



Science, Pseudoscience, and the Decline of Public Health

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Central argument

The conflict between evidence standards of mainstream science and pseudoscience, setting the stage for the decline and possible demise of public health in the United States.

- The U.S. Dept of Health and Human Services is challenging journals over the retraction of articles, along with exerting pressure to not publish vaccine studies.
- Flawed antivaccine work is being protected, while articles providing vaccine safety evidence are being blocked from publication.
- The stakes in these actions extend far beyond academic debate, to public trust and health outcomes.



Attempt to Prevent Removal: VAERS data are a signal, not proof

- The removed study used VAERS data to infer a relationship between vaccination and SIDS (Sudden Infant Death Syndrome). <https://thehill.com/policy/healthcare/5924878-kennedy-demands-answers-vaccine-study/> Vaccines and sudden infant death: An analysis of the VAERS database 1990–2019 and review of the medical literature - PMC
- In an editorial, the journal's editor had already explained the reasons behind the article's removal. <https://www.sciencedirect.com/science/article/pii/S2214750026000521?via%3Dihub>
- The main reason was the study's use of VAERS. VAERS is characterized in the document as unsuitable by itself for determining causation. VAERS is built on passive reporting.



Attempt to Promote Removal:

Aluminum adjuvants in context

The article challenges fear of the small amount of aluminum in vaccines.

- A large Danish cohort study is cited as documenting safety of aluminum-adsorbed childhood vaccines. [Aluminum-Adsorbed Vaccines and Chronic Diseases in Childhood: A Nationwide Cohort Study: Annals of Internal Medicine: Vol 178, No 10](#)
- The basis of concern does not appear to be even plausible. A child's exposure to aluminum in vaccines is much lower than exposure to everyday aluminum sources: planes, pans, cans, and earth's crust.
- The kidneys can efficiently remove aluminum from the bloodstream.

8%

Aluminum share of earth's crust making it the third most common element.



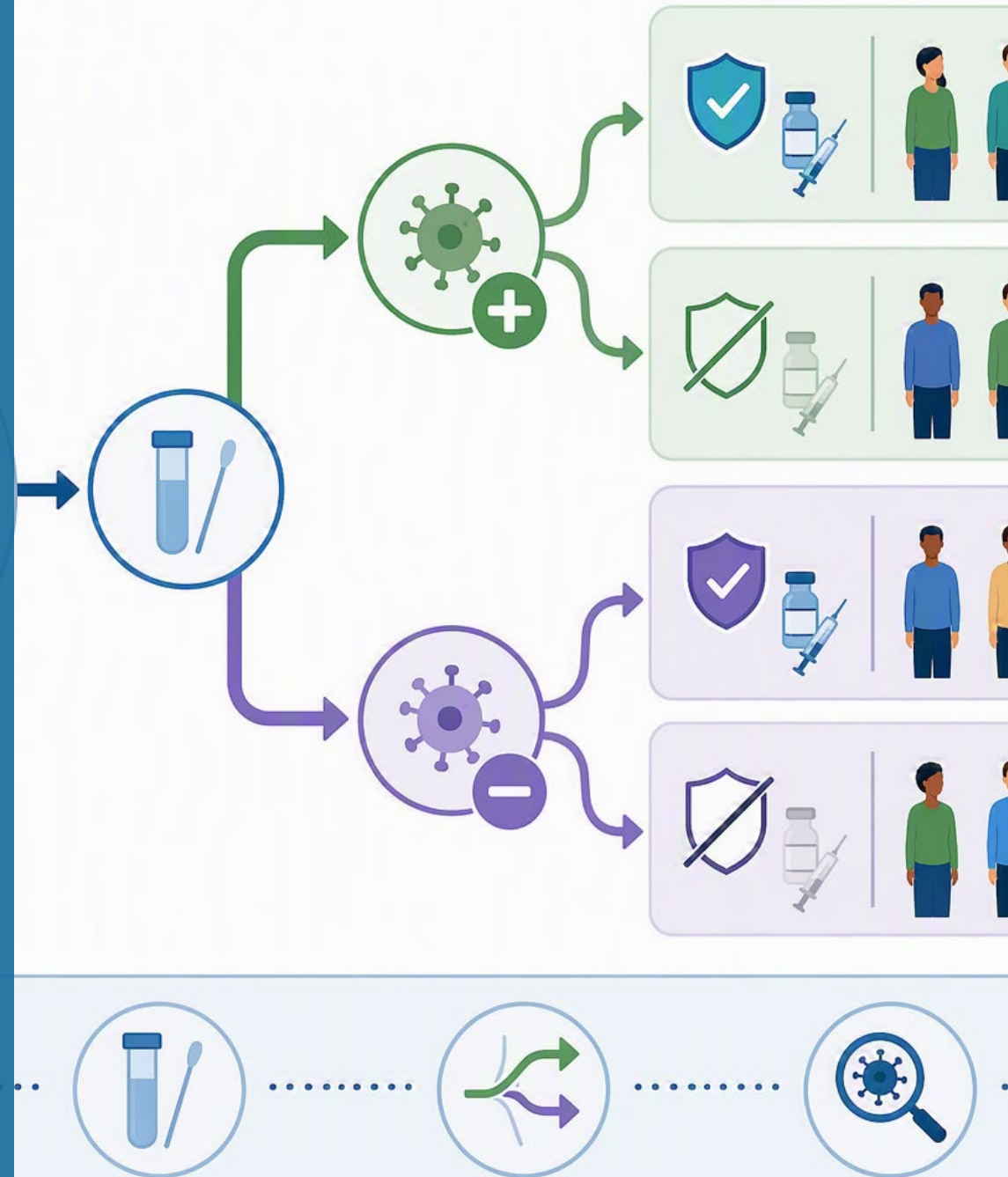
Blocked Publication: COVID-19 vaccine effectiveness study

A CDC MMWR study found reduced hospital and ED visits.

- The study was not published over was refused over cited methodological concerns. <https://apnews.com/article/cdc-covid19-vaccine-study-ea3a8e56d0dcdb7428f060b395b5ff23>
- The study used a test-negative design among people evaluated for COVID-like respiratory illness. This design has been used for decades to evaluate vaccines.
- Vaccination rates were compared among those who did and did not test positive for COVID-19.

~half

Reduction in hospitalizations and ED visits as stated in the document



Test-negative design: useful, not perfect

The design compares vaccination status among test-positive and test-negative patients.

- There are potential biases in both directions.
<https://www.nejm.org/doi/full/10.1056/nejme2113151>
- The design has been used for decades to monitor vaccine effectiveness.
- KFF is cited as reporting results can be highly consistent with randomized controlled trials. <https://www.kff.org/covid-19/estimating-effectiveness-of-influenza-and-covid-19-vaccines-the-test-negative-design/>
- Randomized controlled trials are often unethical.
<https://www.kff.org/covid-19/estimating-effectiveness-of-influenza-and-covid-19-vaccines-the-test-negative-design/>



Vaccine safety studies and Shingrix

FDA has pulled additional vaccine safety studies from publication.

<https://www.nytimes.com/2026/05/05/us/politics/fda-covid-vaccine-studies.html>

- One COVID-19 study evaluated over 4 million vaccine recipients and found rare known adverse events.
- Another study evaluated 7.5 million Medicare recipients and found only a severe allergic reaction risk, at an incidence of about 1 in a million.
- Ironically, A shingles vaccine safety study was also reportedly not published, and at the same time a study of Shingrix observed it helped prevent dementia.

<https://www.acpjournals.org/doi/10.7326/ANNALS-25-04689>



Why current vaccination matters

– Two paths to take

Vaccination to acute illness prevention and long-term sequelae.

- Many viruses can persist after infection, so prevention may matter decades later.
- Long COVID is a major ongoing burden. In those afflicted, yearly healthcare costs are increased by over 66%.
[https://www.ijidonline.com/article/S1201-9712\(26\)00489-3/fulltext](https://www.ijidonline.com/article/S1201-9712(26)00489-3/fulltext)
- The United States needs a comprehensive public health strategy, including vaccination and respiratory-virus prevention measures. <https://www.cdc.gov/respiratory-viruses/prevention/air-quality.html>

1 in 6

COVID-19 patients may develop long COVID, as stated in the document

<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2849452>



Institutional consequences

U.S. public health and scientific workforce losses.

- The U.S. is near losing measles elimination status.
[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(26\)00466-6/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(26)00466-6/fulltext)
- We are abandoning an elimination strategy and replacing it with a mitigation strategy —responding to outbreaks as they occur rather than preventing them from occurring.
- In addition, we are undergoing a scientific “brain drain” to Europe, Canada, and other countries.
<https://www.scientificamerican.com/article/u-s-scientists-are-being-lured-abroad-and-they-arent-looking-back/>



Key takeaways

Data quality matters: passive reports cannot prove causation alone.

Publication integrity matters: flawed and strong studies should face consistent standards and be made readily available to the public.

Public health consequences matter: Public confidence in vaccines, disease control, and scientific integrity are linked.