vaccine itself was almost certainly more dangerous than any one we give to children today, nonetheless, it would be ridiculous to assume that the quantitative and qualitative effects of one single significant assault on a child's immune system would be much the same as vast multitudes of what are individually (hopefully) less significant assaults.

"- As have a whole bunch of other things. I genuinely do commend you for at least trying to claim why we might suspect a causal relationship, but if the data doesn't bear it out on close examination then at some point simply gesturing towards two upwards-trending lines is flogging a dead horse."

Sigh! Some data does some doesn't. You tried to universally exclude all the data that does but I showed that you simply can't do that because by your own definition the Danish data doesn't fit that universe. Assuming you believed that challenge, dechallenge, rechallenge events had some meaning other than the high temporal associations with them and could therefore be ignored the absolute *best* anybody with integrity could do is say "we simply don't have sufficient data to reject the null". But as you have admitted, doctors can't afford to be honest on this issue as they have to keep the veneer of certainty so as not to allow parents to entertain the notion that they might not be gods after all.

Like · 21 November 2013 at 11:05 · Edited

Tristan Wells "- But note the first condition there: you're assuming you can evaluate the outcomes. When even macro-level outcomes require training to assess that policy is going to fall down pretty quickly."

"- See above. You're assuming that you have the same capacity as the kid in Andersen's story to make an assessment. Epidemiology is not nude-monarch-spotting. (Which sounds like a fun day out in itself actually)."

Neither of those are valid responses. If you want to say we aren't entitled to evaluate X, Y and Z but we are entitled to evaluate A, B and C then explain why. But you can't. All you can say is "it's complicated" and then shift the burden of proof. The thing is, out of charity and my desire to actually see you learn something insightful for once in your life I have already had a go at making such a delineation but because it would have rendered your precious beliefs on everything void you just declared it worthless on a completely spurious premise.

At any rate, the burden is on you Patrick. Tell us what we can and can't evaluate and why or stop your whining about us making said evaluations.

"Thing is, we never get direct access to 'facts' that somehow exist wholly independently of our prior theoretical commitments. And that means that the data conjunctions that jump out of the noise at us are ones where we're already going to detect a whiff of meaningful correlation. That's not to say that observers only see what they want to see in light of what they already believe, just that the empirical base of a theory is never wholly theory-free to begin with."

And again, inasmuch as that statement has any consequence it simply proves that trusting authority as a means to engage in science is every kind of idiotic.

What is so hilarious though is that you - the guy that gives us this statement (which is actually reasonably valid) and that raves on about how equality is the single greatest ideal humans can possibly hope for (which is not even remotely valid) - has regularly criticised *us* for intellectual relativism! Like · 21 November 2013 at 14:01

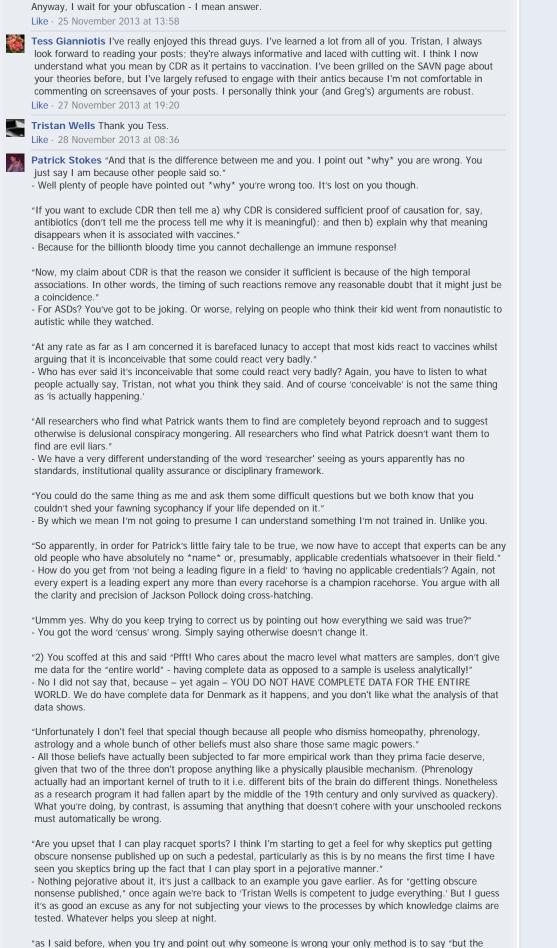
Tristan Wells "If you want to exclude CDR then tell me a) why CDR is considered sufficient proof of causation for, say, antibiotics (don't tell me the process tell me why it is meaningful); and then b) explain why that meaning disappears when it is associated with vaccines."

I ill put this more simply. Let's just take a child who gets a DTaP at 2 mnths and gets sick (say a short s eizure and fever lasting 2 days) folowed by them being fine for the next 2 months at which they get an ther DTaP shot and then they get a severe seizure with a fever lasting a week. They recover to some extent over the course of the next two months (at least ostensibly) but then they get their 6 month shot of DTaP and they subsequently develop encephalitis.

Now, if you were intellectually honest (hahahahahahahahahaha!!!!) you would have answered this point off your own bat 300 posts ago but I will put it to you explicitly now:

Forgetting about whether you want to call this challenge dechallenge rechallenge or some other word that only those who know the secret philosopher's handshake are aware of - do you think it reasonable to dismiss such a (hypothetical) example as a mere coincidence? Or do you agree that doing so would be sheer abject lunacy?





"as I said before, when you try and point out why someone is wrong your only method is to say "but the majority of these people don't agree with you"."

- In fields where what we accept as true is determined by a relevant scientific discipline, yes.

"It establishes the case that you have no idea what to look for and wouldn't know if you found it." - Fine, but neither do you. You're a person with no training telling people who do have training that they're wrong.

"It establishes that you are a pathological liar."

- And again you can't point to a single place where I've lied. You can't, because I haven't. But it's probably easier to assume people are lying than to admit you have no idea what you're talking about, so I assume you accuse people of lying quite a lot.

Like · 28 November 2013 at 19:24

Patrick Stokes "I never said people who defend vaccines claimed to have a problem with it."
FFS. It is not about 'people who defend vaccines' vs. those who don't. It is about people who are trained in the relevant discipline and who submit their claims to the mechanisms we use to test them, versus people who aren't and don't. Right now, you've got a claim that's basically worthless: it hasn't been tested and it's only made by people who have no reason to think themselves capable of interpreting the research. Accepting it also involves accepting the desperately unlikely auxiliary hypothesis that every actual scientist who has looked at this stuff is breathtakingly stupid, corrupt, or both. That doesn't mean you're necessarily wrong, just that we've got very strong reasons to assume you are, and you're doing nothing to overcome that.

Which brings me to:

"If you want to say we aren't entitled to evaluate X, Y and Z but we are entitled to evaluate A, B and C then explain why."

- If you're looking for a hard demarcation line between stuff that anyone can do and stuff that requires training, you won't find one, nor should we expect to. But when a discipline has reached a certain stage of complexity it's clear that both the knowledge base and the 'subject formation' (i.e. the sort of way of thinking required by the discipline) require formal education. That's simply a predictable fact about the increasing complexity of fields of study. (One thing I've noticed is that when anti-vaxxers talk about doing their own 'research' they're generally operating with a very naïve understanding of how education works, basically education as mere 'fact absorption.' You'll notice there's also nothing equivalent to either formative or summative assessment – which is crucial to education – in the 'research' they do).

"Are you now admitting that ASD type symptoms *aren't* an old affliction and they are in fact very novel (at least at the proportions we are seeing)?"

- No, I'd imagine Victorian-era asylums were full of people who would be diagnosed as severely autistic today. Nothing really hangs on the smallpox example in any case; it just struck me as interesting given that when it's pointed out to you that there's no correlation of MMR and ASD diagnoses (as noted, your assertion to the contrary is worthless at this point) you widen the scope to vaccines in general. Now it seems you're pulling out some variant of the 'too many, too soon' claim; I won't bore you with the responses that have been made to that as I assume you know what they are, and no doubt have some piece of special pleading set up to get around those too. Anything so long as you can blame someone in a white coat.

"What is so hilarious though is that you - the guy that gives us this statement (which is actually reasonably valid) and that raves on about how equality is the single greatest ideal humans can possibly hope for (which is not even remotely valid) [when did I say it was "the single greatest etc."?] - has regularly criticised *us* for intellectual relativism!"

- It's not relativistic to point out that all knowledge is mediated; that's just an inescapable fact about being human. It is, however, relativistic to assume that knowledge claims made outside explanatorially successful disciplinary paradigms are just as good as ones made within them. In any case I'd say you're more of an epistemic foundationalist than a relativist.

"do you think it reasonable to dismiss such a (hypothetical) example as a mere coincidence? - No. Do you seriously think that hypothetical is in any way relevant to any real-world cases?

"I have absolutely no respect for your intelligence or integrity"

- And if I thought you were in any way a competent judge of either of those things I dare say that would bother me.

Like · 28 November 2013 at 19:24

Greg Beattie Good on you, Tess. I thought we were the only ones here.

Clear thinkers are as scarce as hens' teeth. Those with the ability to express even more so. In my opinion Tristan has all that nailed. He's really covered everything here, and very well.

I was just reading an excellent article (by a doctor) on vaccination, and the following words made me immediately think of Patrick. In fact, I think they paint a perfect portrait:

"I understand, now, that, my collection of PubMed articles substantiating concerns about inefficacy, neurological, autoimmune, and fatal risks of these poorly conceived and anachronistically relevant immune modulators is not meaningful to someone who is not interested. The questions raised by this information are not provocative to someone who needs, above all, to believe that the government, the CDC, and doctors mean well, are doing their due diligence, and that they are holding themselves to a basic standard of ethical delivery of healthcare. They are not meaningful to someone who needs to outsource their power."

http://www.vaccinationcouncil.org/.../a-shot-never.../...

A Shot Never Worth Taking: The Flu Vaccine ~ by Kelly Brogan, MD www.vaccinationcouncil.org



Deep into my 6th year of researching and investigating the damning science that condemns vaccine efficacy and safety – yes, all of them – I am beginning to turn my attention more to the societal me...

Like · 28 November 2013 at 20:36



Greg Beattie These comments were directed to Tristan but, geeeeeze....!!

- "Because for the billionth bloody time you cannot dechallenge an immune response!"

How ridiculous. He's talking about 'dechallenging' a toxic insult. Do you honestly not understand that? I mean, that's a pretty basic thing to not understand.

- "For ASDs? You've got to be joking. Or worse, relying on people who think their kid went from nonautistic to autistic while they watched."

Why don't you explain just what you mean by this, Patrick? Do you think it's a joke to listen to parents' accounts of what happened? Because that's what it sounds like you're saying. Should we ignore the reports of terrible effects following vaccination?

- "We have a very different understanding of the word 'researcher' seeing as yours apparently has no standards, institutional quality assurance or disciplinary framework."

This makes no sense either. Tristan wasn't talking about researchers: he was talking about *your* view of them. "Oh I loooove them if they're toeing the line but I positively hate them if they aren't".

- "By which we mean I'm not going to presume I can understand something I'm not trained in. Unlike you."

Then why do you have an opinion? Why don't you just be honest and say "I don't have any business discussing these issues: adverse reactions, efficacy, samples etc... none of it." And just avoid these discussions. By your own proclaimations you have no business here, and certainly none determining your own thoughts on these things.

- "You got the word 'census' wrong. Simply saying otherwise doesn't change it."

Simply unbelievable, Patrick. Do you have *no* idea about this, still? What part of the word's meaning are you having problems with?

- "Fine, but neither do you. You're a person with no training telling people who do have training that they're wrong."

Training in what? If we're talking data I'm sure Tristan has ample training... and you probably have none (you seem to be proud to say). So, if that matters, what the hell are you doing discussing the issue with him? Given your stance on who is and isn't even entitled to an opinion, aren't you a walking contradiction? Like · 28 November 2013 at 21:11

Greg Beattie And more...

- "FFS. It is not about 'people who defend vaccines' vs. those who don't. It is about people who are trained in the relevant discipline and who submit their claims to the mechanisms we use to test them, versus people who aren't and don't."

What's the relevant discipline, Patrick? I assume you want someone who knows about all the studies concerning the track record, has evaluated them, and can solidly argue a case using them. Do you know someone like that? If yes, please tell us who it is, and what has satisfied you that he/she fits the bill. If not, then you aren't talking about anything concrete are you. You just have faith that someone, somewhere must fit that bill because you've heard they're everywhere.... or something. Is that about right?

- "Accepting it also involves accepting the desperately unlikely auxiliary hypothesis that every actual scientist who has looked at this stuff is breathtakingly stupid, corrupt, or both."

See above.

- "If you're looking for a hard demarcation line between stuff that anyone can do and stuff that requires training, you won't find one, nor should we expect to... [etc]"

Tristan's question required a specific answer. I started this by saying "Where I can evaluate outcomes, and they're at odds with 'expert' predictions, I'll discard the latter on the basis that, whether or not their 'science' was good, their predictions were wrong."

Note the first words: "Where I can evaluate outcomes". So Patrick, tell me in specific terms where any evaluation I've done has exceeded my ability, and why you think so.

Like · 28 November 2013 at 21:22

Tristan Wells "- Because for the billionth bloody time you cannot dechallenge an immune response!"

What Greg said. I don't care about the level of antibodies that remain I care about the consequences on children's health – unless you think that raised antibodies represent a permanent injuring of a person (which would seem a pretty remarkable claim for somebody so enamoured by vaccination).

"- For ASDs? You've got to be joking. Or worse, relying on people who think their kid went from nonautistic to autistic while they watched."

Not sure if this comment is incredibly callous or just unbelievably stupid. Autism is a range of symptoms. Parents won't necessarily see zero symptoms and then every single one of the range of symptoms moments later but they will see some symptoms soon after the vaccine and other symptoms will develop (or become apparent) over time.

"- Who has ever said it's inconceivable that some could react very badly? Again, you have to listen to what people actually say, Tristan, not what you think they said. And of course 'conceivable' is not the same thing as 'is actually happening.'"

But Patrick we are told that autism IS NEVER caused by vaccines. If it's conceivable why don't they just say "we don't know for sure as we haven't got sufficient data to rule in or out".

"- We have a very different understanding of the word 'researcher' seeing as yours apparently has no standards, institutional quality assurance or disciplinary framework."

Sure it does. If any of them say "this must be true because my mates all say so" then I assume they are full of shit. That is my standard. I reckon that, historically, such a standard has a 99.99999999999999999 per cent track record. Yours has the residual. What's even more hilarious though is that you care far more about empirical validation than I do.

"- By which we mean I'm not going to presume I can understand something I'm not trained in. Unlike you."

You get confused by someone telling you "I don't know"? Explains a lot.

"- How do you get from 'not being a leading figure in a field' to 'having no applicable credentials'?

I got there because that is what you said Patrick. You said "they make a name by proving others wrong". Ergo, anybody who is just a follower has no name. If there is a consensus amongst scientists then, according to you, one and only one of those scientists can have a name. They may have a name in another field but I don't see how that helps your case (well actually at this point it just might be optimal). If they aren't leaders they don't have a name. I assumed by "name" you didn't mean there were a bunch of scientists running around without a given or family name but that you meant their "applicable credentials".

So there you go Patrick. That is how I got from A to B. Clear enough?

"- No I did not say that, because – yet again – YOU DO NOT HAVE COMPLETE DATA FOR THE ENTIRE WORLD. We do have complete data for Denmark as it happens, and you don't like what the analysis of that data shows."

Then why did you complain that giving data for the entire world was too much Patrick? Why?

"- All those beliefs have actually been subjected to far more empirical work than they prima facie deserve, given that two of the three don't propose anything like a physically plausible mechanism."

More begging the question. Magnetism doesn't have a physically plausible mechanism either by the way. At any rate, this is what you said:

"- Once again, Tristan is apparently able to evaluate and dismiss entire fields of knowledge he has no training in, because Tristan has magic powers."

I was just responding to that statement.

"- Nothing pejorative about it,"

It's alright. I really really wasn't offended.

"But I guess it's as good an excuse as any for not subjecting your views to the processes by which knowledge claims are tested."

No Patrick, yours is a process by which tenured academics justify their groupthink. You tell yourself that it has some greater purpose but you have never provided any empirical or logical basis for that.

"- In fields where what we accept as true is determined by a relevant scientific discipline, yes."

Can you please be more honest and specify that when you say "we" you actually mean "all professional groupthinkers".

"- Fine, but neither do you. You're a person with no training telling people who do have training that they're wrong. "

Did you get your mates to help you with that comeback?

"- FFS. It is not about 'people who defend vaccines' vs. those who don't"

You see this is just one more example where the whole pathological lying comes in Patrick. I didn't go into much detail about the validity of the adjustments and that is NOT what this is about.

You said there had never been a single correlation between ASDs and vaccines in all of human history. I said that was lunacy and I said that even the Madsen paper had a correlation originally but after the adjustments those correlations disappeared. You said "No. They NEVER adjusted that data that is a bare-faced lie and you are the stupidest person in history (even amongst the anti-vaxers) for suggesting something so outrageous as NOBODY else has EVER said anything of the sort." I, astonished that even you would be so outrageously wrong, just pointed out that a) the paper itself said they adjusted the data; and b) others had noticed it.

Now, because you are one of the most disgracefully pathological liars in all of human history, you then said "well, I guess some other really really stupid people also saw it but you are still the stupidest person in history because other people think those adjustments are perfectly valid."

So yes Patrick. You are one the most dishonest people I have ever come across. And I have argued with a guy who sent me unsolicited abusive emails to which the only response I provided was "don't email me again" and then he went on a public forum and accused me of cyberbullying him! So I am used to the skeptics acting in the most loathsome possibly way but your refusal to acknowledge your mistake here is about as dishonest as I have ever seen.

Like · 29 November 2013 at 22:05 · Edited

Tristan Wells "- If you're looking for a hard demarcation line between stuff that anyone can do and stuff that requires training, you won't find one, nor should we expect to. "

Hahahahahahahaha!!!!! So everything you have ever said and believed about everything is complete and utter rubbish.

No arguments here. But I should point out though that I did provide a demarcation so I guess that means I should get the world grand awesomeness prize for philosophy right?

"But when a discipline has reached a certain stage of complexity it's clear that both the knowledge base and the 'subject formation' (i.e. the sort of way of thinking required by the discipline) require formal education."

I believe everybody should worship me and give me all their savings. Now, I can't explain why they should do this because it is simply far too complex for those peasants who haven't spent several decades studying the finer intricacies of Tristan Worship so they are just going to have to trust my expertise on this issue.

And let's face it, who could possibly deny I am an expert on this?

"basically education as mere 'fact absorption."

Hahahahahahahahahahahaha!!!!!

So you would agree then that a philosophy lecturer who came into his class and told them "you must accept whatever the experts think without doing any critical thinking of your own" must be an absolutely appalling educator right?

"Nothing really hangs on the smallpox example in any case;"

Wow! Patrick says something that's actually right!

"it just struck me as interesting given that when it's pointed out to you that there's no correlation of MMR and ASD diagnoses (as noted, your assertion to the contrary is worthless at this point) you widen the scope to vaccines in general."

Yes. That is a good point Patrick. Up until a few weeks ago I was arguing with anyone who would listen that every single vaccine bar the MMR was a brilliant idea.

I guess after finally saying something that is true it is only fair that you follow up with something completely ridiculous right?

"Now it seems you're pulling out some variant of the 'too many, too soon' claim;"

I'm sorry. Are you saying that if I give one person 100 mg of arsenic I would expect the exact same results as if I gave them 10 milligrams of cyanide everyday for a year?

"I won't bore you with the responses that have been made to that as I assume you know what they are, and no doubt have some piece of special pleading set up to get around those too."

The guy who can't finish a sentence without begging the question is apparently very concerned about deductive validity now. As for trying to predict my response – sorry, but I'm not as 2 dimensional as you are Patrick.

"Anything so long as you can blame someone in a white coat."

Ummmm, yes. Because I am a noted class warrior right?

Now, I am going to go out on a limb here and say that you always vote with an eye on "social justice". You love equality (or claim you do) and whenever you rationalise your views to yourself you no doubt say it is because of your astonishing compassion. Of course, this is just a rationalisation. The reason you hold ALL of your beliefs is because you like to tell others what to do. So here you are faced with a choice: defend rich doctors, rich pharma company executives and powerful bureaucrats or listen to and defend parents of severely injured children. You choose the former. Now, there is nothing intrinsically wrong with this as far as I am concerned. If the doctors etc are in the right then I believe you should absolutely defend them. But you don't defend them because you have looked at the evidencefor yourself and determined that, yes, the doctors are most likely in the right you have just taken the word of the doctors themselves! In other words you believe the rich and powerful BECAUSE they are rich and powerful.

Over and over you dismiss the views of those who aren't rich and powerful because you know that such peasants are stupid whereas those who are rich and powerful are beyond reproach and to suggest otherwise is an outrageous conspiracy theory.

Now, as I say, I have no problem defending rich and powerful people IF the truth demands it – but I certainly would never be stupid enough to believe them BECAUSE they were rich and powerful. And remember I would never pretend to be this ultra-compassionista bleeding heart.

Everything you believe is a lie. You can't tell the truth here because you can't tell the truth to yourself. Every single one of your beliefs is predicated on the fact that you want to dictate and micro-manage every aspect of everybody else's life. Every one of your appeals to compassion or equality is just a rationalisation for that desire.

"It is, however, relativistic to assume that knowledge claims made outside explanatorially successful disciplinary paradigms are just as good as ones made within them."

And you are begging the question again by calling whatever you happen to believe in as being within an "explanatorially successful disciplinary paradigm". It is really embarrassing that a philosophy lecturer just can't stop himself from making circular arguments.

"In any case I'd say you're more of an epistemic foundationalist than a relativist."

So when you said that I was a relativist what you actually meant was that I was about as far away from being a relativist as it is possible to be. Got it.

"- No. Do you seriously think that hypothetical is in any way relevant to any real-world cases?"

So now you play dumb again. It is obvious that I simply want to know if you will accept the principle before we start delving into case studies.

"- And if I thought you were in any way a competent judge of either of those things I dare say that would bother me."

Why do you think your mates call me "not-a-professor" Patrick? They are trying to be insulting but what do you think it actually means about how they view my posts? Like · 29 November 2013 at 10:11 · Edited

Tristan Wells http://www.nature.com/.../research-ethics-3-ways-to-blow...

"When worries about somebody's work reach a critical point, it falls to a peer, supervisor, junior partner or uninvolved bystander to decide whether to keep mum or step up ... See More



Research ethics: 3 ways to blow the whistle www.nature.com

in the data of the

Reporting suspicions of scientific fraud is rarely easy, but some paths are more effective than others.

Like · 1 · 29 November 2013 at 11:32

Patrick Stokes There's a bit of overlap in your replies so I'll try to combine them where I can reply to both at once:

G: "How ridiculous. He's talking about 'dechallenging' a toxic insult." T: "What Greg said. I don't care about the level of antibodies that remain I care about the consequences on children's health

- Ah I see: so now it's not the antigens that's the issue, it's the 'toxins.' So we're back to blaming stuff that either isn't in there at all or isn't in there in doses sufficient to be toxic. But by all means, keep blaming vaccines because obviously it can't be anything else.

G: "Do you think it's a joke to listen to parents' accounts of what happened? Because that's what it sounds like you're saying. Should we ignore the reports of terrible effects following vaccination?"
T: "Not sure if this comment is incredibly callous or just unbelievably stupid. Autism is a range of symptoms. Parents won't necessarily see zero symptoms and then every single one of the range of symptoms moments later but they will see some symptoms soon after the vaccine and other symptoms will develop (or become

apparent) over time."

- Of course we should listen. Parents dealing with a diagnosis like that deserve all the practical and emotional support we can offer. But when they report observations utterly incompatible with the way autism symptoms present – 'One day he was x, the next day he was y,' 'I saw the light suddenly go out from his eyes' etc. – then we're entitled to discount those reports fairly heavily. You'll note too that Tristan's point about symptoms developing and being noticed over time seriously weakens the claim that the vaccination was the causative event.

G: "Tristan wasn't talking about researchers: he was talking about *your* view of them." T: "Sure it does. If any of them say "this must be true because my mates all say so then I assume they are full of shit". That is my standard."

- And we're back to a) reducing long-established discipline-wide consensus as 'what my mates all reckon' and b) pretending that disciplinary frameworks don't matter. Hence Tristan's adolescent ranting about 'academic groupthink' and what have you, because he simply refuses to accept that knowledge is socially distributed, and if you want society to contain very advanced (and advancing) knowledge then you have to accept that you're going to have to accept the epistemic authority of experts within their domains. You can call that 'outsourcing opinions' or whatever nonsense makes people feel better about their own lack of qualification, but it doesn't change the facts on the ground.

G: "Then why do you have an opinion? Why don't you just be honest and say "I don't have any business discussing these issues: adverse reactions, efficacy, samples etc... none of it." And just avoid these discussions. By your own proclaimations you have no business here, and certainly none determining your own thoughts on these things."

T: "You get confused by someone telling you "I don't know"? Explains a lot."

- Quite right, Greg. My point is that neither do either of you. If you think you have the qualifications and the skills to make and establish scientific claims, then, as they say in the classics, put up or shut up. But there just is no way of establishing such claims outside that institutionalised scientific framework. None. And Tristan seems to think that experts are only experts if they can answer all his questions to his satisfaction for some reason.

G: "Simply unbelievable, Patrick. Do you have *no* idea about this, still? What part of the word's meaning are you having problems with?"

T: "Then why did you complain that giving data for the entire world was too much Patrick? Why?"

- Greg, even the ABS sheet you posted explained – very clearly I thought – that you were using the word census wrong. If you think I'm using the word wrong, go take it up with the ABS. I feel a bit ungracious harping on about this, but indisputably, you got it wrong. Two data points on each head: vaccination status, ASD status. That's what a relevant census would be, and that is what you don't have. Nor did I say anything remotely like 'giving date for the entire world' was too much, I said that you had no such usable data.

G: "Training in what? If we're talking data I'm sure Tristan has ample training... and you probably have none (you seem to be proud to say). So, if that matters, what the hell are you doing discussing the issue with him? Given your stance on who is and isn't even entitled to an opinion, aren't you a walking contradiction?" T: "I am a colossal douche" [paraphrased]

- Tristan's an epidemiologist now? Or is he an immunologist perhaps? Virologist, maybe? Or something – anything – that might actually qualify him to discuss this? No?

G: "If not, then you aren't talking about anything concrete are you. You just have faith that someone, somewhere must fit that bill because you've heard they're everywhere.... or something."
See my point above about distributed knowledge.

G: "Tristan's question required a specific answer. I started this by saying "Where I can evaluate outcomes, and they're at odds with 'expert' predictions, I'll discard the latter on the basis that, whether or not their 'science' was good, their predictions were wrong." Note the first words: "Where I can evaluate outcomes". So Patrick, tell me in specific terms where any evaluation I've done has exceeded my ability, and why you think so."

- Somewhere around the point where you claim that there are no grounds other than the historical belief on which to accept vaccine efficacy would be a good place to look.

Like · 29 November 2013 at 17:16

Patrick Stokes "But Patrick we are told that autism IS NEVER caused by vaccines. If it's conceivable why don't they just say "we don't know for sure as we haven't got sufficient data to rule in or out"."
It's also conceivable that there's a seven foot tall invisible duck standing on the surface of Mars right now. Perfectly conceivable. Can we rule the possibility out logically? No. Is there such a duck? No.

"So there you go Patrick. That is how I got from A to B. Clear enough?"

- Clear as mud. Apparently there is precisely one scientific question in your view, and a consensus is basically whatever everyone happens to believe on that one question. And you still haven't explained how someone's credentials are somehow invalidated by not being a leading researcher ("Damn, I haven't disproved anyone else's paper yet so I guess my PhD has been revoked. I now know nothing at all about what I studied for ten years.")

"More begging the question."

- So, 'these things have been investigated and have been found not to work' is question-begging?

- "Magnetism doesn't have a physically plausible mechanism either by the way."
- Wow, I never picked you for an Insane Clown Posse fan.

"No Patrick, yours is a process by which tenured academics justify their groupthink. You tell yourself that it has some greater purpose but you have never provided any empirical or logical basis for that." - The fact that science obviously works doesn't strike you as a sufficient empirical basis?

T: "You said there had never been a single correlation between ASDs and vaccines in all of human history." - I didn't actually, but carry on.

T: "I said that was lunacy and I said that even the Madsen paper had a correlation originally but after the adjustments those correlations disappeared. You said "No. They NEVER adjusted that data that is a barefaced lie and you are the stupidest person in history (even amongst the anti-vaxers) for suggesting something so outrageous as NOBODY else has EVER said anything of the sort."

- Christ, you paraphrase even worse than you do entailment. Go back and check: I never said they did or didn't adjust the data. You insisted that there was a serious fudging of the figures in there and that Madsen thus doesn't show what its authors said it does. I couldn't find any reference to such a claim online (and you'd think a glaring fault in Madsen would be a pretty hot topic in antivax circles), asked for more info, and you pulled out... a couple of posts on AoA. So things are still exactly where I said they were: you've got an untested claim that something is off with Madsen that has precisely zero credibility, and you're not willing to go through the QA mechanisms by which that claim might gain any.

T: "you are one of the most disgracefully pathological liars in all of human history... You are one the most dishonest people I have ever come across."

- As I say, you really need to get out more.

"So everything you have ever said and believed about everything is complete and utter rubbish."

- You don't need a clear demarcation line for there to be a genuine difference. Or do you think that teenagers instantaneously develop adult maturity at the stroke of midnight on their 18th birthday?

"I believe everybody should worship me and give me all their savings."

- I suspect this example is not entirely hypothetical.

"Now, I can't explain why they should do this because it is simply far too complex for those peasants who haven't spent several decades studying the finer intricacies of Tristan Worship so they are just going to have to trust my expertise on this issue."

- And when society decides, on the basis of centuries of demonstrable progress, that Tristan Worship is a productive domain of human inquiry and that its institutionalisation benefits humankind, that will be a fair point. Good luck with the ARC.

"So you would agree then that a philosophy lecturer who came into his class and told them "you must accept whatever the experts think without doing any critical thinking of your own" must be an absolutely appalling educator right?"

- We've been over your misuse of the term 'critical thinking' before.

"I'm sorry. Are you saying that if I give one person 100 mg of arsenic I would expect the exact same results as if I gave them 10 milligrams of cyanide everyday for a year?"

- See above re: toxins.

"As for trying to predict my response – sorry, but I'm not as 2 dimensional as you are Patrick." - Indeed. To paraphrase Nietzsche, you're like a bottomless pit: not even shallow Like · 29 November 2013 at 17:18

Patrick Stokes "The reason you hold ALL of your beliefs is because you like to tell others what to do." - Oooh, this sounds like fun. Please, Dr Freud, proceed.

"So here you are faced with a choice: defend rich doctors, rich pharma company executives and powerful bureaucrats or listen to and defend parents of severely injured children. You choose the former." - Sorry, Che, but the only people I'm defending here are kids whose parents are so narcissistic they think they somehow know more than scientists.

"But you don't defend them because you have looked at the evidence for yourself and determined that, yes, the doctors are most likely in the right you have just taken the word of the doctors themselves!" - Again, Tristan seems to think we have to personally evaluate each and every discipline for ourselves. (Like I say, you're a kind of frustrated naïve foundationalist). Ridiculous, and in a society grown to this degree of informational complexity, well and truly impossible in any case.

"In other words you believe the rich and powerful people BECAUSE they are rich and powerful." - Ah the old 'If I join two logically unconnected statements with 'in other words' it'll look like I've established the second statement!' trick.

"Over and over you dismiss the views of those who aren't rich and powerful because you know that such peasants are stupid whereas those who are rich and powerful are beyond reproach and to suggest otherwise is an outrageous conspiracy theory."

- Yeah I'm so sick of those incredibly rich medical researchers lording it over me with their obscene wealth and wielding their incredible political power. As Krusty the Clown put it: "Everywhere I go I see teachers driving Ferraris! Research scientists drinking champagne!"

"Everything you believe is a lie. You can't tell the truth here because you can't tell the truth to yourself. Every single one of your beliefs is predicated on the fact that you want to dictate and micro-manage every aspect of everybody else's life. Every one of your appeals to compassion or equality is just a rationalisation for that desire."

- Seriously, dude, this is just hilariously bad. I accept that science is the only successful epistemic framework available (a fact amply demonstrated over the last few hundred years) and the further near-tautological claim that the views of scientists carry more weight that the views of non-scientists *about science*, therefore I am a tyrant who just wants to micromanage everyone's life.

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"And you are begging the question again by calling whatever you happen to believe in as being within an "explanatorially successful disciplinary paradigm".

- It's got nothing to do with what I happen to believe or not.

"So when you said that I was a relativist what you actually meant was that I was about as far away from being a relativist as it is possible to be. Got it."

- Well given that you don't seem to think any foundational claims have been established, you're left believing that all paradigms are equally worthless. So I guess that is a kind of relativism, but one born of frustrated foundationalism. You want foundations of a certain kind, there aren't any, therefore you adopt radical scepticism about all knowledge claims.

"So now you play dumb again. It is obvious that I simply want to know if you will accept the principle before we start delving into case studies."

- Which will look absolutely nothing like what you described.

"Why do you think your mates call me "not-a-professor" Patrick?"
Gee, I dunno. Maybe it's because you make ridiculous and bombastic claims that reek of unearned intellectual pretensions? Just a guess.
Like · 29 November 2013 at 17:19

Tristan Wells I wasn't sure whether to respond given that you have clearly given up by now but this is just so much fun.

"- Ah I see: so now it's not the antigens that's the issue, it's the 'toxins.' So we're back to blaming stuff that either isn't in there at all or isn't in there in doses sufficient to be toxic. But by all means, keep blaming vaccines because obviously it can't be anything else."

None of this paragraph makes any sense. "so now"??? When have I even mentioned "antigens"?

"But by all means, keep blaming vaccines because obviously it can't be anything else"

Que?

"You'll note too that Tristan's point about symptoms developing and being noticed over time seriously weakens the claim that the vaccination was the causative event. "

Ok. So if symptoms for a disease only develop slowly then we must always conclude that it can't possibly have been just a single disease.

You never refuse an opportunity to beclown yourself do you?

"knowledge is socially distributed"

Aaaah, the old "socially distributed" knowledge. Definitely my favourite. It is knowledge that nobody actually has but everybody has a "vibe" of having.

The cowardice is mind-blowing. You implore us to believe every word coming out of the mouths of experts and then when we ask you to name one you scamper away.

At any rate didn't you just say something about "leaders and followers" in science? That most of those in the consensus were just followers to the small number of geniuses who had "made their name". Now you are saying that the genius is all spread around and absolutely *nobody* has made a name for themselves on this issue.

Like I said, you just never refuse an opportunity.

"but it doesn't change the facts on the ground."

That's right. Only the vibe given off by nameless faceless people with socially distributed knowledge endowed on them by people with a name but who don't really have one can do that.

"And Tristan seems to think that experts are only experts if they can answer all his questions to his satisfaction for some reason."

Asking for evidence and explanation is only done "for some reason".

You're a good philosopher Patrick.

"Nor did I say anything remotely like 'giving date for the entire world' was too much, I said that you had no such usable data."

Really? So when you said "because the whole world is a sample, apparently" you were actually criticizing me for not providing *enough* data. Sure Patrick.

"- Somewhere around the point where you claim that there are no ground other than the historical belief on which to accept vaccine efficacy would be a good place to look"

But that all just happened in your head Patrick and whilst we know that everything you say will be abject

nonsense you always manage to surprise us as to how you will choose to beclown yourself (I guess I was wrong when I said you were two dimensional).

I mean, it doesn't even make any sense. Why on earth would Greg claim that a historical belief in vaccines was a "ground" to believe in it? I guess *you* might believe in things based on such tenuous grounds but how did you come to the conclusion that we have?

Like · 1 December 2013 at 18:10

Tristan Wells "- Sorry, Che, but the only people I'm defending here are kids whose parents are so narcissistic they think they somehow know more than scientists. "

Ok. So after over 100 posts whereby you never mention once the welfare of injured children whilst not once missing an opportunity to recoil in righteous indignation over the welfare of scientists all of sudden you are "can't somebody think of the children!"

Seems legit.

And seriously? Narcissists? That is how you think of the parents of injured children just because they interpret various observations in a way you don't agree with?

You see this is another of my gifts Patrick. I hold up a mirror for peoples' true natures. And because they often don't like what they see I get dozens of threads devoted to hurling abuse at me by juveniles and other dishonourables. In case you are wondering, the honourable people tend to like it. The dishonourable - well they tend to thinkI am a "douche".

"- Ah the old 'If I join two logically unconnected statements with 'in other words' it'll look like I've established the second statement!' trick."

You established it by default. You can't make – and haven't even attempted to make – a non-circular explanation as to why doctors are "authoritative" on this issue so I conclude you simply believe it because they are part of the hegemony. You are welcome to argue an alternative case but given that you don't believe you should have to don't have a sook when I draw such conclusions.

"- Yeah I'm so sick of those incredibly rich medical researchers lording it over me with their obscene wealth and wielding their incredible political power. As Krusty the Clown put it: "Everywhere I go I see teachers driving Ferraris! Research scientists drinking champagne!""

That was almost funny. But in order to actually be funny it would have to make sense ie it would have to be true that doctors' average disposable incomes was somehow remotely comparable to parents of severely injured children – sorry, I meant narcissists.

" therefore I am a tyrant who just wants to micromanage everyone's life. "

No. You have particular predilections and *therefore* you use whatever tools are at your disposal to justify your predilections. If you had been alive 500 years ago you wouldn't have thought twice about using religion but today you use "science". Again, this case is made by default by virtue of you not being able to give anything other than vague generic and unfalsifiable assertions about "socially distributed knowledge" and other such mush.

"- It's got nothing to do with what I happen to believe or not. "

Ok. But when I asked you for a single example of modern day peer-reviewed scientific processes being successful all you could give me was a discovery that a) was made 150 years ago; and b) wasn't even peer-reviewed.

But you're right it's all good. It's in the vibe.

"- Well given that you don't seem to think any foundational claims have been established, you're left believing that all paradigms are equally worthless."

It truly is astonishing – well, telling more like - that an academic would be so extraordinarily uncurious as to make such a statement without even bothering to ask me what it is that I believed.

"- Which will look absolutely nothing like what you described."

If you say so. At any rate, do you accept the principle? If not, what sort of temporal relationships would you accept provide sufficient demonstration of causation?

"- Gee, I dunno. Maybe it's because you make ridiculous and bombastic claims that reek of unearned intellectual pretensions? Just a guess."

But that would only make sense if either a) professors regularly say things that are (at least ostensibly) ridiculous and bombastic; or b) I ever gave any intimation that I think highly of academic credentials. Like · 2 December 2013 at 08:29 · Edited

Tristan Wells "It's also conceivable that there's a seven foot tall invisible duck standing on the surface of Mars right now. Perfectly conceivable. Can we rule the possibility out logically? No. Is there such a duck? No.

Yes Patrick that is right. The statement "vaccines cause autism" has a burden of proof. But so does the statement "vaccines *never* cause autism". I'm so glad you can at least work out one side of the equation – now if you can just get that tricky second part.

"- Clear as mud. Apparently there is precisely one scientific question in your view, and a consensus is basically whatever everyone happens to believe on that one question."

Que? I already covered this when I alluded to the possibility of being experts in a different field. The question "is the infant immunisation schedule worthwhile" can only have one relevant expert according to you. There may well be relevant experts in other immunological etc related areas but what have they got to offer parents on the wisdom of vaccinating their children?

"And you still haven't explained how someone's credentials are somehow invalidated by not being a leading researcher"

I have made it clear a billion times I couldn't care less about the validity of any credentials. YOU claimed that for any given question there could only be one person who had a relevant "name".

"The fact that science obviously works doesn't strike you as a sufficient empirical basis? "

Science works. Vaccines are science therefore they work. A perfectly valid argument. But even if I accepted the first premise I most assuredly don't accept the second and therefore the conclusion. After all this time, do you not understand that this is where I am coming from?

"T: "You said there had never been a single correlation between ASDs and vaccines in all of human history." "- I didn't actually, but carry on. ""

Patrick October 20 1:18pm "Quite (and you know all the flaws in his studies, well before we get to the ethics of what he did) and large population studies have subsequently shown there is no correlation between autism and MMR. None."

I suppose you could try and weasel out by saying that you said "MMR" here not all vaccines but you subsequently claimed that other vaccines weren't even in question. And in your original foray into this issue you claimed that the link between (all) vaccines and autism had been disproven.

Seriously mate you are embarrassing yourself. You know pathological liars lie even when they know they will be caught out don't you? They simply can't help themselves.

"Christ, you paraphrase even worse than you do entailment. Go back and check: I never said they did or didn't adjust the data. You insisted that there was a serious fudging of the figures in there and that Madsen thus doesn't show what its authors said it does.""

If you are going to criticize somebody paraphrasing you incorrectly don't you think it behooves you not to make the exact same mistake (and doing it for real)? This is what I said: "But then the authors decided that they would fudge, sorry, 'adjust' the data somehow to bring about the opposite conclusion. Of course, you might argue that all their fudging was perfectly justified...." (October 25 9:39 am)

I made it perfectly clear that the term 'fudge' was simply my opinion. And I even followed it up later with "Hell, you only need to be able to read and see the word "adjusted" in the table for the data and you have sufficient proof to see that they adjusted the data. You are probably the only person on the planet too stupid to understand that adjusted = changed. You can call it whatever you like I call it fudged because without it they would have got the exact opposite conclusion."

That was on November 7 2:41pm. You could have pulled out there with your dignity somewhat intact. But, astonishingly, you continued on! God only knows why. To be fair, I did set the bait but why on earth would you take it?

"- You don't need a clear demarcation line for there to be a genuine difference. Or do you think that teenagers instantaneously develop adult maturity at the stroke of midnight on their 18th birthday?"

We are happy to go with anything at all Patrick. Make the demarcation clear or fuzzy or whatever you like. Just make one. The only rule is that it can't be circular.

All you have so far is: "it's clear that it's complicated". Now, can you do any better?

"And when society decides, on the basis of centuries of demonstrable progress, that Tristan Worship is a productive domain of human inquiry and that its institutionalisation benefits humankind, that will be a fair point. Good luck with the ARC."

Aaah, so now "society decides". But I could have sworn that there was something more intrinsic to science than just the whims of society. But now you are saying that it is no more valid than any other long-lived belief of the past (or present). And I thought that being part of the hegemony had nothing to with you siding with doctors Patrick? Now you are freely admitting that you agree with institutionalised beliefs for no reason other than because they are institutionalised.

"We've been over your misuse of the term 'critical thinking' before."

I know. I'm sorry. Every word Patrick Stokes uses has a "Goldilocks" meaning whereby no matter what he



satisfied with the explanations given by a given discipline then the discipline can't possibly right.

"Really? So when you said "because the whole world is a sample, apparently" you were actually criticizing me for not providing *enough* data. Sure Patrick."

- Thank God, he's got it at last.

"Why on earth would Greg claim that a historical belief in vaccines was a "ground" to believe in it? I guess *you* might believe in things based on such tenuous grounds but how did you come to the conclusion that we have?"

- He does indeed claim that the 'historical belief' is, in his view, why most people believe in vaccine efficacy. Look up the thread: he says as much many times. What you're doing there is equivocating on two different senses of 'ground': a descriptive one ('these are the grounds on which people actually believe x') and a normative one ('this is a good ground for believing x').

"Ok. So after over 100 posts whereby you never mention once the welfare of injured children whilst not once missing an opportunity to recoil in righteous indignation over the welfare of scientists all of sudden you are "can't somebody think of the children!""

- [RIP Maude Flanders]. Given we've already established you apparently can't comprehend compassion as a motivator (such that you reject anyone's claim to be so motivated) I can understand why you'd find that hard to believe. I am annoyed by people who think they know better than experts in general, but antivax is a distinctively harmful example because it puts kids at risk of real harm.

"And seriously? Narcissists? That is how you think of the parents of injured children just because they interpret various observations in a way you don't agree with?"

- Certainly not all of them (though you're already assuming that they are parents of 'injured children'). But it does take a certain kind of narcissism to say "I know more about this topic than this person who went to uni for ten years and does this for a living."

"You see this is another of my gifts Patrick. I hold up a mirror for peoples' true natures. And because they often don't like what they see I get dozens of threads devoted to hurling abuse at me by juveniles and other dishonourables."

- Yes, it couldn't possibly just be because people get sick of you making unjustified accusations against their character and competence.

"You established it by default. You can't make – and haven't even attempted to make – a non-circular explanation as to why doctors are "authoritative" on this issue so I conclude you simply believe it because they are part of the hegemony."

- The entailment is still false: you're saying that because I accept that a) science is established as the one successful empirical framework and b) medical practice is based in science then c) I only side with medical experts over non-medical experts because they're 'rich and powerful'. (And no, none of that is circular). Like · 2 December 2013 at 22:25

Patrick Stokes "But in order to actually be funny it would have to make sense ie it would have to be true that doctors' average disposable incomes was somehow remotely comparable to parents of severely injured children – sorry, I meant narcissists."

The reference was to research scientists; most doctors apply research rather than conducting it. Given how long they train for and the hours they typically work, and the social benefit they provide, I'm quite happy for doctors to earn what they do. If you want to make a case for paying research scientists more in the name of parity, great. The NTEU will be delighted to hear of your support.

"No. You have particular predilections and *therefore* you use whatever tools are at your disposal to justify your predilections."

- Needless to say this is utter nonsense. But it's not like I haven't pulled the odd bit of amateur pop psychologizing on you over the life of this thread, so fair enough, knock yourself out.

"It truly is astonishing – well, telling more like - that an academic would be so extraordinarily uncurious as to make such a statement without even bothering to ask me what it is that I believed." - You've said a few times you regard little or nothing in science (outside of engineering and IT) as being an

advance on the past. (I've read that you're an adherent of GNM; not sure how you reconcile those two beliefs).

"At any rate, do you accept the principle? If not, what sort of temporal relationships would you accept provide sufficient demonstration of causation?"

- The principle seems prima facie unobjectionable, though that's only my immediate response as a layperson.

"But that would only make sense if either a) professors regularly say things that are (at least ostensibly) ridiculous and bombastic; or b) I ever gave any intimation that I think highly of academic credentials." - Why do you assume people have to judge you by your own standards?

"The statement "vaccines cause autism" has a burden of proof. But so does the statement "vaccines *never* cause autism"."

- Well a 'burden of proof' is inherently asymmetrical: either the burden of proof is on the side of the positive proposition or the negative one. It can't be on both.

"The question "is the infant immunisation schedule worthwhile" can only have one relevant expert according to you."

- Wrong; see above re: consensus.

"Science works. Vaccines are science therefore they work. A perfectly valid argument. But even if I accepted the first premise I most assuredly don't accept the second and therefore the conclusion. After all this time, do you not understand that this is where I am coming from?"

- I do understand that this is your objection, yes. But to date you've got nothing serious to back such a claim up with, and you refuse to subject the claim to proper scrutiny. And yet you lecture me on cowardice.

"I suppose you could try and weasel out by saying that you said "MMR" here not all vaccines but you subsequently claimed that other vaccines weren't even in question." - And by 'weasel out' we mean 'accurately describe what I actually said.'

"And in your original foray into this issue you claimed that the link between (all) vaccines and autism had been disproven."

- No causal link *has* been found despite years of searching. If you have evidence to the contrary, go tell a journal.

"I made it perfectly clear that the term 'fudge' was simply my opinion."

- So where's the paraphrasing mistake then??? You said Madsen fudged the data. Is there some neutral, non-pejorative use of the verb 'to fudge' I'm not aware of?

Like · 2 December 2013 at 22:26

Patrick Stokes "We are happy to go with anything at all Patrick. Make the demarcation clear or fuzzy or whatever you like. Just make one. The only rule is that it can't be circular. All you have so far is: "it's clear that it's complicated". Now, can you do any better?"

- valid question. It won't be one with an a priori answer, but hre's an admittedly very preliminary stab at t rying to make the **bo**dary less blurry: I'd suggest that there are certain errors, or ypes of errors, that are cha racteristic of people who aren't formly trained in a discipline when they try to engage in it. We might say hat one indicator that a discipline has reached the point where it requis formal training is that the traine d person, having a suffici ntly deep and broad area knowledge and methodological practice, no longeoutinel y makes these sorts of systemic errors. I saw this just last week in my own discipline: an engineer giving a talk in which he tried, s many have before, to develop a 'science of morals.' Havoided some of the errors that Sam Harris and Michael Shermer happily jump into in trying to do the same thing, so he was ahead on that score, but there were two or three serious blunders in the whole thing that a professional philosopher simply would not have missed. (In the interests of balance, let me add my second-favourite quote from Daniel Patrick Moynihan: "There are some mistakes only someone with a PhD can make.")

So, after all that, we finally get pretty close to the heart of our epistemological disagreement:

"Aaah, so now "society decides". But I could have sworn that there was something more intrinsic to science than just the whims of society. But now you are saying that it is no more valid than any other long-lived belief of the past (or present). [...] it is *not* tautological (not even remotely) to say they know more about the validity of that field. If the latter were true then we descend into relativism. Pure and simple. I'm sorry, but there is just no other place to go. If you think that anybody who has studied something can't be called into question on it then you are just saying "anything goes". And it does you no good to say that "society decides and institutionalises some things over others" - indeed that is just double downing on the relativism. Societies through the ages have institutionalised lots of not just wrong but mind-numbingly idiotic things."

This gets us to the very basic problem i.e. how we ground the validity of different disciplines or even epistemic frameworks in light of the historical fact that they change over time. As I've already noted you appear to be a sort of disappointed foundationalist on this score. The history of twentieth century philosophy of science was largely about making sense of that foundational problem: after the failure of positivism and naïve falsificationism, what was left other than Kuhn-style relativism according to which scientific progress is to be understood via the sociology and psychology of science rather than any reference to external 'truth'? (I've already discussed Lakatos, who was attempting to construct a rational basis on which we could say science progresses without slipping back into those failed earlier positions).

I agree 100% that society has in the past institutionalised things we'd today look on as insane, pernicious and destructive, and as I've said somewhere in this thread it's quite likely that much of our current knowledgebase will one day look just as primitive and silly as leeches and hysterical wombs seem to us. But I also agree with folks like Lakatos that we do have rational grounds for preferring one research programme over another such that we can still talk about scientific progress. And I would also argue that the scientific method – which has itself evolved over time – has well and truly proven itself in explanatory and predictive terms such that those disciplines grounded in it have a presumptive authority in ordering our truth-claims about the world.

You may object here that this is inadequate, because it involves working from within established disciplines rather than testing and either validating or rejecting the foundations of those disciplines. I get that, and I get the instinct to find foundations. But your position depends on their being an 'outside,' a theoretically-neutral and historically unconditioned perspective from which we could evaluate the foundation of these disciplines. You want to stand outside and say e.g. 'Engineering and Technology works, Medical Science doesn't.' Precisely what I'm denying is that there is such a place to stand. We can't step outside our current knowledge-bases to evaluate them from some ahistorical 'view from nowhere.' Even the gender studies people you refer to offer their critique of institutional structures from *within* those structures, not from some impossible point outside them. There is no outside. From the position of classical foundationalism that may seem deeply disappointing. But it's what we're stuck with. (And yes, that too is a judgment from within, just as historically constrained as any other).

I've seen a few people complaining about that Movember article today; none of the points made in it seem

obviously wrong, though some are a bit overblown and frankly there are far more egregious things to deal with in life than whether Movember is rude to people who already have moustaches. As usual, though, people love to reject awkward claims made by academics that don't agree with their immediate gut reactions, especially when they suggest practices might have to change or they might have to think about someone other than themselves. This usually takes the form of "Oh crmon it's just a bit of fun," which is more often than not a nice way of saying "I have decided not to give a toss about whether what I'm doing might in fact be awful." Besides, while I think there's a lot of good intentions in Movember, and I've sponsored friends who have done it this year and in the past, if this new line of criticism somehow stops my newsfeed being cluttered up with a month of selfies of guys trying to rock 70s porn facial hair they cannot possibly pull off ("Wooo, here's Day 9, Merv Hughes eat ya heart out!" etc.) then more power to it. Like · 2 December 2013 at 22:29

Tristan Wells "- The reference was to research scientists;"

I'm pretty sure I have made this point before but I will make it again. If it is just about research scientists then why are we constantly told to "trust our doctors". At any rate, I think it is somewhat naive to believe that researchers into vaccines are generally untainted by supplementary funding.

"- You've said a few times you regard little or nothing in science (outside of engineering and IT) as being an advance on the past. (I've read that you're an adherent of GNM; not sure how you reconcile those two beliefs). "

I believe that there have been brilliant things said and done in the past 50 years but little of that has made the 'mainstream'. Sorry if I didn't make that clear before.

"- Why do you assume people have to judge you by your own standards?

You mean coherently? That is actually a fair point. But the problem remains that many on the outside would see this "insult" and think to themselves "obviously they think Tristan makes (ostensibly) a lot of sense and they simply can't argue the logic or facts so they have to drone on endlessly about his lack of credentials instead." But then, it is not my problem so who am I to complain?

"- Well a 'burden of proof' is inherently asymmetrical: either the burden of proof is on the side of the positive proposition or the negative one. It can't be on both. "

I've already been through this. If 90 per cent of autism cases were unrelated to vaccines then doctors could rightfully trumpet that "the vast majority of autism isn't caused by vaccines". However, it would still be true that – over a large population – there would be many, many people who developed autism as a result of vaccines. In other words, even if you think the ratio is as favourable to vaccines as that (and I certainly don't) then it would still be incredibly deceitful to try to equate this to "vaccines NEVER cause autism".

"- Wrong; see above re: consensus."

I don't see where you proved it wrong

"and you refuse to subject the claim to proper scrutiny"

That statement makes no sense.

"- And by 'weasel out' we mean 'accurately describe what I actually said.'"

Splitting hairs? Really?

"- So where's the paraphrasing mistake then??? You said Madsen fudged the data. Is there some neutral, non-pejorative use of the verb 'to fudge' I'm not aware of?"

Actually that's fair you did paraphrase me correctly. And I'll ignore the rest because you actually come across as quite likeable on these posts – actually, very likeable.

"We might say that one indicator that a discipline has reached the point where it requires formal training is that the trained person, having a sufficiently deep and broad area knowledge and methodological practice, no longer routinely makes these sorts of systemic errors."

Thank you.

"This gets us to the very basic problem i.e. how we ground the validity of different disciplines or even epistemic frameworks in light of the historical fact that they change over time. As I've already noted you appear to be a sort of disappointed foundationalist on this score."

Don't understand the 'disappointed' angle. Do you mean I am disappointed by the fact that not everybody follows the same framework?

"But I also agree with folks like Lakatos that we do have rational grounds for preferring one research programme over another such that we can still talk about scientific progress."

Of course we could. And I am happy with just saying "whatever works". In fact, despite being a foundationalist I have no intention of being obstructionist with pretty much any inductively coherent criteria. But I simply don't accept that "whatever those who are deemed by society to be experts believe" is

inductively coherent. This is why I keep banging on about burden of proof. You think "experts are more likely to right than Tristan so why should I believe him?" But that misses the point. The correct question is: "Without knowing any details of the issue can we a priori say that the experts are more likely than 50:50 to be right on this kind of question?" I am irrelevant. There are an infinite number of possible beliefs. I believe that for any given question throughout history the 'experts' have been vastly more likely to be substantively wrong than substantively right. Their detractors were no doubt vastly more likely to be wrong too – perhaps more so. But that is of no consequence.

To be helpful I say that all is not lost because some knowledge claims (by authorities) are much better than others. But when they don't fall under such an umbrella I can't just say "well the experts are 0.1 per cent likely to be right and this guy over here is a mere 0.05 per cent likely to be right ergo the experts are the way to go and I won't even bother looking at the issue for myself." If you HAVE to choose a belief sight unseen with nothing more than who believes what to go on I would 1) look at the opportunity cost of being wrong of each belief; and 2) look at vested interests (not necessarily in that order). How many PhDs they had would probably be something I gave almost no thought to but I wouldn't have a problem with others allowing it as part of their calculus. There is no way it could reasonably supplant the first two though.

"And I would also argue that the scientific method – which has itself evolved over time – has well and truly proven itself in explanatory and predictive terms such that those disciplines grounded in it have a presumptive authority in ordering our truth-claims about the world."

And I just don't think that there is such a thing as *the* scientific method. On the contrary we reverse engineer from those things that obviously work to say "oh look that works so the method we used to find out about it must be a universal way of determining truth". That in and of itself is invalid, but nowhere near as dangerous as when we take that extra step whereby we take something that doesn't obviously work and claim it must do anyway because it follows some method that may have been used 'successfully' in a completely different field.

"Even the gender studies people you refer to offer their critique of institutional structures from *within* those structures, not from some impossible point outside them."

Sorry. Are you seriously suggesting that only tenured academics are allowed to criticise the 'patriarchy'?

You came across fantastically well in these posts Patrick – almost enough to make me change my opinion of you – but I just don't think your "secret academics' business" rationalisations are going to be sufficient to make people stop believing their own lying eyes.

"As usual, though, people love to reject awkward claims made by academics that don't agree with their immediate gut reactions,"

But that's just it. I don't have a problem with her conclusion – indeed I whole-heartedly agree with it. It was just an absolutely preposterous way to get there.

Like · 4 December 2013 at 09:30 · Edited

Greg Beattie Patrick, you really need to work out your position here. Are you entitled to an opinion on 'the science' or not? If not, why are you offering it? Your Conversation article takes a strong stance. It says that your own opinion shouldn't be taken seriously. Do you still believe this? If so, do you think that's consistent with your effort to be taken seriously here?

Like · 8 December 2013 at 22:10

Greg Beattie These comments are a little late, sorry.

Patrick - "Somewhere around the point where you claim that there are no grounds other than the historical belief on which to accept vaccine efficacy would be a good place to look."

But Patrick, that's ridiculous. I've never claimed that. So why did you say so?

What I said was that such a belief is sufficient grounds for an acceptance of vaccine efficacy. In other words, if we believe vaccines saved us from the past then we *must* believe they work. I've never said it was good grounds. A lie never is. But it is often sufficient. And I've certainly *never* even suggested there were no other grounds.

Like · 8 December 2013 at 22:16

Greg Beattie Quoting Patrick - "Greg, even the ABS sheet you posted explained – very clearly I thought – that you were using the word census wrong. If you think I'm using the word wrong, go take it up with the ABS. I feel a bit ungracious harping on about this, but indisputably, you got it wrong. Two data points on each head: vaccination status, ASD status. That's what a relevant census would be, and that is what you don't have. Nor did I say anything remotely like 'giving date for the entire world' was too much, I said that you had no such usable data."

You're wrong about the lot, Patrick. The ABS uses the word correctly, and the same as I do. Their page does not in any way suggest I'm using it wrongly. If you think it does you need to point out why. A census is a tally. If you want to find out how many students in your class have black hair you can count them. That's a census. The other way to do it is take a sample of, say 10, and calculate a proportion from that.

Tristan was referring to the tally of ASD diagnoses. It's increasing in parallel with increasing use of vaccines. It's as simple as that. He said the correlation is at the population level. And it is. The tally is increasing substantially. This has happened over the same period vaccination has increased substantially. THEY ARE CORRELATED. There is a positive relationship. The greater the amount of vaccination going on the more ASD diagnoses we have recorded. That's what has happened - like it or not!

Now, I know you're talking about a finer evaluation, determining for each child, a) whether they've been vaccinated, and b) whether they've been diagnosed with ASD. You can even go finer and explore a) how much vaccination they've been exposed to, and b) what point on the spectrum they are. These are all just different methods (and degrees) of evaluation. All of these approaches have the capacity to observe a correlation. But the approach you choose does not determine whether you use census or sample data. The approach has nothing to do with which type of data you use.

I've never used the word incorrectly. For you to say I had "indisputably" done so... you must have some really good story. Tell us.

Like · 8 December 2013 at 22:43 · Edited

Tristan Wells the 'toxins' that are in such low doses they can't possibly be toxic

Even your buddies could see that for the loaded question fallacy that it is. Aluminium, for example, is in many vaccines as an adjuvant. It is specifically designed to elicit (or amplify) a reaction from the body. The notion that their doses are too low to have any effect (good or bad) is idiotic.

You need to understand Patrick, that just because *you* don't understand any of what you are talking about it doesn't mean you can necessarily extrapolate that to Greg or Meryl or me or any of us.

"- My point was about aetiology rather than symptomatology; so no, this doesn't follow at all."

Oh that clears it up then... Wait, no it doesn't.

"- You want me to, what, reel off a list of names of epidemiologists, immunologists etc.? What would be the point of that?"

No point in terms of persuading me. Lots of points in terms of getting you to, at the very least, conform to your own rules for arguments.

"- You seem to think a 'consensus' involves everyone agreeing to an answer on a single question. (E.g 'Does cholesterol cause heart disease? Yes/No.') A scientific consensus is not made up of one proposition, but a whole set of interlinked claims that are separately established and reinforced by different people over time."

Hahahahahaha!!!!

You can find a consensus here, you can find a consensus there, you can find a consensus anywhere.

Every time you 'clarify' your claims they just become completely trivial.

"The sort of things that get you a name in research aren't overturning entire theoretical frameworks (in the main), like Einstein overturning Newton, but much more localised parts of the whole."

Like I said above, in order to climb out of the hole you have to change your initial statement so that it has absolutely no meaning. So when you told Greg that:

"You make a name for yourself by telling other people why they're wrong."

What you actually meant was that you make a name for yourself by telling other researchers that their 99.9999999 certainty is in fact a mere 99.9999998 certainty.

I really don't think that is how you originally intended for us to understand this Patrick.

"- The 'for some reason' refers to your apparent belief that if you – you personally, Tristan Wells – are not satisfied with the explanations given by a given discipline then the discipline can't possibly right."

So your brilliant takedown of my position is that if I don't believe something is coherent then I don't believe something is coherent. Great insight Patrick.

"- Thank God, he's got it at last. "

Ummm, but if you were trying to criticise me for falsely describing a mere "sample" as being "the whole world" wouldn't it make a tiny bit more sense if I had ever actually *used* the phrase "the whole world"? All I said was "at the population level". And if you think that there is a problem with that term then you should take it up with the guy who first said it in that exchange:

Patrick Stokes.

Although I suggest that you go through it slowly with him though.

"- He does indeed claim that the 'historical belief' is, in his view, why most people believe in vaccine efficacy. Look up the thread: he says as much many times. What you're doing there is equivocating on two different senses of 'ground': a descriptive one ('these are the grounds on which people actually believe x') and a normative one ('this is a good ground for believing x'). "

The pivotal phrase isn't "ground". It is "no grounds other". That is where your claim was ludicrous. As it so happened, you also used the term "ground" (and "historical belief" for that matter) in a very sloppy manner



but if we were dealing with someone less inclined to split hairs and obfuscate we would probably be more forgiving of such things.

"- [RIP Maude Flanders]. Given we've already established you apparently can't comprehend compassion as a motivator (such that you reject anyone's claim to be so motivated) I can understand why you'd find that hard to believe."

I only trouble myself with revealed preferences. So when you say "the vaccines are harmless because the doses are too low to have a negative impact" I ask "why don't you take an equivalent (for an adult) dose to prove that?" and when you fumble for excuses I conclude you are lying.

I only respect people's calls to "compassion" if they themselves have faced (or it is clear they are willing to face) the costs of that "compassion". Otherwise it is just moral preening.

I don't like moral preening.

"I am annoyed by people who think they know better than experts in general, but antivax is a distinctively harmful example because it puts kids at risk of real harm."

More idiotic circular arguments. If I am wrong then my views are mildly dangerous for children and extremely dangerous for the medical profession; if you are wrong then your views are extremely dangerous for children and extremely profitable for the medical profession (even more so with the latter than if you were right). You of course think that the odds of you being right are in your favour but all you can proffer up to support that is the opinions of those in the medical profession.

And you can't for the life of you see how unbelievably foolish that is.

"But it does take a certain kind of narcissism to say "I know more about this topic than this person who went to uni for ten years and does this for a living.""

I believe every single used car salesman because heaven forbid I would want to be so "narcissistic" as to question someone who has been around cars all their life and makes a living from them.

I am... A Good Philosopher.

Hopefully you would never be so "narcissistic" as to question people who make a living from clubbing baby seals or hitmen or human trafficking Patrick. Let alone those involved in areas whereby the people who make a living from them have also been to those anointed universities (and are therefore presumably intrinsically superior individuals) such as coal fired power stations owners or uranium miners or weapons manufacturers.

FMD your arguments are wretched.

Wretched.

"- Yes, it couldn't possibly just be because people get sick of you making unjustified accusations against their character and competence."

In which case it must be a walk in the park for these angels amongst men to defend themselves without pulling rank or having a sook right?

Right?

"a) science is established as the one successful empirical framework "

And how did you get to this conclusion Patrick?

"and b) medical practice is based in science".

As above. I believe you say to yourself "well science works that is what makes it science. Medicine must be science because other people (rich, powerful or other) say so, ergo medicine must work too."

That is the crux of the issue Patrick. What is so "sciency" about vaccinations? See if you can provide an answer without resorting to the opinions of rich and/or powerful people and then I am happy to admit I am wrong. (You can of course use logically derived arguments of rich and powerful people). Like · 1 · 10 December 2013 at 09:59 · Edited

A

Patrick Stokes "I think it is somewhat naive to believe that researchers into vaccines are generally untainted by supplementary funding."

- Sure, there's very real issues about how research is funded and very important reasons to be extremely careful about conflicts of interest and so on. But bathwater, baby etc.

" If 90 per cent of autism cases were unrelated to vaccines then doctors could rightfully trumpet that "the vast majority of autism isn't caused by vaccines". However, it would still be true that – over a large population – there would be many, many people who developed autism as a result of vaccines. In other words, even if you think the ratio is as favourable to vaccines as that (and I certainly don't) then it would still be incredibly deceitful to try to equate this to "vaccines NEVER cause autism"."
And in the absence of *any* demonstrated cases of vaccines causing autism (as of 2013) I don't really see what you're getting at here.

"Don't understand the 'disappointed' angle. Do you mean I am disappointed by the fact that not everybody follows the same framework?"

- I was thinking more in terms of disappointed that no such foundations have been found.

Thanks for going to some lengths to outline your epistemic stance, I appreciate the effort. We're obviously not going to come to any sort of agreement on this point, but I still think you're assuming there's some sort of standpoint outside the current knowledge-base from which we could then evaluate that base. I'm repeating stuff I've said further up the thread here, so very briefly: your view seems to be that we can assess the past performance of experts at all points in history and from that extrapolate how likely it is that experts are right now. I don't think that's going to work, because the standards by which we evaluate past knowledge-claims are going to be our contemporary standards – precisely what we're trying to evaluate. We could only make sense of the idea that, say, a 15th century alchemist was less right about the fundamental structure of matter than a 19th century chemist by comparing how much of what each of them says agrees with 21st century science. You'll recall the quote attributed to Archimedes: "Give me a lever long enough and a place to stand, and I will move the world." It's not the lever that's the real problem, it's the lack of a place outside the world to stand.

On whether there's one scientific method, I really don't see the problem, even if that method is more historically contingent than the science fandom crowd generally acknowledge. It's evolved over time, such that our conception of it is more prescriptive than it was in Newton's day. But it's still pretty standard across the natural sciences. (Social science is another matter).

"Sorry. Are you seriously suggesting that only tenured academics are allowed to criticise the 'patriarchy'?" - No, I'm just suggesting that they don't somehow step outside the structures they're criticising while they do. Again, there's no place outside to stand.

"But that's just it. I don't have a problem with her conclusion – indeed I whole-heartedly agree with it. It was just an absolutely preposterous way to get there."

- So, you agree that Movember is racist and sexist (and jeez, even I'm not sure I fully agree with that, and I'm an inner-city latte-sipping dolphin-hugging pinko) but not with the reasoning in that article? Like · 11 December 2013 at 19:52

Patrick Stokes "Even your buddies could see that for the loaded question fallacy that it is. Aluminium, for example, is in many vaccines as an adjuvant. It is specifically designed to elicit (or amplify) a reaction from the body. The notion that their doses are too low to have any effect (good or bad) is idiotic." - And you come into a lot more contact with aluminium through other sources than you do via vaccines, so why aren't we all 'vaccine damaged' then, if we're going to indulge in this sort of speculation?

"Oh that clears it up then ... Wait, no it doesn't."

- You were saying that if symptoms come on at different times then (by what you took my reasoning to be) we could never say they were caused by the same disease. But just because an insidious start to a disease means it's hard to pinpoint where it began doesn't entail that we can never diagnose a cluster of symptoms as part of a single disease.

"No point in terms of persuading me. Lots of points in terms of getting you to, at the very least, conform to your own rules for arguments."

- How does reeling off a list of names conform to my own rules of argument?

"You can find a consensus here, you can find a consensus there, you can find a consensus anywhere." - And now I really feel like a VB for some reason.

"Every time you 'clarify' your claims they just become completely trivial." - I don't see why it's trivial to say that a consensus is a more complex thing than simple assent to a single proposition.

"So when you told Greg that:"You make a name for yourself by telling other people why they're wrong." What you actually meant was that you make a name for yourself by telling other researchers that their 99.999999 certainty is in fact a mere 99.9999998 certainty. I really don't think that is how you originally intended for us to understand this Patrick."

- No, it's not how I intended it, but then nor is it an accurate summary of what I'm saying now. Again, you're assuming that a scientific consensus contains one proposition rather than being, if I can put it this way, a coherence-network of different interlinked propositions.

"So your brilliant takedown of my position is that if I don't believe something is coherent then I don't believe something is coherent. Great insight Patrick."

- Close. So, so close. But not quite. My point was that if you don't believe something is coherent then you believe it can't possibly be coherent. In other words it never occurs to you that maybe you, and not everyone else, have gotten it wrong.

"Ummm, but if you were trying to criticise me for falsely describing a mere "sample" as being "the whole world" wouldn't it make a tiny bit more sense if I had ever actually *used* the phrase "the whole world"? All I said was "at the population level"."

- Fair enough, so if you're not going to make a generalised 'autism is up everywhere' claim would you care to specify *which* population you're talking about then?

"The pivotal phrase isn't "ground". It is "no grounds other""

- Well if he accepts that there are other good grounds (stipulating 'good' here to avoid the equivocation problem) for accepting vaccine efficacy then his crusade to remove the historical belief becomes pointless.

https://www.facebook.com/...living.wisdom/posts/10151677624316925?comment_id=27392333&reply_comment_id=28896679&offset=0&total_comments=525[1/01/2014 8:37:42 PM]

"I only trouble myself with revealed preferences. So when you say "the vaccines are harmless because the doses are too low to have a negative impact" I ask "why don't you take an equivalent (for an adult) dose to prove that?" and when you fumble for excuses I conclude you are lying." - And when have I refused to take such a dose?

"I only respect people's calls to "compassion" if they themselves have faced (or it is clear they are willing to face) the costs of that "compassion". Otherwise it is just moral preening. I don't like moral preening." - And what do you take the relevant costs to be in this case?

"If I am wrong then my views are mildly dangerous for children and extremely dangerous for the medical profession"

- So kids dying or suffering long-term health effects from VPDs is 'mild' whereas the negligible loss of income from not administering vaccines is "extremely dangerous."

"if you are wrong then your views are extremely dangerous for children and extremely profitable for the medical profession (even more so with the latter than if you were right)."

- Just how much money do you think doctors make from vaccines? What proportion of a doctor's income do you think is directly or indirectly attributable to vaccines?

"You of course think that the odds of you being right are in your favour but all you can proffer up to support that is the opinions of those in the medical profession. And you can't for the life of you see how unbelievably foolish that is."

- Of those who practice a scientifically grounded body of knowledge, yes. And yes, I know, that's the point at which we disagree, but let's at least get it right what my basis is here.

"I believe every single used car salesman because heaven forbid I would want to be so "narcissistic" as to question someone who has been around cars all their life and makes a living from them." - I'd still say they're likely to know more about cars than me, yeah.

"Hopefully you would never be so "narcissistic" as to question people who make a living from clubbing baby seals or hitmen or human trafficking Patrick. Let alone those involved in areas whereby the people who make a living from them have also been to those anointed universities (and are therefore presumably intrinsically superior individuals) such as coal fired power stations owners or uranium miners or weapons manufacturers. FMD your arguments are wretched."

- Says the guy who apparently can't differentiate between the technical knowledge base of a given profession and our moral evaluation of that profession! That being a hitman is an awful thing to be does not mean that the hitman doesn't know how to kill people. Try harder. Even for you that was woeful.

"a) science is established as the one successful empirical framework " And how did you get to this conclusion Patrick?"

- From the, oh I dunno, last couple of hundred years or so in which we've split the atom, harnessed electricity, stopped people from dying of things that used to kill us routinely etc. (Or did we rename TB too?)

"I believe you say to yourself "well science works that is what makes it science. Medicine must be science because other people (rich, powerful or other) say so, ergo medicine must work too."" - Then you believe wrong. What aspect of the way medical research is conducted strikes you as deviating from the norms of scientific method?

"That is the crux of the issue Patrick. What is so "sciency" about vaccinations? See if you can provide an answer without resorting to the opinions of rich and/or powerful people and then I am happy to admit I am wrong. (You can of course use logically derived arguments of rich and powerful people)."

- I don't think you are happy to admit that actually, because any answer I can give in terms of what we know about the causes of disease will be met with 'no, we don't know that germs cause disease,' any answer I can give in terms of immunology you'll meet with 'no we know jack about the immune system' and any answer I can give in terms of epidemiology you'll meet with 'no you can't use statistics to prove anything.' In other words you've so gerrymandered what you consider to be properly scientific that you'll reject any answer anyone gives you to that question. And of course you'll now crow 'see, he can't answer my question!' It's neat, I'll give you that.

Like · 11 December 2013 at 19:55

Patrick Stokes "Patrick, you really need to work out your position here. Are you entitled to an opinion on 'the science' or not? If not, why are you offering it?"

- Where am I offering a position on the science itself? (Serious question. I've tried to keep myself to commenting on the entailments and meta-issues, and if I've drifted into stuff I'm not qualified to comment on I'd like to know).

"I've never claimed that. So why did you say so? [...] And I've certainly *never* even suggested there were no other grounds."

- Remembering we're using 'grounds' in the normative sense here i.e. 'good grounds,' then either you accept we have such grounds, in which case trying to dispel the historical point is moot as vaccine efficacy is established anyway, or you don't accept that we have such grounds. The latter interpretation is the only way I can make sense of why you think the historical belief matters. But if you'd like me to accept that what you're saying is that vaccines work but it really, really matters that people stop believing they work for the wrong reasons, fine.

"You're wrong about the lot, Patrick. The ABS uses the word correctly, and the same as I do. Their page does

not in any way suggest I'm using it wrongly. If you think it does you need to point out why. A census is a tally. If you want to find out how many students in your class have black hair you can count them. That's a census. The other way to do it is take a sample of, say 10, and calculate a proportion from that. "
- If you have an exhaustive set of data on one population that reports the ASD status and the vaccination status of every head in that data set, great. Until then, you do not have a census that allows you to say ASD diagnoses are correlated with vaccine status. What you have at best is in fact two separate sets of data on the same population, each showing a diachronic increase in a particular variable. Yes, that might allow you to say that both variables are on the rise within the same population, but that tells us nothing on its own. Like · 11 December 2013 at 19:56

Tristan Wells "But bathwater, baby etc."

Oh we've thrown out plenty of babies to protect the medical industry don't worry about that.

"- And in the absence of *any* demonstrated cases of vaccines causing autism (as of 2013) I don't really see what you're getting at here. "

http://gif-central.blogspot.com.au/.../nathan-fillion...

Well I suppose I had better explain it. The rationale for you (and others) thinking there is an "absence" (ie why you think you can a priori dismiss cases such as Hannah Poling) is based on the supposed lack of correlations at the population level Patrick.

"Thanks for going to some lengths to outline your epistemic stance, I appreciate the effort. We're obviously not going to come to any sort of agreement on this point, but I still think you're assuming there's some sort of standpoint outside the current knowledge-base from which we could then evaluate that base."

Is there any amount of criticism of the successes or failures of my stance that will lead to the conclusion that we should just accept as gospel the beliefs of people with a massive vested interest in maintaining that belief?

"But it's still pretty standard across the natural sciences. (Social science is another matter). "

What? No it isn't. Not even remotely. Some use logic (Austrian economics and mathematics). Some recreate the event for themselves (eg chemistry, electromagnetic/ Newtonian physics). Some use direct or indirect observations of exogenous events (eg geology or biology). Some observe nothing but use after the fact compiled statistics to form conclusions (epidemiology, econometrics). Some spend their time dividing by zero and/or detailing in great mathematical detail their hallucinatory drug experiences (macroeconomics and astrophysics). Some just copy and paste whatever the guy who recently got the biggest grant just wrote (climatology). Some try to directly observe stuff but never see anything and just make up fairy tales to explain their absence away (immunology/virology).

You might even be able to work out which of those approaches I give the most credence to a priori and which fields I give the most credit to ex posteriori and if you think the a priori is significantly different to the ex posteriori then your "disappointed" angle would make a lot of sense.

And please don't try and tell me that chemists occasionally use statistics etc. That only reinforces my initial point - the methods used are *not* all the same.

"- No, I'm just suggesting that they don't somehow step outside the structures they're criticising while they do. Again, there's no place outside to stand."

So are you saying that feminists are in a roundabout fashion actually supporting the "patriarchy"? And similarly, does that mean I am actually supporting vaccinations?

Again, you clarify by rendering your point meaningless.

"- So, you agree that Movember is racist and sexist (and jeez, even I'm not sure I fully agree with that, and I'm an inner-city latte-sipping dolphin-hugging pinko) but not with the reasoning in that article?"

The conclusion was that she didn't like Movember. The reasoning was that it is sexist and racist.

"- And you come into a lot more contact with aluminium through other sources than you do via vaccines, so why aren't we all 'vaccine damaged' then, if we're going to indulge in this sort of speculation?

So if the other methods for coming into contact with aluminium (ie not injected) affect us in the same degree/manner why do they need to add it to vaccines to make them "work"? Presumably babies would already have it in their system right?

It never ceases to amaze me that vaccine defenders can't accept that there is a difference between injecting something and ingesting it.

But then why do we inject most vaccines Patrick? Why?

"- You were saying that if symptoms come on at different times then (by what you took my reasoning to be) we could never say they were caused by the same disease. But just because an insidious start to a disease means it's hard to pinpoint where it began doesn't entail that we can never diagnose a cluster of symptoms

as part of a single disease."

Let me rewrite that so you have some hope of understanding what I was trying to say: But just because an insidious start to a vaccine reaction means it's hard to pinpoint where it began doesn't entail that we can never diagnose a cluster of symptoms as part of a reaction to the same vaccine.

"- How does reeling off a list of names conform to my own rules of argument?"

One of the standard rules for using an appeal to authority as a "valid" inductive argument is that the authority has to have a name. Plus you have previously made the point (and then ran away from it as fast as possible) that the authority has to be someone willing to take responsibility for the truth of their claims.

"- I don't see why it's trivial to say that a consensus is a more complex thing than simple assent to a single proposition. "

Oh I'm sorry. What term would you prefer? Nebulous? Meaningless? Unfalsifiable mush?

"a coherence-network of different interlinked propositions"

That made me wince.

And I'm a bureaucrat.

"My point was that if you don't believe something is coherent then you believe it can't possibly be coherent."

Then why did you mock me when I pointed out that I didn't understand (but still believed in (obviously)) magnetism (ie force exerted at a distance)?

"- Fair enough, so if you're not going to make a generalised 'autism is up everywhere' claim would you care to specify *which* population you're talking about then? "

I said autism diagnoses. And I said Denmark. But I could have said practically any country, city, town, suburb in the Western hemisphere over the past few decades.

Where are you going with this? Like · 13 December 2013 at 09:02 · Edited

Tristan Wells "- Well if he accepts that there are other good grounds (stipulating 'good' here to avoid the equivocation problem) for accepting vaccine efficacy then his crusade to remove the historical belief becomes pointless. "

Sorry Patrick. You can't just tag on caveats ("good") now to obscure the fact you got it badly wrong.

"- And when have I refused to take such a dose?"

I wasn't sure whether you had or hadn't been asked this. Regardless, if you want to win this debate (and be the world's greatest hero to boot) you only need to set it up and take them. Please don't let me hold you back. I can only assume that pharma companies – confident as they are in the safety of their products – will be thrilled to hear you will put this question to rest once and for all and will happily provide the necessary material. Just as long as you get the concoctions verified by someone from our side then we are good to go.

"- And what do you take the relevant costs to be in this case?"

The relevant costs are incurred by those people willing to suffer the most extraordinary public abuse (such as Meryl Dorey) for saying something that is deeply unpopular. Others have suffered worse (there have been instances of children being taken away from refuser parents in many countries).

I can't see too many costs of being vocal on the other side. For example, third rate thinkers and assorted miscreants can easily get their name in lights for no reason other than because they joined the bandwagon.

Indeed, I would say (although to be fair it is 'costless' for me to do so) that even if I thought Meryl and Greg were completely wrong on the science I would still think they are the superior beings compared to the miscreants who carry on at various webpages and in the journalistic profession.

Having witnessed the sorts of people who make up the other side I honestly doubt there is a single one among them with the courage and principles to continue to fight for vaccines if they had to wear any sort of public criticism for it.

Like · 13 December 2013 at 09:10 · Edited

Tristan Wells "- So kids dying or suffering long-term health effects from VPDs is 'mild'"

Ummm, that is the entire point of Greg's graphs. You know? The ones you think are "irrelevant". The number of kids who actually died from so-called VPDs was in most cases very low before their vaccines were widespread. And if the number of long-term health effects are what you are primarily concerned about then you need to do a much better job of explaining why it is that we have ten times the rate of disability amongst children today (according to US census data) than we did before childhood vaccines were common.

Of course, given that you are a skeptic and therefore consistency is not one of your fortes you will probably complain and say "well just one death is a tragedy". And I will point out that you guys hate it when we say the same about vaccine injuries.

"- Just how much money do you think doctors make from vaccines? What proportion of a doctor's income do you think is directly or indirectly attributable to vaccines?"

I reckon that for, say, a paediatrician (including the cost of the consultations) it wouldn't be insignificant. But it is a moot point. McDonalds makes only a tiny percentage of their income on their apple pies but if it turned out that their apple pies killed or maimed 1 per cent of those who ate them (or more specifically the populous believed they did) then the market capitalisation of McDonalds would drop to a pittance overnight.

"- I'd still say they're likely to know more about cars than me, yeah."

There's a point there somewhere.

"- Says the guy who apparently can't differentiate between the technical knowledge base of a given profession and our moral evaluation of that profession! That being a hitman is an awful thing to be does not mean that the hitman doesn't know how to kill people. Try harder. Even for you that was woeful."

No it was fine. Your attempt to obfuscate the issue was admirable though. But just to be clear: You said we should all trust people who make a living from X when they defend X. I said that was abject lunacy. The "moral" vs "technical" has nothing to do with it.

"- From the, oh I dunno, last couple of hundred years or so in which we've split the atom, harnessed electricity, stopped people from dying of things that used to kill us routinely etc. (Or did we rename TB too?)"

Yes we did Patrick. We call it lung cancer. That is why in the past 100 years TB has fallen precipitously and lung cancer rates have risen in the Western world (I think they stabilised around the 70s in Australia but obviously it is different in different countries). It is also why if you look around the world there is a) almost zero correlation between rates of smoking in the population (a not Patrick-census census if you like) and rates of lung cancer; and b) countries with high rates of lung cancer tend to have low rates of TB and vice versa. (In case you are wondering I am using statistics the way Austrian economists do ie to illustrate a point rather than demonstrate it).

If you read about GNM the idea that TB is simply a phase of lung cancer should be one of the first things you come across. I thoroughly recommend it by the way. But then I am intellectually curious and hence, couldn't possibly be a philosophy lecturer.

At any rate I never claimed that great things haven't occurred in the past whatever years. I said we reverse engineer the epistemology behind those things that work to say "well that worked so it must have followed some fancy method". Some fields which have been consistently demonstrably useless (climatology for example) by virtue of the fact that they are politically favoured then get brought into the credibility generated by our ability to generate nuclear power or make ipads. Their methods aren't even remotely related and one doesn't work ever whereas the others have high success rates. But because the governments/rich and powerful people call them all "scientists" apparently how closely aligned the predictions of climatology are to reality don't matter. We must accept it otherwise we are "anti-science denialists".

What I find most perturbing though Patrick is that you seemingly have never given this any thought.

"- Then you believe wrong. What aspect of the way medical research is conducted strikes you as deviating from the norms of scientific method?"

See my points about different scientific "methods" above. It uses statistics. Not all statistics are rubbish, but that is your safest bet. And in the case of pharma-company generated statistics it is 'bet your house on it' safe.

"And of course you'll now crow 'see, he can't answer my question!' It's neat, I'll give you that."

Maybe Patrick, but more importantly it's logical. If I don't accept the very core premises of the beliefs then how could I possibly be persuaded of your conclusions if you just keep on arguing as though I did?

I don't *have* to make any arguments against the germ theory as the burden of proof is on you and the fact that no virologist (or anybody else) has ever witnessed a pathogenic virus doing what they are assumed to do is sufficient for me to say "I am not convinced". But I actually go much further in my determination to be helpful (well... maybe I get a *little* satisfaction from ripping people's prejudices to shreds). I lay out all the reasons why the germ theory cannot possibly be true. And even from there – as if my devastating takedown of the germ theory wasn't enough – I go further still and say "well what if the one in a googolplex chance of the germ theory being true eventuated – how would the immune system cope with that?" and then I lay out a further devastating critique of the idea of immune system memory as it pertains to pathogens.

"The latter interpretation is the only way I can make sense of why you think the historical belief matters."

Thank you for making us aware of the limits of your mind.

But let me help you out if I may. I would like a Ferrari because it is fast, corners well and is very pretty. Now,

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https://www.facebook.com/...living.wisdom/posts/10151677624316925?comment_id=27392333&reply_comment_id=28896679&offset=0&total_comments=525[1/01/2014 8:37:42 PM]
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if it turned out that the Ferrari I bought (in my dreams) was slower than a Toyota but nonetheless still cornered well and was pretty I would feel particularly aggrieved. So much so in fact that I would probably seek to return the car. Of course, there are some who would not change their minds on the Ferrari after being made aware of its slowness because they just loved its beauty and cornering that much.

It is called "thinking at the margin". You can look it up if you like.

You really have had quite an education here haven't you Patrick? And to think neither Greg nor I charge you a cent.

Like · 1 · 13 December 2013 at 05:54 · Edited

1234

Greg Beattie - "Where am I offering a position on the science itself? (Serious question. I've tried to keep myself to commenting on the entailments and meta-issues, and if I've drifted into stuff I'm not qualified to comment on I'd like to know)."

Well, I had an afternoon in so I collected a few, Patrick. For a start, you posted these *one minute* before asking the question:

1. "And you come into a lot more contact with aluminium through other sources than you do via vaccines, so why aren't we all 'vaccine damaged' then..." [What's your expertise on the various exposures and their comparative capacity for harm?]

2. "But just because an insidious start to a disease means it's hard to pinpoint where it began doesn't entail that we can never diagnose a cluster of symptoms as part of a single disease." [Patrick Stokes MD]

3. "...if you're not going to make a generalised 'autism is up everywhere' claim would you care to specify 'which* population you're talking about then?" [Why?? Are you going to give us your analysis?]

4. "What aspect of the way medical research is conducted strikes you as deviating from the norms of scientific method?" [Isn't 'scientific method' an area for experts? Are you an expert in research design, hypothesis testing... what?]

And three minutes earlier, this:

5. "And in the absence of *any* demonstrated cases of vaccines causing autism (as of 2013) I don't really see what you're getting at here." [Judge Patrick... disagreeing with other judges too]

These are all examples of you either offering a position on 'the science', or inviting Tristan to discuss 'the science' with you. But if we go back beyond four minutes we find these little gems:

6. "I do understand that this is your objection, yes. But to date you've got nothing serious to back such a claim up with,..." [Judge Patrick... but how would he know?]

7. "No causal link *has* been found despite years of searching." [Really? How would you know?]

8. "Well what *do* you blame then: the 'toxins' that are in such low doses they can't possibly be toxic, or the antigens that have been steadily decreasing in number?" [Patrick's judgement on a couple of things, again.]

9. "The fact that science obviously works doesn't strike you as a sufficient empirical basis?" [Whatever that one even means.]

10. "So we're back to blaming stuff that either isn't in there at all or isn't in there in doses sufficient to be toxic."

11. "But when they report observations utterly incompatible with the way autism symptoms present..." [Patrick Stokes MD]

12. "You'll note too that Tristan's point about symptoms developing and being noticed over time seriously weakens the claim that the vaccination was the causative event."

The above all occurred *after* I recently brought up this point about you not being consistent with your stance of "I don't discuss the science because I'm not entitled to" (only a handful of posts ago). But let's look back before that:

13. "No, I'd imagine Victorian-era asylums were full of people who would be diagnosed as severely autistic today." [Patrick Stokes MD]

14. "Because for the billionth bloody time you cannot dechallenge an immune response!" [Does this count for a billion?]

15. "All those beliefs have actually been subjected to far more empirical work than they prima facie deserve, given that two of the three don't propose anything like a physically plausible mechanism." [Judge Patrick MD]

16. "As I said before, if you're going to rely on the study you pointed to you cannot consistently rely on the 1995 Australian study as well, because the assumption that would allow you to rely on the former (i.e. rates should be roughly similar in the US and Australia) invalidates the latter (because the same methodology applied in the US gave much lower figures)." [Patrick the statistician]

17. "I genuinely do commend you for at least trying to claim why we might suspect a causal relationship, but if the data doesn't bear it out on close examination then at some point simply gesturing towards two upwards-trending lines is flogging a dead horse." [Patrick the statistician]

18. "If you don't have information on both variables for each person in the population you do not have a census." [Patrick the statistician.]

19. "Here you go: http://www.abs.gov.au/.../abs@.nsf/DetailsPage/3303.02011...
I believe ICD-10 codes Y60-Y84 in sheet 1.1 of the first Excel document are what you're looking for." [Patrick the statistician]

Obviously the longer I sit here the more I'll find. I'm amazed that you asked the question, and attached the adjective 'serious'.



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Like · 2 · 16 December 2013 at 17:37

Greg Beattie You may feel some of those examples above are not clear-cut, because you didn't actually use the words "I am Patrick and I am an expert in this area". But you must understand there is a difference between saying "The toxins are in too low a dose to cau... See More



No, you're not entitled to your opinion

theconversation.com

Every year, I try to do at least two things with my students at least once. First, I make a point of addressing them as "philosophers" – a bit cheesy, but hopefully it encourages active learning. Secondly...

Like · 16 December 2013 at 18:00

Greg Beattie - "Remembering we're using 'grounds' in the normative sense here i.e. 'good grounds,' then either you accept we have such grounds, in which case trying to dispel the historical point is moot as vaccine efficacy is established anyway, or you don't accept that we have such grounds."

Obfuscation.

榆山

You claimed that I said "there are no grounds other than the historical belief on which to accept vaccine efficacy". That was clearly wrong. Now you're saying you meant "good grounds". So, in other words, you think I said "there are no *good grounds* other than the historical belief on which to accept vaccine efficacy".

But Patrick, you must have been asleep if you picked that up. I would *never* have said that the historical belief is good grounds. It definitely is *not*. And that's what I've been saying the whole time. In fact, the entire point of those graphs (the ones you have a problem with) is to show people that the historical belief is definitely not good grounds. It's a lie, and a lie is never *good* grounds. Unfortunately it's 'sufficient' grounds for many though - people who don't yet know it's a lie.

Are there any good grounds for believing in vaccine efficacy? You know, I'm not aware of any. But what do you think? Oh that's right, you wouldn't know. There must be some because someone told you so. And someone else told them... and so on. And somewhere, someone actually has the evidence for it. Like · 16 December 2013 at 18:16

Greg Beattie - "If you have an exhaustive set of data on one population that reports the ASD status and the vaccination status of every head in that data set, great. Until then, you do not have a census that allows you to say ASD diagnoses are correlated with vaccine status."

We all know what you're talking about, Patrick. A dataset with both pieces of info on each unit (and no doubt they exist for some populations) would be more revealing than the crude method of comparing census data on ASD diagnoses and census data (or other) of vaccine coverage. But that doesn't mean that the latter doesn't exist, or isn't census data.

It's a simple lack of understanding of the terms but, as I said way back, I completely understand you finding it foreign because we traditionally use the word 'census' to refer to that thing each household has to fill out at 7pm on a certain date every few years. In statistics it describes what we're using when we attempt to measure the whole group rather than a sample. If it makes it easier for you, I'll admit I didn't really know what you meant when you first said "because the whole world is a sample, apparently". I still don't. But I responded by pointing out that it's not called a sample but a census.

Now don't, whatever you do, write back and say "No, you can't call it a census". It's a bloody census, Patrick! It's just not the kind of census you had in mind. That doesn't mean it automatically becomes a sample or something.

Like · 16 December 2013 at 22:22 · Edited

Tristan Wells "If you're going to be consistent"

Why on earth would Patrick want to do that Greg? Like · 17 December 2013 at 08:53

Greg Beattie - "Why on earth would Patrick want to do that Greg?"

Because someone might be watching. But you're probably right... why bother when you've blown it this much already? I have a feeling we'll get an explanation. We won't follow it. No one will. And that will undoubtedly be because we don't have the necessary expertise. I'm ready to be bowled over by that again. Like · 17 December 2013 at 23:37 · Edited

Patrick Stokes Ok, finally found some time to get back to this thread. Apologies for the delay.

"The rationale for you (and others) thinking there is an "absence" (ie why you think you can a priori dismiss cases such as Hannah Poling) is based on the supposed lack of correlations at the population level Patrick." - Once again, that lack of correlation doesn't rule out apodictically the possibility it could happen. But if you're going down that route we can't rule out anything that's not logically impossible. Hence if my newspaper keeps disappearing I can't blame the neighbours because I can't logically rule out aliens taking it.

"What? No it isn't. Not even remotely. Some use logic ... "

- So what? Leaving aside the pointless ad hom all you're saying is different forms of empirical enquiry use different investigative methods. (That's when you're not dragging in things that aren't empirical sciences at all e.g. mathematics). Nothing to do with the epistemic framework that defines scientific method.

"So are you saying that feminists are in a roundabout fashion actually supporting the "patriarchy"? And similarly, does that mean I am actually supporting vaccinations? Again, you clarify by rendering your point meaningless."

- No, they aren't, and you aren't. What I'm saying is that these criticisms aren't offered from some ahistorical, asocial 'view from nowhere,' because there isn't one.

"just because an insidious start to a vaccine reaction means it's hard to pinpoint where it began doesn't entail that we can never diagnose a cluster of symptoms as part of a reaction to the same vaccine."

- I didn't say you could never do it, but you're trying to say that temporal associations for diseases that are *always* insidious in onset, that occur in both the vaccinated and non-vaccinated, and that present at the same age at which kids get most of their vaccinations, are sufficient to show vaccines cause those diseases. So, good luck with that.

"One of the standard rules for using an appeal to authority as a "valid" inductive argument is that the authority has to have a name."

- No, it isn't. Though if you want to treat the name of a discipline as shorthand for the consensus view of individuals working within that discipline, fine.

"Plus you have previously made the point (and then ran away from it as fast as possible) that the authority has to be someone willing to take responsibility for the truth of their claims." - No, I've said if you're going to say things that aren't properly backed up by science, you better be prepared to accept the consequences of that.

"Oh I'm sorry. What term would you prefer? Nebulous? Meaningless? Unfalsifiable mush?" - Got an actual argument here? Didn't think so.

"That made me wince. And I'm a bureaucrat."

- If you can't cope with epistemological terms, maybe don't get into an argument about epistemology?

"Then why did you mock me when I pointed out that I didn't understand (but still believed in (obviously)) magnetism (ie force exerted at a distance)?"

- Look, this is the internet: you reference magnetism, you cop an ICP reference. I don't make the rules.

"I said autism diagnoses. And I said Denmark. But I could have said practically any country, city, town, suburb in the Western hemisphere over the past few decades." - So we're back to Madsen then. And around and around we go.

"Sorry Patrick. You can't just tag on caveats ("good") now to obscure the fact you got it badly wrong." - I didn't get it wrong, but nice try. If it's just about grounds in the non-normative sense, then what he's doing seems pretty trivial, but harmless ("You all believe something that is factually true but for the wrong

reasons!"). If it's grounds in the normative sense, then he's attacking the science, which he claims not to be doing.

"I wasn't sure whether you had or hadn't been asked this. Regardless, if you want to win this debate (and be the world's greatest hero to boot) you only need to set it up and take them."

- So how would that be 'winning the debate' exactly? If I don't immediately have some dreadful reaction, you're seriously going to say "Oh, I guess vaccines are safe and effective after all because this one relatively healthy adult taking the product in a way that differs from the way it's supposed to be taken didn't have an adverse reaction"? (And what would the 'all at once' thing achieve? It's like saying "If you think water is good for you, why don't you drink your yearly intake of water in one sitting?")

"The relevant costs are incurred by those people willing to suffer the most extraordinary public abuse (such as Meryl Dorey) for saying something that is deeply unpopular."

- And for 'unpopular' read 'unscientific and dangerous,' just for a start. That said, and for the record, I don't condone abusing anyone. (This thread is about as uncivil as I get, and I've been pretty Pollyanna by internet

debate standards).

"The number of kids who actually died from so-called VPDs was in most cases very low before their vaccines were widespread. And if the number of long-term health effects are what you are primarily concerned about then you need to do a much better job of explaining why it is that we have ten times the rate of disability amongst children today (according to US census data) than we did before childhood vaccines were common."

- Disabilities of the sort previously associated with VPDs? Are there a bunch of kids in iron lungs, postinfection deafness etc. out there? In any case, while there is of course a very real sense in which one death is too many – I believe that, and you do too – these are always matters of managing proportional risk. If you can demonstrate that vaccines cause more death and morbidity than they prevent, do so. Like · 20 December 2013 at 20:40

Patrick Stokes "I reckon that for, say, a paediatrician (including the cost of the consultations) it wouldn't be insignificant. But it is a moot point."

- Well no, it isn't, but it's Christmas so I'll let you off the hook on that one.

"McDonalds makes only a tiny percentage of their income on their apple pies but if it turned out that their apple pies killed or maimed 1 per cent of those who ate them (or more specifically the populous believed they did) then the market capitalisation of McDonalds would drop to a pittance overnight." - For that analogy to fit the situation, McDonalds would have to be the only viable available source of food, and the options would have to be going to McDonalds or starving to death.

"The "moral" vs "technical" has nothing to do with it. "

- Yes it does, that's the whole point! Your hitman example was a disaster: it only works if we assume that morally awful people are also incompetent at doing the awful thing. Whether medicine works has nothing to do with the characters of the people practicing it.

"I said we reverse engineer the epistemology behind those things that work to say "well that worked so it must have followed some fancy method"."

- Oh come off it - so we split the atom and then reverse-engineered particle physics from that did we?

"Yes we did Patrick. We call it lung cancer."

- Oh God. I really should have seen you'd do that. You really have no shame at all, do you? You will just keep reaching for bigger and bigger revisions to settled knowledge rather than – actually, look, forget it. If you want to indulge in epistemic hipsterism ("Germ theory's too mainstream, I was into GNM *before* it was cool") and insist that lung cancer is just renamed TB, acute flaccid paralysis is (always) renamed polio and emus are renamed dodos, fine. If you want to hold to some weird justificationist epistemology where everyone owes it to you to demonstrate why germ theory is true, and believe that you've single-handedly destroyed the entire basis of modern medicine (without putting any such claims up for peer review because, again, too mainstream), fine. And if you want to keep pontificating here because AVN followers will think you're some sort of intellectual giant schooling all those nasty know-it-all doctors, fine. Just don't threaten public health while you do so.

Like · 20 December 2013 at 20:41

Patrick Stokes To go through your examples of where you think I've illegitimately commented on the science, Greg:

- 1, 5, 6, 7, 8, 10, 11 and 15 are simply stating what's reported by scientists. Now, you point out that there is a difference between asserting 'x' and asserting "I'm told that x and I believe the person who told me that." But again, we are both entitled and rationally required to take what scientists tell us is the consensus position within science as valid. Does that mean it's infallibly true? Of course not. It just means that there's nothing else outside that consensus.

- 2, 12, 14, 16 and 17 are matters of simple logical entailment.

- 18 and 19 were the outcome of looking up the ABS' public website. (You recall it took me about 10 minutes to find the data you scoffed at even existing – and that's allowing for the vagaries of government website design). All I did was point out that it exists.

- 4: describing scientific method at that level of generality is something I'd hope any Year 10 could do.

- 3 was me asking Tristan to be more specific.

- 9 is a statement of the bleeding obvious.

So pretty much the only possible 'gotcha' in there is 13, which I accept would require empirical data that I don't have in order to demonstrate it. Well played, sir.

"Of course you'll then be burdened with explaining to me why my views on, say, mortality data, shouldn't be taken seriously"

- You'll notice I haven't said at any point that you're wrong about the mortality data; I've argued over what the significance of that data could be if you are right about it. I'm not questioning your statistical prowess (though I'm aware others have), I'm questioning the relevance of the arguments you're pursuing. You often seem to run those two very different questions together, if you don't mind me saying so.

"It's best if you tell us precisely how your stance relates to *you*. Is your opinion on these things to be taken seriously? If so, why can't others' also be taken seriously? And if not, why are you offering it? And the examples above where you ask for data, or some other info of a technical nature... why are you asking? Don't tell me you're intending to form your own opinion."

- Such 'opinions' as I've offered have either been reporting accepted scientific fact – which, again, I'm entitled to rely upon – or are simply drawing out entailments of claims made by others. Take them as seriously or not as you like. Where I can't reasonably expect to be taken seriously would be if I tried telling scientists

they're wrong about their own area of expertise. We really are going around in circles here.

"But Patrick, you must have been asleep if you picked that up. I would *never* have said that the historical belief is good grounds. It definitely is *not*."

- I'm not saying you said the historical belief is a good ground. Obviously you don't think it is. What I'm saying is that the proposition "The historical belief is false" is practically irrelevant if we have other *good* grounds for accepting vaccine efficacy. Are we all clear on this now?

"Are there any good grounds for believing in vaccine efficacy? You know, I'm not aware of any. But what do you think? Oh that's right, you wouldn't know. There must be some because someone told you so. And someone else told them... and so on. And somewhere, someone actually has the evidence for it." - Correct, Greg. That's how distributed knowledge works in a society of high information complexity. We finally got there. Well done.

Like · 20 December 2013 at 20:42

Patrick Stokes It's unlikely I'll get back to this thread before early January. A happy and safe Christmas and New Year to you both.

Like · 20 December 2013 at 20:43

Greg Beattie - "No, they aren't, and you aren't. What I'm saying is that these criticisms aren't offered from some ahistorical, asocial 'view from nowhere,' because there isn't one."

None of our criticisms of vaccination are offered from such a view either, Patrick. So your point was...?

- "but you're trying to say that temporal associations... are sufficient to show vaccines cause those diseases."

No he's not, Patrick. He's saying that these associations are sufficient to call the practice into question. That means we (the consumers) require you (the promoter) to demonstrate that vaccines are *not* a cause. I find it unbelievable that a philosophy 'expert' should consistently fail to understand this simple point.

- "No, it isn't. Though if you want to treat the name of a discipline as shorthand for the consensus view of individuals working within that discipline, fine."

Again, you render your own argument pointless. Are you saying there is no one? Or just that you don't know any?

- "No, I've said if you're going to say things that aren't properly backed up by science, you better be prepared to accept the consequences of that."

Two problems with that, Patrick. 1. We don't believe we are saying things that aren't backed by science, and 2. We are prepared to take the consequences of our views. I'm not sure what you mean by 'consequences' but we are obviously prepared to stand up for what we believe. In fact, we openly invite discussion and scrutiny of our views. Or maybe you mean something different by 'consequences'?

- "Got an actual argument here? Didn't think so."

Yes, he did. But you missed it.

- "If you can't cope with epistemological terms, maybe don't get into an argument about epistemology?"

Don't flatter yourself. Quite obviously it wasn't the terms themselves that made Tristan wince. It was your nauseating attempt to string them together (once again) into something which rendered even your own argument formless.

Like · 20 December 2013 at 23:55

Greg Beattie - "If it's just about grounds in the non-normative sense, then what he's doing seems pretty trivial, but harmless ("You all believe something that is factually true but for the wrong reasons!"). If it's grounds in the normative sense, then he's attacking the science, which he claims not to be doing."

You're either deliberately obfuscating or you don't have the capacity to follow. I suspect the former. One more time...

Most people believe in Santa Claus at some stage in their life. For some, the belief may go on longer than it does for others. But inevitably we all come to learn that it was all just a story. Now, when we believed it, we believed that Santa Claus was the reason we received gifts at Christmas. After we learnt the truth we found the gifts came from other people.

With vaccination it's a bit different. We all start off believing it brought about the big decline in deaths. The difference is most of us never get that fairy tale corrected. We go on believing it, and, in fact, it continues to get reinforced in our adulthood (thanks to those angels you think we should all defer to). Now hear this - the really important thing about this belief - it's all you need to convince you that vaccines are good. In fact, you can't really come to any other conclusion. You're straight-jacketed.

What happens if we take away that straight-jacket?

Are there 'good grounds' for believing in it? As a community, we've never had to answer that question before. We've always had the straight-jacket on. When it was first explained to us that Santa Claus wasn't true we had to arrive at another view if we wanted to work out whether the goods would still arrive at Christmas. With vaccination we have to decide whether there is sufficient reason to believe in 'the goods'. Are we

satisfied that they will still be there?

This is where the promoters come in. It's their job to convince us of 'the goods'. They've relied on the old story for far too long, but in its absence I don't think they relish the challenge of having to demonstrate 'the goods' to a sceptical crowd. For a start, I don't think 'the science' is really there, but that's a question for the community to decide. Secondly, and this is a big one, the memory of the bullshit story will linger. Decent people will question why they should believe the same crowd that systematically lied to them... and took so long to owe up to it.

So, as you can see, I'm not "attacking the science" as you say. I'm asking the promoters of vaccines to show cause why we should believe in their goods, in the absence of the demonstrably false story they've used to promote them. I'm also wondering why we should believe them at all now, given their documented problems with 'truth in advertising'.

The problem with you is you want to just make a declaration that vaccines are good, regardless. And that's because these same people have 'said' so. That's philosophy, hey? Like · 21 December 2013 at 09:31 · Edited

Greg Beattie - "And what would the 'all at once' thing achieve? It's like saying "If you think water is good for you, why don't you drink your yearly intake of water in one sitting?""

No. Nothing to do with a year. It's a body mass thing, Patrick. If you want to convince others that a 3kg baby can tolerate something they suspect is toxic, and they ask you to demonstrate your faith by taking a weightadjusted dose yourself, and you refuse, or or come up with "why should I?", you won't inspire much confidence. It's as simple as that.

- "And for 'unpopular' read 'unscientific and dangerous,' just for a start. That said, and for the record, I don't condone abusing anyone. (This thread is about as uncivil as I get, and I've been pretty Pollyanna by internet debate standards)."

No, 'unpopular' does not imply 'unscientific and dangerous'. That was *your* expert assessment, again. The second part is something for which I respect you.

- "Disabilities of the sort previously associated with VPDs? Are there a bunch of kids in iron lungs, postinfection deafness etc. out there? In any case, while there is of course a very real sense in which one death is too many – I believe that, and you do too – these are always matters of managing proportional risk. If you can demonstrate that vaccines cause more death and morbidity than they prevent, do so."

With the first part of this you demonstrate first (and again) that you do indeed offer your own assessment of 'the science', and second that you know very little about it. For a start, the iron lung was superseded long ago. But..."If you can demonstrate that vaccines prevent more death and morbidity than they cause, do so." Like · 21 December 2013 at 00:36

Greg Beattie - "For that analogy to fit the situation, McDonalds would have to be the only viable available source of food, and the options would have to be going to McDonalds or starving to death."

How do you work that out? The medical industry offer *their* vaccines as one of their products. McDonalds offers *their* apple pies. With vaccines, the options are take them or leave them. With McDonalds the options are take them or leave them. Unless you're suggesting that avoiding vaccines means certain death.

- "Oh come off it - so we split the atom and then reverse-engineered particle physics from that did we?"

You didn't really think that was what Tristan meant, did you? More deliberate obfuscation?

- "Oh God. I really should have seen you'd do that. You really have no shame at all, do you? You will just keep reaching for bigger and bigger revisions to settled knowledge rather than – actually, look, forget it...."

All this was just a "Oh no, you're not going out in that purple sweater again! Don't walk with me. It's sooo uncool" rant. You have nothing substantial to say, just that you recognise his views are really not popular *at all*. Brilliant piece of thinking, Patrick.

Like · 21 December 2013 at 00:52

Greg Beattie - "But again, we are both entitled and rationally required to take what scientists tell us is the consensus position within science as valid."

And I guess that applies to the consensus tale of how vaccines slew the terrible killers of our past. Only a fool would take such entitlement after learning the truth. And rationally required? You haven't got much of a hand with either.

- "2, 12, 14, 16 and 17 are matters of simple logical entailment."

No they aren't.

2. May be a logical entailment but why are you even speculating? The premise is simply not your business.

12. Doesn't the process of diagnosis require expertise? How would you know which phenomena weaken which conclusions?

14. What would you know about challenging an 'immune response', let alone dechallenging it? From where I sit you don't even have a great handle on critical thinking, and you're a philosopher. But that's just my view. What's your expertise in physiology?

16. Research methodology is a specialist field. In fact, each discipline applies further specialisation. What's your expertise in the area?

17. You're drawing a conclusion about whether or not there is data that supports a causal relationship between two things. Isn't this is an area for expertise? What's yours?

- "18 and 19 were the outcome of looking up the ABS' public website. (You recall it took me about 10 minutes to find the data you scoffed at even existing – and that's allowing for the vagaries of government website design). All I did was point out that it exists."

I didn't scoff at it. That's your imagination. But that's not the point, Patrick. Why are you even involving yourself in it? Why make the statement to start with that the studies' conclusions somehow conflict with the data? Why didn't you just say "I'm told by X that those studies conflict with the data, and I believe X"? If you really do believe that your opinions shouldn't be taken seriously why are you offering them?

- "4: describing scientific method at that level of generality is something I'd hope any Year 10 could do."

But you asked to discuss the ways in which scientific method in medical research differs from that in other areas. And you want us to believe you aren't capable of forming worthwhile opinions on things that you aren't expert in. Those two are inconsistent. Unless you care to answer what I asked - "Are you an expert in research design, hypothesis testing... what?"

- "3 was me asking Tristan to be more specific."

I know. Why? Are you wanting to dabble in something you've told others they shouldn't go near?

- "9 is a statement of the bleeding obvious."

No it wasn't. It was a silly statement. 'Science works' doesn't really mean anything, Patrick. Walking works too. That doesn't mean much either. You made the statement in an attempt to establish the primacy of your argument, by aligning it with 'science'. It didn't work. Just because we make iPads doesn't mean all pursuits of a technical nature are 'backed by science'. It's a meaningless premise. But you're right... this *is* your area of expertise, hey? So my including it in the list of inconsistencies was wrong.

- "You'll notice I haven't said at any point that you're wrong about the mortality data;"

That's true. So which areas have I written about that you think I shouldn't have? Or are you happy that I haven't crossed any lines, in your opinion?

- "Such 'opinions' as I've offered have either been reporting accepted scientific fact – which, again, I'm entitled to rely upon – or are simply drawing out entailments of claims made by others. Take them as seriously or not as you like. "

Again, you're not really saying anything. A fact is simply something expressed as if 'the truth'. And 'accepted' just means someone or some group believes it. Neither of those get you off the hook. Even if you gave us the proportion of believers, and it was substantial, that still wouldn't change the fact that you're presenting it as your own view. And doing so is completely inconsistent with your article.

- "Correct, Greg. That's how distributed knowledge works in a society of high information complexity. We finally got there. Well done."

Again, where have I commented on something that I don't have the capacity to understand. Please be specific. And point out why 'distributed knowledge' is needed for it, and just how the distribution serves us. Like · 21 December 2013 at 01:49

Greg Beattie - "A happy and safe Christmas and New Year to you both."

And all the best from me too. Again, I respect you for this. I believe it trumps all differences of opinion.

I must admit I feel a bit uncharitable having a go at you from the 'philosopher' angle, but I want to make the point that your argument cuts both ways. Expertise is not always a badge. Sometimes it's a dog tag. That aside, I have no doubt you know a lot more about philosophy than I do. Like · 21 December 2013 at 02:01

Tristan Wells "I can't blame the neighbours because I can't logically rule out aliens taking it. "

12th

There's a point there somewhere. I told you, and I explained why, you cannot draw any conclusions – inductively or deductively, tenuous or definitive – when you fail to reject the null hypothesis. Statistics don't work that way. And, again, in order to be consistent you really should stop making such points on an area where you are not an expert – and by that I mean have absolutely no idea.

"Nothing to do with the epistemic framework that defines scientific method."

Aaah I see, they all use different methods but they are all exactly the same because something something

peer-review!

"- No, they aren't, and you aren't. What I'm saying is that these criticisms aren't offered from some ahistorical, asocial 'view from nowhere,' because there isn't one. "

So my assertion was correct. Your clarification rendered your point meaningless. Well actually not entirely meaningless. As I pointed out before, inasmuch as it has any meaning, it simply shows that it is idiotic to blindly follow the authorities.

"- I didn't say you could never do it, but you're trying to say that temporal associations for diseases that are *always* insidious in onset, that occur in both the vaccinated and non-vaccinated, and that present at the same age at which kids get most of their vaccinations, are sufficient to show vaccines cause those diseases. So, good luck with that."

And doctors attempt to show that temporal associations for diseases that are insidious in onset, that occur in people with or without a germ are sufficient to show that germs cause diseases. We could go on and on.

And I don't think simple temporal associations are sufficient. Challenge, dechallenge, rechallenge is proof beyond reasonable doubt though.

"- No, it isn't. "

Yes. It is. They also have to be sans a vested interest too by the way. And there has to be an actual consensus and it should only ever be used when there is no actual evidence to swing it one way or another. And there can't be any controversy over whether they are experts. But you ignore every other principle of argument so why should this be any different?

"Though if you want to treat the name of a discipline as shorthand for the consensus view of individuals working within that discipline, fine."

But there is no consensus of individuals Patrick. You said so yourself that no individual has any thought they all just collectively hold hands with each other and voila! Whatever Patrick believes is always the consensus view on everything for some or other reason.

"- No, I've said if you're going to say things that aren't properly backed up by science, you better be prepared to accept the consequences of that."

Because I might be punished by the all vengeful god of science?

My kids are ridiculously healthy. No antibiotics, no doctor visits and no allergies in their combined 14 years. So those are my consequences. I really don't mind accepting those.

"- Got an actual argument here? Didn't think so."

My argument was that your statement was meaningless.

"- If you can't cope with epistemological terms, maybe don't get into an argument about epistemology?"

Or maybe I just like people to say things that have meaning.

"- Look, this is the internet: you reference magnetism, you cop an ICP reference. I don't make the rules."

So you admit then that your subsequent criticism of me was bullshit then?

"- So we're back to Madsen then. And around and around we go."

This may come as a shock to you but the country of Denmark doesn't revolve around the Madsen paper. Nor indeed do its autism statistics. But this is obviously one of those things you don't feel you can obfuscate out of so you just play dumb.

"If it's just about grounds in the non-normative sense, then what he's doing seems pretty trivial, but harmless ("You all believe something that is factually true but for the wrong reasons!"). If it's grounds in the normative sense, then he's attacking the science, which he claims not to be doing."

You don't understand the idea of thinking at the margin.

Add it to the list I guess.

"- So how would that be 'winning the debate' exactly? If I don't immediately have some dreadful reaction, you're seriously going to say "Oh, I guess vaccines are safe and effective after all because this one relatively healthy adult taking the product in a way that differs from the way it's supposed to be taken didn't have an adverse reaction"?"

It wouldn't make me feel any different about their efficacy but I would immediately admit their safety was a virtual non-issue.

" (And what would the 'all at once' thing achieve? It's like saying "If you think water is good for you, why don't you drink your yearly intake of water in one sitting?")"

No. It's like saying that babies are smaller and more vulnerable than adults. But as an academic you may not have ever noticed this.

"- And for 'unpopular' read 'unscientific and dangerous,"

I'm pretty sure the German translation of that was the motto for the Stasi.

"That said, and for the record, I don't condone abusing anyone. (This thread is about as uncivil as I get, and I've been pretty Pollyanna by internet debate standards). "

And yet one of your greatest heroes on this issue is a guy who spends all his waking hours hurling abuse at people he doesn't agree with from the comfort of his computer desk.

Having said that, I do agree that you yourself don't do it but I don't see how you can justify hanging around the people you do.

"- Disabilities of the sort previously associated with VPDs?"

Yes.

"Are there a bunch of kids in iron lungs, post-infection deafness etc. out there?"

We don't use iron lungs (negative pressure ventilators) because they cost as much as a house and had a fatality rate of 90 per cent. We use *positive* pressure ventilators instead for things like transverse myelitis. There is no evidence that they are used significantly less today than iron lungs were previously. And rates of congenital deafness/blindness etc (ie what would have used to have been called rubella related) are still high and indeed higher than ever if the US census data is to be believed.

But of course you will just ignore these facts won't you? After all, the Scientists (peace be upon them) tell you not to worry about them. Well actually, that ain't really true is it? You don't *want* to worry about them and so you go to people with a massive vested interest in telling you what you want to hear and arbitrarily decree them to be "scientists" and everything they say as holy writ.

"If you can demonstrate that vaccines cause more death and morbidity than they prevent, do so."

Burden of proof Patrick. Burden of proof. You want me to take vaccines because people who make a living off them tell me to and indeed, astonishingly, you actually want me to believe them *because* they make a living from them. I don't think that is sufficient - or even helpful. You then have a go yourself with a bunch of points that you know nothing about and then when your inconsistency and incoherence is found out you just say "oh yes but that is the Science ™ so I am allowed to put it forward."

But if we are talking about whatever scientists say then why on earth is it wrong for Meryl or Greg to tell people that the flu vaccine is useless. That is what the science says right? Oh but wait, the Cochrane scientists aren't real scientists are they? Or they are, but only if they agree with the CDC and in turn they are only scientists if they agree with Patrick.

Like · 21 December 2013 at 13:09 · Edited



Tristan Wells "- For that analogy to fit the situation, McDonalds would have to be the only viable available source of food, and the options would have to be going to McDonalds or starving to death."

That's true Patrick. I can just imagine orthopedic surgeons facing down the angry mob with their colleagues behind them saying to the mob "listen guys, I know these doctors are responsible for the poisoning and maiming of your and my children, but you have to understand that I went to one of their parties at Med school and so I will fight to the death to save them from you."

You missed the point Patrick. Other than emergency medicine and orthopedic surgery, the entire credibility of practically all the things that doctors do (from cholesterol drugs to chemo) is predicated on their supposed success with vaccines. Take that away and nobody would trust their prognostications on anything. If orthopedic surgeons were desperate to sacrifice themselves for their colleagues it wouldn't make any difference. Contrary to what doctors would like us all to believe there isn't a shortage of such doctors because so few people are angelic enough to be willing to earn half a million dollars for 6 months work but because medical professionals do everything in their power to restrict the number of practitioners in order to keep their prices up – and for this they expect everybody to treat them as heroes. We could spend one 10th on medicine than we currently do now with 10 times better results by a) taking away patents; and b) taking away the licensing of doctors. And of course if we adopted GNM en masse it would be a 100*100 times improvement.

"-your hitman example was a disaster."

No Patrick, telling the world that believing in people *because* they make money off X when they tell you X is a good idea is a disaster of an argument. Me pointing out why it is a disaster with some illustrative examples is just me pointing it out with some examples.

But if you want another example more specific to the notion of "technical". Why don't you have a go at fracking? Do we trust those who make a living from it when they say it won't affect the water supply? Are they not the "experts"?

"- Oh come off it - so we split the atom and then reverse-engineered particle physics from that did we? "

No. We thought to ourselves that if we used computers to predict how a building will withstand an earthquake based on said physics principles then we could use the results of computers which already assumed SUVs will warm the world to "prove" that the world will warm up because of our SUVs.

And the reason I talked about mathematics is because I think far too much is made of empirics. It is completely useless in economics except to illustrate the consequence of policies but not to demonstrate them. And in medicine the statistics based approach leads us to the inexorable conclusion that there is no such thing as cause and effect - ie it is all just God playing dice.

GNM accepts as given that the brain can signal cells to grow (or necrotize), and from that point on it is essentially all just logic. Now, Hamer *has* demonstrated his assertions empirically and indeed he actually has a technically falsifiable theory - unlike the germ theory/vaccination paradigm which has absolutely zero going for it on any level. But his theory started with applying logic to generic observations and that God didn't play dice.

"- Oh God. I really should have seen you'd do that. You really have no shame at all, do you?"

Over 400 posts and only *now* you realise that I don't think too highly of popular beliefs?

"You will just keep reaching for bigger and bigger revisions to settled knowledge rather than – actually, look, forget it. If you want to indulge in epistemic hipsterism ("Germ theory's too mainstream, I was into GNM *before* it was cool"

I pointed out some facts. It means nothing to me whether those facts lead inexorably to an unpopular conclusion. I just go with whatever is the most coherent. If you think those facts are wrong or my logic invalid then you are welcome to explain my mistakes.

I mean I don't understand why you are so upset. You know I don't believe in germ theory so why would you think I accepted any of the corollaries of germ theory? So far you haven't be able to find any inconsistencies in my beliefs so why did you think this would be any different?

"acute flaccid paralysis is (always) renamed polio"

Well no. Polio was renamed a bunch of things many of which come under the umbrella of AFP.

"and emus are renamed dodos, fine"

And 40 year old asylum inmates are now classified as 10 year olds with autism.

Yeah you're right. That last one was *really* stupid.

"If you want to hold to some weird justificationist epistemology where everyone owes it to you to demonstrate why germ theory is true,"

Strangely yes if they want me to believe it. Am I supposed to just believe *everything* I am told now even if it doesn't come from the almighty Scientists?

"and believe that you've single-handedly destroyed the entire basis of modern medicine (without putting any such claims up for peer review because, again, too mainstream), fine"

Cheers.

"Just don't threaten public health while you do so."

You don't threaten public health. Like · 21 December 2013 at 13:33 · Edited

Tristan Wells And happy Christmas to both you and Greg. Like · 21 December 2013 at 12:54

 $\mbox{Tristan Wells}$ "- Oh come off it - so we split the atom and then reverse-engineered particle physics from that did we? "

But splitting the atom wasn't science anyway Patrick so why would you even bring it up? Like · 21 December 2013 at 15:32

Tristan Wells "My kids are ridiculously healthy. No antibiotics, no doctor visits and no allergies in their combined 14 years. So those are my consequences. I really don't mind accepting those."

I suppose I should be careful saying such things as there are people out there who actually believe that my not drugging my children on a regular basis makes me a monster. Like · 27 December 2013 at 14:35 · Edited

Tristan Wells Expert=imbecile.

http://www.news.com.au/.../story-fncynjr2-1226791671102

