

An Open Letter to Dr. Jay Bhattacharya, Director of the National Institutes of Health

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Father of Steven Hooker

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Dr. Jay Bhattacharya, Director
National Institutes of Health
9000 Rockville Pike Bethesda, MD 20892

CC: The Honorable Robert F. Kennedy, Jr.,
Secretary of Health and Human Services

The ADSI Portfolio and the Systematic Exclusion of Vaccine-Causation Research in the Face of the Profound Autism Epidemic

Dear Dr. Bhattacharya,

I write to you as the father of Steven Hooker — a nonspeaking speller with profound autism, whose life was derailed following a vaccine injury — and as a scientist who has spent decades

watching the institutions entrusted with our children's health refuse to ask the one question that matters.

I listened carefully to the August 27, 2026 meeting of the Interagency Autism Coordinating Committee. I heard NIH Principal Deputy Director Dr. Matthew Memoli open the session by assuring the Committee that NIH is "working towards more investigation of vaccines as a cause of autism" and that the agency is "agnostic" about environmental triggers — that "this plan closes no door."

Those are reassuring words. They are also, unfortunately, contradicted by the facts on the ground.

The NIH Autism Data Science Initiative represents a \$50 million federal investment ostensibly aimed at uncovering the etiology of autism spectrum disorders. I have conducted a thorough, PI-by-PI assessment of the ADSI portfolio — examining each researcher's published work, public statements, study design constraints, and methodological frameworks. **Not a single ADSI principal investigator (PI) is studying vaccines or vaccine components.** Not one.

If Dr. Memoli's words at the IACC meeting are to be taken seriously, then I have a simple question: **which ADSI PI is currently funded to include aluminum adjuvants, vaccine schedule timing, or lot-specific vaccine data in their analysis? Name the PI and the specific variable.**

I suspect no answer will be forthcoming, because no such PI exists.

The Gatekeepers Control the Data

Three of the seven funded PIs — **Wendy Chung** (Boston Children's), **Daniel Geschwind** (UCLA), and **Jonathan Sebat** (UCSD) — have built their careers on explicit, public denial that vaccines could play any role in autism etiology. These are not dispassionate scientists keeping an open mind. These are ideological gatekeepers who have:

- Framed vaccine-autism research as "misinformation" and "fear" (Sebat)
- Declared that "no postnatal environmental exposure" can cause autism (Geschwind)
- Called the vaccine-autism hypothesis "fraudulent" while designing survey instruments that systematically exclude pharmaceutical exposure variables (Chung)

These three control the genetic analysis, the cohort design, and the causal inference architecture of the ADSI. They will not permit a vaccine signal to emerge from their data because their institutional survival depends on preventing it. Any signal will be pre-filtered as "noise," "artefact," or "confounding by indication." The \$50 million, in their hands, will produce

exactly one output: a glossy, multi-omic map that says we looked everywhere and found only genetics and a handful of politically safe environmental factors.

The environmental specialists are no better. Kristen Lyall (Drexel) has retreated to studying diet and endocrine-disrupting chemicals — public-health-approved targets that threaten no pharmaceutical interest. Douglas Walker (Emory) possesses untargeted LC-HRMS metabolomics technology powerful enough to detect vaccine components in biological samples, but his knowledgebase and filtering protocols systematically exclude pharmaceutical signals. Jason Stein (UNC) has the organoid platform that could demonstrate the biological impact of aluminum adjuvants on developing neural tissue — and instead he is testing six approved industrial toxicants we already know are harmful.

Only **Xiaobin Wang** (Johns Hopkins) has demonstrated the intellectual courage to cross the pharma-causation line, through her cord blood biomarker work on acetaminophen and neurodevelopment. And even her ADSI project, as currently scoped, does not include vaccine administration variables.

When Dr. Memoli tells the IACC that NIH is "working towards more investigation of vaccines as a cause of autism," what he means — if he means anything at all — is that NIH is making rhetorical concessions while the actual research dollars continue flowing to investigators who have staked their careers on ensuring the vaccine question is never answered.

The Researchers Who Actually Studied the Question — And Were Punished for It

The claim that "no door is closed" rings hollow when you examine what happened to the scientists who actually walked through those doors. The researchers who have investigated vaccine components and autism are not obscure cranks operating outside the scientific mainstream — they are accomplished investigators who asked the forbidden question and were systematically purged for it.

On the **aluminum adjuvant** side: **Dr. Christopher Shaw** at the University of British Columbia published multiple studies demonstrating aluminum adjuvant neurotoxicity and was subjected to years of coordinated attacks designed to discredit his work. **Dr. Christopher Exley**, one of the world's foremost authorities on aluminum biochemistry, documented elevated aluminum in the brain tissue of autistic individuals and was hounded out of his university position at Keele. **Dr. Romain Gherardi** and **Dr. Guillemette Crepeaux** at INSERM in France have published extensively on the myopathological and neurotoxic effects of aluminum adjuvants, including Crepeaux's work showing aluminum adjuvant particles travel from injection sites to the brain via monocyte-lineage cells — research that should have triggered an urgent NIH investigation and instead triggered an institutional cold shoulder. **Dr. Lluís Lujan** at the University of Zaragoza has documented the persistence of aluminum adjuvant granulomas and their systemic effects, work that the NIH-funded ADSI investigators have never cited, never engaged, and never attempted to replicate.

On the **epidemiology** side: **Dr. Anthony Mawson** published rigorous analyses of vaccinated versus unvaccinated children showing significant differences in neurodevelopmental outcomes — and was met with silence from the establishment. **Dr. Karl Jablonowski** and I at Children's Health Defense has conducted detailed analyses of vaccine schedule timing and autism risk using publicly available datasets that the ADSI PIs claim don't yield signals. **Dr. James Lyons-Weiler** has published peer-reviewed work on the biological plausibility of vaccine-autism links that the genetic determinists have never attempted to refute on the merits. **David Geier** and I have published epidemiological studies linking vaccine-derived mercury exposure to autism prevalence. I have also published epidemiological research examining the relationship between the childhood immunization schedule and neurodevelopmental outcomes — work that was persecuted not for methodological flaws but because the conclusions threatened the institutional consensus.

These researchers did not fail to meet the NIH's standards. They were **denied entry** to the NIH's ecosystem. The "door" Dr. Memoli claims is open was welded shut for them the moment they produced data pointing toward vaccines. Their grant applications are rejected not on scientific merit but because review panels stacked with the same gatekeepers now running the ADSI ensure that no funding reaches anyone who might produce the wrong answer. This is not a meritocracy. It is a protection racket for the pharmaceutical status quo, and the \$50 million ADSI portfolio is its latest — and most expensive — manifestation.

The Epidemic of Profound Autism Demands Better

We are not talking about mild social awkwardness or the broader autism phenotype. We are talking about children like Steven — children who cannot speak, who require round-the-clock care, who will never live independently. Children whose development was on track until a discrete, documented medical event.

The CDC's own website now acknowledges what families like mine have asserted for years: **the claim that vaccines do not cause autism is not an evidence-based claim.** The studies have not ruled out the possibility. The biologic mechanisms — aluminum adjuvant neurotoxicity, immune activation cascades, microglial priming, mitochondrial dysfunction triggered by multiple simultaneous antigenic challenges — have not been adequately investigated. And yet the ADSI, the NIH's flagship autism etiology initiative, has not a single PI with a track record of investigating any of these mechanisms.

This is not oversight. This is design.

The Personal Cost of Institutional Cowardice

I have watched my son struggle for decades. I have watched thousands of families — mothers and fathers who saw their children regress before their eyes following vaccination — be gaslit, dismissed, and vilified by the very institutions that should be investigating what happened to them.

The ADSI PIs are building the modern, high-tech equivalent of Bruno Bettelheim's "refrigerator mother" theory. Instead of blaming cold mothers, they now blame paternal age, maternal BMI, parental anxiety, and dietary choices. The locus of causation is kept safely within the family's private sphere while the pharmaceutical industry and its products remain untouched. Chung surveys parents about what they ate during pregnancy. Sebat points to "dad's old sperm" and *de novo* mutations. Stein builds causal diagrams linking childhood BMI to autism — as if the child's own metabolic state, rather than the environmental triggers that disrupt metabolism, is the root cause.

This is \$50 million of taxpayer-funded deflection. Our children deserve better. Steven deserves better.

What I Am Asking

Dr. Bhattacharya, your reputation as a scientist willing to challenge institutional orthodoxy — from the Great Barrington Declaration forward — is well known. But reputations are not enough. The ADSI portfolio, as currently constituted, is a closed loop designed to produce a predetermined answer. It is a validation engine, not a search for truth. And Dr. Memoli's opening reassurances at the IACC meeting do not survive five minutes of scrutiny against the actual roster of funded investigators and their actual research designs.

I am asking you to:

1. **Answer the question Dr. Memoli's comments invited:** which ADSI PI is currently funded to include aluminum adjuvants, vaccine schedule variables, or lot-specific vaccine data in their analysis? If the answer is none — and it is — then acknowledge that the portfolio, as structured, cannot and will not investigate vaccine-related causation, and explain what you intend to do about it.
2. **Remove the ideological gatekeepers** — Chung, Geschwind, and Sebat — from leadership positions in federally funded autism etiology research. Their public record demonstrates active hostility to the very hypothesis the CDC now acknowledges has not been ruled out.
3. **Expand the mandate** of Wang and Walker to explicitly include vaccine components, adjuvants, and immunization schedule variables in their mixture models and metabolomics platforms. The technology exists. The data exists. What has been missing is the institutional permission to look.

4. **Redirect Stein's organoid platform** to include aluminum adjuvants and live vaccinia virus in his gene-in-a-dish experiments. Testing six industrial toxicants we already know are harmful is a waste of a powerful technology.
5. **Establish independent oversight** — analysis of raw biological samples and cohort data by teams not institutionally or financially bound to the existing consensus. The geneticists who run the ADSI cannot be trusted to police themselves.

Dr. Memoli told the IACC that NIH is "agnostic" and that the plan "closes no door." Those are nice words. But the doors were closed long ago — by the PIs you are currently funding, through study designs that systematically exclude the variables that matter, and through a culture of institutional censorship that treats the vaccine-autism hypothesis not as an open scientific question but as a threat to be managed.

I am available to discuss this assessment in detail at your earliest convenience. I am not asking for a favor. I am asking for the federal government to do the job it claims to be doing: investigating what is making our children sick.

Respectfully,

A handwritten signature in blue ink, appearing to read "Dr. B. Hooker". The signature is fluid and cursive, with a large initial "B" and a stylized "H".

Brian Hooker, PhD

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