Is It Time to Fire Your Doctor? CDC VAERS Records More Deaths from COVID Vaccines Than Total of All Previous Vaccines Combined

Mark Taliano Global Research, September 07, 2023

The evidence is in. The COVID jabs kill. <u>Autopsies prove it</u>. (1)

CDC VAERS records more deaths from COVID jabs than the total of all previous vaccines combined (though the mRNA jabs are not vaccines), and only a very small percentage of adverse events are reported to VAERS. (2)

Doctors should not be blindly following 'Public Health' diktats, nor should they be recommending these kill jabs.

Governments, subservient to the World Health Organization (WHO), are largely indemnified because they announced a contrived Emergency and gave Emergency Use Authorization (EUA) for experimental drugs that otherwise would not be authorized.

Canada declared Emergency when there were 100 so-called "cases". That is not a pandemic — even with the WHO's new definition of pandemic which excludes mortality rates. Governments secured EUA because they falsely claimed therapeutics were not available. They are available and were available. Ivermectin is an example.

Some of the impacts of these jabs are <u>myocarditis</u>, <u>strokes</u>, <u>cardiac issues</u> (3). Countless other 'side-effects' also exist.

Big Pharma clinical experiments are corrupt. Pfizer has a criminal record. They lie. Pfizer's own 'Confidential Report', which they tried to keep secret, acknowledges 1,200 reports of jab-attributed deaths and tens of thousands of adverse events over a brief period of time.

The insert for the jabs at pharmacies are blank. None of the COVID tests are fit for purpose. None. Death Certificate coding was changed from a peer-reviewed format that worked well for about 17 years to a rigged format that falsely elevates COVID numbers (4). Hospitals receive more money for COVID diagnoses etc. In one if not most jurisdictions, people entering hospitals are labelled unvaccinated for the first two or three weeks even though most are vaccinated. The database is corrupt.

When governments introduced the Swine Flu jab, they pulled it off the market after about 50 jab-attributed deaths. The COVID jab-attributed deaths even by CDC statistics are in the tens of thousands (36,080) (5). Globally the numbers are genocidal. Actuaries put the jab-attributed excess deaths in the U.S. in the hundreds of thousands (See Ed Dowd and Josh Stirling) (6). Life Insurance claims for deaths of working age people are sky high, Censorship, the government and mass media hide all of this.

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Over the 'COVID" period of the military grade psychological operations imposed by governments, people have become indoctrinated to accept nonsense, and doctors who speak out against the established narrative have been persecuted for their honesty and professionalism. Masks are harmful (7), mandates do not work, jabs kill. Experts trotted out on tv and mainstream are pharma shills whether they realize it or not.

COVID propaganda was and is an unreasonable Fear campaign.

Find a doctor who does not push experimental mRNA injections on people. These jabs impair natural immunity(8) and create myriad problems, including turbo cancers. Nobody should take them.

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People should be following protocols that help neutralize the pathogens introduced by the mRNA experimental injections. Such protocols do exist. Check out Dr. McCullough.

Notes

- (1) Dr. Peter McCullough, "74% of COVID Autopsy Vaccine Autopsy Deaths Were Caused by the Vaccine." Daily Cloudt, (74% of COVID Vaccine Autopsy Deaths Were Caused By The Vaccine/Daily Clout) Accessed 06 September, 2023.
- (2) Electronic Support for Public Health–Vaccine Adverse Event Reporting System (ESP:VAERS) (Electronic Support for Public Health–Vaccine Adverse Event Reporting System (ESP:VAERS) (ahrq.gov)) Accessed 06 September, 2023.
- (3) One in Thirty-five MRNA Booster Recipients had Jab-Associated Myocardial Injury, marktaliano.net One in Thirty-five MRNA Booster Recipients Had Jab-Associated Myocardial Injury Global ResearchGlobal Research Centre for Research on Globalization see also:

John Leake, "Leading British Cardiologist, Dr. Aseem Malhotra, and Dr. Peter McCullough Independently Come to Same Conclusion." (Leading British Cardiologist, Dr. Aseem Malhotra, and Dr. Peter McCullough Independently Come to Same Conclusion/ By John Leake) Accessed 06 September, 2023

(4) Mark Taliano, "Invalid COVID data Drives Catastrophic Public Policies Globally." Global Research, 20 ctober, 2022. (Invalid Covid Data Drives Catastrophic Public Policies Globally – Global ResearchGlobal Research – Centre for Research on Globalization) Accessed 06 September, 2023.

Dr. Brian Hooker: Toxins that are injected, breathed and ingested are driving the autism epidemic aya das yase

RHODA WILSON JUNE 7, 2023

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Mercury is a neurotoxin. And it's in childhood vaccines. When Dr. Brian Hooker did the calculations for the Hepatitis B vaccine given to children, he found his son had received 80 times what is considered the safe limit for mercury. Dr. Hooker's son has autism. "I was mortified because of what I had done to my son unwittingly," he

Dr. Hooker joined Forum Conversation for an in-depth discussion about vaccines and autism during which he described his journey and research into the causes of autism which led to researching several childhood vaccines and other environmental factors. "There are toxic environmental factors, things that are injected, breathed, or ingested – that are driving this [autism] epidemic," he said.

The contract was provided from the contract of Dr. Hooker has served on the board of Children's Health Defense since 2018 and has been their Chief Scientific Officer for two years. He has a PhD in biochemical engineering from Washington State University and has been involved in bio research and biotechnology for 35 years.

In 1999 Dr. Hooker's son was diagnosed with autism. At the time his son was 18 months old. This triggered his quest to understand what caused autism; how can it be reversed, and what can be done about it.

He began by searching through research being published by the US Centres for Disease Control and Prevention ("CDC") but what the CDC was publishing left him feeling dissatisfied. So, he began researching other sources to find out "what indeed was the truth." AND EVENTAGE IT HE OF EXPERIENCES OF

Frederica de la compansión de la compans "I was astounded to find out that the vaccines that my son received contained mercury," Dr. Hooker told Report from Planet Earth. "Mercury is a neurotoxin." The prevailing thought in publicly available research, he said, showed mercury is responsible for neurodevelopmental disorders.

Dr. Hooker explained that there is continuing debate whether the 12.5mg contained in the childhood Hepatitis B vaccine is over the safe limit. "But I did the calculation, and when my son was receiving these mercury-laden vaccines, he was exceeding the EPA and the FDA limits by over 80 times," he said.

The state of the s "I was very, very concerned about the mercury-containing preservative thimerosal that was used in many, if not The material of the property of the same o most of the vaccines that my son received in the late 1990s." the first seems the kenestration of the

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When Dr. Hooker compared publicly available research with research that the CDC was publishing and statistics on children who had received vaccines containing mercury compared to those who hadn't, it became clear the CDC was "hiding something."

In 2000, a paper by Sallie Bernard confirmed the mercury-autism hypothesis. "I was mortified because of what I had done to my son unwittingly, but it really challenged me to look further into this issue," Dr. Hooker said. The Food and Drug Administration ("FDA") has never curbed the level of mercury in infant and childhood vaccines. Thimerosal has never been completely taken out of vaccines in the US.

"Some formulations of the flu shot, those in multidose vials, still contain 25 micrograms of mercury via thimerosal. The CDC claims that 93% of all flu shots made in 2021-2022 were thimerosal-free. However, they do not state whether that calculation is made per vaccine dose or per vaccine vial. Indeed, if this refers to individual vials, that would mean that up to 43% of all doses contain thimerosal," Dr. Hooker explained. SE CONTRACTO

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Dr. Hooker also found that several detergents are used in the manufacturing of vaccines. "For example, different forms of polysorbate molecules actually poke holes in the blood-brain barrier. And that allows neurotoxins like mercury, formaldehyde, and aluminium to enter the brain of vaccinated [people]."

Studies have shown that when mercury gets into people's brains in the form of thimerosal, its half-life is nearly infinite. "So, it's really locked into brain tissues," he said. "It appeared to me that these vaccines were the perfect mechanism to inject mercury directly into the brain."

Mercury can be cleared from the brain. Dr. Hooker has tried several things and what he found worked for his son was a process called <u>chelation</u> and some over-the-counter supplements, such as <u>glutathione</u> and <u>n-acetylcysteine</u>, proved helpful.

To treat the effects of autism, Dr. Hooker took a more holistic approach that considered autism from a systems perspective—that is termed biomedical—rather than neuropsychiatric. "There are a number of effective therapies; chiropractic, naturopathic, acupuncture," he said. "Underlying all of these approaches are nutrition and diet," such as eliminating gluten and casein from his son's diet to alleviate gastrointestinal symptoms.

It's been established that mercury toxicity will <u>promote the overgrowth of candida yeast</u> in the gut. "So, when you add mercury to the microbial community, it responds by killing off those bacteria that are susceptible to mercury and allowing those organisms that are not susceptible to mercury like yeast to flourish. Also, some nasty anaerobic bacteria like Clostridia are tolerant to mercury. The gut biome is basically set out of balance when exposed to mercury," he said.

"I've met individuals who have come up to me and said, my son or daughter never had a vaccine, yet they're diagnosed with autism. But there are numerous toxins that pregnant mothers, infants, and our children encounter in the environment.

"If you're close to coal-fired power plants, there's mercury in the air because coal contains mercury. If you are close to manufacturing facilities or freeways, that can also be a risk factor. And then there are countless additives in our food with potential risks. We are increasingly exposed to glyphosate, which is associated with genetically modified organisms. There are so many insults to our children. And I think one of the ramifications besides just neurodevelopmental disorders in general, is this increase in autism. My son didn't get vaccinated in a vacuum.

"Considering the toxic burden that these children were exposed to in the 1990s, and only increasing in this century, I think that the causes of autism are really multifaceted."

Autism has also been associated with <u>acetaminophen</u>, commonly known as the brand names <u>Tylenol, Paracetamol</u> or Panadol.

"The incidence of autism has increased dramatically since the early 1980s. It was estimated as anywhere between one in 10,000 to one in 2000, at the highest level. By the time my son was diagnosed in 1999, it was one in 250 ... The latest autism numbers show that the incidence in the United States is one in 36 children, and I believe that's one in 29 boys.

"There are toxic environmental factors, things that are injected, breathed, or ingested – that are driving this epidemic."

The CDC must have been aware of increases in autism for decades and have an idea of what is causing it. Rejecting the possibility that its environmental toxins, including toxins in vaccines, suggests at least, negligence. But as Dr. Hooker noted it's worse than negligence on CDC's part:

"I worked with a whistle-blower, Dr. William Thompson from the CDC. In his comment when I asked about autism causation, he said that the CDC was completely paralysed regarding the question of autism because it always led them back to vaccinations."

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A 2017 study by Dr. Anthony Mawson showed that autism rates were at least five times higher in the vaccinated group compared to the completely unvaccinated group.

Dr. Hooker did <u>a follow-on study</u> with Neil Miller which was published in 2020. "What we found was children who received any vaccine in the first year of life compared to those that didn't, were twice as likely to get a developmental disorder diagnosis. By the time they were eight years old, they were four and a half times as likely to get a diagnosis of asthma by the time they were eight years old. And then they were twice as likely to get recurrent ear infections," Dr. Hooker said.

A third study was done by Dr. James Lyons-Weiler and Dr. Paul Thomas. "They affirmed the results of Mawson and my results with Neil Miller." Unfortunately, this last paper was retracted by the journal for being biased toward finding an association between vaccines and conditions like autism.

"I want individuals who are genuinely questioning, who want to learn about this subject, to do a deep dive into the science on both sides ... I encourage individuals to look closely at the pronouncements that say that vaccines don't cause autism. Consider the veracity and viability of the studies on both sides. Look at the completeness of the science saying that there is a relationship between vaccines and autism. And once you do that, the important questions and answers will begin to appear."

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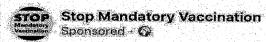
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Vaccines cause SIDS

Even the CDC admits that vaccines can cause serious brain injury and death. Is it any surprise that vaccines can cause sudden infant deaths too?

STEVE KIRSCH JUNE 17, 2023





Parents, not only can any vaccine given at any age kill your child, but if this unthinkable tragedy does occur, doctors will dismiss it as "Sudden Infant Death Syndrome" (SIDS). If you are on the fence about vaccinating, read this story and then join our Facebook group to talk with like-minded parents.



2-month old Dies 48 hours After 8 Vaccines: Owen's Mom Speaks Out

Coincidence? No single case can PROVE causality. It's the sheer number of these results and the statistical odds ratios that make the case, plus biological plausibility.

Executive summary

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In this article; I'll present just a few simple examples that demonstrate that vaccines cause SIDS. If vaccines don't cause SIDS, these data points are hard to explain away. And note that "they" never show you their data points measuring the same thing that show an opposite result!!

Is vaccination the only cause of SIDS? No. I don't claim that. I only claim if you delay or eliminate vaccination, SIDS rates go down.

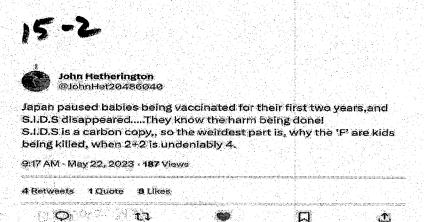
Also, given that vaccination overall produces kids who are less healthy, arguing whether vaccines cause SIDS is academic. There are many other reasons to avoid vaccination entirely.

Stop or delay vaccination -> SIDS decreases dramatically

If you stop vaccinating, or simply delay when vaccines are given to kids, the rate of SIDS goes down. See this article.

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CDC paper admits that vaccines can cause brain damage and death

See <u>this section in my previous Substack article</u> for the CDC study and **be sure to read all the highlighted sections** in <u>this excellent Substack article about the CDC paper</u>.

It basically says the vaccine led to brain inflammation which then led either to permanent brain injury or death. Get it?

Thus, we meet the "biological plausibility" condition in the Bradford Hill criteria with this paper.

But we didn't even need that. The fact that people are hard to kill and that injecting a foreign substance directly into your body (bypassing your normal protection mechanisms) could kill you isn't much of a stretch for most people.

SIDS is much more likely to happen right after vaccination

SIDS seems to happen more often after vaccination, especially if more vaccines are given such as in the example at the start of the article.

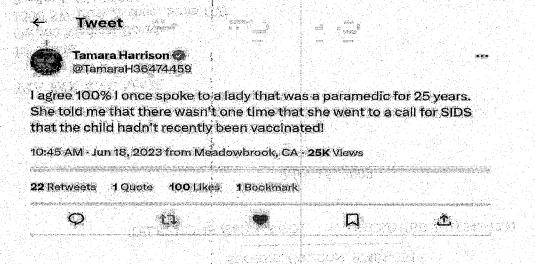
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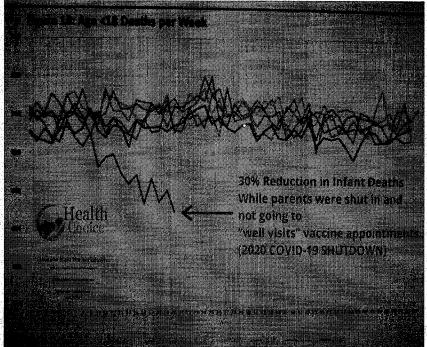
Walanda Casera

Here are some anecdotes which appear to be credible because they are consistent with the evidence I've collected and because the sources appear to be credible as well. You can choose to believe them or not. If you choose not to believe these stories and you have comparable credible evidence that negates these anecdotes, I'd like to see it.

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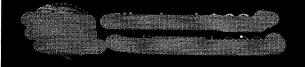




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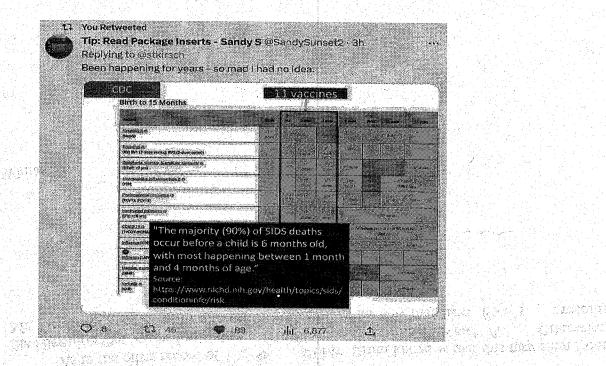
12 years as an ER nurse and every SIDS case had a well visit within 72 hours of their death. Every single one.

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My previous article about SIDS Read the comments in my previous article which talks about SIDS.

My survey results of parents of kids who died from SIDS confirm it was MUCH more likely to happen after a shot than before a shot

Here is my survey.

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Here are the results. It is most interesting to read the Notes section written by the parents. I have the contact information for all the parents who responded. There was one gamed entry which I deleted.

I wish someone would replicate this survey, but nobody seems to be interested in doing that. They all want to tell me that my survey is bad, but nobody wants to show the CORRECT results. The lack of interest in doing the "correct" survey tells you everything you need to know, doesn't it?

The results of my survey show the odds of getting SIDS a month before the shot vs. a month after a shot are 2:32 or 1:16.

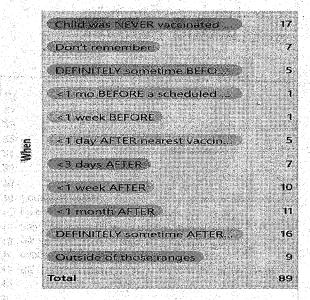
If the vaccines aren't elevating the risk of SIDS, how do you explain this HUGE discrepancy?

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Excellent Substack article from AMD on SIDS

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See this excellent Substack article written by AMD if you are still in doubt. This article convinced Dr. Pierre Kory he 图 等之 医色素的 经收益 化二氢化二

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Comprehensive Study: There Are ZERO Amish Kids Suffering From Cancer, Diabetes or Autism

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S.D. Wells July 8, 2023

The current population of Amish folks in America is quickly approaching 400,000, with the largest concentrations of 90,000 in Pennsylvania and 82,000 in Ohio. Amish have settled in as many as 32 US states, and have an average of 7 kids per family, so the population is growing rapidly. In a brand new, comprehensive study (as of June 2023), presented by Steve Kirsch to the Pennsylvania State Senate; it was calculated that for Amish children, who are strictly 100 percent not vaccinated (fully unvaccinated), typical chronic conditions barely exist, if any at all.

These chronic conditions, also called preventable diseases and disorders, that nearly many vaccinated children and swaths of Americans suffer from, include auto-immune disease, heart disease, diabetes, asthma, ADHD, arthritis, cancer, and of course... wait for it... autism (think ASD and Asperger's Syndrome).

Expert panelists testified how healthy Amish children are Compared to vaccinated American children

Maybe scaring people off vaccines is a good thing, for all those pro-jab-fanatics who think every natural health advocate is a "conspiracy theorist" who spreads disease and disorder by talking about dirty vaccines, vaccine injuries and vaccine-induced deaths. During testimony, expert health advocates shared WHY there's never been any reports published regarding the health of Amish children in general, saying "After decades of studying the Amish, there's no report because the report would be devastating to the parrative. It would show that the CDC has been harming the public for decades and saying nothing and burying all the data."

Dr. Peter McCullough, a top cardiologist in America, with mountains of peer-reviewed, published work, testified before the U.S. Senate and before legislatures throughout the U.S., regarding dangers of vaccines, including the COVID-19 gene-mutating jabs. Speaking of the pandemic, the Amish did NOT lock down, they did NOT put on bacteria-breeding masks, and they most certainly did NOT "vaccinate" for the Wuhan Lab Flu. They ignored every single CDC and Fauci-propagandized mandate and protocol, including the deadly clot shots (because they knew better than to get injected with millions of toxic, sticky spike proteins and graphite nanoparticles).

Guess what happened? The Amish had a survival rate of COVID 90 times higher than the rest of America. Nobody wants to talk about this, except natural health advocates. If you post anything about it on social media, you immediately get banned, blacklisted and labeled "misinformation" or "disinformation." Why is it so important to AVOID vaccines like the plague? Just take a look at all the insane ingredients used in vaccines, including preservatives, emulsifiers, adjuvants, genetically modified bacteria, mutated viruses and sterility-causing chemicals. This is all listed right out in the open. No human should ever have any of this injected into their blood and muscle tissue, bypassing the normal defensive shields of the body, including the skin, lungs and digestive tract.

These toxic, sometimes lethal ingredients include mercury (high doses in the multi-dose flu jab), human blood (albumin from abortions), deadly pig viruses called circovirus (in Rotateq Rotavirus jabs), eagle blood, dog blood, infected green monkey kidney cells, sucralose, monosodium glutamate (MSG), cow blood, chicken blood, eggs, dairy, antibiotics, peanut oil (yes, residuals remain, hence all the deathly peanut allergies), latex (from the stoppers on the needles and vials that the needles penetrate), aluminum and much more.



This Is What Happens When You Don't Jab Kids: Vaccinated vs. **Unvaccinated Data**

September 9, 2023 The Vigilant Fox

Odds ratios for a number of illnesses are through the roof for vaccinated children.

"The CDC has never looked at long-term health outcomes of vaccinated versus unvaccinated children," attested Professor Brian Hooker, Ph.D., during a presentation to the World Council of Health.

Brian Hooker is senior director of science and research at Children's Health Defense and professor emeritus of biology at Simpson University in Redding, California, who has been doing advocacy and research around vaccine safety for 20 years.

In light of the CDC's unwillingness to conduct long-term studies comparing vaccinated and unvaccinated children, Dr. Hooker took it upon himself to aggregate and conduct such studies.

This is what he found.

Dr. Hooker presented a study from Anthony R. Mawson and colleagues. This study collected information from moms who homeschooled their children and focused on children between the ages of 6 and 12.

Journal of Translational Science





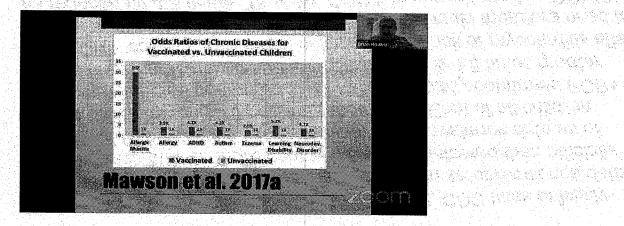
Pilot comparative study on the health of vaccinated and unvaccinated 6- to 12-year-old U.S. children

Anthony R Mawson ", Brian D Ray!, Azad R Bhuiyan! and Binu Jacob

Professor, Department of Epidemiology and Biosratistics, School of Public Health, Jackson State University, Jackson, MS 39213, USA.

President, National Home Education Research Institute, PO Box 13939, Salem, OR 97309, USA "Associate Professor, Department of Epidemiology and Biostatistics, School of Public Health, Jackson State University, Jackson, MS 39213, USA Former graduate student, Department of Epidemiology and Biostaristics School of Public Health, Jackson State University, Jackson, MS 19213, USA

Comparing the vaccinated and the unvaccinated, Mawson and colleagues discovered something stark. The odds ratios for a number of illnesses were through the roof for the vaccinated cohort.





Children in the vaccinated population were found to be a staggering **30 times more likely** to have allergic rhinitis compared to the unvaccinated children.

A similar story followed for other conditions. Vaccinated children in <u>Mawson's study</u> were found to be **3.9 times** more likely to have allergies, **4.2 times** more likely to have ADHD, **4.2 times** more likely to have autism, **2.9 times** more likely to have eczema, **5.2 times** more likely to have a learning disability, and **3.7 times** more likely to have a neurodevelopmental disorder compared to the unvaccinated children.

Dr. Mawson's <u>research paper</u> was initially published in the journal *Frontiers in Public Health* and gained considerable attention, accumulating over 80,000 views within the first three days. After widespread attention, the journal subsequently removed the paper, stating that it had never been fully accepted despite its earlier publication. The article underwent another round of peer review and was ultimately rejected by Frontiers. Undeterred by this turn of events, Dr. Mawson went on to republish his paper in the *Journal of Translational Science* in 2017.

Critics will say, "This is just one study."

Well, Professor Brian Hooker and Democratic Presidential candidate Robert F. Kennedy Jr. have accomplished quite the feat, compiling over 100 other studies like <u>Mawson's</u> comparing health outcomes between vaccinated and unvaccinated children.

And what they've found is quite remarkable. **Unvaccinated children consistently have better health outcomes than vaccinated children**. The book is called *Vax-Unvax: Let the Science Speak*. You can check it out here.

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Childhood Vaccines cause Autism: The evidence and the institutional cover-up

RHODA WILSON SEPTEMBER 1, 2023

There is damning evidence linking vaccines with autism and neurodevelopmental disease. And, there has been systemic suppression of this evidence.

Thousands of peer-reviewed articles demonstrate a connection between children's poor health from exposure to certain chemicals and radiation, the authors of a *Global Research* article wrote. And, you need not look far to find ample evidence that there is precisely what you might call a "question" about whether vaccines are "associated" with autism. So, here is some of the evidence.

Referring to the thousands of peer-reviewed articles, the three authors – journalist <u>Helen Buyniski</u>, Richard Gale, and <u>founder of Progressive Radio Voices Dr. Gary Null</u> – acknowledged that published studies need to be viewed in context of the scientific method:

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Certainly, studies are open to interpretation; they may be the subject of debate; they may be subject to the scrutiny of the public and the scientific community; by all means, try to replicate them.

But to write as if there is no debate, as if these studies simply do not exist; as if the association between these exposures and harms to health is some ludicrous and easily refutable "allegation," this is not scientific.

The above is from the first of a three-part series of articles being published by Global Research: 'Do Vaccines Cause Autism?'. The following are excerpts from this article. You can read the full article HERE.

Vaccines Undeniably Associated with Autism

You need not look far, in spite of the sophisticated <u>algorithmic manoeuvres made by Google</u> to wipe such artefacts from its search results, to find ample evidence that there is precisely what you might call a "question" about whether vaccines are "associated" with autism. This "question," this rather undeniable association can – and should – be openly debated, live on national television.

A debate is also an accessible forum for the public to observe, unlike jargon-laden peer-reviewed journals and elite science and medical conferences. When ordinary people's lives are now more and more subject to top-down requirements "based on the science," the public has a right to observe and hear it debated in plain language. This is urgently needed. It is truly a question of life and death.

How Debatable is the Assertion That Vaccines Cause Autism?

Though it should be held in public, the debate is over. All the evidence is there – but no one is brave enough to say it, and with reason, as anyone who does is publicly tarred and feathered.

The issue is so highly pressurised, that anyone with anything to lose is rightly afraid to light the match and say the simple words "vaccines cause autism," knowing they'll watch their reputation and maybe their career burst into flames. Lots of semantic acrobatics are performed that effectively communicate the causal connection without actually stating it in so many words. Really speaking: vaccines have been scientifically and legally documented to cause autism. Not just once. Not just twice. Many times.

Here is the Evidence

In a careful analysis of thousands of articles in the peer-reviewed literature on toxicology and immunology, nowhere could the three authors of the *Global Research* article find evidence to support claims that vaccine safety





is based upon a gold standard of clinical research: long-term, double-blind, placebo-controlled studies.

Since such gold-standard research has never been carried out, our medical officials are relying on inconclusive research that is not science-based to create public health policy. American parents, meanwhile, are conditioned by our medical officials to bring their children in for regular vaccinations, confusing pure propaganda with scientific proof.

Never has a concise epidemiological study been published that compares the long-term health outcomes of a group of infants and children given the recommended CDC immunisation schedule and a cohort of unvaccinated children. However, several smaller studies indicate that neurological disorders are associated with vaccination when vaccinated children are compared with the unvaccinated.

As we witness a rapidly increasing number of vaccinated children being afflicted by conditions such as autism, food allergies, encephalitis, type 1 diabetes, attention deficit hyperactivity disorder ("ADHD") and Crohn's disease, it's critical that we investigate further the role played by environmental toxins to better understand their pathology

And, when we look into the independent science on the safety of vaccines, it's readily apparent that many of the ingredients found in vaccines are toxic, even in small amounts, and may contribute to a range of illnesses, including autism.

Research indicates that <u>conflicts of interest abound in the vaccine industry</u>, making it difficult to have faith in our health authorities. Worse still, evidence points to pervasive corruption among high-profile individuals and institutions in the medical-industrial complex.

The Global Research article details six of the most alarming examples: Simpsonwood; Dr. Julie Gerberding's admissions; Dr. Poul Thorsen's corruption; whistle-blower Dr. William Thompson; investigative journalist Sharyl Attkisson's report; and, a leaked GlaxoSmithKline document. For the sake of brevity, below we have only given an overview of Simpsonwood

In 2003, while researching the controversial link between vaccines and autism – which despite repeated dismissal by all public health authorities continued to persist among parents and in-the-know doctors as autism rates skyrocketed – public health advocate Robert F. Kennedy, Jr. stumbled upon a massive coverup that had taken place in June 2000 in Norcross, Georgia.

The Simpsonwood conference – officially the <u>Scientific Review of Vaccine Safety Datalink Information</u> – included top scientists and health officials from the US Food and Drug Administration ("FDA"), the US Centres for Disease Control ("CDC"), the British Health Ministry and pharmaceutical industry execs, all gathered to discuss the results of a major study evaluating the negative effects of thimerosal, a commonly-used mercury-based preservative in vaccines.

The transcript Kennedy unearthed through a Freedom of Information Act request bears witness to the mild panic that set in among the audience after CDC epidemiologist Dr. Tom Verstraeten presented his study findings and dropped the bomb: "The screening analysis suggests a possible association between certain neurologic developmental disorders. Namely tics, attention deficit disorder, speech and language disorders and exposure to mercury from thimerosal-containing vaccines before the age of six months."

This was Dr. Verstraeten's fourth attempt to conduct the study to produce the desired data after the first three had stubbornly shown the correlation he was trying to disprove.

While the drug companies that manufactured the thimerosal-containing vaccines offered to remove the offending substance in September 1999, the CDC declined their offer, instead waiting until all thimerosal-containing vaccine lots expired in 2002 to officially end its use.



Let's now take a look at more damning evidence linking vaccines with autism and neurodevelopmental disease and the systemic suppression of this evidence.

The vaccine-autism debate has been limited mainly to two issues: the MMR vaccine, following the controversies over Dr. Andrew Wakefield's findings in the 1990s, and the toxicology of thimerosal.

Studies have pointed to the role of other vaccines than MMR in autism as well. Doctors at Stony Brook University's Medical Centre determined that male infants vaccinated with the Hepatitis B vaccine before 1999 have a three-fold higher autism rate than their non-vaccinated peers. The risk was greater among non-white boys. Concerns over thimerosal are waning because it has been removed from all vaccines except for the influenza shot, and even the flu vaccine cannot account for the rising autism rate.

Since 2001, autism has steadily continued to rise. In 2000, it was 1 in 250 children. As of March 2023, the CDC's reported rate has dropped to a shocking 1 in 36; just a few years prior, in 2018, the rate was 1 in 44. This rate has been found to be even higher by the authors of a *JAMA Paediatrics* research letter published in 2020: They found autism was occurring in 3.49 per cent of children and adolescents aged 3 to 17. That's 1 in 30.

The CDC argues that this proves thimerosal is not the culprit. It ignores a 2012 Australian study published in the journal *Toxicological and Environmental Chemistry* that there is a direct maternal transfer of ethylmercury (from thimerosal in vaccines) from pregnant mothers to the embryo/foetus. It remains American federal health policy for pregnant women to receive the flu shot, which may contain 25 micrograms of mercury.

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No Autism in Vietnam Before Bill Gates and His "Vaccines" (Video)

September 2023

https://rumble.com/v3f59o2-no-autism-in-vietnam-before-bill-gates-and-his-vaccines.html

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The Science behind the Absence of Autism in the Amish Community: Energetic Immunity

Rajalakshmi Kandaswamy April 22, 2015

As one MIT researcher, Dr. Stephanie Seneff has already predicted, **if the current trend continues** unabated and if nothing is done to shift this momentum in a positive direction today, **the incidence of Autism would be 1 in 2 children in the U.S by 2025**.

The statistics would be similar in other countries too as the accelerated increase in autism incidence and prevalence is being witnessed globally.

This editorial seeks to discuss the underlying science behind the almost complete absence of the prevalence of autism in the Amish community and to highlight the urgency of implementing solutions in autism that are already showing results on the ground.

As far as the science behind the secret to the absence of autism in the Amish community is concerned, what I have chosen to do in this editorial is to present an overview of the factors contributing to this presentation in the Amish population, that can be explained by the cutting-edge emerging scientific disciplines in various fields.

Psychoneuroimmunology

Making a choice not to vaccinate their children is a well-known albeit controversial practice in the Amish population by and large. What has been largely overlooked and misunderstood as to how their immunity is robust without following the vaccination schedule as advised by conventional medicine is the psychoneuroimmunological basis that underlies their choices and hence the positive results they are experiencing as a result of those choices in the form of almost all their children being free from the symptoms of autism.

Psychoneuroimmunology is the nascent scientific discipline that studies the interaction between the mind, body and social systems and how this interaction influences health and healing. The Amish community is world renowned for their way of life that is based on leading life in a manner that honors the intelligence of the cells of the body, trusting the signals that their bodies send that reveal what resonates with well-being and acting on those signals and impulses. Their social system and psychological conditioning therefore, prepares the ground for their choice to not vaccinate their children.

This extends onto the widespread belief that most in the community hold on to tenaciously that in fact the opposite is true – vaccination, if they make the choice to do so, causes more harm than good. All the more so since the Amish community has become aware that they have somehow been made "immune" to the usual presentation of autism, because of their "no vaccination" mindset.

This forms the psychological platform on which their immunological protection against not only most of the childhood illnesses the vaccines are supposed to prevent, but also the absence of manifestation of the debilitating symptoms of autism, is based.

Biomedicine

The more obvious biomedical basis for the absence of autism in the Amish community is the fact that throughout many centuries they have rigorously followed organic farming and have been consuming only organic produce grown mostly on their own farms, by themselves. Their food is therefore pesticide free and is consistently sustained as such over many generations. And the Amish continue to maintain the same till today.

This practice reveals what may be interpreted as their belief and understanding of biomedicine as "food being medicine". This mindset and conditioning is again in alignment with their reverence for the land, respect for the

values that they uphold, one such value being living in harmony with the forces of nature and viewing their food as being divine and pure. As the rest of the world is dealing with the rise in the debilitating symptoms in autism at least partially precipitated by genetically modified and pesticide-laden food, the Amish have been protected from the same.

Energetic immunity

The term "Energetic Immunity" can be defined as the immunity generated by the system/being in response to the chronically aligned state of energies of the individual or system. Quantum physics has discovered that everything in the universe is ultimately made up ofenergy. And this field of energy includes the mind, body and the ecosystem.

This is the Energy Medicine perspective that provides the (w) holistic understanding of the almost complete absence of autism in the Amish population. The psychoneuroimmunology and biomedical factors discussed above also fall under this umbrella of Energy Medicine.

The Amish beliefs and practices discussed above translate as advantages to their wellbeing that is provided by maintaining a healthy and aligned Energy Field.

More or less chronically or consistently, and this field of aligned energies is both at the micro as well as themacro level, at the molecular level as well as at the clinical level as evidenced by the lack of manifested symptoms of autism.

The scientific community needs to focus more on what is actually working in autism so that more of the same can be replicated.

What I have discussed above could form the platform for developing a multi- pronged approach in dealing with the symptoms in autism that has its foundation in Applied Energy Medicine that establishes the Energetic Immunity in the individual. So that the people with autism can be free from the limiting symptoms in autism and can thrive with their unique gifts and talents. The additional benefit of establishing such an Energetic Immunity in autism would be the less susceptibility to other infections and conditions that most people with autism usually suffer from throughout their life span. Energetic Immunity being established in the autistic person regardless of the age of the person, using Applied Energy Medicine would thus decrease the morbidity and increase the longevity and the quality of life in the person.

To get a clearer understanding of Applied Energy Medicine, it is recommended that my editorials and articles on this subject are perused at www.intenthealing.com/blog.

What is likely to raise opposing viewpoints would be the all too familiar Autism-Vaccine debate. And that need not interfere in the applying of the method that I am suggesting here, to see the results right away because it can be easily implemented in the already affectedchildren/people with autism who have already completed their vaccine schedule. The solution as suggested in this editorial can be presented to all and the question of vaccination in the relevant category of children and parents can be left to the individual choice of the parents, in most cases. Because to wait would be a costly mistake. With the present statistics of 1 in 68 children being diagnosed with autism, why wait, when there are solutions in autism that are already working? [1-6].

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Doctor call provides even more evidence that vaccines are the leading cause of autism and SIDS

If vaccines don't cause autism or SIDS, then how can we explain what these doctors told me? They also agreed that completely unvaccinated kids are healthier than fully vaccinated kids; no exceptions.

STEVE KIRSCH JULY 24, 2023

I spoke with over a dozen doctors and holistic practitioners for nearly 2 hours on Saturday morning. They related stories that are hard to explain if vaccines aren't harming our kids.

Executive summary

I had a call with over a dozen doctors and holistic practitioners today, all friends of Jason Dean. He chose doctors he knew who would be willing to go on a zoom call; there was no other selection criteria.

While they asked not to reveal who said what for fear of retribution, I will summarize some of the most astonishing statements that were made in the call today.

The key points:

Unvaccinated kids are uniformly much healthier than vaccinated kids. Nobody on the call disagreed with this.

Vaccines cause autism, SIDS, and other chronic diseases. Several doctors noted that all or nearly all of their autism cases were linked to the MMR vaccine. In another case, one doctor told the story of a police investigator that he knew personally who was assigned SIDS cases over 7 years; she noted that 75% of SIDS deaths happened within 48 hours of a vaccine (approximately 500 cases total). That's impossible if the vaccines aren't causing the deaths.

It is possible, in some cases, to partially reverse autism. The most successful reversals occur when the child is treated soon after the injury and the parents are committed to the treatment protocol.

The key points

Below is a summary of some of the main points made in the call.

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Although the call was not recorded to protect the reputations of the people on the call, any mainstream fact checker can reach out to me and contact ANYONE on the call (choose from the picture above) to verify that EVERY statement below was said in the call:

- 1. They all agreed kids who aren't vaccinated are far healthier. It isn't a close call. It is a dramatic difference.
- One of the doctors said that the difference is so extreme that she claimed that she can tell who is vaccinated just from a photo. She said she could look at a photo of 50 kids and pick out the one fully unvaccinated kid in the photo. I didn't test this, but it's an extraordinary claim.
- 3. They all believe vaccines cause autism, SIDS, and other chronic diseases. This doesn't mean vaccines are the SOLE cause of these chronic diseases, just a major cause. The reason they believe that is the time proximity between vaccination and change in behavior of the child as noticed by the parents (sometimes in hindsight when the parents are quizzed about whether there was a vaccine given shortly before the behavior changed). There are simply too many cases of dramatic changes happening "hours after" or "days after" to be coincidence. These dramatic changes were NEVER seen in fully unvaccinated kids.
- 4. Some of the stats were really incredible. One provider said she has treated 50 cases of autism and 100% of those 50 cases happened shortly after the MMR shot. Then another doctor on the call said the same thing: 100% of the cases he has seen were all after the MMR shot. A third doctor said her cases were all MMR related except for one DTaP. She knew of just one case of autism that wasn't vaccine related. NOTE: According to VAERS, only 66% of all autism cases reported were associated with the MMR vaccine.
- 5. One of them knew a police officer who was assigned to investigate SIDS deaths. That officer is now retired. The officer did 3 to 4 cases a month, so around 300 cases total in the past 7 years. In 75% of the cases, SIDS happened within 48 hours after a vaccine shot. I will be doing a zoom call with that investigator later. That statistic is impossible if the

vaccines aren't causing SIDS. Nobody can postulate a confounder on that one. This isn't a cherry picked data point; it's the only data point from a police officer I'm aware of.

- 6. The doctors can't get a debate on "do vaccines cause autism" or "are vaccinated kids healthier." One of them said he offered \$10,000 to anyone who would debate him. No takers. I know the feeling.
- 7. PANS/PANDAS is basically the "older kid" version of autism and again, that is always vaccine related.
- 8. Autism can, in **some** cases, be partially reversed if treated early enough with the right treatment. The key to best results is to treat the child ASAP after the autism is noticed and get the parents to fully cooperate with the treatment plan. For example, one provider cited a case of a child with a t-score of 50 (i.e., right in the middle of autism cases) who in 18 months was able to return the child to nearly normal.
- 9. One of the doctors commented that it has been unsafe to question the safety of vaccines. She said this was still true which is why I didn't record the call and obscured last names.
- 10. One doctor treated an Olympic athlete who couldn't walk shortly after getting the COVID shot. That athlete has not gone public with his story.
- 11. One doctor who has treated 1,000 autism cases said about half happened very quickly and half happened slowly. This makes sense because I surveyed a Facebook autism parents group and found the same thing. He has a lot of unvaxxed kids in his practice and says there is no comparison in the health of the kids.
- 12. One doctor knows someone who runs a clinic for the developmentally disabled. He asked the owner, "How's business?" She said it was exploding. He asked if she knew the cause. She paused, looked around to make sure nobody was listening, and then said "It's the vaccines."
- 13. One doctor estimated that 50% to 60% of the parents know the vaccine caused their child's autism. 40% don't realize it.
- 14. Another doctor said 100% of her cases were vaccine related. The medical community won't debate her.
- 15. This is the moment. It's time for people to come out and tell the stories that they haven't been able to tell.

Mainstream fact checkers welcome

Choose anyone in the photo above. I'll put you in touch with them, you can verify the visual match in a zoom call, and they can verify everything I wrote in the article is what was said in the call.

Was this a biased sample?

All samples have bias.

If you are a doctor reading this and disagree with anything that was said and would like to do a Zoom call with your colleagues to set the record straight just like this call, I'd be happy to host it and write up what was said.

Summary

TO M

There was no reason for any of these doctors in this call to lie about what they saw.

Unless these doctors are ALL lying, we have a serious problem that nobody wants to talk about.

Basically, the vaccines are harming our kids and should be stopped. The risk/benefit tradeoff isn't even close. Kids are much healthier without any vaccines. This call was yet more confirmation.

I've invited any doctor(s) who disagree, who can show there is no link between vaccines and autism, SIDS, and higher disease to contact me to do a similar Zoom call where we can talk about it.

It's tragic that some states (CA, NY, ME, MS, CT, and WV) require vaccines for public schools and there is pretty much no way out other than to homeschool your kids or move out of state. We aren't allowed to have any debates with the authorities on whether this is a good idea. They know more about your child's health than you do, and they will not be questioned about it.



Developed Nations With Packed Infant Vax Schedule Linked To Higher Childhood Mortality Rates: Study

AUG 06, 2023 Megan Redshaw

Highly developed nations requiring the most neonatal vaccine doses tend to have the worst mortality rates in children under age 5, according to a <u>peer-reviewed study</u> published July 20 in Cureus.

Researchers Neil Miller, director of the Institute of Medical and Scientific Inquiry in New Mexico, and Gary Goldman, who has a doctorate in computer science, performed several analyses based on 2019 and 2021 data to explore potential relationships between the number of early childhood vaccinations required by developed nations and their neonatal, infant, and under age 5 mortality rates.

According to global health experts, few measures in public health can compare with the impact of vaccines, which are credited with having reduced disease, disability, and death from a variety of infectious diseases. Yet the study found that developed nations requiring more neonatal vaccinations may have unintended consequences that increase childhood mortality, challenging the idea that more vaccines administered always results in fewer deaths.

"Our paper investigated potential associations between the number of early childhood vaccine doses that developed nations require and their early childhood mortality rates," Mr. Miller told The Epoch Times in an email. "For example, some nations administer hepatitis B and tuberculosis (BCG) vaccines to their infants shortly after birth. We found that nations that require both vaccines had significantly worse infant mortality rates when compared to nations that require neither vaccine."

Miller and Goldman's research initially began in 2011 when they <u>published a paper</u> using 2009 data showing less favorable infant mortality rates among highly developed nations requiring the most infant vaccinations.

The recent study replicated their original study using 2019 and 2021 data from the top 50 nations where childhood vaccine doses range from 12 to 26. Results showed the infant mortality rate increased by 0.167 deaths per 1,000 live births for each additional vaccine dose added to the vaccination schedule, supporting the earlier study's findings.

Twenty-nine nations in 2009 had better infant mortality rates than the United States, but by 2019, the United States had declined to 44th in infant mortality rankings, and in 2021, ranked 50th—despite requiring the highest number of infant vaccines.

Hepatitis B and Tuberculosis Vaccination May Increase Mortality

In their latest study, Miller and Goldman broadened their research to assess the impact of hepatitis and tuberculosis vaccines on mortality rates of neonatal infants (babies under 28 days old), infants up to age 1, and children under 5. Mortality data and vaccination schedules were compiled from UNICEF, the World Health Organization, the European Centre for Disease Prevention and Control, and national governments.

Nations were then grouped based on whether they required zero, one, or two vaccine doses given to newborns to determine their statistical significance to mortality rates of the three age groups. The association demonstrated by the analysis showed neonatal vaccines for hepatitis B and tuberculosis may not contribute to an overall reduction in mortality in nations where infants are at low risk of mortality from diseases the vaccines are targeting. In these nations, infants may actually experience greater risks from vaccination.

Reduction in Infant Vaccine Doses Decreased Mortality

Using 2021 data, the researchers found a statistically significant difference of 1.28 deaths per 1000 live births between the mean infant mortality rates among nations that did not vaccinate their neonates at all and

those that required two vaccine doses. For each reduction of six vaccine doses administered during infancy, the infant mortality rate improved by approximately one death per 1,000 live births.

Additionally, vaccines administered during the first year of life had a greater effect on under age 5 mortality rates compared with vaccines administered in the second through fifth years of life, suggesting younger infants who generally weigh less and receive more vaccines in a shorter period are significantly more likely to experience an adverse reaction resulting in hospitalization or death.

"Hepatitis B and tuberculosis vaccines given shortly after birth when the immune system is immature and the neonate has low weight, may increase vulnerability to serious adverse reactions and deaths that ultimately contribute to higher neonatal, infant, and under age five mortality rates," Mr. Miller told The Epoch Times.

Vaccination Sequence and Combination Can Impact Mortality

In most nations, more than half of infant deaths occur during the neonatal period, with about 75 percent of neonatal deaths occurring during the first week of life when neonatal vaccines are administered, according to Mr. Miller. Deaths that occur during this period have a large impact on neonatal, infant, and under age 5 mortality rates.

The study states the U.S. neonatal mortality rate comprises 61 percent of its infant mortality rate and 52 percent of the mortality rate in children under age 5.

Read more here...

Vaccines are causing most Type I diabetes

From the odds ratios, it's clear that at least 75% of all cases are caused by the childhood vaccines. However, the medical community will never acknowledge they are responsible for this error.

STEVE KIRSCH AUG 16, 2023

Executive summary

I recently interviewed a mother, Debbie Nease, whose son was perfectly normal. He got a vaccine shot and within days, he was a type I diabetic. Is this just an isolated anecdote? It turns out it isn't.

We know from many studies that vaccines are the primary cause of auto-immune diseases. For example, my survey of over 10,000 kids showed an OR of 22 which means that 95% of autoimmune diseases, in general, are caused by vaccines. Anyone can replicate that survey in 24 hours, but nobody in mainstream medicine will dare to do this.

The same survey showed that kids who were vaccinated were about 4.7 times more likely to get diabetes than kids who avoided all vaccines (and the k-shot).

The clincher is that there is a pediatric clinic in America which has had thousands of fully unvaxxed kids over the last 25 years. The rate of type 1 diabetes in that practice is zero.

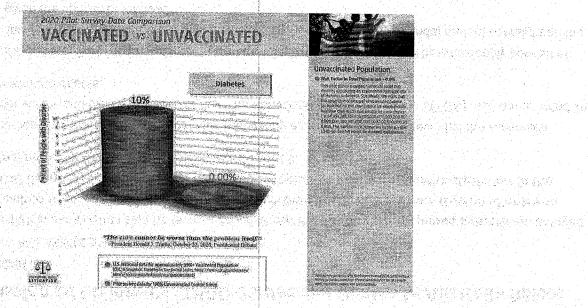
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Could there be other causes of type 1 diabetes? Of course. But the pediatric clinic is evidence that the vast majority of type 1 diabetes is preventable and the main intervention is stopping the shots.

The evidence

Here's the evidence supporting my hypothesis.

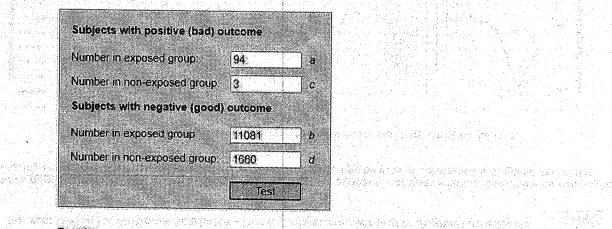
If you can show that all this evidence fits your hypothesis better, I'm all ears. That's what science is about.
 The <u>control group study</u> showed no diabetes in 1,000 people who were fully unvaccinated.



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2. My survey odds ratio calculation for vaccinated vs. fully unvaccinated risk of type I diabetes:

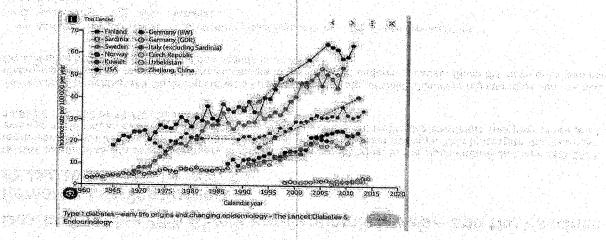
Odds ratio calculator



Results

Odds ratio	4,6939
95 % CI	1:4853 to 14:8344
z statistic	2.634
Significance level	P = 0:0084

- 3. When you remove the suspected cause, the problem appears to completely disappear. A pediatric clinic with no vaccines has no type I cases in 25 years. This is hard for anyone to explain. It will be written up and submitted to the medical literature. When you combine this fact with the 4.7 odds ratio in the point above, it's very clear that 75% or more of type 1 diabetes is caused by the vaccine.
- 4. The climbing rates of type I diabetes worldwide with no explanation as kids get more and more shots over time:



5. The explanations for the climbing rates of type I diabetes don't fit because there isn't a causal link established between any of these factors and type I diabetes. According to this Healthline article, "these factors include the early introduction of cow's milk, short duration of breastfeeding, and perhaps even pollution." So where is the study showing a later introduction of cow's milk and a longer duration of breast [feeding] fixes the problem?

Parties and the training of the control of

- 6. Type I diabetes is a modern disease. Even the mainstream docs admit that type 1 diabetes is entirely a modern disease. The Healthline article points out that "scant descriptions of diabetes from ancient literature seem to only describe type 2 diabetes."
- 7. Too many "coincidences" among parent reports where their child developed diabetes shortly after vaccination.

Why do medical studies always fail to find a link between vaccines and type I diabetes? Because they were designed not to.

- These studies remind me of the studies that are meant to show that vaccines don't cause autism. They are never really designed to find a signal.
- Where is the study looking at the number of case onsets happening before a vaccine shot vs. after a vaccine shot?
- Why aren't any of these studies that purport to not find a link comparing the fully unvaccinated kids with the fully vaccinated kids?
- Why are all these studies looking at a single vaccine only? That signal would be hard to find because the difference between a child getting 70 vaccines vs. 69 isn't going to show a signal.

If there is no link, then the pediatric clinic which eschews vaccines should have the same rate of diabetes as the surrounding clinics.

So someone is lying.

The authors reviewed studies that compared vaccination rates in 13,000 children with type 1 diabetes with control children, finding no association between receipt of any childhood vaccine and the subsequent development of type 1 diabetes.

My study was the same size as theirs, but I compared fully vaccinated kids with fully unvaccinated kids and found a huge signal. Why didn't they do it my way?

Are vaccines the only cause?

There are likely other possible causes of type I diabetes, but the point of this article is that the data I've been able to collect shows that vast majority are caused by the childhood vaccines which is why pediatric clinics which eschew vaccines have dramatically lower rates of type 1 diabetes than those who do not. Otherwise, how can you explain that?

Summary.

The data I've seen on the vaxxed vs. unvaxxed shows that over 75% of the cases of type 1 diabetes are caused by the vaccines. If you want to disprove me, simply show me the study of the fully unvaccinated rate vs. fully vaccinated rate are comparable. I've never seen such a study.

Studies that are purportedly designed to find an association between vaccines and type 1 diabetes are flawed because they never look at:

- the onset time relative to the last vaccination,
 - the type of vaccine (they only look at one at a time), and
- they never compare the rates in the fully vaccinated with the fully unvaccinated in the same community or medical practice.

If they did any of these things, they'd immediately discover why they are failing to find a signal.

23-4

It took me just 24 hours to collect the data in my survey. Why don't they do something similar? They don't even try this! This is a huge failing of evidence-based medicine that they are all incapable of finding a signal that would go against the government narrative.

It's almost as if they don't want to know they got it wrong.

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Neonatal, Infant, and Under Age Five Vaccine Doses Routinely Given in Developed Nations and Their Association With Mortality Rates

Neil Z. Miller • Gary S. Goldman July 20, 2023 . Cureus

Abstract

Introduction

In 2011, using 2009 data, we published a study demonstrating that among the most highly developed nations, those requiring the most vaccine doses for their infants tended to have the least favorable infant mortality rates (r=0.70, p<.0001). Twelve years later, we replicated our original study using 2019 data. Linear regression analysis corroborated the positive trend reported in our initial paper (r=0.45; p<.002). Herein, we broaden our analyses to consider the effect of vaccines on neonatal and under age five mortality rates.

Objective

We performed several investigations to explore potential relationships between the number of early childhood vaccine doses required by nations and their neonatal, infant, and under age five mortality rates.

Methods

In this ecological study, we conducted linear regression analyses of neonatal, infant, and under age five vaccine doses required by nations and their neonatal, infant, and under age five mortality rates. All analyses were based on 2019 and 2021 data. We also stratified nations by the number of neonatal vaccine doses required and conducted a one-way ANOVA test and a post hoc Tukey-Kramer test to determine if there were statistically significant differences in the group mean neonatal, infant, and under age five mortality rates of nations that administered zero, one, or two neonatal vaccine doses.

Results

Linear regression analyses of neonatal vaccine doses required by nations in our 2021 dataset yielded statistically significant positive correlations to rates of neonatal mortality (r = 0.34, p = .017), infant mortality (r = 0.46, p = .0008), and under age five mortality (r = 0.48, p = .0004). Similar results were reported using 2019 data.

Utilizing 2021 data, a post hoc Tukey-Kramer test indicated a statistically significant pairwise difference between the mean neonatal mortality rates, mean infant mortality rates, and mean under age five mortality rates of nations requiring zero vs. two neonatal vaccine doses. There was a statistically significant difference of 1.28 deaths per 1000 live births (p < .002) between the mean infant mortality rates among nations that did not give their neonates any vaccine doses and those that required two vaccine doses.

Using 2019 and 2021 data, 17 of 18 analyses (12 bivariate linear regressions and six ANOVA and Tukey-Kramer tests) achieved statistical significance and corroborated the findings reported in our original study of a positive association between the number of vaccine doses required by developed nations and their infant mortality rates.

Conclusions

There are statistically significant positive correlations between mortality rates of developed nations and the number of early childhood vaccine doses that are routinely given. Further investigations of the hypotheses generated by this study are recommended to confirm that current vaccination schedules are achieving their intended objectives.

full document at https://www.cureus.com/articles/164423-neonatal-infant-and-under-age-five-vaccine-doses-routinely-given-in-developed-nations-and-their-association-with-mortality-rates#1/