

18 - 1

“Ethically Unjustifiable” – Scientists from Harvard & Johns Hopkins Found Covid-19 Vaccines 98 Times Worse Than the Virus

Jim Hoft, September 12, 2022

A new pre-print study by nine health experts from major universities showed that the COVID-19 vaccines are 98 times worse than the virus, and mandatory booster vaccination in college is “ethically unjustifiable,” as reported by Epoch Times.

The study was posted on The Social Science Research Network (SSRN) in September, titled, “COVID-19 Vaccine Boosters for Young Adults: A Risk-Benefit Assessment and Five Ethical Arguments against Mandates at Universities.”

It was conducted by nine top scientists from the University of Washington, University of Oxford, University of Toronto, Harvard University – Harvard Medical School, University of California, San Francisco (UCSF), Johns Hopkins University – Department of Surgery, and others.

Using CDC and sponsor-reported adverse event data, researchers conclude that booster regulations may result in more harm than good.

According to the study, for every one COVID hospitalization prevented in previously uninfected young adults, “18 to 98 actual serious adverse events” have been caused.

“Per COVID-19 hospitalization prevented in previously uninfected young adults, we anticipate 18 to 98 serious adverse events, including 1.7 to 3.0 booster-associated myocarditis cases in males, and 1,373 to 3,234 cases of grade ≥ 3 reactogenicity which interferes with daily activities,” the study stated.

University booster mandates were deemed unethical by the researchers for the following reasons:

- no formal risk-benefit assessment exists for this age group;
- vaccine mandates may result in a net expected harm to individual young people;
- mandates are not proportionate: expected harms are not outweighed by public health benefits given the modest and transient effectiveness of vaccines against transmission;
- US mandates violate the reciprocity principle because rare serious vaccine-related harms will not be reliably compensated due to gaps in current vaccine injury schemes; and
- mandates create wider social harms. We consider counter-arguments such as a desire for socialization and safety and show that such arguments lack scientific and/or ethical support.

The study concludes:

Based on public data provided by the CDC, we estimate that approximately 22,000 to 30,000 previous *uninfected* young adults ages 18–29 years must be boosted with an mRNA vaccine to prevent one Covid-19 hospitalisation. Given the fact that this estimate does not take into account the protection conferred by prior infection nor a risk-adjustment for comorbidity status this should be considered a conservative and optimistic assessment of benefit.

Our estimate shows that university Covid-19 vaccine mandates are likely to cause net expected harms to young healthy adults—between 18 and 98 serious adverse events requiring hospitalisation and 1373 to 3234 disruptions of daily activities—that is not outweighed by a proportionate public health benefit.

Serious Covid-19 vaccine-associated harms are not adequately compensated for by current US vaccine injury systems. As such, these severe infringements of individual liberty are ethically unjustifiable.

18-2

Worse still, mandates are associated with wider social harms. The fact that such policies were implemented despite controversy among experts and without updating the sole publicly available risk-benefit analysis to the current Omicron variants suggests a profound lack of transparency in scientific and regulatory policy making.

These findings have implications for mandates in other settings such as schools, corporations, healthcare systems and the military. Policymakers should repeal booster mandates for young adults immediately, ensure pathways to compensation to those who have suffered negative consequences from these policies, provide open access to participant-level clinical trial data to allow risk- and age-stratified harm-benefit analyses of any new vaccines prior to issuing recommendations¹²⁵, and begin what will be a long process of rebuilding trust in public health

19-1

5-7

BBC accidentally admits COVID Vaccine is to blame for 2022 being Worst Year for Excess Deaths in 50 years after their "Journalists" chose to LIE believing nobody would "Mark their Homework"

THE EXPOSE SEPTEMBER 1, 2023

The people of the UK should now be in a state of shock.

But instead, they have been distracted by non-stop coverage of Prince Harry's new book, so will have most likely missed the tragic and devastating information published by BBC News of all organisations.

Information that reveals the UK suffered the highest number of excess deaths throughout 2022 in over half a century.



Excess deaths in 2022 among worst in 50 years

7 hours ago



Source

However, the reporters, driven by ambition and a belief that they will not be held accountable, made the decision to conceal the truth behind why there were so many excess deaths last year.

They most likely thought the majority of the British public would be too lazy to "mark their homework", so to speak.

But they didn't count on an independent news organization Z, committed to reporting the facts that the mainstream refuse to, fact-checking their quietly published article.

And we can reveal that the widely but most definitely unjustly trusted news source/propaganda arm of the Government known as the BBC, and its reporters, have knowingly lied about the safety of the vaccine and lied to you.

It was all going so well for the BBC and its reporters until they decided to unequivocally state that in no way shape or form is the Covid-19 vaccine responsible for a record-breaking year of death. They even provided a "source" to prove it and claimed that –

'Figures up to June 2022 looking at deaths from all causes show unvaccinated people were more likely to die than vaccinated people.'

Source- BBC News

They then went on to state that –

"If vaccines were driving excess deaths we would expect this to be the other way around."

Source- BBC News

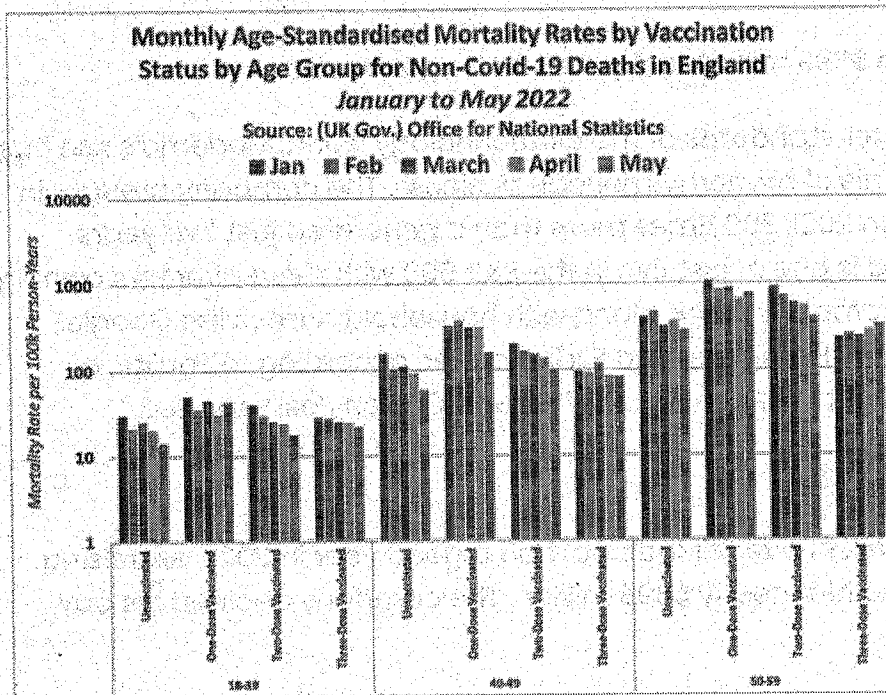
The problem for BBC News and its dishonest reporters is that The Expose has been analysing the source in question, which has been provided by a UK Government institution known as the Office for National Statistics (ONS) for months on end.

19-2

And we can reveal that mortality rates per 100,000 in every single age group, even children, in England and Wales were lowest among the unvaccinated in some age groups as early as 2021, and lowest among the unvaccinated in all age groups by May 2022 at the latest.

Therefore, BBC News has not only lied to the public, but they have also admitted in black and white that the Covid-19 injections are to blame for 2022 being the worst year for deaths in half a century by confirming that "if vaccines were driving excess deaths we would expect this to be the other way around (highest mortality rates among the vaccinated)".

The moral of this story is of course, always check the official source. Specifically table 2.



Source

But that is of no comfort to the thousands of families across the country who are still mourning the loss of loved ones as the truth about the catastrophic events of the past year comes to light.

And as the investigation into the Covid-19 vaccine scandal unfolds, it is clear that the consequences of this deception will be felt for years to come.

The devastation left in the wake of your Government's actions, unelected powerful institutions' actions, Big Techs' actions and the Mainstream Media's actions is unimaginable.

You cannot trust the BBC. And the UK Government has clearly confirmed that mortality rates per 100,000 are highest among the vaccinated in every single age group.

This means that people who have taken the Covid-19 vaccine have a higher chance of dying than the general population due to the intense damage it can do to the most vital organ in the human body, the heart, and the devastating decimation it does to the natural immune system.

Because this isn't an isolated incident occurring in the UK, it's occurring in every country where the Pfizer and/or Moderna vaccines have been administered.

Official figures prove that in the 'Five Eyes' countries and most of Europe there were nearly 2 million excess deaths recorded by November 2022 since the roll-out of the Covid-19 injections.

19-3

And in the USA there have been half a million deaths among young adults and children resulting in 118,000 excess deaths since the Covid-19 injections were first administered to the wider population.

Another "white lie" told by BBC News in its article is that –

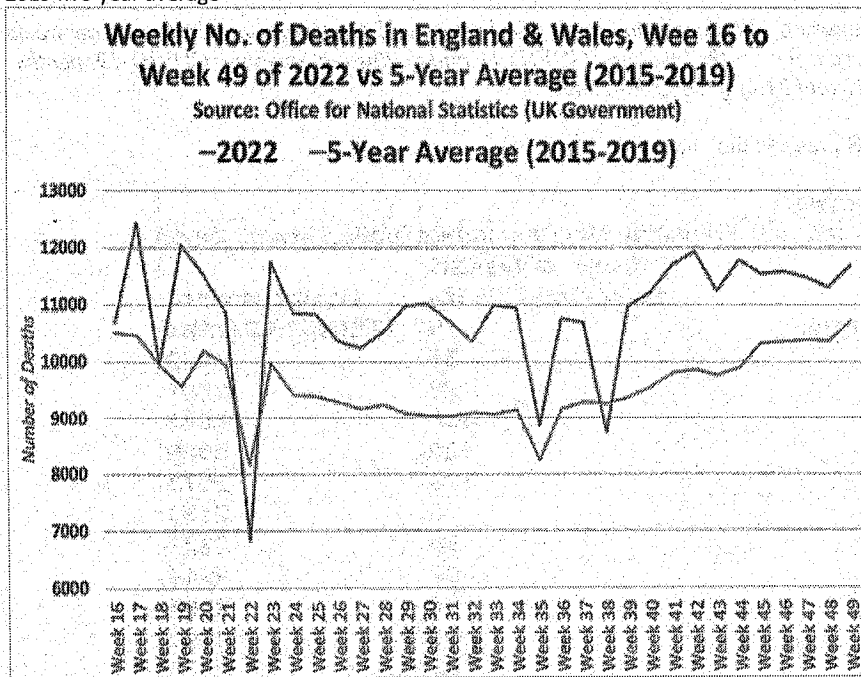
It wasn't until June that excess deaths really started to rise – just as the number of people waiting for hours on trolleys in English hospitals hit levels normally seen in winter.

Source- BBC News

This lie was clearly told so that they could attempt to blame the rise in excess deaths due to a crisis in the NHS affecting waiting times for treatment etc.

But the official ONS data, and Public Health Scotland data actually proves that the significant increase in excess deaths began in April.

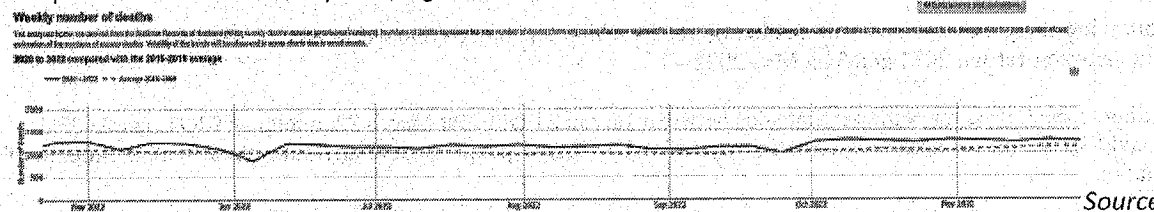
We dug into the data, analysing the weekly number of deaths over the past eight months and comparing them to the 2015-2019 five-year average –



The chart reveals a disturbing trend, with excess deaths occurring in all but two weeks since April 2022. These two exceptions, it turns out, coincide with the late Queen’s Platinum Jubilee and funeral, which would have caused delays in death registrations due to the bank holidays.

But even taking these weeks into account, the data shows an average of 1,268 excess deaths every single week.

The following chart is taken from Public Health Scotland’s Covid-19 Dashboard, and it shows the weekly number of deaths compared to the 2015-2019 five-year average –



Source

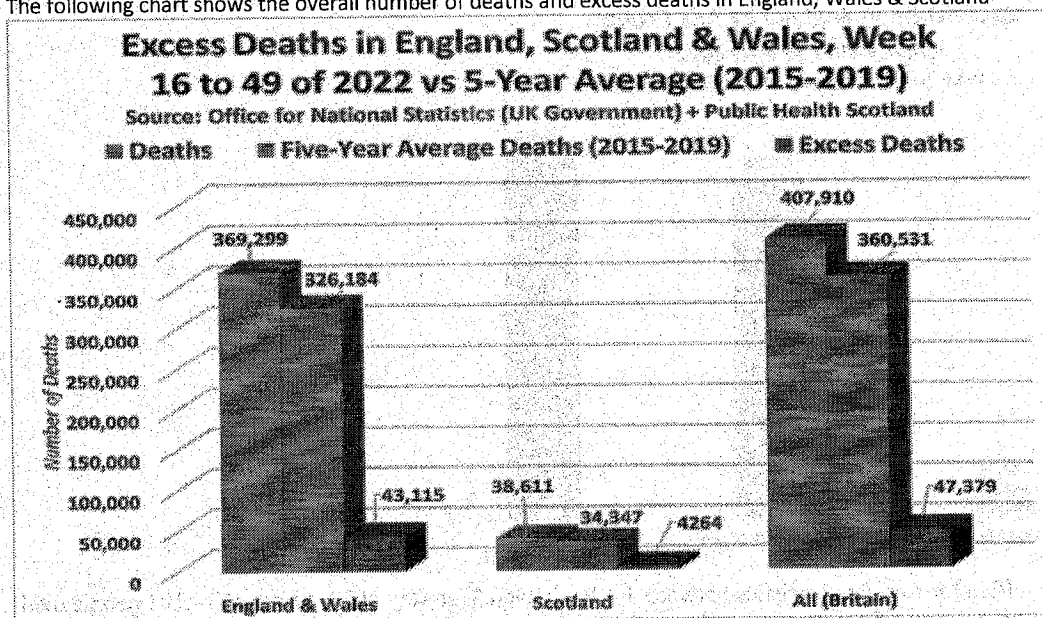
Because the chart doesn't reveal the true picture, we downloaded the death data from the Public Health Scotland Covid-19 Dashboard, which you can also do so here, and calculated the total number of deaths between week 16 and week 47 of 2022.

19-4

5-8

According to the data, there were 34,316 deaths during this period in the 2015-2019 five-year average and 38,611 deaths during this period in 2022.

This means Scotland has suffered 4,264 excess deaths against the five-year average over the past 34 weeks. The following chart shows the overall number of deaths and excess deaths in England, Wales & Scotland –



The five-year average number of deaths in Britain over these 8 months equates to 360,531. Meanwhile, the total number of deaths in 2022 in Britain over these 8 months equated to 407,910.

Therefore, Britain suffered 47,379 excess deaths between the middle of April and the beginning of December 2022. There are a number of possible explanations for this outcome.

It is possible that the Covid-19 vaccines were not adequately tested before they were released, and therefore had unknown side effects or complications that were not discovered until after it was given to a large number of people.

It is also possible that the vaccine was not properly manufactured, and therefore was contaminated or otherwise ineffective in preventing illness or death.

Regardless of the specific cause, the implications of what is currently occurring in the real world are significant.

We found data on excess deaths for 15% of the world's countries on the website of the Organisation for Economic Co-operation and Development (OECD).

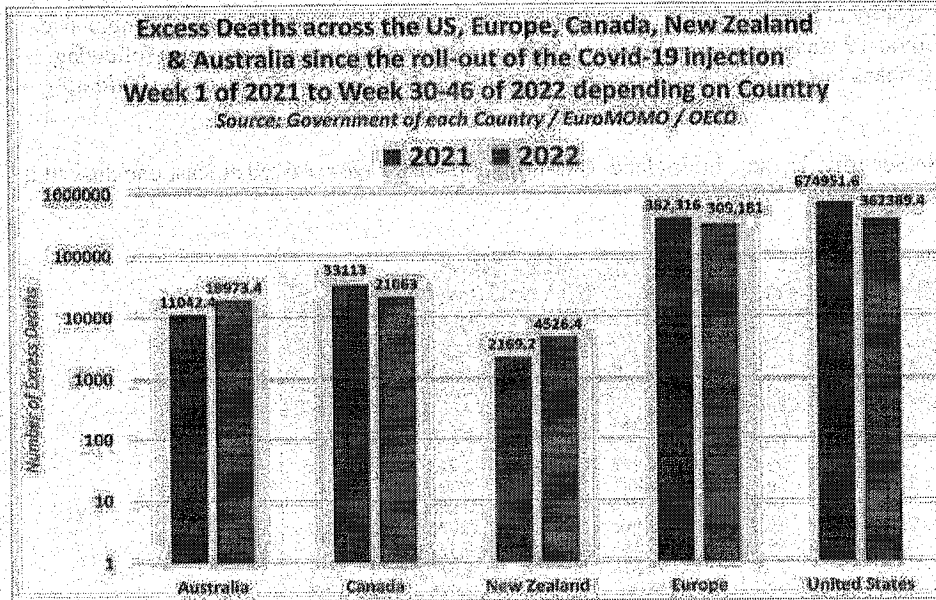
The OECD hosts data for countries including the USA, Canada, New Zealand, Australia, the UK and some of Europe. We also extracted data from EuroMOMO, which provides compiled data for 28 countries in Europe including the UK and is more up-to-date.

The data has been provided to the OECD and EuroMOMO by each country's government organizations, such as the Centers for Disease Control in the USA and the Office for National Statistics in the UK.

The following chart shows excess deaths in the "Five Eyes" countries (Australia, Canada, New Zealand, the UK, and the US) and 27 other European countries –

19-5

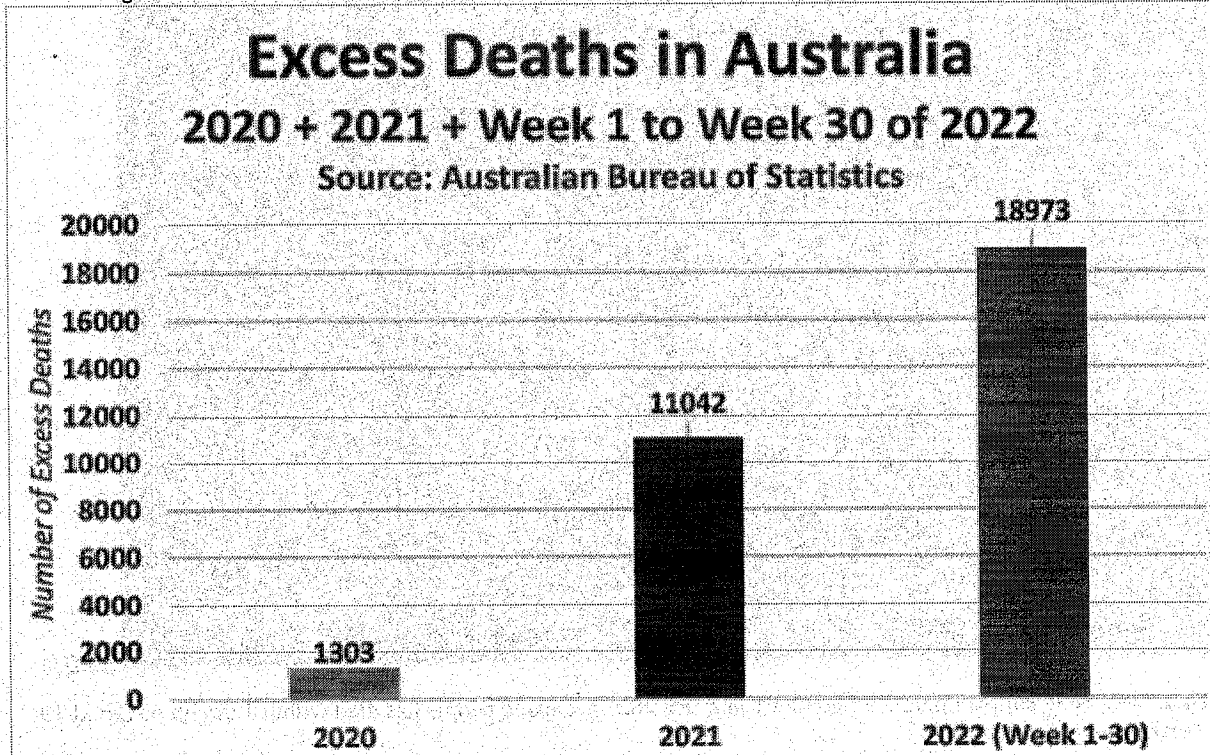
209



In 2021, the US suffered nearly 700k excess deaths and a further 360k excess deaths by November 11th 2022, while Europe had 382k excess deaths in 2021 and 309k excess deaths by November 2022. These figures do not include Ukraine.

The figures for New Zealand, Australia, and Canada only cover up to week 40, week 30, and week 28 of 2022, respectively. The excess deaths in these countries are not just a result of the alleged Covid-19 pandemic and have not decreased since the rollout of the Covid-19 vaccine.

The following chart shows the overall excess deaths in Australia in 2020, 2021, and up to week 30 of 2022 –



Source Data

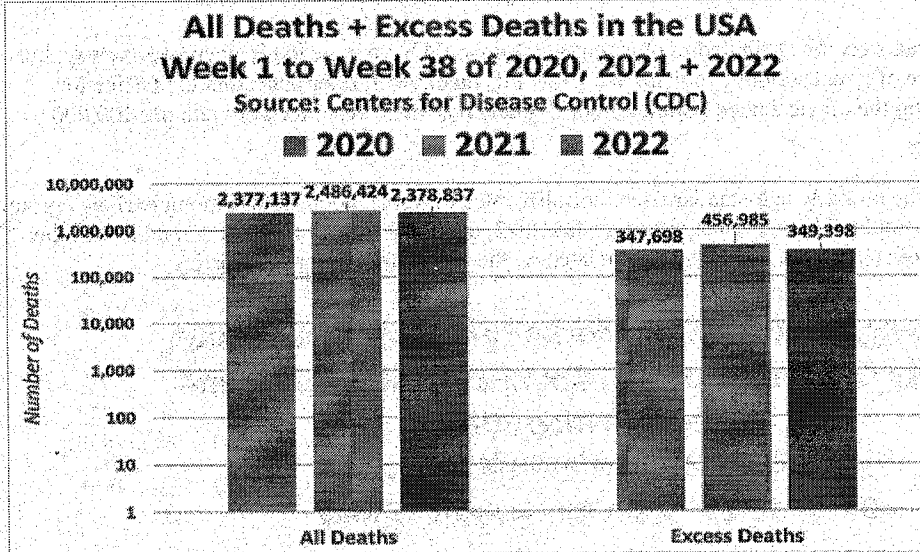
19-6

HP

In Australia, there were only 1,303 excess deaths in 2020, but this increased by 747% to 11,042 deaths in 2021 after the rollout of the Covid-19 vaccine.

By the end of July 2022, there were 18,973 excess deaths in Australia, representing a 1,356% increase from 2020. This is more excess deaths in 7 months than in the previous two years combined.

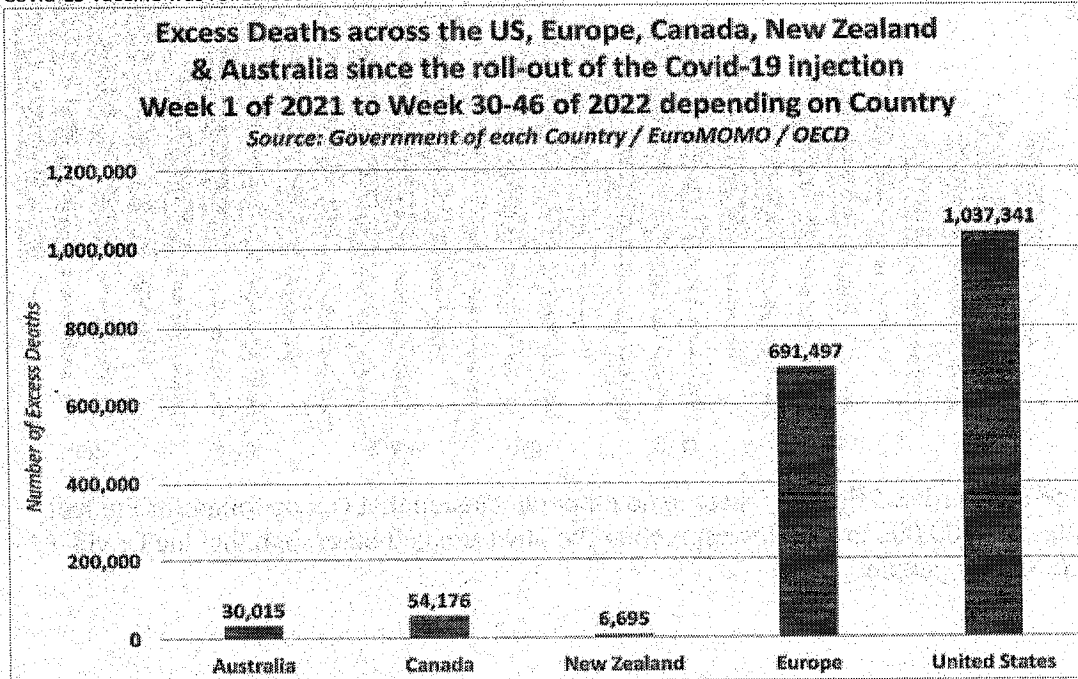
The situation is similar in the US –



In the US, 1,700 more people died by week 38 of 2022 compared to week 38 of 2020, and 109k more died by week 38 of 2021 compared to week 38 of 2020.

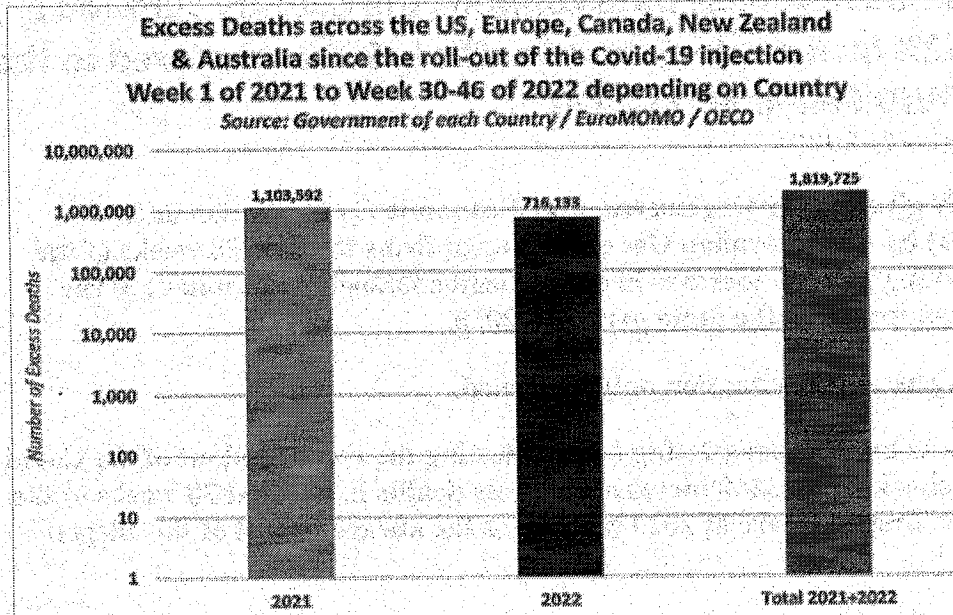
These numbers indicate that deaths increased rather than decreased following the rollout of the Covid-19 vaccine.

The following two charts show the total excess deaths in the “Five Eyes” and Europe since the beginning of 2021, when the Covid-19 vaccine was rolled out –



19-7

1-01



According to the Centers for Disease Control and the Organisation for Economic Co-operation and Development, there have been over 1 million excess deaths in the US between 2021 and 2022 so far.

Official figures from EuroMOMO, provided by 28 European countries including the UK, France, Germany, Spain, and Italy, show over 690k excess deaths in Europe by November 2022.

Australia, Canada, and New Zealand also had significant numbers of excess deaths, though their overall populations are smaller. In total, the "Five Eyes" and most of Europe had 1,103,592 excess deaths in 2021 and 716,133 excess deaths by November 2022.

This adds up to over 1.8 million excess deaths since the rollout of the Covid-19 vaccine.

The official narrative that the vaccine is safe and effective and would reduce the number of deaths is contradicted by the data. These figures alone suggest that the Covid-19 vaccines are the main cause of the excess deaths in the "Five Eyes" and Europe.

But we know thanks to checking the original source provided by lying "journalists" working for the BBC that this is backed up by official UK Government data published by the Office for National Statistics.

The UK government's official report shows that the Covid-19 vaccines are deadly and killing people in the thousands. The figures can be found in a report titled '*Deaths by Vaccination Status, England, 1 January 2021 to 31 May 2022*', and it can be accessed on the ONS site [here](#), and downloaded [here](#).

Table 2 of the report reveals that mortality rates per 100,000 are lower among the unvaccinated population in every age group in England.

The data also shows that the gap between the mortality rates of the vaccinated and the unvaccinated population is increasing. **As of May 2022, the most recent month with data available, the partly vaccinated, double vaccinated, and triple vaccinated populations in England were more likely to die of any cause than the unvaccinated population in all age groups.**

That's reality.

And it is the complete opposite of the fantasy claim made by BBC News that, "[figures up to June 2022 looking at deaths from all causes show unvaccinated people were more likely to die than vaccinated people](#)".

19-8

5-01

No evidence of vaccine effect

The rise in cardiac problems has been pointed to by some online as evidence that Covid vaccines are driving the rise in deaths, but this conclusion is not supported by the data.

One type of Covid vaccine has been linked to a small rise in cases of heart inflammation and scarring (pericarditis and myocarditis). But this particular vaccine side-effect was mainly seen in boys and young men, while the excess deaths are highest in older men - aged 50 or more.

And these cases are too rare - and mostly not fatal - to account for the excess in deaths.

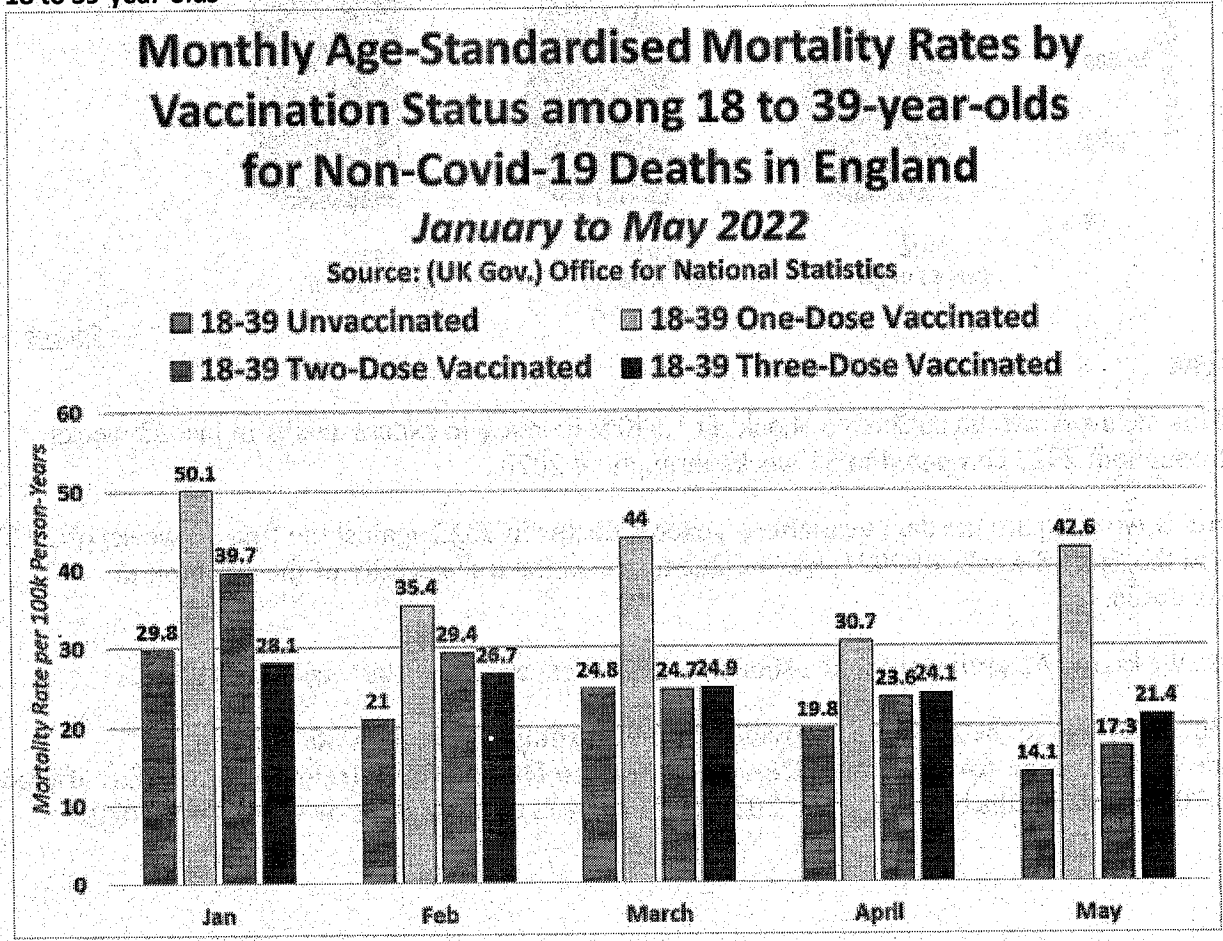
Finally, figures up to June 2022 looking at deaths from all causes show unvaccinated people were more likely to die than vaccinated people.

While this data on its own can't tell us it's the vaccine protecting people from dying - there are too many complicating factors - if vaccines were driving excess deaths we would expect this to be the other way around.

Source

The following charts show a visualisation of the actual reality and have been created using the figures published by the Office for National Statistics -

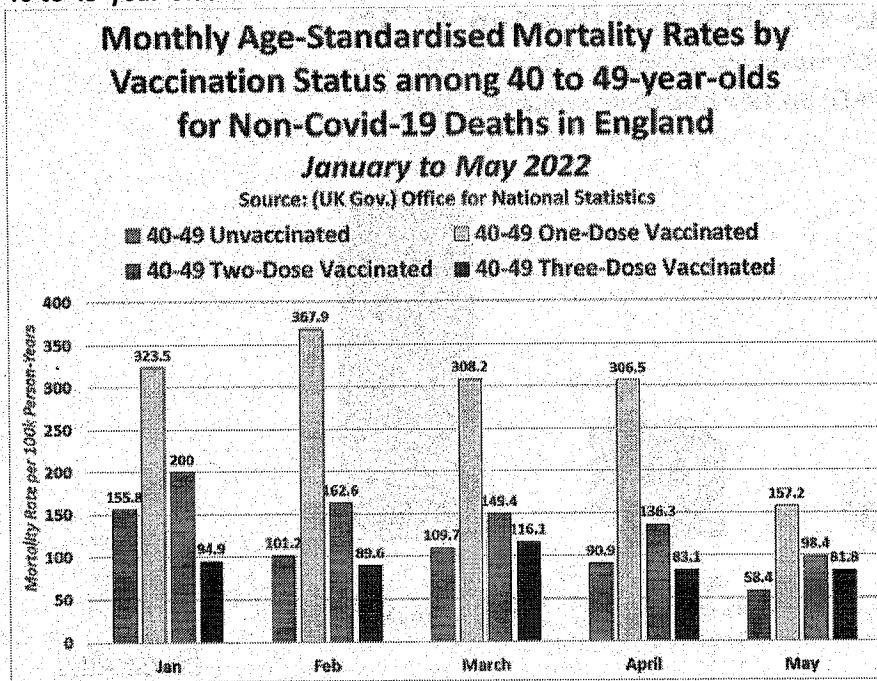
18 to 39-year-olds



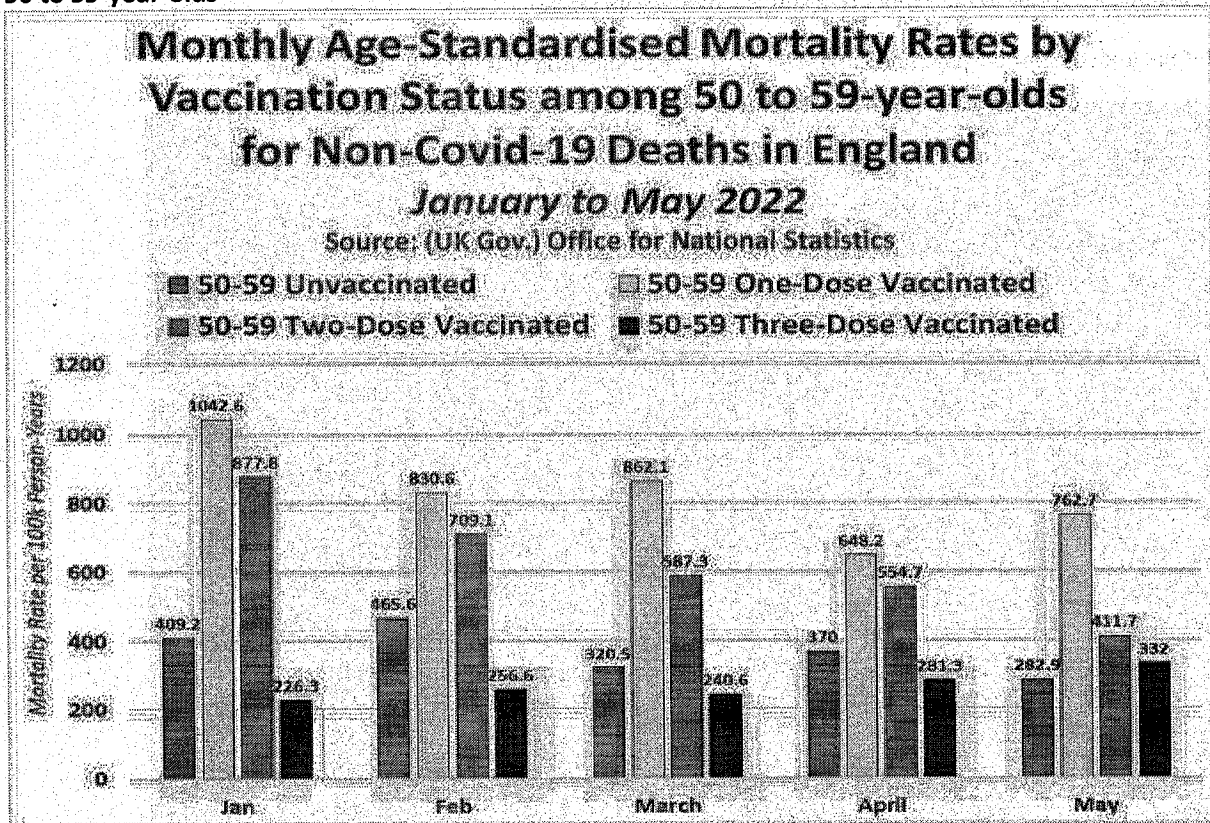
19-9

3.01

40 to 49-year-olds



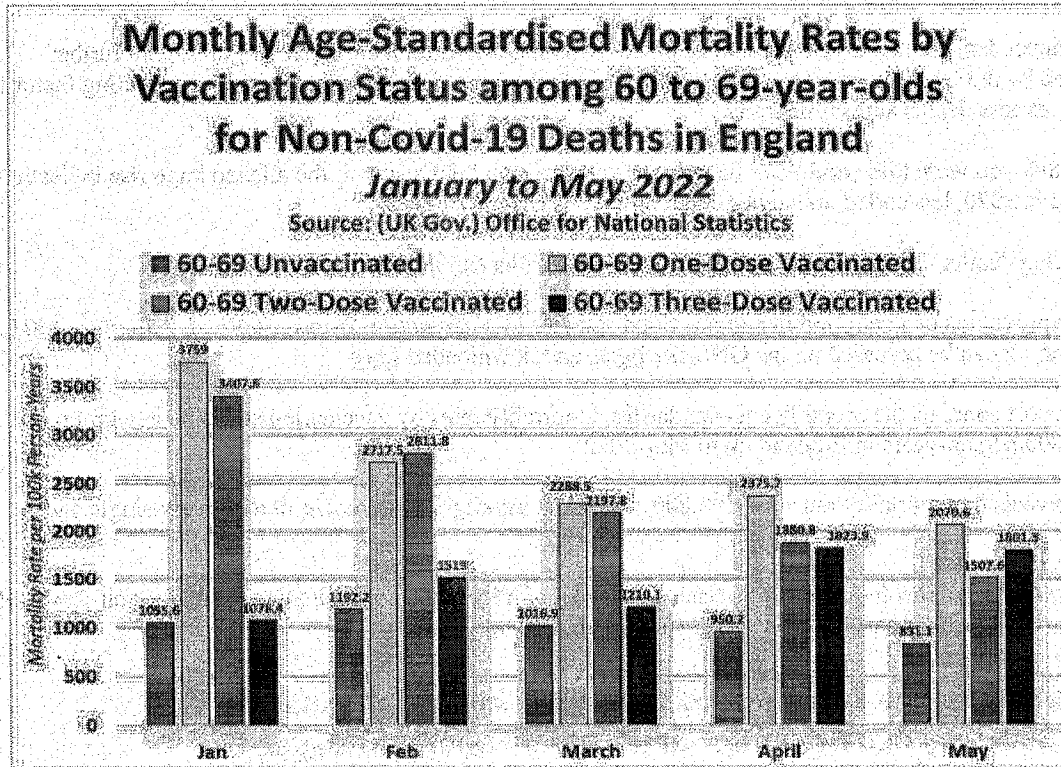
50 to 59-year-olds



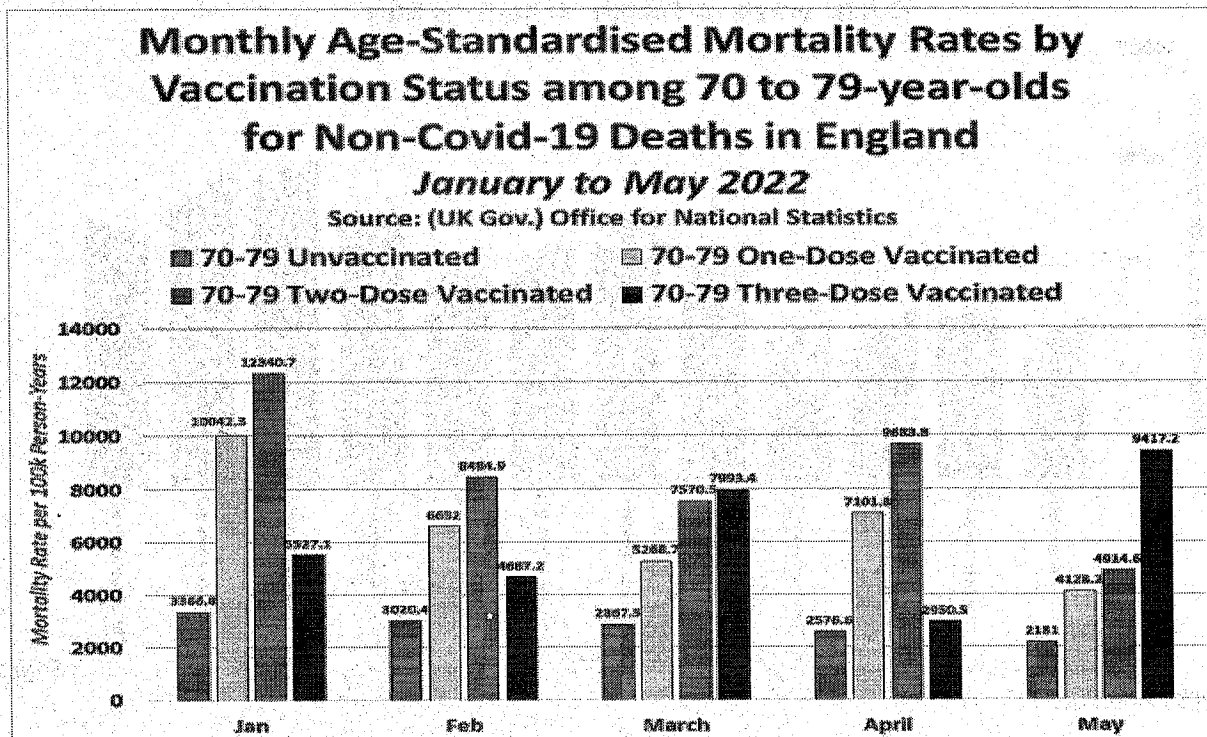
19-10

3-01

60 to 69-year-olds

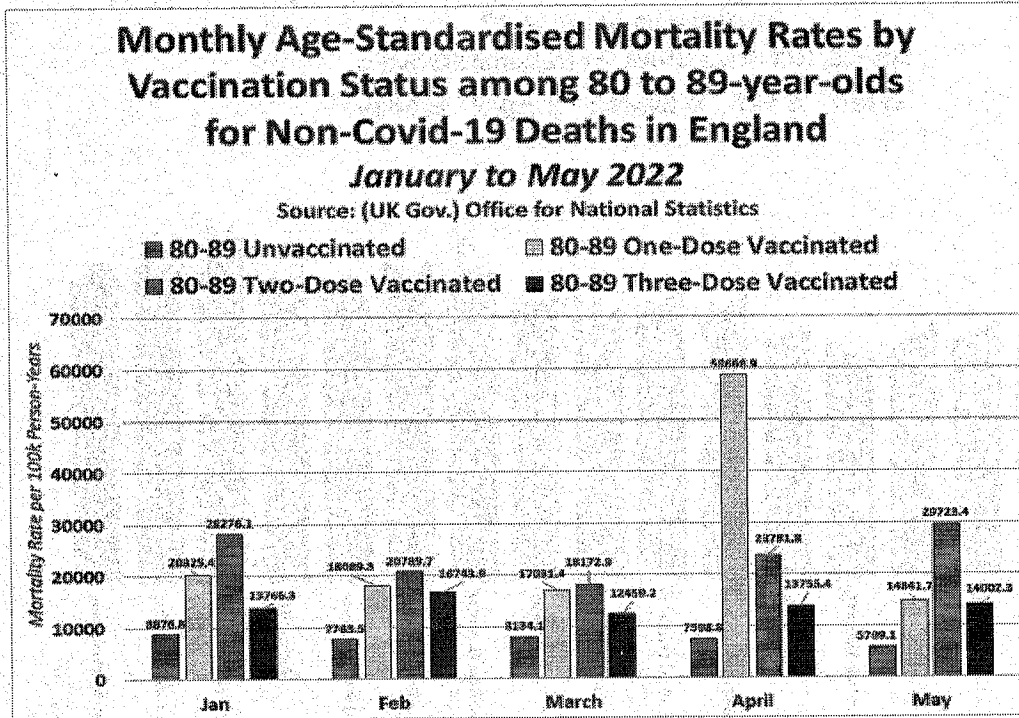


70 to 79-year-olds

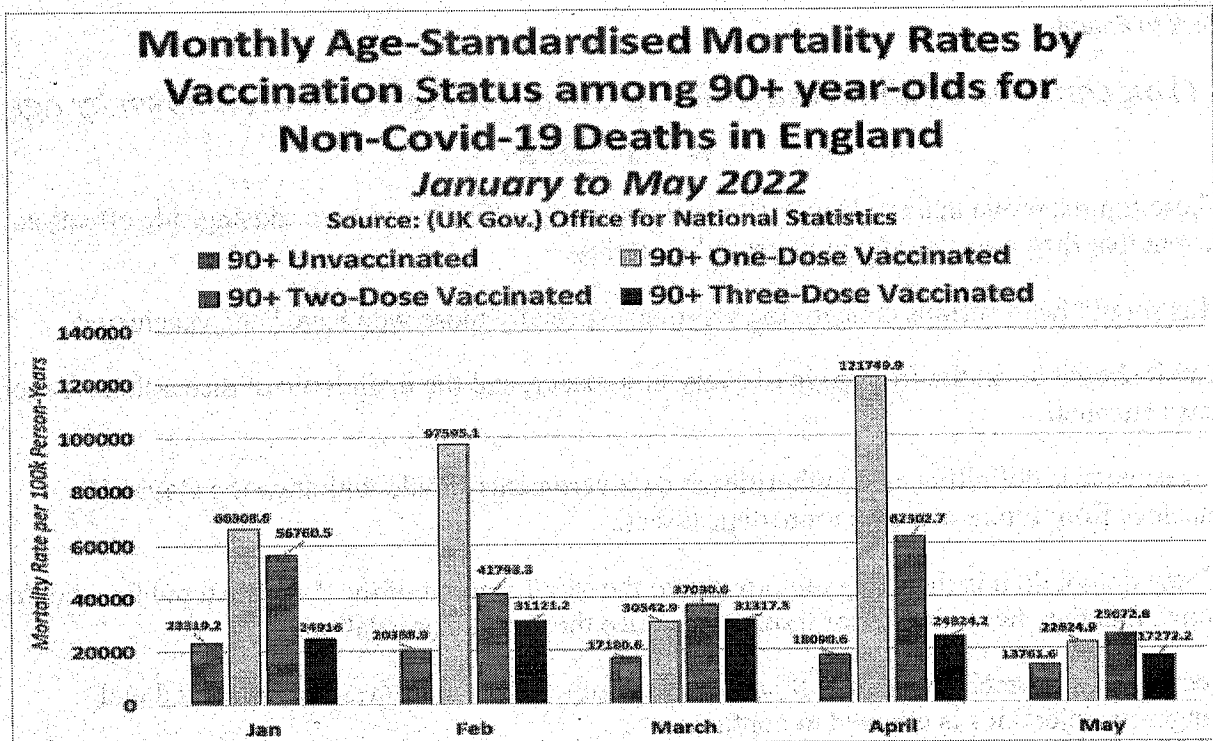


19-11

80 to 89-year-olds



90+ year-olds



19-12

Due to the above figures being age-standardised and rates per 100,000 population, they are indisputable evidence that the Covid-19 injections increase the risk of death and are killing people.

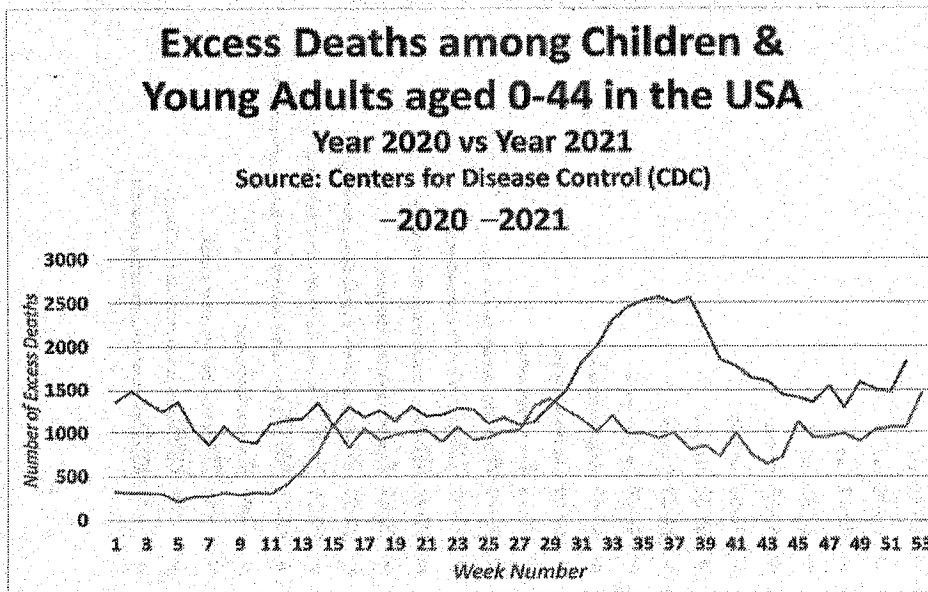
But another disturbing trend has emerged in the USA.

Nearly half a million children and young adults in the US have died since the Food and Drug Administration granted emergency use authorization for the Covid-19 vaccines, representing 118,000 excess deaths by November 2022 compared to the 2015-2019 average.

In 2021, there were 291,461 excess deaths among people aged 0 to 44 in the US, a shocking 60,000 more than the previous year.

The CDC data can again be found on the website of the [Organisation for Economic Co-operation and Development \(OECD\)](#).

This chart reveals a troubling trend, with a significant increase in excess deaths in 2021 compared to 2020 –

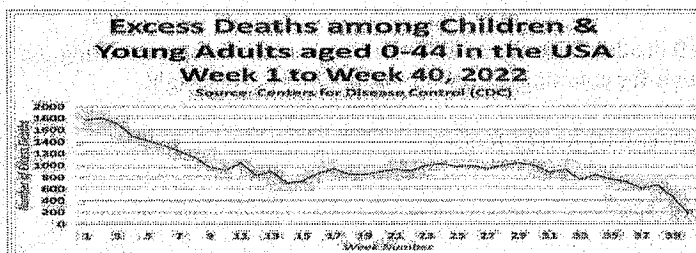


When the Covid-19 pandemic allegedly hit the US in early 2020, one might have expected excess deaths among children and young adults to decrease with the introduction of a vaccine.

However, official figures show that excess deaths among this age group were significantly higher every week in 2021 compared to the previous year, with the exception of weeks 29 and 30.

Then, in week 31, excess deaths surged among children and young adults. This trend has continued into 2022, according to data from the Centers for Disease Control. T

These figures raise concerns and warrant further investigation, as the vaccine was supposed to provide protection and mitigate the impact of the pandemic.



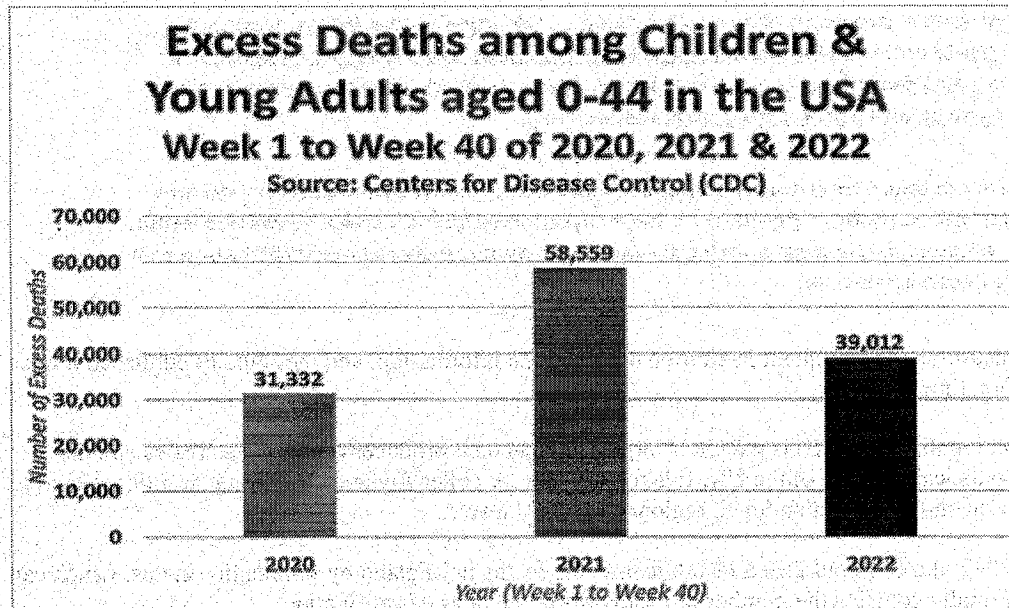
19-13

5-11

The CDC's latest data reveals a disturbing trend among children and young adults because according to the agency's figures, which cover up to week 40 of 2022, there has been a significant increase in excess deaths among this age group.

While it's worth noting the last few weeks of data are subject to change, they paint a worrying picture of the impact of Covid-19 vaccination on the younger generation.

But how does the situation in 2022 compare to previous years? To provide some context, let's take a look at the figures from 2020 and 2021.



According to the data, there has been a disturbing increase from the same time frame in 2020., with a staggering extra 7,680 excess deaths among this age group in 2022 alone.

But it's not just this year that has seen a spike in excess deaths among young people. In 2021, the situation was even direr, with 27,227 extra excess deaths by week 40 following the rollout of the Covid-19 vaccine compared to the same time frame in 2020.

These numbers raise serious questions about the safety and effectiveness of the Covid-19 vaccines. If the official narrative that these vaccines are safe and effective is to be believed, how can we explain the increase in deaths among children and young adults in both 2021 and 2022?

In conclusion, the data shows that excess deaths have increased significantly in the "Five Eyes" and Europe since the rollout of the Covid-19 vaccine.

This includes a dramatic increase in excess deaths among children and young adults in the US and a widening gap in mortality rates between the vaccinated and unvaccinated populations in England.

And thanks to the BBC, we now know that the COVID Vaccine is to blame.

20 -1

Judicial Watch: Records Reveal Pfizer Tested Safety of Covid Vaccine Booster on 23 People Before Biden FDA Approved the Shots

Cristina Laila September 1, 2023

Judicial Watch on Thursday released a tranche of records revealing Pfizer tested the safety and efficacy of the Covid vaccine booster on only 23 people in 2021 before it asked the FDA to approve the shots.

Biden's FDA immediately approved the Covid booster shot at the end of September of 2021.

"The participants included 11 people aged 18 to 55 and 12 people aged 65 to 85. Of the younger group, there were nine females and two males; eight of whom were white, one was black and two were Asian. Of the older group six were female, six were males, and all were white." Judicial Watch reported. 8.9 million Covid boosters were administered just three weeks after the FDA approved the shots.

Judicial Watch **reported:**

Judicial Watch released 58 pages of records from the U.S. Food and Drug Administration (FDA) showing that a Pfizer study surveyed 23 people in 2021 to gauge reactions to its COVID vaccine booster before asking the FDA to approve it. The FDA indicated that this production of records "represents our complete response to your request; no additional productions are anticipated."

The records were obtained in response to a March 2022 lawsuit filed after the Department of Health and Human Services failed to respond to an August 2021 Freedom of Information Act (FOIA) request for records "submitted by Pfizer and BioNTech to the FDA, including BARDA, relating to 'booster' vaccinations for the SARS-CoV-2 virus" (Judicial Watch, Inc. v. U.S. Department of Health and Human Services (No. 1:22-cv-00730)).

Biomedical Advanced Research and Development Authority, BARDA, has been heavily involved with the development of the COVID-19 vaccine. According to its website:

The Biomedical Advanced Research and Development Authority (BARDA) provides an integrated, systematic approach to the development of the necessary vaccines, drugs, therapies, and diagnostic tools for public health medical emergencies such as chemical, biological, radiological, and nuclear (CBRN) accidents, incidents and attacks; pandemic influenza (PI), and emerging infectious diseases (EID).

"With the planned push for new boosters by the Biden administration, the public would do well to examine these troubling documents about the shotgun approval of prior COVID boosters," said Judicial Watch President Tom Fitton.

11-5

21-1

FDA, CDC Hid Data On Spike In COVID Cases Among The Vaccinated: Documents

SEP 03, 2023 Zachary Stieber

COVID-19 cases among vaccinated seniors soared in 2021, according to newly disclosed data that was acquired by U.S. health agencies but not presented to the public.

Humetrix Cloud Services was contracted by the U.S. military to analyze vaccine data. The company performed a fresh analysis as authorities considered in 2021 whether COVID-19 vaccine boosters were necessary amid studies finding waning vaccine effectiveness.

Humetrix researchers found that the proportion of total COVID-19 cases among the seniors was increasingly comprised of vaccinated people, according to the newly disclosed documents.

For the week ending on July 31, 2021, post-vaccination COVID-19 cases represented 73 percent of the cases among people 65 and older, the company found. The elderly were 80 percent fully vaccinated at the time. Breakthrough infection rates were higher among those who were vaccinated early, the researchers found. They estimated that the rates were twice as high in those who had been vaccinated five to six months prior, when compared to people vaccinated three to four months before.

The breakthrough cases started in January 2021, according to the data.

Protection against hospitalization was also fading, researchers discovered.

In the week ending on July 31, 2021, 63 percent of the COVID-19 hospitalizations in seniors were among the fully vaccinated, according to the documents. The same pattern of weaker protection among people who were vaccinated early was found.

Researchers calculated that the vaccine effectiveness (VE) against infection was just 33 percent while the effectiveness against hospitalization had dropped to 57 percent.

Seniors who previously had COVID-19 and recovered were more likely to avoid hospitalization, the researchers also found. Risk factors included serious underlying conditions such as obesity and being in the oldest age group, or older than 85.

The cohort analysis was completed on 20 million Medicare beneficiaries, including 5.6 million seniors who received a primary series of a COVID-19 vaccine.

"Our observational study VE findings show a very significant decrease in VE against infection and hospitalization in the Delta phase of the pandemic for individuals vaccinated with either the Pfizer or Moderna vaccine for those 5-6 months post vaccination vs. those 3-4 months post vaccination," Dr. Bettina Experton, Humetrix's president and CEO, said in a Sept. 15, 2021, email to top U.S. Food and Drug Administration (FDA) officials.

Humetrix also found that among the beneficiaries, there had been 133,000 cases, 27,000 hospitalizations, and 8,300 intensive care admissions among the fully vaccinated since the start of the COVID-19 pandemic.

Dr. Experton disclosed that Humetrix shared the data with the U.S. Centers for Disease Control and Prevention (CDC) in August 2021.

"It would have been nice to know [the military] was conducting this prior to now. Also might have been nice for CDC to share the data," Dr. Peter Marks, one of the FDA officials, told colleagues in response.

21-2

"This is more worrisome than the other data we have in my opinion," Dr. Janet Woodcock, the FDA's acting commissioner at the time, said in reply.

The presentation and emails were obtained by the Informed Consent Action Network, a nonprofit that seeks to provide transparency around medical issues, through the Freedom of Information Act (FOIA).

"It is hard to see this as anything other than a failure of our health authorities to assess, share, make public, and act upon valuable, real-world data in the midst of a so-called pandemic," Del Bigtree, founder of the network, told The Epoch Times via email. "And without FOIA, the public likely would never be made aware of these failures which, of course, allows them to be perpetrated again and again."

The FDA and CDC declined to comment.

Dr. Francis Collins, the director of the U.S. National Institutes of Health at the time, wrote in a separate email obtained through FOIA that the results of the study provided "pretty compelling evidence that VE is falling 5–6 months post vaccination for both infection and hospitalization for those over 65."

He added, "Even for those 3–4 months out there is a trend toward worsening VE."

The CDC, FDA, and National Institutes of Health did not share the data with the public as they considered whether to clear and recommend COVID-19 vaccine boosters.

The CDC held a meeting with its vaccine advisers on Aug. 30, 2021. During the meeting, CDC officials went over emerging data on waning vaccine effectiveness. But the military study was not included.

The FDA held a similar meeting on Sept. 17, 2021. The CDC participated. The Humetrix analysis was also not presented during that meeting.

Both agencies have aggressively promoted COVID-19 vaccines throughout the pandemic, including hyping them as strongly protective against severe disease even after their own data have suggested that is not the case.

The CDC did present ([pdf](#)) data from COVID-NET, one of its systems, that showed effectiveness against COVID-19-associated hospitalization was falling among the elderly since the emergence of the Delta variant but that data still showed 80 percent effectiveness.

The presentation also included data from outside researchers and Israel that estimated the protection during the Delta era against infection ranged from 39 percent to 84 percent and that the effectiveness against hospitalization ranged from 75 to 95 percent.

The FDA ended up clearing a Pfizer booster for many Americans. The CDC advised most people to receive it. The agencies later expanded booster clearance and recommendations to virtually all Americans aged 5 and older, with Moderna's shot as another option. Authorities have since replaced the old shots due to their lack of durability, and are preparing to roll out another slate of shots this fall.

22-1

Even the CDC Now Admits That the Vaccinated Likely Have a Higher Risk of Infection With New Covid Variant

Julian Conradson September 4, 2023

As if the Covid Scamdemic couldn't get any more absurd, the Centers for Disease Control and Prevention **CDC** is now admitting that the failed Covid "vaccine" causes those to receive it to be more susceptible to infection than someone who is unvaccinated – just as the Biden Regime is seemingly prepping for another authoritarian lockdown and booster rollout with the arrival of the new election BA.2.86 Covid variant, no less.

Curious timing.

According to the CDC's 'Risk Assessment Summary for SARS CoV-2 Sublineage BA.2.86' that was published late last month, the new variant "may be more capable of causing infection in people who have previously had COVID-19 or who have received COVID-19 vaccines." In other words, the experimental gene therapy jabs have done nothing but cause problems for those who have taken it, including, but not limited to, sudden death, blood clots, heart complications, and now increased risk of infection – as confirmed by the very organization that called the very same notion 'disinformation' just a few months ago.

Now we just need them to acknowledge the rest of the issues that have been caused by the jab. Despite the transmission admission, the CDC shamelessly added that the new vaccines coming this month will definitely do their job – just like the first, and second, and third, and so on shots that came before. As the agency puts it, "this updated vaccine will be effective at reducing severe disease and hospitalization."

They can't be serious. This is despite the fact that, by their own admission, "scientists are [still] evaluating the effectiveness of the forthcoming, updated COVID-19 vaccine." No surprise – this round is being rushed to market without proper testing too.

From the CDC risk assessment:

Based on what CDC knows now, existing tests used to detect and medications used to treat COVID-19 appear to be effective with this variant. BA.2.86 may be more capable of causing infection in people who have previously had COVID-19 or who have received COVID-19 vaccines. Scientists are evaluating the effectiveness of the forthcoming, updated COVID-19 vaccine. CDC's current assessment is that this updated vaccine will be effective at reducing severe disease and hospitalization. At this point, there is no evidence that this variant is causing more severe illness. That assessment may change as additional scientific data are developed. CDC will share more as we know more..

...updated vaccines will be available as early as mid-September at your local pharmacy or doctor's office.

The CDC's admission comes just a month after the Cleveland Clinic released the results of a study that showed that a higher number of COVID-19 vaccine doses received increases the risk of infection with COVID-19. The study was published at Open Forum Infectious Diseases (OFID), wherein the studies are fully peer-reviewed.

The research, conducted with a large sample size within the healthcare system, capitalized on the early recognition of the need to maintain an effective workforce during the pandemic.

23-1

CDC & FDA Ignored U.S. Military Investigation Revealing Vaccine Failures, New FOIA Documents Reveal

Jim Hofl September 4, 2023

Non-profit organization ICAN (Informed Consent Action Network) has obtained new documents through the Freedom of Information Act (FOIA). These documents shed light on the disregard by the Centers for Disease Control and Prevention (CDC) and the Food and Drug Administration (FDA) towards a U.S. military investigation that reportedly indicated vaccine failures as early as January 2021.

The FOIA documents, made public by ICAN, suggest that the CDC and FDA may have overlooked crucial information regarding the efficacy of vaccines. According to ICAN's findings, a U.S. military investigation conducted in January 2021 apparently revealed signs of vaccine failures. However, the CDC and FDA allegedly failed to acknowledge or address these concerns adequately.

"Through FOIA requests, ICAN's attorneys have obtained a September 2021 presentation delivered to FDA and NIH higher-ups, including Anthony Fauci, Francis Collins, Peter Marks, and Janet Woodcock, which indicated shocking levels of waning immunity and breakthrough infection among the vaccinated as early as July 2021," according to the press release.

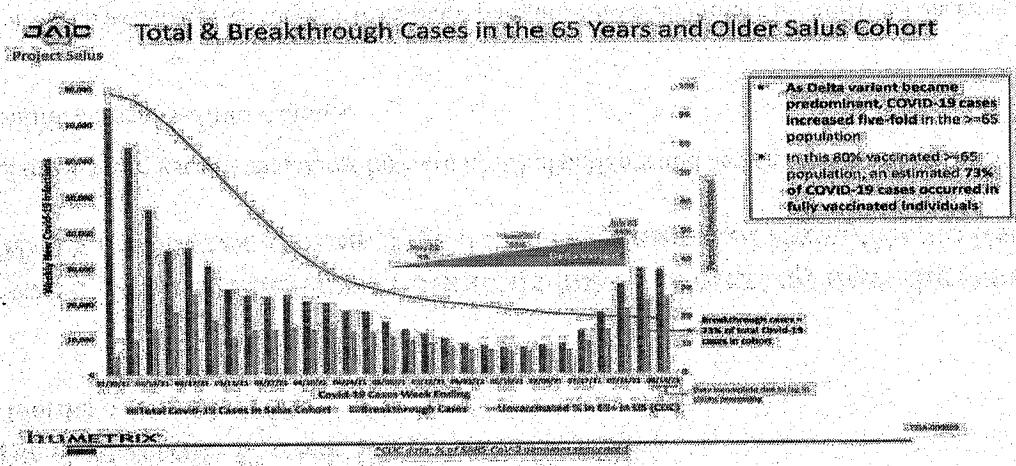
Humetrix Cloud Services has been awarded a contract by the U.S. military to conduct a comprehensive analysis of vaccine data. The company, known for its expertise in healthcare technology solutions, played a crucial role in helping the military gain valuable insights into the effectiveness and distribution of vaccines.

A concerning trend has emerged regarding the proportion of COVID-19 cases among the senior population. The study revealed that a growing number of vaccinated individuals account for a significant portion of total cases within this age group.

According to recently released data, the emergence of breakthrough cases can be traced back to January 2021.

More from ICAN:

In fact, the data shows that for the final week of July, fully vaccinated individuals made up an estimated **73% of COVID-19 cases and 63% of COVID-19 hospitalizations** in the 65+ age group. The presentation goes on to show evidence of rapidly waning immunity, as infection rates 5-6 months post vaccination were **twice as high** as infection rates 3-4 months post vaccination.

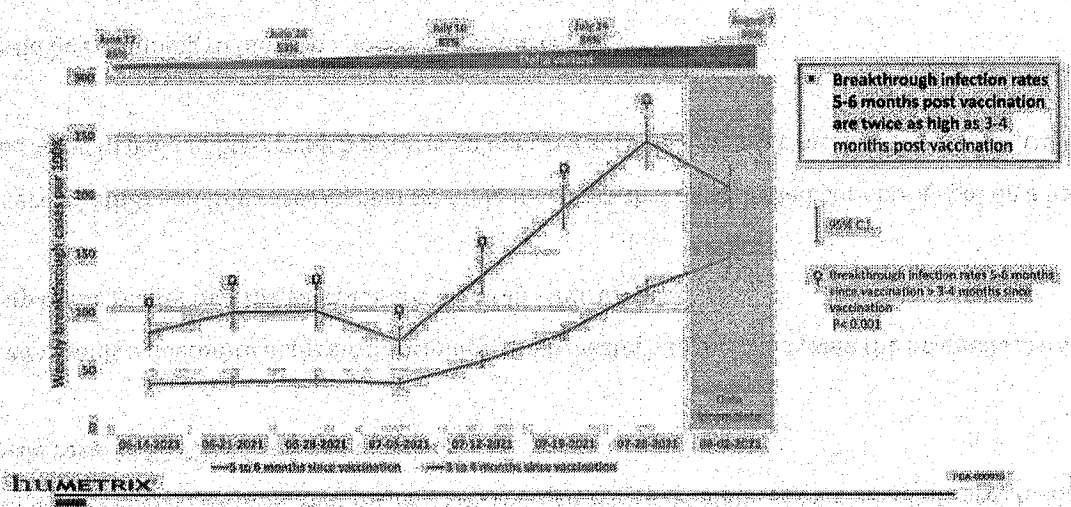


Source: Humetrix

23-2



Is mRNA Vaccine Effectiveness Against Delta Breakthrough Infection Waning Over Time in 65 Years and Older Salus Cohort?



Source: Humetrix

Despite having this data on hand—certainly by the date of the **September 13, 2021 presentation**, (but likely earlier, as a **September 15, 2021 email** states that the data had been “brought to the CDC three weeks ago”) — public health officials, **like Fauci**, continued to double-down on the message that vaccines were the key to getting “control of the virus.”

Meanwhile, on September 16, 2021, Collins **noted** about the data: “Interesting and pretty compelling evidence that VE [vaccine efficacy] is falling 5-6 months post vaccination **for both infection and hospitalization** for those over 65. Even for those 3-4 months out there is a trend toward worsening VE.”

But the CDC didn’t let the evidence get in the way of its messaging. As late as December 2021, the **CDC** kept up the outrageous façade that the vaccines offered “similar protection in real-world conditions as they have in clinical trial settings, reducing the risk of COVID-19, including severe illness by 90 percent or more among people who are fully vaccinated.”

CDC apparently went as far as keeping the data from FDA, evidenced by the Director of CBER, Peter Marks’, **comment** to Janet Woodcock, Acting Commissioner of FDA, that, it “might have been nice for CDC to share the data.”

Rest assured that ICAN’s legal team won’t rest in its efforts to expose exactly what the government knew about these vaccines and when it knew it.

The CDC and FDA have chosen not to disclose crucial data while deliberating the authorization and endorsement of COVID-19 vaccine booster shots.

More from **Epoch Times**:

The cohort analysis was completed on 20 million Medicare beneficiaries, including 5.6 million seniors who received a primary series of a COVID-19 vaccine.

0-5

23-3

"Our observational study VE findings show a very significant decrease in VE against infection and hospitalization in the Delta phase of the pandemic for individuals vaccinated with either the Pfizer or Moderna vaccine for those 5-6 months post vaccination vs. those 3-4 months post vaccination," Dr. Bettina Experton, Humetrix's president and CEO, said in a Sept. 15, 2021, email to top U.S. Food and Drug Administration (FDA) officials.

Humetrix also found that among the beneficiaries, there had been 133,000 cases, 27,000 hospitalizations, and 8,300 intensive care admissions among the fully vaccinated since the start of the COVID-19 pandemic.

Dr. Experton disclosed that Humetrix shared the data with the U.S. Centers for Disease Control and Prevention (CDC) in August 2021.

"It would have been nice to know [the military] was conducting this prior to now. Also might have been nice for CDC to share the data," Dr. Peter Marks, one of the FDA officials, told colleagues in response.

"This is more worrisome than the other data we have in my opinion," Dr. Janet Woodcock, the FDA's acting commissioner at the time, said in reply.

In a statement to Epoch Times, ICAN founder Del Bigtree said, "It is hard to see this as anything other than a failure of our health authorities to assess, share, make public, and act upon valuable, real-world data in the midst of a so-called pandemic. And without FOIA, the public likely would never be made aware of these failures which, of course, allows them to be perpetrated again and again."

Dr. Peter A. McCullough shared his thought on this revelation.

"Failure was very rapid with large numbers of fully vaccinated Americans suffering hospitalization and death. By May 1, 2021 the CDC announced it was giving up on tracking vaccine breakthrough cases. No RCT ever showed a reduction in hospitalization/death," he said.

2-3

24-1

Science Fraud: Pfizer's Covid Jab "Placebo" Control Group Was Given Moderna's "Vaccine"

Mac Slavo September 8, 2023

Pfizer has committed a major scientific fraud. Instead of giving a control group a placebo, they were instead given Moderna's mRNA "vaccine." The problem is, that's no longer a control group, and the data was presented as if they were given a placebo or a "treatment that has no therapeutic value, such as water, or saline."

New research published at Preprints.org reveals that the so-called "placebo" injections used in Pfizer's Wuhan coronavirus (COVID-19) "vaccine" trials were not real placebos. Moderna's "vaccine" has some kind of effect on the body, or the ruling class wouldn't insist the slaves be injected with it.

In a clinical trial study titled "Forensic Analysis of the 38 Subject Deaths in the 6-Month Interim Report of the Pfizer/BioNTech BNT162b2 mRNA Vaccine Clinical Trial," the paper, which has not yet been peer-reviewed, looked at 38 trial subjects who died between July 27, 2020, when Phase 2 / 3 of Pfizer's clinical trial began, and March 12, 2021, at the conclusion of Pfizer's six-month interim report on the results.

Researchers say their analysis of these cases is unique in that it represents the first study carried out by a group unaffiliated to ever look at the original data from Pfizer and BioNTech's BNT162b2 mRNA injection clinical trial (CA4591001).

At Week 20 of the trial; the BNT162b2 mRNA jab illegitimately received Emergency Use Authorization (EUA) from the U.S. Food and Drug Administration (FDA), which disregarded the safety and effectiveness of ivermectin, as one example, and proceeded to rush its EUA for the Pfizer-BioNTech jab at *warp speed*.

Once that EUA was issued, trial subjects who were given the "placebo" were offered the BNT162b2 injection. Most of them accepted, save for a few objectors, and Pfizer-BioNTech proceeded to report that the number of deaths in the vaccinated versus placebo group during the first 20 weeks showed "no significant difference." *-Natural News*
The way Pfizer-BioNTech manipulated the numbers and the "placebos" given, made it appear as though its jabs were safe and effective. What the two companies failed to reveal, though, is the fact that most of its "placebo" group had, in fact, gotten jabbed with real COVID shots also.

The only group that saw deaths drop to zero was the truly and fully unvaccinated group, which was very small, while everyone else either got sick or died at rates consistent with what we now know to be common among the fully jabbed.

Staying FULLY UNVACCINATED Proves To Be The Safest Defense Against Contracting COVID 4 Out Of 5 Canadian "COVID-19 Deaths" Are In The "Fully Vaccinated"

What is even worse is that Pfizer-BioNTech also secretly gave at least some of its "unvaccinated" control group members the mRNA jab from *Moderna* instead in order to make it seem like the BNT162b2 injection is much safer and more effective than it actually is.

Before COVID Scam, Moderna CEO Said "Make A Billion Doses of Vaccines" For A "Pandemic"

"On December 23, 2020, the subject received Dose 1 of the Moderna mRNA ... died on January 11, 2021," the preprint explains. The subject in question was a 65-year-old Hispanic male with a medical history that included pulmonary fibrosis and hypertension. Thanks to immunosuppression from the Moderna jabs, the man died rather quickly – **and Pfizer-BioNTech officially classified him as an "unvaccinated" COVID death.**

So basically, it sounds like those who conducted the study knew a lot of people would die from the vaccines, and they wanted to make it look like it was the scamdemic that killed them and not the shot.

Should we pity those who continue to parrot "trust the science yet?" It was pretty obvious from the beginning of this massive scamdemic that this was all about getting people scared enough to be injected with an mRNA sauce that's proven deadly.

25-1

'We were ordered to "Euthanise" Patients to falsely increase COVID Death Counts while Hospitals were Empty' claims Whistleblowing NHS Doctor

THE EXPOSE AUGUST 30, 2023

An NHS whistleblower, who wishes to remain anonymous, has come forward with allegations that the **NHS hospitals were not overwhelmed during the COVID-19 pandemic**, as was reported by authorities and the mainstream media.

The whistleblower also confirmed that the little care given throughout the pandemic amounted to negligence and that the government and **NHS bosses essentially instructed staff to let people die, or in some cases kill them through the 'End of Life Care' programme and falsely label the deaths as being due to Covid-19.**

This individual referred to as Dr. John, has worked in minor injuries and illness centres as well as in a primary care role throughout the pandemic.

Dr. John claims that he has "seen this mess evolve from the very beginning of the pandemic" and that hospitals were actually extremely quiet and almost empty during the first lockdown.

"I used to see an average of 20 patients per day, that dropped to 1 – 2 patients during the first lockdown. I have even witnessed an elderly lady with horrific broken bones come into the hospital three weeks after her accident as she was too scared of catching coronavirus to visit the hospital sooner. In the end, the pain overcame the fear.

"I have also assessed people with chest pains in their homes who would not go for further assessment as they were so scared of 'the virus' they would rather chance a heart attack than the infection or the loneliness of going to the hospital alone."

NHS statistics certainly back up Dr John's claims.

We examined [the data for A&E attendance](#) in the months of April (Lockdown 1) and November (Lockdown 2) for 2020 and compared this with April and November in 2018 and 2019 which showed A&E attendance during the first lockdown was 57% down on the previous year, and A&E attendance during lockdown 2 was 31% down on the previous year.

- 2018 – April – 1,984,369 attended A&E / November – 2,036,847 attended A&E
- 2019 – April – **2,112,165** attended A&E / November – **2,143,505** attended A&E
- **2020 – April – 916,581 attended A&E / November – 1,485,132 attended A&E**

Summary: A&E attendances, performance and emergency admissions

Period: April 2020

Source: STCS data collection - MSH&E
 Basin: Provider
 Published: 14th May 2020
 Revised:
 Status: Published
 Contact: Chris Evison - England.nhsdata@nhs.net

A&E attendances			
Type 1 Departments - Major A&E	Type 2 Departments - Single Speciality	Type 3 Departments Other A&E/Minor Injury Unit	Total attendances
689,720	19,726	207,135	916,581

Provider Level Data

This significant drop in attendance suggests that people were too scared to visit the hospital due to the fear propaganda perpetuated in the mainstream media.

Furthermore, Dr. John also describes how changes in care policies have led to patients not receiving proper follow-up care, resulting in negative outcomes for patients and their families.

He states that usual follow-up visits were not done and parents were removing casts from their children's broken limbs, "I dread to think the state of some of their limbs,".

25-2

He also mentioned that a change in care policies led to one 80+-year-old woman being permanently disabled. He describes visiting an elderly patient who had only had a single face-to-face physio follow-up and a single follow-up via phone call following a hip operation. He found her in a bedridden state, unable to transfer to a commode, her dignity taken away.

"I recall visiting one patient a female in her 80's. She'd only had a single face-to-face physio follow-up and a single follow-up via phone call following a hip operation. I found her laid in her mess on incontinence pads, her dignity taken because she was bed bound with a fixed rotated leg, unable to transfer to a commode. Her family were extremely upset".

The demise of the NHS didn't just affect Dr John's patients though, it also affected him personally as he lost a family member to cancer during the alleged pandemic due to not being given the required care.

"He was given 7 years to live with his illness, he lasted just 1 year in the new NHS system. I've also witnessed the desperation of families witnessing their own relatives dying sooner than they should have due to the lack of professional care that should have been provided. It has been a very sad year in which I have witnessed the demise of the health service.

"I have also seen stroke patients sent home without being given any follow-up care. I also know of a triage policy in which staff were forced to send potentially seriously ill people home on the premise of giving them a call if their condition worsened".

Dr. John's claims are supported by a Care Quality Commission report that found 34% of NHS staff were pressured into placing "Do Not Resuscitate" orders on Covid patients with disabilities and learning difficulties. The policy led to people with disabilities and learning difficulties accounting for 3 in every 5 Covid deaths according to official ONS figures.

This testimony from an NHS staff member suggests that the public was being lied to regarding the official narrative of the NHS being overwhelmed during the pandemic.

It highlights the negative impact of misinformation and fear propaganda on the public's perception of the situation, leading to people avoiding seeking medical treatment for fear of contracting the virus.

Additionally, it also highlights the negative impact of changes in care policies, leading to patients not receiving proper follow-up care and negative outcomes for patients and their families.

A fact that is also backed up by a document nicknamed 'The Death Document' that was published by NICE, an executive non-departmental public body, **sponsored by the Department of Health and Social Care.**

As well as a mountain of evidence that the UK Government authorised the essential "mass murder" of the elderly and vulnerable by Midazolam injection and then told the public Covid-19 was to blame.

Between 2 March and 12 June 2020, 18,562 residents of care homes in England died with COVID-19, including 18,168 people aged 65 and over, representing almost 40% of all deaths involving COVID-19 in England during this period.

This is a significant number considering that during the same period, 28,186 "excess deaths" were recorded in care homes in England, representing a 46% increase compared with the same period in previous years.

A number of decisions and policies adopted by authorities at the national and local level in the UK violated care home residents' rights to life, to health, and to non-discrimination.

These include:

Mass discharges from hospital into care homes.
Imposition of blanket Do Not Attempt Resuscitation (DNAR) orders on residents of many care homes around the country and restrictions on residents' access to hospital.

25-3

Suspension of regular oversight procedures for care homes by the statutory regulating body, the Care Quality Commission (CQC), and the Local Government and Social Care Ombudsman.

These actions by authorities contributed to the high number of deaths among care home residents during the pandemic. It is also stated that serious illness in Covid-19 presents pneumonia and accompanying respiratory insufficiency.

Therefore, typical symptoms include breathlessness, cough, weakness and fever. It is also noted that people who suffer deteriorating respiratory failure and who do not receive intensive care, develop acute respiratory distress syndrome with severe breathlessness.

With that in mind here is an important warning applied to Midazolam courtesy of the US National Library of Medicine –

Midazolam injection may cause serious or life-threatening breathing problems such as shallow, slowed, or temporarily stopped breathing that may lead to permanent brain injury or death. You should only receive this medication in a hospital or doctor's office that has the equipment that is needed to monitor your heart and lungs and to provide life-saving medical treatment quickly if your breathing slows or stops. Your doctor or nurse will watch you closely after you receive this medication to make sure that you are breathing properly.

The warning states that this medication should only be given in a hospital or doctor's office that has the necessary equipment to monitor the patient's heart and lungs and provide life-saving treatment if needed.

The question is therefore raised as to why the "Death Document" published in April 2020 instructs doctors to treat COVID-19 patients suffering a disease that allegedly affects the respiratory system with Midazolam, a drug that affects the respiratory system.

Another question is raised as to why during the same month out-of-hospital prescribing for Midazolam was twice the amount seen in 2019.

Midazolam Hydrochloride (1501041T0)

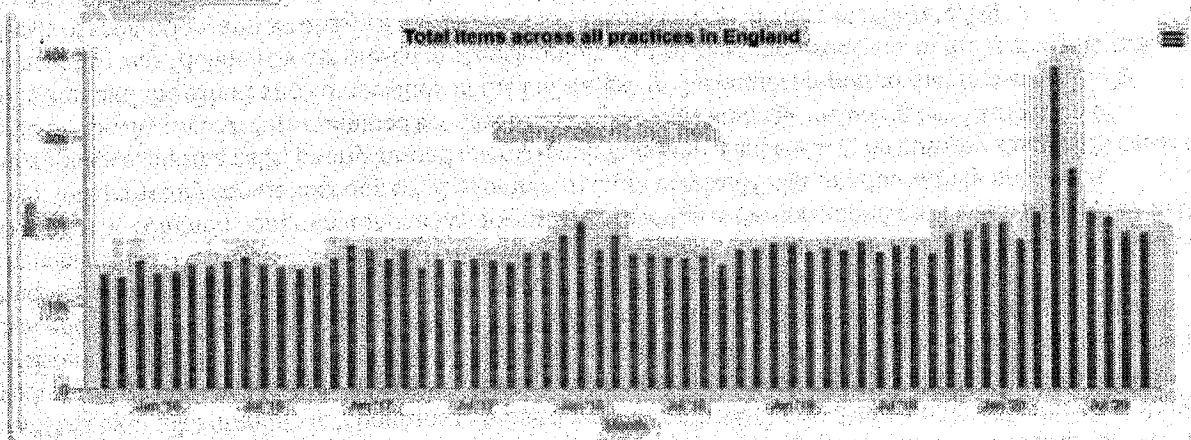
Part of chapter 15 Anaesthesia, section 15.1 General anaesthesia, paragraph 15.1.4 Sedative and analgesic peri-operative drugs

High-level prescribing trends for Midazolam Hydrochloride (BNF code 1501041T0) across all GP practices in NHS England for the last five years. You can see which CCGs prescribe most of this chemical relative to its class, or learn more about this site.

[View all matching drug items.](#)

Trends

Spending



25-4

This raises concerns about the appropriateness of the treatment being given to Covid-19 patients in care homes during the pandemic.

The CQC, a statutory body commissioned by the Department for Health and Social Care, conducted a special review of Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) decisions made during the COVID-19 pandemic. The [investigation](#) found evidence of unacceptable and inappropriate DNACPR's being made throughout the pandemic and states that it is possible that cases of inappropriate DNACPR's remain in place.

The CQC's investigation also found that throughout the "pandemic" this guidance was not being followed as they had received deeply troubling evidence from numerous sources that during the COVID-19 pandemic, DNACPR notices have been applied in a blanket fashion to some categories of person by some care providers, without any involvement of the individuals or their families.

Almost 10% of people using services or families who responded to their call for evidence told the British Institute of Human Rights that they had experienced pressure or use of DNACPR orders.

Thirty-four per cent of people working in health and/or social care said they were under pressure to put DNACPR's in place without involving the person.

In addition, 71% of advocacy organizations and campaigners said they experienced DNACPR orders put in place or pressure to make them without being involved in the decision.

It's also noted that these DNACPR orders were wrongly used as an excuse to begin end-of-life care.

The Death Document

NICE claims to be an independent organisation but in truth it seems to be anything but once you look into its structure. On this page [HERE](#) you will see the quote "Our Structure – The structure of the organisation and how we work with the **government**". Following the link to the "Our Structure" page [HERE](#), and then clicking "Find out more about how we develop guidelines" takes you to a page [HERE](#) from which it is clearly stated that "Topics are referred to NICE from the following organisations":

Healthcare topics: **NHS England**

Public health topics: **Department of Health and Social Care**

Social care topics: **Department of Health and Social Care and Department for Education.**

A copy of the NICE framework is [HERE](#) which you can go through at your leisure. As you will see at Clause 4.1 "**The Secretary of State is accountable to Parliament for the health system (its "steward"), including NICE**".

All the above information points to NICE not being independent at all. It is **clearly part of the UK government**, (NICE is funded by and accountable to the Department of Health and Social Care) and operates as an agency of the NHS. Further, and worryingly, given that it does not appear to be an independent organisation, the reach of NICE is extremely wide ranging given their guidance is implemented not only in hospitals, but in GP practices, and care homes and community organisations, along with others, and extends internationally.

It is with all the above in mind, that we must ask the question "Are the UK government, via the Department of Health and Social Care, responsible in any way for **NICE guideline NG163** which led to the unnecessary killing of the UK's elderly and most vulnerable by recommending the use of Midazolam and Opioids for the "treatment" of Covid 19?"

This document is tricky to find. If you search for it on the NICE website, you will reach a page that states that this guidance has been updated by NG191, which supersedes it. There is no library copy of NG163 for you to look at.

Clare Wills Harrison, a lawyer who has been exposing the Midazolam scandal since 2020, found NG163 some time ago along with multiple other documents which have since come to light and are relevant to the Midazolam issue. It is fair to say that NG163 has directly led to the incorrect use of a protocol which Clare and her team call "the death pathway", and they have come to the conclusion that where the word "pathway" appears in any medical recommendations, this is normally a cause for concern.

You can read NG163 yourself by clicking [HERE](#)

25-5

When you read NG163, note the date – 3rd April 2020. This was less than 2 weeks after the UK entered lockdown. Even if we concede that NICE, via the government, were working on treatment guidelines from January 2020, when early reports of Covid 19 were circulating around the world, that would have given NICE only 3 months to formulate the guidance in NG163. It is inconceivable that NICE could have the evidence and effective information about the use of Midazolam and Opioids for the treatment of breathlessness and anxiety in Covid 19, within this time frame.

NG163 clearly states, Midazolam did not have a UK marketing licence to be used for breathlessness or agitation at the date of its publication. If prescribed for the same, it would therefore be regarded as being used off label. A PowerPoint presentation created by Clare Wills Harrison ([see here](#)) explains the extra requirements placed on anyone prescribing a medicine off-label. You should also consider the consistent refusal by the UK health agencies to allow prescribing off label for other cheap anti-viral drugs to treat Covid.

At the time of publication (April 2020), opioids and benzodiazepines did not have a UK marketing authorisation for moderate to severe breathlessness. See [support for decision-making for off-label prescribing during the COVID-19 pandemic](#), produced by the General Medical Council (GMC) and Care Quality Commission (CQC), and the [GMC's COVID-19 ethical hub](#). [amended 17 April 2020]

Source

The GMC regulates doctors in the United Kingdom. They set standards, hold a register, carry out quality assurance education and investigate complaints.

On 14th April the GMC put out a “Joint statement: Community-based prescribing for COVID-19 symptoms” which you can find [HERE](#).

The joint statement irrefutably supports the NICE guidance in NG163 –

These drugs do not currently have a UK marketing authorisation for this use. We know that some clinicians are worried about how this guideline fits with GMC and MHRA advice about the use of medicines that are unlicensed or outside the terms of their existing licence (off-label).

We want practitioners to know that it is entirely appropriate to follow these guidelines and that we would not have concerns about prescribing decisions based upon them.

Source

the NICE guidance is clear that sedation and opioid use should not be withheld through fear of causing respiratory depression.

Source

Lawyer Clare Wills Harrison spoke to Dr Bryan Ardis in detail about the “Death Document” and more in the video below – It’s quite clear, from the evidence provided by whistleblowing NHS staff, investigative lawyers, and official Government reports is that you gave up over two years of your life due to a lie.

A lie that involved prematurely ending the lives of thousands upon thousands of people, who you were told died of Covid-19.

A lie that has involved committing one of the greatest crimes against humanity in living memory.

A lie that has required three things – fear, your compliance, and a drug known as Midazolam.

26 - 1

WAYNE ROOT: A Covid Vaccine Nightmare Story Everyone Needs to Hear. The Next Person Crippled, Disabled, or Dead Could Be You!

Aug. 10, 2023 Wayne Allyn Root

There is a silent tragedy of epic proportions going on in our country. It's silent because the media refuses to connect the dots.

Have you noticed the tsunami of recent headlines about high-profile Americans who "died suddenly" or suffered heart attacks, strokes, or blood clots at young ages? Celebrities, athletes, entertainers, and CEOs are dropping dead, or having heart attacks.

Still, the media whistles past the graveyard.

There are always a thousand excuses. Anything and everything, EXCEPT blaming the Covid vaccine. It can never be the vaccine.

Strange thing though. Virtually every one of these dead, crippled, disabled or seriously-ill people have one thing in common: they were vaccinated. What a wild coincidence!

I'll soon write a column about 65 friends, acquaintances, and business associates of mine...people I personally know...who have died or suffered serious illness since being vaccinated. The numbers are piling up. These are not coincidences. It's a pattern. Studying a pattern like this used to be called "SCIENCE."

In the meantime, I have one up-close and personal story that every American needs to hear. Last week I went out to dinner with one of my best friends (let's call him Mike). He told me the story of his own sister, who was badly injured and disabled by the Covid vaccine. He then informed she's a big fan of mine and watches my Real Americas Voice TV show every Saturday. He said she'd like to talk to me and share her story.

We spoke yesterday. Here's her story.

Let's call her Jane. She is an accomplished female CEO. Jane runs a medical organization that helps children. She wanted to stress to me how healthy she'd been before getting the vaccine. She traveled the world on business and lugged her own luggage everywhere. She biked 15 miles a day. She took one-hour spin classes. She ate healthy. She was on no medications.

During the Covid pandemic, Jane never got Covid. She continued biking 15 miles several times per week. She walked 3 miles a day.

Then her doctor pressured her to take the Covid vaccine. She was worried and skeptical, but eventually she relented. She took one Pfizer jab. One. No second jab. No booster. Just one.

That's all it took to ruin her life. Jane will never be the same.

Within four hours she felt extreme nerve pain. Pain the likes of which she'd never felt in her life. Mind-numbing pain.

Then came the racing heart. Heart palpitations. Severe muscle twitching. Severe muscle weakness. Shortness of breath. Horrible fatigue. Brain fog so bad she could no longer focus, or deal with even basic tasks.

Next came blurred vision. Sensitivity to light and sound. Dry eyes and dry mouth. Dizziness. Ringing in her ears so loud she couldn't think. Hair loss in clumps. Severe heartburn. Circulation problems- her feet turned purple. She could barely walk. Internal tremors so bad, it felt like a cell phone was vibrating inside her body. She is in so much pain at night, she can't sleep.

26-2

Jane also suffered from menstrual problems after getting the vaccine. She hemorrhaged so severely this past February that she was hospitalized and eventually required emergency surgery.

By March it was a new issue requiring hospitalization. Her heart was beating so fast it felt like it was going to explode. It went from 60 beats per minute to 165 within seconds. Her heart condition is so serious, she fears could "die suddenly" at any time.

This is Jane's new normal. She was perfectly healthy all her life. Then she took the Pfizer Covid vaccine. Her life instantly changed after that one vaccine. Now it's difficult to walk to the bathroom.

But this is no fluke. Jane joined a Facebook group for Covid vaccine victims. It's now up to 5,000 members- all with similar stories.

They may be the lucky ones. My wife and I eat at our favorite restaurant every Friday night. The manager (call him John) stopped by our table every week to say hello. He always shared stories about his wife and daughter. His family was his life. We loved talking to John.

Three weeks ago, we walked into the restaurant. The GM told us John had just "died suddenly." Never sick a day in his life, 52 years old, he suddenly keeled over and died of a heart attack in front of his wife. Since every employee had to be vaccinated to work, we know John was vaxxed. We will attend his memorial service this coming weekend.

The facts are out. The CDC's own internal report shows over 117,000 excess deaths among American children since the vaccine. CHILDREN. That's more excess dead children in two years than all the US soldiers killed in the Vietnam War in a decade.

Life insurance companies report more excess deaths among working age Americans since 2021 (the year the Covid vaccine began) than at any time in history. What do working age Americans have in common? The Biden administration forced them to take the vaccine, or lose their jobs.

Ed Dowd, the former Blackrock money manager, who analyzes numbers for a living, says the disability rolls have grown by millions since the vaccine. MILLIONS. That's why there is such a severe shortage of employees.

We know this is happening. The next victim could be you, your spouse, your children. To do nothing now; to make believe this isn't happening; to hope it goes away; to try to cover it up; is no longer about ignorance, or delusion, or even greed.

At this point, to do nothing, to refuse to act, is a combination of pure evil, mass murder and crimes against humanity.

27-1

Can anyone explain the alarming rise in disability in both the US and UK?

I just talked to Ed Dowd. The only thing that can explain this is the COVID vaccine. It's 100% consistent. But if it isn't the vaccine, how come NOBODY has a better explanation?

STEVE KIRSCH | JULY 19, 2023

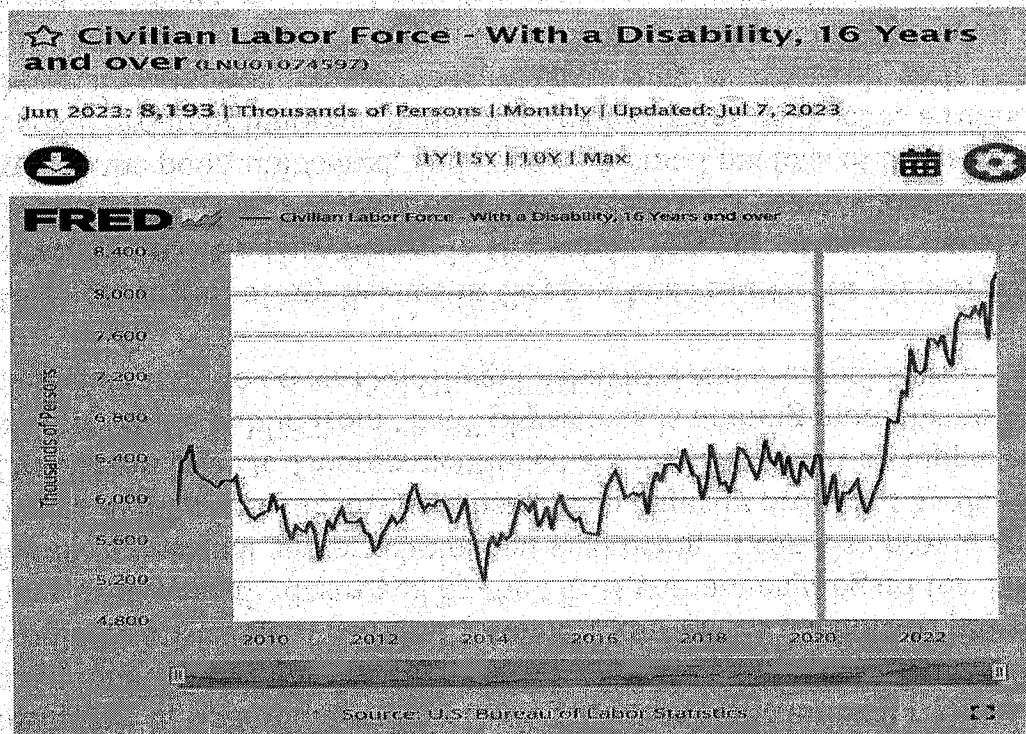
Executive summary

I just got off the phone with Ed Dowd. We both agree that the highly alarming rise in disability data in the UK and US is 100% consistent with the COVID vaccine being the cause.

If we are wrong and there is a better explanation, why are all the health authorities silent?

US data

The FRED disability data is based on surveys. They do the survey the same way every time. There were no methodology differences. Look at the graphs right after the vaccines were rolled out for the civilian labor force:



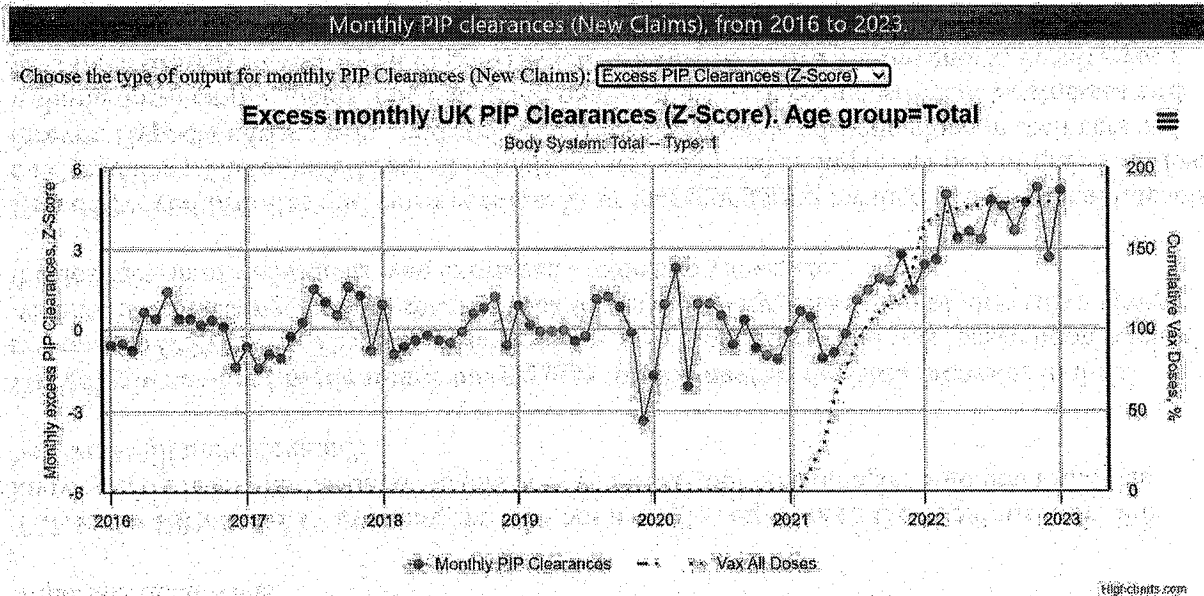
27-2

The UK disability numbers

Unlike the US FRED numbers, the UK numbers are directly measured because these are numbers of disability insurance claims.

Overall, the claims rate now has a Z-score >5 which means it is highly unlikely to be caused by normal statistical fluctuations.

As you can see, the claims tracked the rollout of the COVID vaccine.



Age Group:

- Haematological
- Oncology
- Psychiatric
- Neurological
- Musculoskeletal
- Visual
- Auditory
- Cardiovascular
- Gastrointestinal
- Dermatological
- Immune
- Genito-urinary
- Endocrine, Metabolic and Thermoregulation
- Respiratory
- Others

Select System:

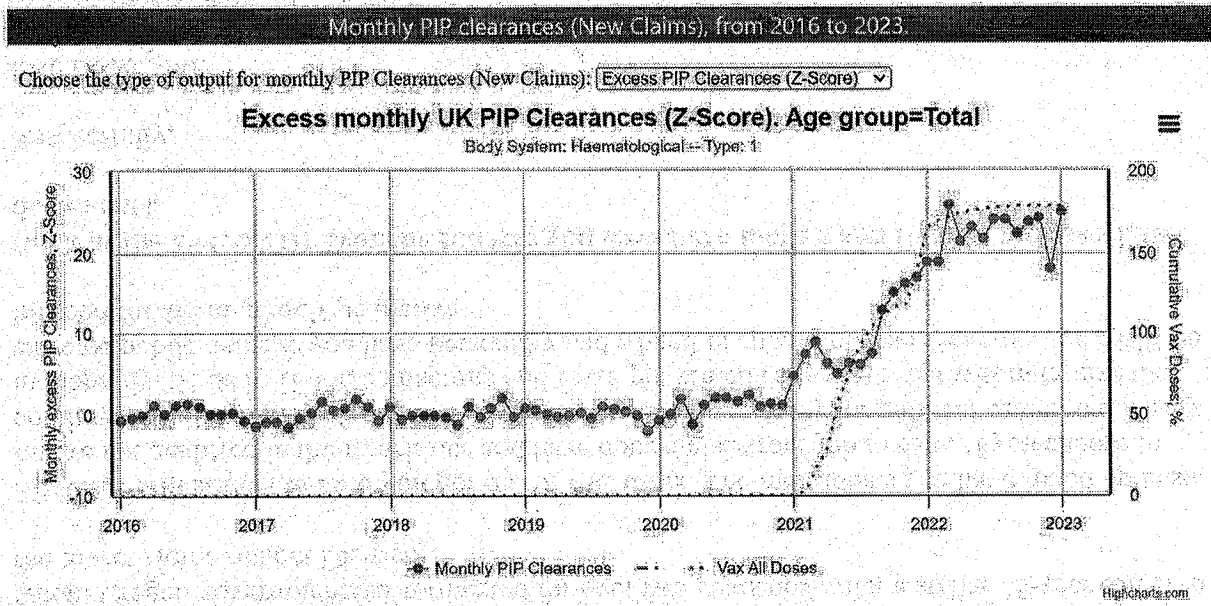
List of underlying causes within body system
179 - Total Total

27-3

Blood issue in the UK spiked right after the COVID vaccines rolled out

Blood issues have spiked; it starts right after the COVID vaccine rollout. Z-score is over 25 meaning that this is caused by something; it didn't happen at random.

We know from the US insurance data that the #1 cause of these disabilities is "unknown" because we all know that vaccines are safe and effective, don't we ;)?



Age Group:

- Haematological
 - Oncology
 - Psychiatric
 - Neurological
 - Musculoskeletal
 - Visual
 - Auditory
 - Cardiovascular
 - Gastrointestinal
 - Dermatological
 - Immune
 - Genito-urinary
 - Endocrine, Metabolic and Thermoregulation
 - Respiratory
 - Others
- Select System: Total

- List of underlying causes within body system
- 9 - Metabolic red cell disorders Haematological
 - 10 - Other infectious diseases Haematological
 - 8 - Bacterial diseases Haematological
 - 5 - Platelet disorders Haematological
 - 4 - Clotting disorders Haematological
 - 7 - Viral diseases Haematological
 - 6 - Blood disorders Haematological
 - 2 - Haemolytic disorders Haematological
 - 1 - Anaemia Haematological

Summary

It looks to us like huge rates of disability in the US and the UK are being caused by the COVID vaccines. If you have a better explanation, I'm all ears.