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After Long Silence On 'Long Vax', Science Magazine Links Autoimmune Disorders To COVID Shots

JUL 21, 2023 Brenda Baletti

Mainstream publications and regulatory agencies have buckled to public pressure to admit the COVID-19 vaccine can cause injuries such as myocarditis and pericarditis—but until recently, they've published little or nothing about the substantial number of people suffering from autoimmune disease after vaccination.

However, on July 3, the journal Science published an article confirming that COVID-19 vaccines are linked to autoimmune disorders, such as small fiber neuropathy and postural orthostatic tachycardia syndrome (POTS).

"We've been screaming from the top of our lungs about these things happening," Agnieszka Wilson, founder of #CanWeTalkAboutIt told The Defender. **"And finally, slowly, it's being acknowledged."**

The #CanWeTalkAboutIt campaign is a global effort to break the silence around injuries from the COVID-19 vaccine.

Suzanna Newell, former board member of the vaccine-injured patient advocacy group React19, told The Defender:

"I am extremely grateful that doctors and medical institutions are now willing to talk about adverse reactions. [They] should have been listening to the injured. We even have many injured medical professionals among the injured who have had trouble being heard."

Science reported that in addition to abnormal blood clotting and heart inflammation, the COVID-19 mRNA vaccines give rise to "another apparent complication":

"[This] debilitating suite of symptoms that resembles Long Covid, has been more elusive, its link to vaccination unclear and its diagnostic features ill-defined.

"But in recent months, what some call Long Vax has gained wider acceptance among doctors and scientists, and some are now working to better understand and treat its symptoms."

According to Science, Long Vax cases "seem very rare." They include a wide range of symptoms such as persistent headaches, severe fatigue, and abnormal heart rate and blood pressure.

The symptoms can begin to appear within hours or weeks after vaccination and are difficult to study, the authors of the article said.

Science reported that increasing numbers of researchers are making diagnoses that include small fiber sensory neuropathy, which causes tingling or electric shock-like

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sensations, burning pain and blood circulation problems, and POTS [postural orthostatic tachycardia syndrome]—a condition that affects blood flow and can result in symptoms such as lightheadedness, fainting, and increased heartbeat—that appear when standing up from a reclined position.

Post-vaccination symptoms could have features of one or both conditions. People with long COVID can suffer similar symptoms, according to the article.

Small sensory fiber neuropathy and POTS also are associated with other vaccines such as Gardasil, Merck's human papillomavirus (HPV) vaccine.

Commenting on the article, Substacker Igor Chudov wrote that the authors acknowledge the suffering, but also minimize it, falsely asserting that it is rare. "It goes on and on about how 'rare' vaccine injuries are."

Brianne Dressen, founder of React19, said that despite the fact the article qualifies some of its key claims, she sees it as an important step toward getting these conditions more widely recognized.

Dressen told The Defender:

"Science Magazine is speaking to an audience that the rest of us who have been pigeonholed into this corner can't speak to because they don't even know we exist. We've all been censored to no end. So how are we going to reach those people?"

"They've been hammered over and over again in outlets like Science Magazine—which is kind of ironic—with the idea that the vaccines are wonderful and there's no possible way that anything bad can happen ...

"So if we ever get an opportunity to put a little bit of content out there in their lane for them to question even just a little bit what's going on around them, then we'll be able to pull them back over to, you know, to the truth."

Vaccine-Related Autoimmune Disorders Are Underreported

Scientists at the National Institutes of Health (NIH) were attempting to study and treat patients with Long Vax symptoms in 2021. They published a preprint report on their work, but the study was abruptly halted without explanation and the NIH has stonewalled attempts to discover details about what the agency knew early on.

Science also cited previous and forthcoming research by Sujana Reddy identifying post-vaccine POTS, and a study published in Nature Cardiovascular Research by researchers from Cedars Sinai Medical Center last year that linked COVID-19 and the vaccine to POTS.

Other peer-reviewed research reported similar links and has revealed a wide range of immune system and neurological effects from the COVID-19 vaccine.

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Numerous people with autoimmune disorders from the COVID-19 vaccine have also shared their stories with The Defender. Some reported difficulties in submitting their health information to the Vaccine Adverse Event Reporting System (VAERS).

A total of 1,569,668 reports of adverse events following COVID-19 vaccines were submitted between Dec. 14, 2020, and June 23, 2023, to VAERS.

The latest available data from VAERS show 770 reports of POTS with 578 cases attributed to Pfizer's vaccine, 160 reports attributed to Moderna's and 31 reports to Johnson & Johnson's.

"Under-reporting is a known and serious disadvantage of the VAERS system," according to VAERS expert Jessica Rose, Ph.D.

Rose wrote, "Unfortunately, we can never really know how many people are suffering from adverse events. Reports can go missing, reports can remain in temporary VAERS ID limbo or never get filed in the first place."

Scientists Hesitantly Speak Out

"You see one or two patients and you wonder if it's a coincidence," Anne Louise Oaklander, M.D. Ph.D., a neurologist and researcher at Harvard Medical School, told Science. "But by the time you've seen 10, 20," she continued, "where there's smoke, there's fire."

In addition to Oaklander, a top researcher on small fiber neuropathy, Harlan Krumholz, M.D., a Yale cardiologist, Sujana Reddy, D.O., an internal medicine resident physician at East Alabama Health, Tae Chung, M.D., a neuromuscular physiatrist who runs a POTS clinic at Johns Hopkins, Matthew Schelke, M.D., a neurologist at Columbia University, Lawrence Purpura, M.D., MPH, an infectious disease specialist at Columbia University, and William Murphy, Ph.D., an immunologist at the University of California, Davis all commented on their ongoing research on autoimmune illness associated with COVID-19 vaccination.

The article also reports that "regulators in the US and Europe say they have not found a connection between COVID-19 vaccines and small fiber neuropathy or POTS."

But even Peter Marks, M.D., Ph.D., director of the U.S. Food and Drug Administration's Center for Biologics Evaluation and Research, which has denied and downplayed the existence of vaccine autoimmune side effects, conceded to Science, "If a provider has somebody in front of them, they may want to take seriously the concept [of] a vaccine side effect."

German Minister of Health Karl Lauterbach has "acknowledged that Long Covid-like symptoms after vaccination are a real phenomenon," Science also reported.

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Marks told Science he worried “the sensational headline” about vaccine side effects could “mislead” the public. And several other researchers quoted in the article also expressed concern that their research could “undermine trust in COVID-19 vaccines.”

Dressen said researchers are hesitant to speak out because it carries great risk.

“There is not a single person, whether they are new to the game or whether they’ve been in this for decades, there’s not a single person that when they do step across that line and they do speak out, that they don’t get punished,” Dressen said.

She added, “There’s not a single person that gets hailed a hero and money flows and their research happens. There’s always repercussions. And these researchers knew that, right? Which is why they came out together and they came out in force.”

The Power of Patient Advocacy

Dressen also told The Defender that doctors and researchers are finally speaking out because of the work being done by vaccine-injured patients.

“The interesting thing about these researchers though,” she said, “is that they too had to be deprogrammed. And that happened because of ... the patients [who] ended up in their offices,” she said.

“The majority of the advocacy that happened to get these researchers to where they were willing to speak out, it happened on the ground floor with their own patients. So, you know, that’s the power that the patients have.”

Newall, who suffers from COVID-19 vaccine-related autoimmune disease, said:

“The best advice and support I have had about my reactions have come directly from other injured. They have been a lifeline for me. I knew to ask for a skin punch biopsy only because other injured people had told me to based on my symptoms.

“Even knowing what to ask for, the first neurologist wanted to wait and run other tests because he said small fiber neuropathy doesn’t normally present the way I was presenting. I told him we are in uncharted [sic] waters learning as we go, so please run the test.

“Finally after months of waiting, he tested me and I was positive for small fiber polyneuropathy.”

Immune Overreaction to Spike Protein

The article hypothesizes that the Long Vax symptoms might be caused by an immune overreaction to the SARS-CoV-2 spike protein. Science wrote:

“One theory is that after vaccination some people generate another round of antibodies targeting the first. Those antibodies could function somewhat like spike itself: Spike targets

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a cell surface protein called the angiotensin-converting enzyme 2 (ACE2) receptor, enabling the virus to enter cells.”

Bernhard Schieffer, M.D, Ph.D., a cardiologist at the University of Marburg, is also quoted:

“The rogue antibodies might also bind to ACE2, which helps regulate blood pressure and heart rate. ... If those antibodies disrupt ACE2 signaling, that could cause the racing heart rates and blood pressure swings seen in POTS.

“Small fiber neurons also have the ACE2 receptor on their surface, so in theory rogue antibodies could contribute to neuropathy.”

Rose told The Defender that “molecular mimicry” is a possible action for spike-induced autoimmunity. Molecular mimicry refers to a significant similarity between pathogenic elements contained in a vaccine and some human proteins.

According to Nature, this similarity may lead to immune cross reactivity, where the reaction of the immune system toward the pathogenic antigens may harm the similar human proteins, essentially causing autoimmune disease.

‘Needless Gaslighting’ Has to End

Vaccine-injured advocates say that much more research into these types of adverse events is imperative.

“This is just one of the many injuries and many side effects that they write about in this article. There’s so much more work to be done in the area, so much more attention to be given to a lot of people who are suffering today,” Wilson said.

Newell said that when vaccine-injured can get access to early treatments, they are more likely to recover.

“But, that requires acknowledgment,” she said, adding, “Just like Guillain-Barré [syndrome] is recognized as a vaccine reaction, we need small fiber neuropathy and POTS to be recognized as well.”

She added:

“Had there been a medical and financial safety net along with processes to accurately research the injured and adequately support us, we would be much farther along than we are and so many wouldn’t have had to needlessly be gaslit at the doctor’s office with all of these new symptoms.

“I wish those of us who were not using the medical system prior to our Covid vaccines and were now suddenly showing up with debilitating and scary symptoms would have been at the very least researched.

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"We needed acknowledgment even though our truths are uncomfortable. It has been a painful and lonely ride that I would not wish on anyone. We need to be able to talk openly about reactions because what doesn't get talked about leads to shame and isolation. Isolation can lead to suicide. We have seen far too many injured take their lives.

"We have waited years because our reactions might cause vaccine hesitancy. That has delayed progress. We are part of the science. The medical world needs to study our reactions to make this brand-new vaccine safer for all people."

Science reported that a few university-sponsored research projects are moving forward. Yale's LISTEN study will examine both long COVID and Long Vax cases.

React19 also plans to distribute small grants for studying immunology, biomarkers, and other features of post-vaccine illness. "Even modest support matters," Krumholz told Science, because "it's incumbent on us to produce preliminary data" to win over funders with deep pockets.

"The deep-pocketed funders of Covid vaccines had no problem pouring billions into them without any preliminary data—but helping their victims is not one of their financial priorities," Chudov commented.

He added, "Thus, the researchers helping the vaccine-injured operate with tens of thousands of dollars, while Pfizer shareholders enjoy their multi-billion windfall."

Wilson, who is also a journalist who interviews doctors and scientists on her program, the "Aga Wilson Show," added, "This is not a fight between the anti and the pro-vax. It's a fight for people's health."

She said public health agencies should be responsible for creating better systems to track injuries and should be funding research to understand and treat them and stop them from happening again.

"We are in a very bad situation because the governments are not taking responsibility for this. This research needs to be funded," she said.

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CDC: Covid Shots Caused 338x Increase in Cancers & AIDS

Frank Bergman July 21, 2023

Official data from the U.S. Centers for Disease Control and Prevention (CDC) has revealed that Covid shots caused a disturbing spike in the number of Americans developing diseases that decimate the innate immune system.

The new data from the CDC shows that large numbers of fully vaccinated Americans are developing cancers and acquired immune deficiency syndrome (AIDS).

The CDC data doesn't show a phenomenon that's unique in the United States, however.

Further data made available by the governments of Canada and the UK also suggests that the vaccinated populations in both of these countries are also developing the debilitating condition.

It's a common misconception that AIDS is only caused by the HIV virus but this isn't true.

Acquired (or secondary) immunodeficiency is one of the major causes of infections in adults.

These immunodeficiency disorders affect your immune system partially or as a whole, making your body an easy target for several diseases and infections.

When immunodeficiency disorders affect your immune system, your body can no longer fight bacteria and diseases.

Several factors in the environment can cause secondary immunodeficiency disorders.

Some common ones are:

- Radiation or chemotherapy, which can lead to a secondary immunodeficiency disorder known as neutropenia
- Infections due to human immunodeficiency virus (HIV) can result in acquired immune deficiency syndrome (AIDS)
- Leukaemia, a cancer that begins in the cells of the bone marrow that can lead to hypogammaglobulinemia—a type of secondary immunodeficiency
- Malnutrition, which affects up to 50% of populations in underdeveloped countries and leaves people vulnerable to respiratory infections and diarrhea

But some of the less common causes include drugs or medications.

So it's perfectly possible for a medication or drug to cause AIDS

And data published by the CDC strongly suggests that Covid shots should be added to the list.

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Top Dr. Says 74% Of Deaths In New Autopsy Study Linked To Covid Jabs (VIDEO)

Kelen McBreen July 10th 2023

Experts trying to get to bottom of why perfectly healthy people are dying of blood clots soon after their Covid shots

<https://twitter.com/VigilantFox/status/1678416545460961281>

Texas cardiologist and epidemiologist Dr. Peter McCullough recently joined The Epoch Times for a discussion about a new study linking 74% of deaths in peer-reviewed autopsies to Covid shots.

Dr. McCullough Breaks Down Landmark Autopsy Study Linking COVID Vaccine to 74% of the Deaths

Doctors [@P_McCulloughMD](#) & colleagues reviewed 325 autopsy cases, and they found “a total of 240 deaths (73.9%) were independently adjudicated as directly due to or significantly... pic.twitter.com/5zTkmTxguN”

— The Vigilant Fox  (@VigilantFox) **July 10, 2023**

The doctor explained he was joined in the study by a graduate student at the Michigan School of Public Health as well as others and that they looked at 44 papers with 325 total autopsies.

Next, Dr. McCullough delivered details of all the autopsies to a trio of doctors who are “experts at looking at pathological specimens” to double-check if his suspicion the Covid jabs were to blame for the deaths was accurate.

After the other doctors examined the data, Dr. McCullough said, “We found that 73.9% of all the cases – it was either the vaccine as the direct cause of death or it significantly contributed to the death. The deaths occurred within a week or two after taking the last shot.”

“In far more than 50%, the single cause was a cardiovascular cause of death,” he added.

Later, Dr. McCullough pointed out what he found to be the most disturbing part of the study, which is that most of the cases were “people who were perfectly healthy, had no other medical problems, the only new thing in their lives was the vaccine and then they died with an obvious syndrome like a blood clot or heart damage, myocarditis.”

Infowars and brave individuals like Dr. McCullough have been sounding the alarm bells over the Covid jabs for years now, but it appears as if more people are beginning to wake up to the dangers of the experimental shots as more people are killed and injured.

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Disability Claims Are Increasing at a Record Pace Under Biden. Why?

Wire Editor July 24, 2023

(By Jon Miltimore, FEE) Despite the many economic challenges people are facing today, including stubbornly high inflation and 401ks that are still reeling from the worst stock market drop since 2008, many contend that we're witnessing the triumph of "Bidenomics."

The White House has been touting statistics showing 13.2 million jobs have been created during the Biden administration and that the unemployment rate fell to 3.6% in June. Not bad, right?

At least some seem to think so.

"America under President Biden has better employment numbers ... than the America of 1984 when President Reagan ran morning in America ads touting the economy," said Matthew Dowd, a former political strategist for George W. Bush and MSNBC.

The thing about statistics is they can be deceiving — "Lies, damned lies, and statistics," to paraphrase the British statesman Benjamin Disraeli.

A closer look at government data reveals the labor participation rate, which has been declining for decades, is at its lowest in the last 45 years if you exclude the pandemic (more on why in a minute).

How do these data mesh with the White House's figures, which show 13 million added jobs and an employment rate of 3.6%? The answer is surprisingly simple.

Government data show there has been considerable job growth since early 2020, with 130 million total jobs in April 2020 to 156 million in June 2023, but almost all of that job growth involved replacing jobs that were erased during the COVID-19 pandemic (there were 152 million total non-farm jobs prior to lockdowns).

In other words, Biden is taking credit for jobs that are primarily returning after huge swathes of the economy were shut down. But as noted, labor participation remains significantly lower than it was prior to the pandemic.

There are a multitude of reasons more people are choosing not to work. More families homeschooling, a trend that took off during the pandemic, is likely one reason. Lower (real) wages may be another factor. Perhaps some workers are refusing to return to the workforce because they don't want to get vaccinated or wear a mask (as some businesses still require). There are government-created poverty traps, which occur when poor workers lose support payments when they earn more income, which can discourage work. And of course, more working-age people are able to retire early.

All of these factors likely played a role (big or small) in the weakened labor participation, but we have clear data on one front that sheds light on the matter.

"Disability claims [are] soaring," economist Peter St. Onge recently tweeted. "A big part of that impressive unemployment rate: if you're living on disability, you're no longer counted."

St. Onge was referring to Federal Reserve data showing that disability claims, which remained flat between 2014 and 2020, began to skyrocket in 2021.

In January 2021, there were 29,851,000 disability claims. By June 2023, that figure had reached 34,152,000 — an increase of 15% in just 30 months, the fastest increase on record. (Data go back to 2008.)

There are undoubtedly various reasons disability claims are surging, but the biggest one might be related to "long COVID" (COVID symptoms that continue or develop long after initial infection).

"The bottom line is that long COVID is why the labor force participation rate has not recovered to pre-pandemic levels, even in a situation with solid wage growth," Torsten Slok, the chief economist and partner at Apollo Global Management, wrote in a note earlier this year.

Can workers even collect disability for long COVID? Apparently so, and reports suggest the Biden administration has been working to make it easier to do.

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"The Biden administration has already taken some steps to try to protect workers and keep them on the job, issuing guidance that makes clear that long COVID can be a disability and relevant laws would apply," MPR News reported in 2022.

Now, many may contend that it's the government's job to provide assistance for workers who are considered disabled. But as the economist Murray Rothbard once noted, "It is easy to be conspicuously 'compassionate' if others are being forced to pay the cost."

Whether one supports the payments or not, it's clear that the job triumphs of "Bidenomics" are smoke and mirrors. Fewer people working and more collecting disability is hardly an economic triumph — even if it makes the unemployment rate look smaller.

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Ed Dowd Drops Bombshell Data: Hematological (Blood-Related) Claims Up 522% Above Trend in 2022 (VIDEO)

July 24, 2023

"We were looking for data like this, and we found it in the UK Personal Independence [Payment] (PIP) system," announced former Blackrock portfolio asset manager Edward Dowd (@DowdEdward) on the Dr. Drew show. "We need the help of the medical community and the regulators to explain what's going on because it's alarming."

Dowd then presented a slide showing yearly PIP clearances (payments) by body system, using different metrics for 2020, 2021, and 2022.

Table - Yearly PIP clearances by body system, using different metrics for 2020, 2021, 2022

System	2016-2019 Average, \$	2020 Excess Clearances, %	2021 Excess Clearances, %	2022 Excess Clearances, %
Auditory	2942.25	13.25	32.35	121.09
Cardiovascular	11671.25	12.64	57.58	121.25
Dermatological	2533	11.17	47.77	138.44
Endocrine, Metabolic and Thermoregulation	5573.25	47.58	178.47	156.26
Gastrointestinal	9054.75	12.57	60.63	145.61
Genito-urinary	8288.25	18.49	57.57	142.97
Haematological	1587.25	16.55	217.66	522.33
Immune	2079.5	6.76	44.46	119.05
Musculoskeletal	110892.5	0.15	17.94	93.26
Neurological	80376.75	6.57	19.17	107.11
Oncology	34576	1.78	6.41	38.49
Psychiatric	119023.75	18.99	42.81	124.40
Respiratory	16267	23.68	47.94	93.51
Visual	3590.75	-0.30	9.31	90.68
Others	131923.5	-17.14	-13.93	-1.32
Total	844129.25	8.82	108.87	181.78

ASK DR. DREW ED DOWD FOUNDER OF PHINANCE TECHNOLOGIES & AUTHOR OF "CAUSE UNKNOWN" • @DOWDEDWARD

"And you can see, I'll point out hematological (blood-related) ... that's up 522% in 2022. And I want to say this is versus trend. It's not versus 2021 or 2020. It's versus a trend that we analyzed from 2016 to 2019. So it's a percent increase over trend. And the trends were stable — and then this exploded."

Dowd continued to explain the chart in more detail.

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ASK DR. DREW ED DOWD FOUNDER OF PHINANCE TECHNOLOGIES & AUTHOR OF "CAUSE UNKNOWN" • @DOWDEDWARD

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"And you can see, if you look at this chart, [increased claims in] different body systems started off slowly in 2020, picked up speed in 21, and just exploded in 2022. So something is going on that is detrimental to the population of the UK," he concluded.

Here are some of the worrisome numbers of increased claims above trend in 2022:

ED DOWD

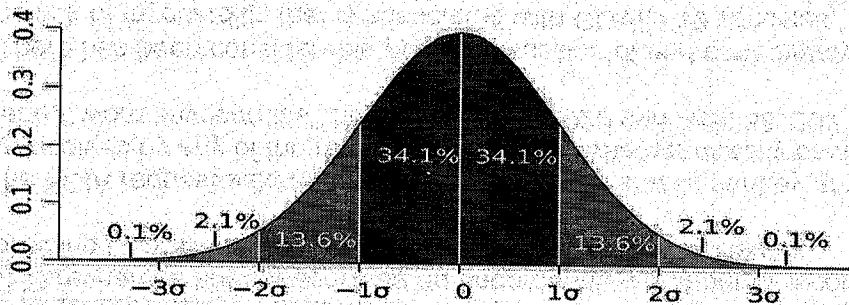
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- Hematological – up 522%
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- Dermatological – up 138%
- Endocrine, metabolic, and thermoregulation – up 156%
- Gastrointestinal – up 145%
- Genito-urinary – up 143%
- Immune – up 115%
- Musculoskeletal – up 93%
- Neurological – up 107%
- Oncology – up 35%
- Psychiatric – up 124%
- Respiratory – up 93%
- Visual – up 80%

"These numbers are just crazy percentage-wise," Dowd remarked.

"We can convert these things to what's called Z scores or standard deviations."



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Dowd explained how a three-standard deviation happens 0.3% of the time. "In Wall Street, that's a big deal." "Sometimes we see extreme six-standard deviation events, and that's kooky," he added. But alarmingly, the increase in hematological (blood-related) claims equates to a **61 standard deviation**. "That's like the probability of a black hole appearing near the earth, and we get sucked in in two years. It's not something that is likely to occur mistakenly," **Dowd** remarked.

Dowd ended by commenting, "**61 standard deviations is lights out, black swan event, something's gone off the rails. It's so many zeros and so unlikely to happen by accident that it has to be explained. And that's what we're calling on the medical community to explain this. That's it.**"

The full interview between Doctors Drew Pinsky, Kelly Victory, and former Blackrock portfolio manager Ed Dowd is available in the **video below**:

<https://rumble.com/v30rc7a-ed-dowd-reveals-new-bombshell-data-that-looks-like-a-cover-up-w-dr-kelly-v.html>

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After Long Silence On 'Long Vax', Science Magazine Links Autoimmune Disorders To COVID Shots

JULY 21, 2023 Brenda Baletti

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However, on July 3, the journal Science published an article confirming that COVID-19 vaccines are linked to autoimmune disorders, such as small fiber neuropathy and postural orthostatic tachycardia syndrome (POTS).

"We've been screaming from the top of our lungs about these things happening," Agnieszka Wilson, founder of #CanWeTalkAboutIt told The Defender. "And finally, slowly, it's being acknowledged."

The #CanWeTalkAboutIt campaign is a global effort to break the silence around injuries from the COVID-19 vaccine.

Suzanna Newell, former board member of the vaccine-injured patient advocacy group React19, told The Defender:

"I am extremely grateful that doctors and medical institutions are now willing to talk about adverse reactions. [They] should have been listening to the injured. We even have many injured medical professionals among the injured who have had trouble being heard."

Science reported that in addition to abnormal blood clotting and heart inflammation, the COVID-19 mRNA vaccines give rise to "another apparent complication":

"[This] debilitating suite of symptoms that resembles Long Covid, has been more elusive, its link to vaccination unclear and its diagnostic features ill-defined.

"But in recent months, what some call Long Vax has gained wider acceptance among doctors and scientists, and some are now working to better understand and treat its symptoms."

According to Science, Long Vax cases "seem very rare." They include a wide range of symptoms such as persistent headaches, severe fatigue, and abnormal heart rate and blood pressure.

The symptoms can begin to appear within hours or weeks after vaccination and are difficult to study, the authors of the article said.

Science reported that increasing numbers of researchers are making diagnoses that include small fiber sensory neuropathy, which causes tingling or electric shock-like sensations; burning pain and blood circulation problems, and POTS [postural orthostatic tachycardia syndrome]—a condition that affects blood flow and can result in symptoms such as lightheadedness, fainting, and increased heartbeat—that appear when standing up from a reclined position.

Post-vaccination symptoms could have features of one or both conditions. People with long COVID can suffer similar symptoms, according to the article.

Small sensory fiber neuropathy and POTS also are associated with other vaccines such as Gardasil, Merck's human papillomavirus (HPV) vaccine.

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Brianne Dressen, founder of React19, said that despite the fact the article qualifies some of its key claims, she sees it as an important step toward getting these conditions more widely recognized.

Dressen told The Defender:

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"Science Magazine is speaking to an audience that the rest of us who have been pigeonholed into this corner can't speak to because they don't even know we exist. We've all been censored to no end. So how are we going to reach those people?"

"They've been hammered over and over again in outlets like Science Magazine—which is kind of ironic—with the idea that the vaccines are wonderful and there's no possible way that anything bad can happen ...

"So, if we ever get an opportunity to put a little bit of content out there in their lane for them to question even just a little bit what's going on around them, then we'll be able to pull them back over to, you know, to the truth."

Vaccine-Related Autoimmune Disorders Are Underreported

Scientists at the National Institutes of Health (NIH) were attempting to study and treat patients with Long Vax symptoms in 2021. They published a preprint report on their work, but the study was abruptly halted without explanation and the NIH has stonewalled attempts to discover details about what the agency knew early on.

Science also cited previous and forthcoming research by Sujana Reddy identifying post-vaccine POTS, and a study published in Nature Cardiovascular Research by researchers from Cedars Sinai Medical Center last year that linked COVID-19 and the vaccine to POTS.

Other peer-reviewed research reported similar links and has revealed a wide range of immune system and neurological effects from the COVID-19 vaccine.

Numerous people with autoimmune disorders from the COVID-19 vaccine have also shared their stories with The Defender. Some reported difficulties in submitting their health information to the Vaccine Adverse Event Reporting System (VAERS).

A total of 1,569,668 reports of adverse events following COVID-19 vaccines were submitted between Dec. 14, 2020, and June 23, 2023, to VAERS.

The latest available data from VAERS show 770 reports of POTS with 578 cases attributed to Pfizer's vaccine, 160 reports attributed to Moderna's and 31 reports to Johnson & Johnson's.

"Under-reporting is a known and serious disadvantage of the VAERS system," according to VAERS expert Jessica Rose, Ph.D. Rose wrote, "Unfortunately, we can never really know how many people are suffering from adverse events. Reports can go missing, reports can remain in temporary VAERS ID limbo or never get filed in the first place."

Scientists Hesitantly Speak Out

"You see one or two patients and you wonder if it's a coincidence," Anne Louise Oaklander, M.D. Ph.D., a neurologist and researcher at Harvard Medical School, told Science. "But by the time you've seen 10, 20," she continued, "where there's smoke, there's fire."

In addition to Oaklander, a top researcher on small fiber neuropathy, Harlan Krumholz, M.D., a Yale cardiologist, Sujana Reddy, D.O., an internal medicine resident physician at East Alabama Health, Tae Chung, M.D., a neuromuscular physiatrist who runs a POTS clinic at Johns Hopkins, Matthew Schelke, M.D., a neurologist at Columbia University, Lawrence Purpura, M.D., MPH, an infectious disease specialist at Columbia University, and William Murphy, Ph.D., an immunologist at the University of California, Davis all commented on their ongoing research on autoimmune illness associated with COVID-19 vaccination.

The article also reports that "regulators in the US and Europe say they have not found a connection between COVID-19 vaccines and small fiber neuropathy or POTS."

But even Peter Marks, M.D., Ph.D., director of the U.S. Food and Drug Administration's Center for Biologics Evaluation and Research, which has denied and downplayed the existence of vaccine autoimmune side effects, conceded to Science, "If a provider has somebody in front of them, they may want to take seriously the concept [of] a vaccine side effect."

German Minister of Health Karl Lauterbach has "acknowledged that Long Covid-like symptoms after vaccination are a real phenomenon," Science also reported.

23-3

Marks told Science he worried "the sensational headline" about vaccine side effects could "mislead" the public. And several other researchers quoted in the article also expressed concern that their research could "undermine trust in COVID-19 vaccines."

Dressen said researchers are hesitant to speak out because it carries great risk.

"There is not a single person, whether they are new to the game or whether they've been in this for decades, there's not a single person that when they do step across that line and they do speak out, that they don't get punished," Dressen said.

She added, "There's not a single person that gets hailed a hero and money flows and their research happens. There's always repercussions. And these researchers knew that, right? Which is why they came out together and they came out in force."

The Power of Patient Advocacy

Dressen also told The Defender that doctors and researchers are finally speaking out because of the work being done by vaccine-injured patients.

"The interesting thing about these researchers though," she said, "is that they too had to be deprogrammed. And that happened because of ... the patients [who] ended up in their offices," she said.

"The majority of the advocacy that happened to get these researchers to where they were willing to speak out, it happened on the ground floor with their own patients. So, you know, that's the power that the patients have."

Newall, who suffers from COVID-19 vaccine-related autoimmune disease, said:

"The best advice and support I have had about my reactions have come directly from other injured. They have been a lifeline for me. I knew to ask for a skin punch biopsy only because other injured people had told me to based on my symptoms.

"Even knowing what to ask for, the first neurologist wanted to wait and run other tests because he said small fiber neuropathy doesn't normally present the way I was presenting. I told him we are in uncharted [sic] waters learning as we go, so please run the test.

"Finally after months of waiting, he tested me and I was positive for small fiber polyneuropathy."

Immune Overreaction to Spike Protein

The article hypothesizes that the Long Vax symptoms might be caused by an immune overreaction to the SARS-CoV-2 spike protein. Science wrote:

"One theory is that after vaccination some people generate another round of antibodies targeting the first. Those antibodies could function somewhat like spike itself: Spike targets a cell surface protein called the angiotensin-converting enzyme 2 (ACE2) receptor, enabling the virus to enter cells."

Bernhard Schieffer, M.D., Ph.D., a cardiologist at the University of Marburg, is also quoted:

23-4

"The rogue antibodies might also bind to ACE2, which helps regulate blood pressure and heart rate. ... If those antibodies disrupt ACE2 signaling, that could cause the racing heart rates and blood pressure swings seen in POTS.

"Small fiber neurons also have the ACE2 receptor on their surface, so in theory rogue antibodies could contribute to neuropathy."

Rose told The Defender that "molecular mimicry" is a possible action for spike-induced autoimmunity. Molecular mimicry refers to a significant similarity between pathogenic elements contained in a vaccine and some human proteins.

According to Nature, this similarity may lead to immune cross reactivity, where the reaction of the immune system toward the pathogenic antigens may harm the similar human proteins, essentially causing autoimmune disease.

'Needless Gaslighting' Has to End

Vaccine-injured advocates say that much more research into these types of adverse events is imperative.

"This is just one of the many injuries and many side effects that they write about in this article. There's so much more work to be done in the area, so much more attention to be given to a lot of people who are suffering today," Wilson said.

Newell said that when vaccine-injured can get access to early treatments, they are more likely to recover.

"But, that requires acknowledgment," she said, adding, "Just like Guillain-Barré [syndrome] is recognized as a vaccine reaction, we need small fiber neuropathy and POTS to be recognized as well."

She added:

"Had there been a medical and financial safety net along with processes to accurately research the injured and adequately support us, we would be much farther along than we are and so many wouldn't have had to needlessly be gaslit at the doctor's office with all of these new symptoms.

"I wish those of us who were not using the medical system prior to our Covid vaccines and were now suddenly showing up with debilitating and scary symptoms would have been at the very least researched.

"We needed acknowledgment even though our truths are uncomfortable. It has been a painful and lonely ride that I would not wish on anyone. We need to be able to talk openly about reactions because what doesn't get talked about leads to shame and isolation. Isolation can lead to suicide. We have seen far too many injured take their lives.

"We have waited years because our reactions might cause vaccine hesitancy. That has delayed progress. We are part of the science. The medical world needs to study our reactions to make this brand-new vaccine safer for all people."

Science reported that a few university-sponsored research projects are moving forward. Yale's LISTEN study will examine both long COVID and Long Vax cases.

React19 also plans to distribute small grants for studying immunology, biomarkers, and other features of post-vaccine illness. "Even modest support matters," Krumholz told Science, because "it's incumbent on us to produce preliminary data" to win over funders with deep pockets.

23-5

"The deep-pocketed funders of Covid vaccines had no problem pouring billions into them without any preliminary data—but helping their victims is not one of their financial priorities," Chudov commented.

He added, "Thus, the researchers helping the vaccine-injured operate with tens of thousands of dollars, while Pfizer shareholders enjoy their multi-billion windfall."

Wilson, who is also a journalist who interviews doctors and scientists on her program, the "Aga Wilson Show," added, "This is not a fight between the anti and the pro-vax. It's a fight for people's health."

She said public health agencies should be responsible for creating better systems to track injuries and should be funding research to understand and treat them and stop them from happening again.

"We are in a very bad situation because the governments are not taking responsibility for this. This research needs to be funded," she said.

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N.Y. Times Admits COVID Deaths Overcounted by One-Third

The official number is probably an exaggeration because includes some people who had virus when they died even though it was not the underlying cause of death.

Ezekiel Loseke July 19, 2023

(Ezekiel Loseke, Headline USA) The *New York Times*, after having previously denounced the observation that U.S. COVID-19 deaths were systematically over-reported, finally admitted the truth in a recent article, but buried it in paragraph 17.

"The official number is probably an exaggeration because includes some people who had virus when they died even though it was not the underlying cause of death," the paper confessed in the Monday morning "Newsletter" item titled "A Positive Covid Milestone."

"Other C.D.C. data suggests that almost one-third of official recent Covid deaths have fallen into this category," it added. "A study published in the journal *Clinical Infectious Diseases* came to similar conclusions."

Although the mortality padding was widely recognized at the time from anecdotal reports about the inconsistent and overly broad standards being applied by medical officials, few were willing to acknowledge it.

Based on the fraudulent data, states including New York destroyed small businesses, encroached on civil liberties in an unprecedented manner, and locked many citizens in their homes, as noted by Breitbart columnist John Nolte.

In 2020, however, the "newspaper of record" attacked then-President Donald Trump and other skeptics for suggesting that COVID numbers were inflated by an over-diagnosis of the crisis.

In an article titled "Right-Wing Media Stars Mislead on Covid-19 Death Toll," it even labeled the claim a "QAnon conspiracy theory," while attempting to shame popular conservative radio host Mark Levin.

The article trotted out Anthony Fauci, the then-director of the National Institute of Allergy and Infectious Diseases, to clarify the subtle distinction between truth and wild online fabulism.

"The point that the C.D.C. was trying to make was that a certain percentage of them had nothing else, but just Covid," Fauci said. "That does not mean that someone who has hypertension or diabetes who dies of Covid didn't die of Covid-19—they did."

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Dr. Peter McCullough: Mitochondrial Dysfunction Linked to Spike Protein Damage

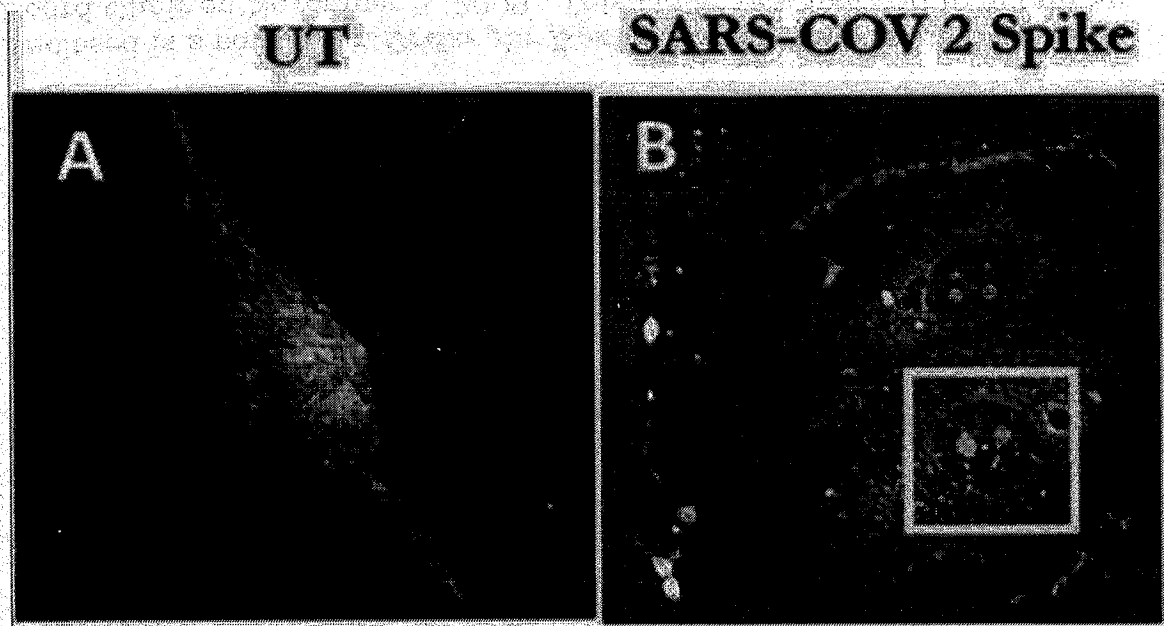
Dr. Peter McCullough, the nation's foremost COVID and COVID vaccine expert, is the most trusted voice when it comes to dealing with complications from both the virus and the experimental vaccine used to treat it. And he is courageously speaking out again.

One prime post-COVID symptom that has left experts puzzled is the "brain fog" phenomena, where people infected by the virus experience long-term neurological symptoms. A recent study produced by Clough et al. at the University of Buffalo, titled: *Mitochondrial Dynamics in SARS-COV2 Spike Protein Treated Human Microglia: Implications for Neuro-COVID*, deals with this exact issue.

And the study is alarming, to say the least:

"Emerging clinical data from the current COVID-19 pandemic suggests that ~ 40% of COVID-19 patients develop neurological symptoms attributed to viral encephalitis while in COVID long haulers chronic neuro-inflammation and neuronal damage result in a syndrome described as Neuro-COVID. We hypothesize that SAR-COV2 induces mitochondrial dysfunction and activation of the mitochondrial-dependent intrinsic apoptotic pathway, resulting in microglial and neuronal apoptosis."

The authors studied immune cells in the brain, both before and after COVID spike protein exposure. The spike protein caused the cell's mitochondria, the part of the cell that creates energy and stimulates immune response, to dysfunction massively. Compare the photos below of untreated (UT) vs SARS-COV2 Spike exposed cells (yellow box emphasizes the degradation of the cell's mitochondria.)



"These findings disclose some important mechanistic insights into SARS-COV2 induced mitochondrial dysfunction which underlies neuropathy associated with post-SARS-COV2 syndromes including Spike protein damage from the infection and COVID-19 vaccines," wrote Dr. McCullough. The imaging alone speaks volumes: cell mitochondria are being attacked and fractured by the spike protein.

26-1

Over 1M Americans are likely severely vaccine injured by the COVID vaccines

Imagine going from being perfectly healthy to suddenly having 30 or more chronic symptoms in common with the vaccine injured. We need to stop these shots ASAP.

STEVE KIRSCH JUL 14, 2023

Executive summary

On May 27, 2022, I did a survey of the vaccine injured, but I never formally published the results. At the time of the survey, I had around 100,000 followers on Substack so my reach was limited. You can see the survey results here.

I received over 1,000 responses. The comments are devastating. Take the time to read them. It's important to notice that over 100 over those were severely injured with 30 or more symptoms that are common to the COVID vaccinated.

Can you imagine going from perfectly normal to having over 30 unusual symptoms in a span of days? I wrote a story about one of the people most injured, Marsha Gee. She was perfectly healthy before the shots. After the shots, she exhibited 78 of the 100 or so symptoms common to COVID vaccine victims. That's not just bad luck or a coincidence.

Nothing much has changed in the year since I wrote that story.

Doctors are still claiming that injuries are rare and few doctors are speaking out. Because the doctors stay silent, every doctor assumes that it is just them who is having the "bad luck." They don't want to say anything because they don't want to alarm people. So, nobody has figured out that nearly everyone is unlucky.

Survey results of my survey of the vaccine injured

You can see the survey results here.

The comments (in the far right field) are devastating. They are not rare.

What is staggering is the sheer number of people who went from perfectly normal to having dozens of telltale vaccine injury symptoms shortly after the shots.

This is not a safe vaccine. I've never heard anything like this, going from normal to 86 new symptoms? The list is ordered by the number of symptoms reported.

One of the comments from over a year ago

Here is what a former top nurse at UCSD wrote on May 29, 2022:

Please help. UCSD has medically separated me from their hospital due to my disabilities... I was honored to be the first nurse at ucsd to get vaccinated... and they've turned their backs on me since that very first

26-2

day. They still believe in "no adverse reactions" from this Pfizer COVID vax. I started dying that day... and I'm still continuing to fight for my life 17months later. Thank you.

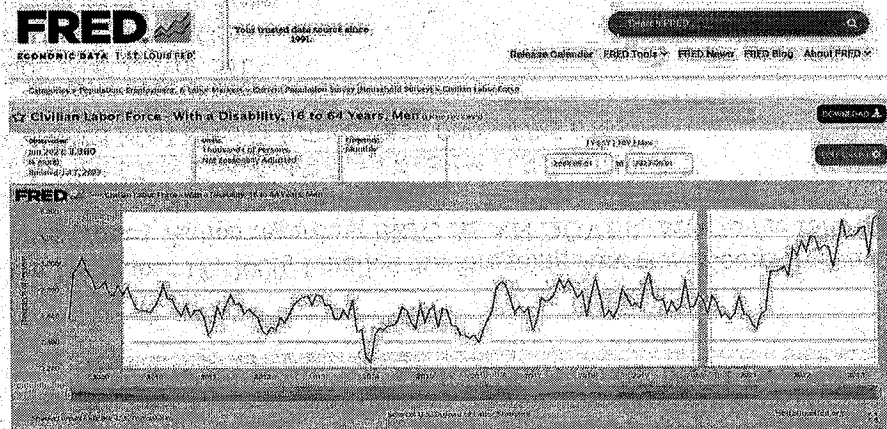
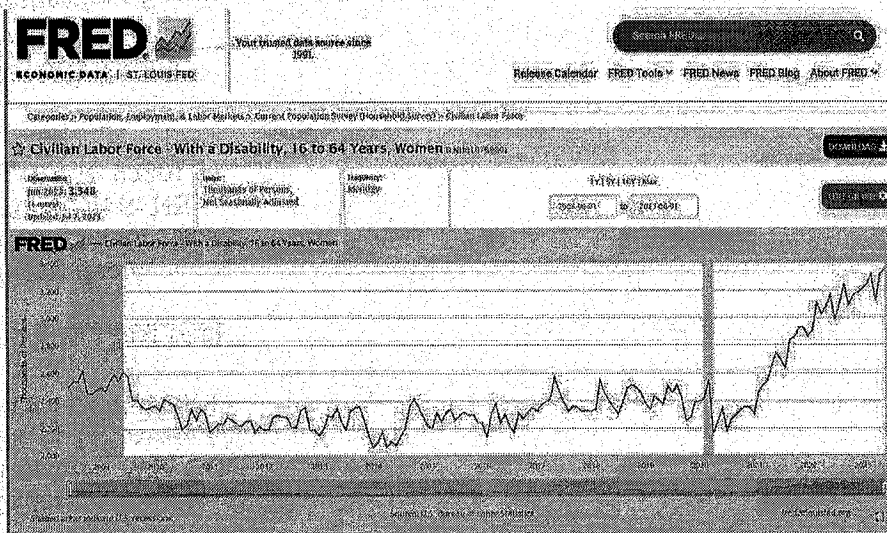
You can [read her story here](#).

The numbers are staggering

Over 270M Americans got the shot.

The v-safe data showed 8% of people who got the shot had to seek medical attention; that translates to about 22M Americans who were injured.

It also appears that a huge number of Americans were disabled by the vaccines: over 1M women and 750K men to date and the number is still going up.



26-3

In addition, I've estimated earlier that around **640,000 Americans have been killed** by the shot (the shot kills roughly 1 person per 1,000 doses as noted at the end of this paper; this has been confirmed by many other analyses using different approaches).

Could it be something other than the vaccine?

That would cause this much unprecedented disability, it has to be something novel that we've never seen before. This limits the possibilities, doesn't it?

It has to be novel. It has to be able to seriously injure people in a way that gets worse over time (either by grinding away at people from the inside or being repeatedly applied). What are the candidates other than the vaccine?

A comment from one of my Substack readers sums up the situation nicely:



Sean Jul 26, 2022

I've heard of more deaths, both personally and professionally (people taking time off for bereavement) in the past year, than I have in my 50 years on this earth.

♡ LIKE (2) ◻ REPLY ***

If the vaccines are safe and effective, what could cause something like this?

Summary

Overall, the COVID shots have been a complete and utter disaster.

The shots made people more likely to become infected, injured, disabled, and dead. The COVID vaccines appear to be the worst medical interventions of all time killing an estimated 13M people worldwide (see page 24 of Rancourt's paper).

It appears that the cure may have killed around twice as many people as the disease.

I found the same thing when I commissioned an independent poll of Americans: twice as many people were killed by the vaccine as from COVID.

But what's even worse is that, by and large, the medical community has not acknowledged the huge number of vaccine injuries and deaths and still believes that the COVID vaccines were a huge success and have saved millions of lives worldwide.

The gap in perception is huge. It's a shame we cannot have a conversation about it, isn't it?

27-1

'This Is Not Normal': Embalmer Continues to Sound Alarm on Freakish Blood Clots Found in Vaxxed People

Adan Salazar July 3, 2023

'In the 20 years prior to 2021 I never seen anything like this,' says embalmer Richard Hirschman.

Freakishly long blood clots continue to be found inside the bodies of deceased vaccinated individuals, embalmer and funeral director Richard Hirschman says.

Hirschman took to Twitter Sunday saying he's still seeing the long fibrous clots being extracted from vaxxed individuals.

"I have been only sounding an alarm about what I am seeing! I can only say that this is not normal," Hirschman tweeted. "In the 20 years prior to 2021 I never seen anything like this. Something is causing this, and I see it often."

I never claimed to be a doctor or scientist, I am an embalmer. I have been only sounding an alarm about what I am seeing! I can only say that this is not normal. In the 20 years prior to 2021 I never seen anything like this. Something is causing this, and I see it often. pic.twitter.com/beZy7pEzfh

— Richard Hirschman (@r_hirschman) **July 3, 2023**

Replying to a commenter, Hirschman showed a picture of what a normal blood clot typically looks like.

This is what I am seeing in the veins and arteries of the dead during the embalming process.

— Richard Hirschman (@r_hirschman) **July 3, 2023**

I have been saying that the blood is different! Since early 2021 during the embalming process I have noticed unusual clotting. From small specks to large white fibrous clots. pic.twitter.com/GC59j4uo43

— Richard Hirschman (@r_hirschman) **July 2, 2023**

Hirschman's comments come as bodybuilder and fitness influencer Jo Lindner **died over the weekend** just weeks after claiming tests showed his blood samples contained white fibrous clots.

👤 YouTube bodybuilding star Joesthetics dies aged 30 of aneurysm. He talks about Covid Vaccine injuries in this video just 3 weeks ago!

Joesthetics talks about his severe post-covid vaccine injuries, and they fact that they found white fibrous clots in his blood samples. pic.twitter.com/x5bZfVjuDv

— DiedSuddenly (@DiedSuddenly_) **July 1, 2023**

Hirschman appeared in the documentary *Died Suddenly*, where he discussed discovering the clots in people he embalmed.

Check out ***Died Suddenly*** for more information about the greatest ongoing mass genocide in human history.

28-1

Repeated COVID-19 Vaccination Weakens Immune System: Study

JUNE 03, 2023 Zachary Stieber

Repeated COVID-19 vaccination weakens the immune system, potentially making people susceptible to life-threatening conditions such as cancer, according to a new study.

Multiple doses of the Pfizer or Moderna COVID-19 vaccines lead to higher levels of antibodies called IgG4, which can provide a protective effect. But a **growing body of evidence indicates that the “abnormally high levels” of the immunoglobulin subclass actually make the immune system more susceptible to the COVID-19 spike protein in the vaccines**, researchers said in the paper.

They pointed to experiments performed on mice that found multiple boosters on top of the initial COVID-19 vaccination “significantly decreased” protection against both the Delta and Omicron virus variants and testing that found a spike in IgG4 levels after repeat Pfizer vaccination, **suggesting immune exhaustion**.

Studies have detected higher levels of IgG4 in people who died with COVID-19 when compared to those who recovered and linked the levels with another known determinant of COVID-19-related mortality, the researchers also noted.

A review of the literature also showed that vaccines against HIV, malaria, and pertussis also induce the production of IgG4.

“In sum, COVID-19 epidemiological studies cited in our work plus the failure of HIV, Malaria, and Pertussis vaccines constitute irrefutable evidence demonstrating that an increase in IgG4 levels impairs immune responses,” Alberto Rubio Casillas, a researcher with the biology laboratory at the University of Guadalajara in Mexico and one of the authors of the new paper, told The Epoch Times via email.

The paper was published by the journal Vaccines in May.

Pfizer and Moderna officials didn’t respond to requests for comment.

Both companies utilize messenger RNA (mRNA) technology in their vaccines.

Dr. Robert Malone, who helped invent the technology, said the paper illustrates why he’s been warning about the negative effects of repeated vaccination.

“I warned that more jabs can result in what’s called high zone tolerance, of which the switch to IgG4 is one of the mechanisms. And now we have data that clearly demonstrate that’s occurring in the case of this as well as some other vaccines,” Malone, who wasn’t involved with the study, told The Epoch Times.

“So, it’s basically validating that this rush to administer and re-administer without having solid data to back those decisions was highly counterproductive and appears to have resulted in a cohort of people that are actually more susceptible to the disease.”

Possible Problems

The weakened immune systems brought about by repeated vaccination could lead to serious problems, including cancer, the researchers said.

Read more [here...](#)

29-1

Dr. Paul Alexander : The Silenced Jab Injured Are Committing Suicide - VIDEO

Kristi Leigh June 8, 2023

Dr. Paul Alexander supported the Canadian Trucker protest and continues to advocate for freedom and warn against the dangers of the jab -especially now for pregnant women and babies. He is sounding the alarm that not only side effects are injuring and killing people, but the cover-up is leaving the injured so defeated many are now taking their own lives. Paul Elias Alexander, Ph.D. is a global expert on COVID-19. Alexander holds master's level study at York University Canada, a master's in epidemiology at the University of Toronto, a master's in evidence-based medicine at Oxford and a doctorate in evidence-based medicine and research methods from McMaster University in Canada. He also served as former senior advisor to COVID pandemic policy in Health and Human Services in the Trump administration. ***
<https://substack.com/@drpaulalexander>

VIDEO: <https://rumble.com/v2sspas-dr.-paul-alexander-the-silenced-jab-injured-are-committing-suicide.html>

30 - 1

Breaking! 20 Million People Killed Globally By Covid Vaccines & 2.2 Billion Seriously Hurt (Video)

August 13, 2023

Alex Jones breaks down a video from Dr. Roger Hodkinson explaining how the Covid vaccine killed 20 million people globally.

BREAKING NEWS: 20 million global deaths directly attributed to the Covid Vaccines and 2.2 billion serious adverse reactions. These numbers are best estimates using government data. Anthony Fauci, Bill Gates, Ralph Baric, Tedros and others created a Pandemic to inject the world.... pic.twitter.com/686mJeaVN7

– Truth Justice [™] (@SpartaJustice) March 25, 2023

<https://banned.video/watch?id=64d8015c3a4bee5842ddfe8b>

31-1

Apple Valley Village Health Care Center saw >7X higher COVID death rates after COVID vax rollout. Isn't it supposed to decrease rates?

It's in the official Medicare reports! And an employee revealed that 30% of the residents died directly after the shots. Bottom line: the CDC lied and people died.

STEVE KIRSCH AUG 14, 2023

I got inside data from someone who worked at Apple Valley Village Health Care Center showing that the vaccines killed patients and made them more likely to die from COVID.

Executive summary

I recently heard an extraordinary story from an employee at Apple Valley Village Health Care Center in Apple Valley, MN.

Before the vaccines, there were 27 cases of COVID and no deaths from COVID. Not a single death.

So things were under control. No need for a vaccine; nobody was dying.

But they had to roll out the vaccine because they were told to.

Here's what happened next:

- **30% of patients killed by the vaccine in 3 weeks:** Over 40 people died within 3 weeks after the shot. There were around 140 residents at the time, so the vaccine killed nearly 30% of the residents.
- **10X higher death rate from COVID:** Shortly after the vaccine rollout, in one span of just 3 weeks, there were 90 cases of COVID which resulted in 28 deaths from COVID. COVID, which wasn't deadly before people got the shots, seems to have made people much more likely to get COVID and much more likely to die from COVID. You don't have to take my word on this; it's right there in the official US government CMS data: a 10X higher death rate from COVID post-vaccine.
- In short, **the COVID vaccines were an absolute disaster at that facility.** Everyone kept quiet about it. They didn't even tell key members of management (like the person in charge of PR).

Nobody who works there today would return my calls to confirm these reports for some reason. I can't figure out why. I just want to know the truth.

It's almost like they are hiding something.

I picked a random facility for comparison and the numbers there were even worse; the vaccine killed everyone at that facility and made people much more likely to die from COVID as well. In fact, it was so bad, that more people died from COVID than were infected with COVID!

Finally, the most important lesson, once again, is that we need full transparency of record-level public health data. When we have this transparency, we can instantly see how flawed the data is. Without that transparency, we erroneously trust data that we should never have trusted.

It's too bad nobody in public service agrees with me on this and will sponsor a bill to make public health care records public.

Introduction

There must be some reason that no nursing in America wants to share their data with me, but I just can't seem to figure it out. ;)

Well, I finally got my wish: I got data from an employee at Apple Valley Village Health Care Center.

On Sunday, Jan 3, 2021, this employee was called back to work during the holidays due to a massive number of deaths that started happening right after the COVID vaccines were given on December 28 and 29 of 2020 (Monday and Tues).

In other words, in just 5 days after the shots, the Center had become a war zone. It was so bad, they had to call their employees back to the office early from their holiday to deal with all the dead bodies.

31-2

Over 40 people died in a 3 week period in January in a facility that housed 140 patients at the start of 2021 (178 bed total capacity). That's a loss of nearly 30% of the residents killed by the vaccine.

This is a train wreck.

Maybe that is why the nursing homes won't return my calls?

Site selection

This nursing facility was selected for this story because I was contacted by a whistleblower there who provided quantitative information and dates.

I'm not cherry picking. I'm just documenting information that is offered to me.

Also, if the vaccine is safe, there can't be a single facility where the vaccine is unsafe and large fractions of the patient base dies. So a single facility can prove that the null hypothesis (vaccines are safe) is false.

The key statistics that were reported

- **COVID death rate before vaccine:** 0 deaths in 27 COVID cases. A death rate of zero.
- **COVID death rate post-vaccine:** 28 COVID deaths in 90 cases, a more than 10X increase in the rate (technically, it's an infinite increase since the rate before was 0).
- **All-cause deaths per dose caused by the vaccine:** 40 deaths in 140 doses which is more than **1 death for every 4 doses**. That is not a typo.

Apple Valley Village lessons

- This is why the nursing homes are never talking about what a huge success the vaccines were. It's not because they are shy. It's because the vaccines killed massive numbers of elderly people.
- Nobody spoke up. There was no PR about this, nothing to notify the community. The company didn't even notify their head of communications about what was happening.
- Nobody wants to talk about it today. The company didn't return any of my calls and believe me, I called lots of people.
- The Medicare records are publicly downloadable. Anyone can verify that before the COVID shots there were ZERO deaths in 27 cases. They can also verify just weeks later, after the shots, the death rate from COVID skyrocketed to 28 deaths in 90 cases, almost a 1 in 3 death rate from COVID, up from zero.
- The facility lost nearly 30% of their residents in just 3 weeks just from the shot alone (not from COVID).
- Of course, not all facilities will see such a high death rate, but the fact that you can find even a single facility with this level of deaths says there is something seriously wrong with the vaccine, e.g., quality control of batches.

The vaccine did precisely the opposite of what people were told.

When a child dies from drinking unsafe baby formula, we shut down the plant. When old people die at a nursing home, nobody gives a damn.

This is not the only example

I'm just picking on Apple Valley because I was able to get data from an insider to compare it with the official data in Medicare. They didn't match up.

But this site is by no means the only example in Medicare. With 15,000 nursing homes listed, this is a "target rich environment." It took me no effort at all to find far worse examples.

Let's use **the 2020 and 2021 database** and look at, for example, provider #315506 which is PROMEDICA SKILLED NURSING & REHAB (WASHINGTON Township) which I just picked randomly.

I called them up and I was able to directly talk to someone who could help me. He's new there (the nursing home was acquired by a new entity in Feb 2023) and said he'd get back to me on the data. A far cry from the ghosting I got at Apple Valley Village.

31-3

Note that Promedica is huge; they have operations all over the US.

Before the COVID vaccines rolled out, this location reported in 2020:

- COVID cases: 50
- COVID deaths: 34
- Total deaths: 60

So that's way different from Apple Valley. Pre-vax, over half the total deaths were from COVID and 68% of the COVID cases were fatal.

So this makes COVID appear super deadly while Apple Valley made COVID (before the vaccines) look mild.

I know what you are thinking:

How can that be? How can a virus kill 68% of the elderly patients in one facility (Promedica) and zero in another (Apple Valley Village) during the same timeframe in 2020?

Well, nobody's looking into that because we haven't had any transparency of the public health data. It's all buried where people can't find it.

What do I think? I don't know because Apple Valley Village won't talk. And it's not like Medicare is going to investigate this and explain the discrepancy either. And it's not like *The New York Times* or anyone in mainstream media cares about this at all.

Their mission is to promote the narrative, not to find truth. And there's no chance anyone in Congress is curious either. Just me.

So the COVID vaccine to the rescue, right? Surely, you can't get any worse than a 68% death rate from COVID!! That's what I thought...

Well, you'll never guess what the numbers reported to Medicare in 2021 were for that facility from the start of 2021 until 3/8/21 (essentially for the first 2 months of 2021):

20 COVID cases, but 58 COVID deaths !!!

Whoa baby... just when you thought things were bad before, they just got really bad now.

There were nearly 3X as many people who died from COVID as there were who got COVID!

In other words, the death rate from COVID went from a 68% death rate to drumroll please... and quadrupled after the vaccine rollout to a **290% death rate!!!**

This is incredible to me.

I've never heard of more people dying from a disease than who got the disease.

But it's right there in the MEDICARE DATA. And it passed the Medicare QA checks as well.

All of these deaths happened within about 2 months after the vaccine rollout. I wonder if any of these deaths might have been from the safe and effective "vaccine"?? What do you think?

Here are the numbers for the COVID infections, COVID deaths, and all-cause deaths at this facility in 2021 so you can see that I'm not cherry picking:

31-4

Week Ending	Submitted Passed Quality Assurance Check	Residents Weekly Confirmed COVID-19	Residents Total Confirmed COVID-19	Residents Weekly All Deaths	Residents Total All Deaths	Residents Weekly COVID-19 Deaths	Residents Total COVID-19 Deaths	Number of All Beds	Total Number of Occupied Beds
1/1/2021	Y	3	53	3	63	3	27	120	86
1/10/2021	Y	3	60	3	66	3	30	120	88
1/17/2021	Y	3	62	3	69	3	31	120	89
1/24/2021	Y	3	65	3	73	3	34	120	92
1/31/2021	Y	3	68	3	76	3	35	120	94
2/7/2021	Y	0	68	21	110	8	61	120	101
2/14/2021	Y	0	68	20	150	7	68	120	100
2/21/2021	Y	0	68	21	171	8	76	120	97
2/28/2021	Y	0	67	21	192	6	84	120	100
3/7/2021	Y	0	70	21	213	3	91	120	100
3/14/2021	Y	0	70	0	213	0	91	120	89
3/21/2021	Y	0	70	0	213	0	91	120	78
3/28/2021	Y	0	70	1	214	0	92	120	71
4/4/2021	Y	0	70	0	214	0	92	120	69
4/11/2021	Y	0	70	3	217	0	92	120	66
4/18/2021	Y	0	70	1	218	0	92	120	70
4/25/2021	Y	0	70	1	220	1	95	120	80
5/2/2021	Y	0	70	0	220	0	95	120	83
5/9/2021	Y	0	70	0	220	0	95	120	81
5/16/2021	Y	0	70	0	220	0	95	120	84
5/23/2021	Y	0	70	1	221	0	95	120	81
5/30/2021	Y	0	70	0	221	0	95	120	83
6/6/2021	Y	0	70	0	221	0	95	120	88
6/13/2021	Y	0	70	1	222	0	95	120	85
6/20/2021	Y	0	70	1	223	0	95	120	90
6/27/2021	Y	0	70	0	223	0	95	120	95
7/4/2021	Y	0	70	0	223	0	95	120	95
7/11/2021	Y	0	70	0	223	0	95	120	94
7/18/2021	Y	0	70	0	223	0	95	120	97
7/25/2021	Y	0	70	1	225	0	95	120	93
8/1/2021	Y	0	70	0	225	0	95	120	91

Promedica data from the official CMS data. Columns in this screenshot are: Submitted Data, Passed Quality Assurance Check, Residents Weekly Confirmed COVID-19, Residents Total Confirmed COVID-19, Residents Weekly All Deaths, Residents Total All Deaths, Residents Weekly COVID-19 Deaths, Residents Total COVID-19 Deaths, Number of All Beds, Total Number of Occupied Beds.

8/15/2021	Y	Y	0	70	1	227	0	95	120	95	0
8/22/2021	Y	Y	0	70	0	227	0	95	120	95	0
8/29/2021	Y	Y	0	70	2	229	0	95	120	94	0
9/5/2021	Y	Y	1	71	3	230	0	95	120	90	0
9/12/2021	Y	Y	0	71	0	230	0	95	120	93	0
9/19/2021	Y	Y	0	71	0	230	0	95	120	89	0
9/26/2021	Y	Y	0	71	0	230	0	95	120	92	0
10/3/2021	Y	Y	0	71	0	230	0	95	120	95	0
10/10/2021	Y	Y	0	71	2	232	2	95	120	95	0
10/17/2021	Y	Y	0	71	1	233	0	95	120	96	0
10/24/2021	Y	Y	0	71	0	233	0	95	120	102	0
10/31/2021	Y	Y	0	71	1	234	0	95	120	96	0
11/7/2021	Y	Y	0	71	0	234	0	95	120	99	0
11/14/2021	Y	Y	0	71	1	235	0	95	120	100	0
11/21/2021	Y	Y	0	71	1	236	0	95	120	100	0
11/28/2021	Y	Y	1	72	2	238	0	95	120	97	0
12/5/2021	Y	Y	0	72	2	240	0	95	120	101	0
12/12/2021	Y	Y	1	73	0	240	0	95	120	107	0
12/19/2021	Y	Y	3	76	1	241	0	95	120	111	0
12/26/2021	Y	Y	3	79	2	243	1	96	120	98	0

The all-cause deaths dropped back to near zero. Next pay attention to the weekly all-cause deaths. Let me magnify that for you so you can clearly see that right after they rolled out the safe and effective vaccine, deaths per week skyrocketed to unprecedented levels, then rapidly disappeared.

The stunning thing that is undeniable is that over a 2 month period (from the start of the year to the week ending 3/7/21), 153 residents died in a facility that had an average occupancy of less than 100 beds over that 2 month period. That's a stunning death rate. The only thing that was "unusual" was the introduction of the vaccine.

If the vaccine worked as promised, none of the 20 COVID cases would have died from COVID because the vaccine prevented that. So all 153 deaths in 2 months (basically a stunning 153% death rate over the 2 month period relative to the average occupancy) would have to be primarily due to the vaccine.

12-29

31-5

If the vaccine didn't work at all, then a max of 20 COVID deaths could happen (from the 20 COVID cases), and count 10 deaths for the underlying weekly death rate, and that leaves only 123 excess deaths over 2 months on a base of 100 residents which is an astonishing 123% death rate from the vaccine itself.

Week Ending	Residents Weekly All Deaths	Residents Total All Deaths	Residents Weekly COVID-19 Deaths	Residents Total COVID-19 Deaths
1/3/2021	3	63	3	37
1/10/2021	3	66	3	38
1/17/2021	3	69	3	39
1/24/2021	20	89	7	46
1/31/2021	20	109	7	53
2/7/2021	21	130	8	61
2/14/2021	20	150	7	68
2/21/2021	21	171	8	76
2/28/2021	21	192	8	84
3/7/2021	21	213	8	92
3/14/2021	0	213	0	92
3/21/2021	0	213	0	92
3/28/2021	1	214	0	92
4/4/2021	0	214	0	92
4/11/2021	3	217	0	92
4/18/2021	2	219	0	92
4/25/2021	1	220	1	93
5/2/2021	0	220	0	93
5/9/2021	0	220	0	93
5/16/2021	0	220	0	93
5/23/2021	1	221	0	93
5/30/2021	0	221	0	93
6/6/2021	0	221	0	93
6/13/2021	1	222	0	93
6/20/2021	1	223	0	93
6/27/2021	0	223	0	93
7/4/2021	0	223	0	93

A magnified view of the key columns in the spreadsheet above.

Could any of these deaths be from COVID?

Look at Provider #396122, FOX SUBACUTE AT MECHANICSBURG in MECHANICSBURG, PA.

There was no COVID at all in this case. Yet a huge number of deaths happened in the two months after the vaccine rollout. Then the deaths plummeted back to zero.

More people died (138 for the year) then there were residents of the facility (53).

So over a 100% death rate right after the vaccines rolled out, without any COVID deaths or diagnoses.

Here's a third case of COVID death rates skyrocketing after the COVID vaccines rolled out. These cases are easy to find.

Here's another one that simply can't happen if the vaccines worked to reduce the death rate from COVID, Medicare provider 455815, ASBURY CARE CENTER OF HOUSTON.

In 2020, they had 36 COVID cases and 6 deaths from COVID.

By the week ending May 16, 2021, they had 1 additional COVID case, but now had 35 COVID deaths. So pretty much everyone with COVID died. The death rate post-vaccine was much higher than pre-vaccine.

All of these cases are verifiable in the database.

The Medicare Nursing Home database

That Medicare database is a target rich environment for truth seekers because it is week-by-week record level data where it is hard to hide inconsistencies as you can see from our analysis.

For that reason, I expect that Medicare will take it down soon so nobody else will analyze it and make them look bad.

31-6

Download it while you still can and you can verify everything I wrote in this article (except for the vaccine death rates which I got from an Apple Valley employee):

[Medicare Nursing Home data download link](#) (official mortality data for all nursing homes in US)

No transparency of record-level health care data

Now you can see why all my calls for data transparency of public health RECORD-LEVEL data have fallen on deaf ears.

I have yet to find a single lawmaker in any state or the US Congress committed to sponsoring a bill that will allow the public to know the truth about the vaccines.

For more information on Apple Valley Village

- [Apple Valley Campus](#) (website)
- [Management team](#)
- [US News analysis](#) (ratings)
- [Crucial report](#) (ratings)

No response from the Apple Valley Village

I reached out to multiple executives at the company which owns the facility (Cassia) and none of them would get back to me to comment on my allegations. I can tell you this: it wasn't for lack of trying on my part. I even called former employees and all of them promptly returned my calls! Hmmm.....

Response from Promedica; Washington Township

I was able to directly speak to someone there. He promised to get back to me. I will update this article when I hear back from him. He mentioned that the facility was acquired by new owners in February 2023.

This is actually a stroke of luck because the new owners shouldn't be afraid to talk; they have plausible deniability for what happened!

Important caveats

Not all nursing homes report statistics like these.

But these black swans are absolutely real (the employee at Apple Valley Village wasn't called back to work on a holiday for no reason), they cannot be dismissed, and there are likely hundreds, if not thousands of more nursing homes with troubling statistics post vaccine rollout

If other nursing homes are not experiencing similar statistics, it most likely means that **there is a QA problem with the vaccines**; some batches are significantly worse than others.

How this could escape the eagle eyes of our ever vigilant CDC and their non-existing QA process for the vaccines, I haven't a clue.

That article also has [important new, updated graphs on AVV](#).

Summary

This new data adds to the pile of evidence we already have showing the COVID vaccines were a massive error. The sooner our government admits to this, the better. Based upon past history, this could take decades.

In this particular instance, we have clear evidence that:

- The COVID vaccines are not safe; they **can kill 30% or more** of the elderly recipients they are specifically intended to protect.
- The COVID vaccines can increase your risk of **dying from COVID** by 10X or more. It's right there in the official government Medicare records if anyone bothered to take a look. It's publicly accessible.

31-7

- **Massive numbers of old people are dying from the vaccine.** Even if all the deaths were isolated to just these two facilities, they should stop the vaccine. But these are not the only facilities with vaccine deaths. But nobody cares because if they did, even a small number of deaths should have halted the program.

Three other things to keep in mind:

- **The immediate deaths are just the tip of the iceberg.** The COVID vaccines can kill people 2.5 years after a person is vaccinated. I know someone who just died from the vaccine who was vaccinated over 2 years ago. It may be longer than that... we just don't have the data, but the VAERS data shows that the death reports are still going strong years after the rollout.
- **This Medicare data doesn't cover disability.** Also, the COVID vaccines have very seriously injured at least 1% of the people who got the shots and added millions of people to the disability rolls in the US and UK. We don't easily notice 1% changes like this, but they are real as the article points out.
- **Key government data that people trust for proof of safety and efficacy is unreliable.** The reason I like anecdotes is because I can verify they really happened. The reason I dislike official government data is because you cannot validate it unless they include the record level data which they rarely do. And when they do include it, it's obvious how flawed the aggregate data is. This is why no government should rely solely on large studies. And this is why the medical community hates anecdotes: because they reveal their studies are false.

At a bare minimum, these vaccines need to be withdrawn from the market until the government admits that there was a problem and has clearly identified the causes and fixed them all.

When a few children die from drinking unsafe baby formula, we stop the plant.

When massive numbers of old people die from an unsafe vaccine, we encourage them to get more.

32-2

For more information

US nursing home data shows clearly that the COVID vaccines made the elderly MORE likely to die from COVID. Whoops!

Apple Valley Village Health Care Center saw >10X higher COVID death rates after COVID vax rollout. Isn't it supposed to decrease rates?

This is not an unusual story at all

I just talked to a charge nurse in a facility with 100 residents (half in long term care, half in rehab care). When they rolled out the vax in late 2020, they had 12 deaths over the next 2 months afterwards. There were 65 people in the facility at the time who got jabbed. Normal death rate expected is 7% annually. So they had 12 deaths when there should only have been 1 death.

Got a similar story?

If you have a similar story to this one, please report it here.

Here's one of the responses I got showing that this nursing home isn't unique at all:

Hi. I'm filling in this form, as these two cases are significant, **in one home 2/3 of residents died**, in the **other 1/3**, shortly after receiving the vaccines. It was blamed on a COVID outbreak, of course. I have no connection to these homes and no inside information, I just remember reading about them - **in both homes they had no deaths throughout all of 2020, until the vaccines were rolled out starting in December 2020.**

Two-thirds of residents die in Covid outbreak at Lincolnshire care home
(this article followed the narrative)

24 Residents Dead in 3 Weeks as One Third of UK Nursing Home Residents Die After Experimental mRNA COVID Injections

The last article cited a whistleblower (James) who came out and exposed that it was the vaccine causing the deaths, including a video).

NOTE:

His video is available here. He testified that:

"After being injected with the mRNA shot, residents who used to walk on their own can no longer walk. Residents who used to carry on an intelligent conversation with him could no longer talk. And now they are dying. "They're dropping like flies." (Full article with video.)

Guess what? None of the people who didn't get the vaccines died. Yeah, that's right. Only the people who got the vaccines died. Exactly the opposite of what people were told.

Could this data be wrong?

Of course, but if you don't like that data, there are other, more well known examples to select from with statistically "impossible" effects.

From the comments:

SOA data

A convent in Kentucky was one of several that had zero Covid deaths until the vaxes were given. That was Benedictine Sisters of St. Walburg, and the first vax was given Feb 1; two nuns died Feb 3rd, another on Feb 10th, and I am fairly rsure I came across a later story about 2 more deaths. I wonder how many they have had since then, there were only 35 nuns there.

20,000 doses of the COVID vaccine created 23 new suspicious deaths in Norway which is an excess death rate that matches my often cited 1 in 1,000 excess deaths per dose. This is much less than the current example, but a 1 in 1,000 death rate is far from acceptable; it is 1,000X higher than the "safe" level.

32-3

Heath Freedom Ireland video shows these two charts which show an "impossible" rise in deaths if there is nothing new that is causing it.

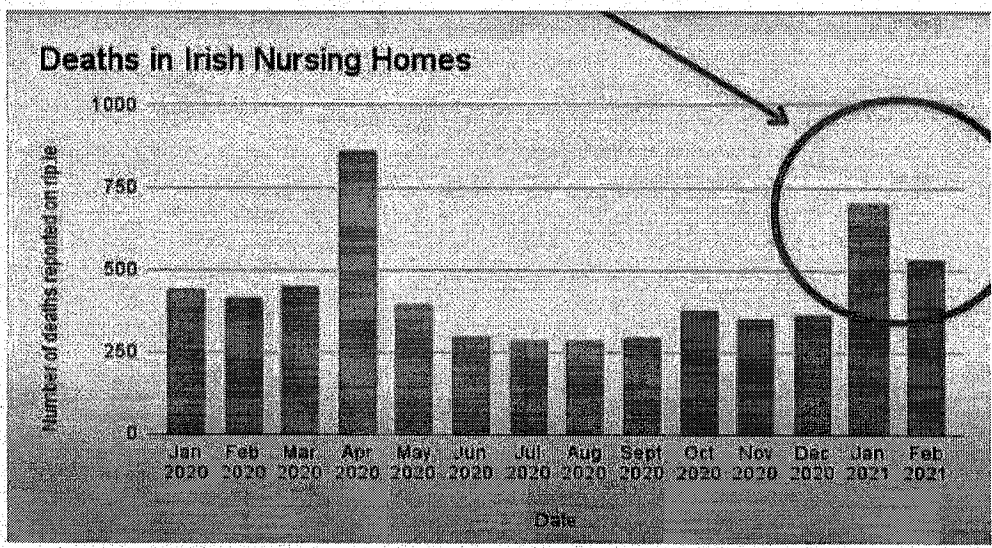


Figure 1.

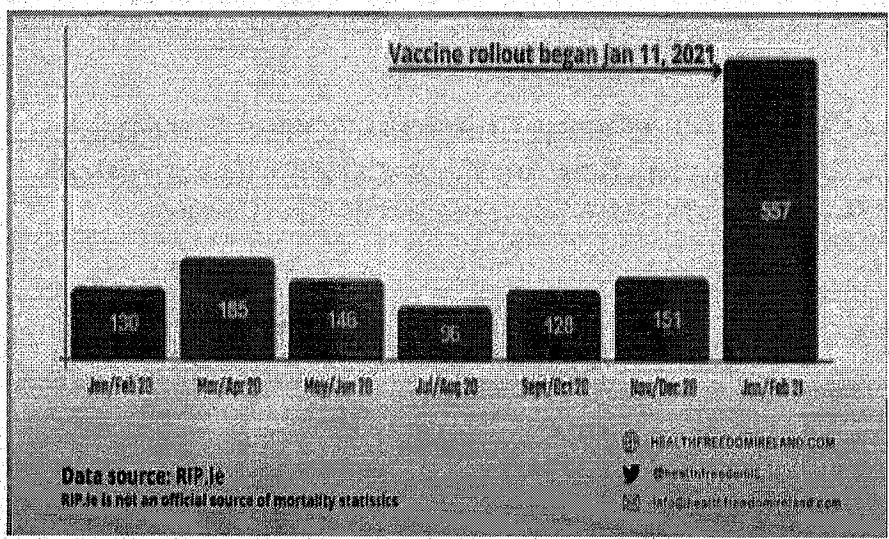


Figure 2.

What this means

There seems to have been this huge rise in excess deaths when the COVID vaccines rolled out worldwide in December/January. That rise in excess deaths is not explainable through normal statistical variations.

3.2-4

Think I'm making this up?

If you trust the authorities and believe that I'm making this story up and you are confident that the vaccines are perfectly safe, you can bet against me here (\$25,000 minimum wager).

Fact checkers: Of course I'm wrong! You know that! This is a great opportunity to double your net worth quickly.

You join with others who are confident that I'm wrong and are willing to back their beliefs with cash (which I find is amazingly good at showing whether people truly believe what they say).

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