

# CDC Runs Two VAERS Systems – The Public Can Access Only One of Them

## [CDC Runs Two VAERS Systems – The Public Can Access Only One of Them](#)

*An investigation by The BMJ into the Vaccine Adverse Event Reporting System, or VAERS, found multiple deficiencies in the system, including the revelation that the government runs two systems – one for the public, and a private back-end system that contains all of the corrections and updates, including deaths that occurred after an initial injury.*

by [John-Michael Dumais](#), [The Defender](#)

November 14, 2023

When [Dr. Robert Sullivan](#) collapsed on his treadmill three weeks after his second COVID-19 vaccine in early 2021, he fell into a “[nightmare](#)” ordeal that he said exposed glaring deficiencies in the nation’s vaccine safety monitoring system.

Diagnosed with sudden onset [pulmonary hypertension](#), the healthy and fit 49-year-old anesthesiologist from Maryland attempted to file a report through the government-run [Vaccine Adverse Event Reporting System](#) (VAERS).

But like others interviewed in a recent [investigation by The BMJ](#), Sullivan hit barrier after barrier when trying to submit and update his report.

Almost three years later, still grappling with debilitating symptoms, Sullivan’s experience highlights the systemic problems with the U.S. adverse events monitoring system run

jointly by the Centers for Disease Control and Prevention (CDC) and the U.S. Food and Drug Administration (FDA).

From doctors unable to file reports to disappearing data, limits on transparency and lack of resources to follow up on concerning vaccine reactions, experts warn VAERS is failing to detect critical safety signals.

According to one of those experts – VAERS researcher [Albert Benavides](#), whose experience includes HMO claims auditing, data analytics and revenue cycle management – VAERS’ failure isn’t accidental.

“It is not broken,” Benavides wrote in his [Substack coverage of The BMJ investigation](#). “VAERS runs cover for the [big pharma](#) cabal.”

### **‘They even delete legitimate reports’**

Like others interviewed by The BMJ, Sullivan experienced limited follow-up after submitting his VAERS report. He received only a temporary report number months after his initial submission.

A physician named “Helen” (pseudonym) told The BMJ that fewer than 20% of concerning reports get follow-up, including many deaths she reported.

In consultation with Benavides, an [audit by React19](#) found that 1 in 3 [COVID-19](#) vaccine adverse events reports in VAERS were either not posted publicly or were deleted. React19 is a nonprofit that collects stories of people injured by the mRNA vaccines.

According to The BMJ, of those queried by React19, “22% had never been given a permanent VAERS ID number and 12% had disappeared from the system entirely.”

Benavides, who publishes the [VAERSAware dashboards](#) documenting many of the problems with VAERS, said there is even deeper

dysfunction in the VAERS system – from inventing symptoms to deleting reports.

“VAERS does not publish all legitimate reports received,” Benavides told [The Defender](#). “They throttle publication of reports. They even delete legitimate reports.”

For a system dependent on voluntary engagement, these restrictive policies keep critical data hidden, according to Benavides.

In 2007, the U.S. Department of Health and Human Services (HHS) contracted with Harvard Pilgrim Health Care (HPHC) to review the VAERS system. In 2010, HPHC filed its report, which determined that 1 in 39 people experienced vaccine injuries and that only around [1% of vaccine-related injuries or deaths](#) are ever reported to VAERS.

The CDC, which operates under HHS, [scuttled the study](#), refused to take calls from the researchers and declined to upgrade the VAERS system when a new, much [more effective system](#) was developed.

### **‘Blind spots are self-created’**

VAERS “collects reports of symptoms, diagnoses, hospital admissions, and deaths after vaccination for the purpose of capturing post-market safety signals,” according to The BMJ.

But the limited transparency of VAERS data presents barriers to proper analysis, according to The BMJ’s investigation and researchers like Benavides.

The public – including doctors and other report submitters – can access only incomplete initial reports, not updates with vital details.

This means outcomes like death are often excluded if the initial report was for an injury and a subsequent death report was filed.

"I made the false assumption that my conversation [with VAERS] would result in an adjustment to the publicly reported case," [Patrick Whelan, M.D., Ph.D.](#), told The BMJ.

Whelan, a rheumatologist and researcher at the University of California Los Angeles, in 2022 filed a report of a cardiac arrest in a 7-year-old male patient after COVID-19 vaccination.

"I assumed that, since it was a catastrophic event, the safety committee would want to hear about it right away," Whelan said. But nobody called him or requested an update after his submission.

"There was no mechanism for [updating] it," Whelan told The BMJ. "The only option I had was to make a new VAERS report." Without updates, the VAERS data showed that the boy was still hospitalized.

Whelan is one the authors of a [recent critique](#) of the Cochrane Review that concluded the COVID-19 mRNA vaccines were not dangerous.

The problem with VAERS is not limited to a lack of adequate follow-up but to the incomplete and often inaccurate information found there.

"VAERS in effect allows typos, truncated lot #'s, UNK [unknown] ages, UNK vax dates, UNK death dates, etc. to pass through into publication," Benavides said.

Benavides said specific data – including ethnicity, hospital names, attending physicians, submitter's relationship to the patient, patient and submitter addresses, telephone numbers and emails – collected by VAERS are not published,

"Any blind spots are self-created, in my opinion," he said.

## **Agencies maintain two separate VAERS databases – public gets to see only one**

“There’s two parts to VAERS, the front end and back end,” stated Narayan Nair, division director for the FDA’s Division of Pharmacovigilance at a December 2022 meeting with advocates, according to The BMJ. “Anything from medical records by law can’t be posted on the public-facing system,” he said.

The BMJ investigation discovered that the FDA and CDC maintain two separate VAERS databases, one available to the public that contains only initial reports, and a private back-end system containing all of the updates and corrections.

“Anything derived from medical records by law” cannot be posted on the public-facing system, Nair told the advocates, according to The BMJ.

In an apparent contradiction to this claim, The BMJ noted the FDA’s [Adverse Event Reporting System](#) (FAERS), which collects post-marketing information on drug reactions, posts its updates publicly.

Sullivan, who met Nair years before COVID-19 and considers him a friend, told The Defender that if this “very bright, kind and caring person” could not fix VAERS, “I don’t think it’s fixable.”

## **CDC says it reviewed 20,000 reports of deaths – none were related to COVID shots**

Withholding outcome data like deaths obscures critical safety signals, experts contend.

James Gill, a medical examiner, reported the death of a 15-year-old patient after vaccination, but the case was dismissed by the CDC despite autopsy evidence, according to the BMJ investigation.

Physician “Helen” told The BMJ that after filing reports on

her medical patients, including six who had died, she received only a single request for medical records on the death and two for hospital-admitted patients.

The standard operating procedure for COVID-19 vaccine reports in VAERS, according to The BMJ, is for reports to be processed quickly and for “serious reports” to receive special review by CDC staff.

However, while some other countries have acknowledged the probable connection between the mRNA vaccines and death, the CDC, while claiming to have reviewed nearly 20,000 death reports, has yet to acknowledge a single death linked to the COVID-19 vaccines, The BMJ said.

Benavides provided The Defender examples of VAERS “deleting legitimate reports,” not just duplicates or false claims.

“VAERS even [deleted dead Pfizer Trial patients](#),” he said, claiming that this report, for example, was not a “duplicate” and did not appear to be fake.

Benavides said:

“There are currently about 50 deaths that are not counted as deaths because the correct box is not checked off.

“There are thousands of reports and about 100 deaths in ‘UNKNOWN VAX TYPE’ in VAERS. Read the narrative to see these are clearly C19 jab-related deaths.

“There are over a thousand cardiac arrests where they are not marked as dead, and I question if they actually survived because there is no mention of ROSC [return of spontaneous circulation].”

“Why couldn’t VAERS populate the ages of these dead kids before publication?” Benavides said, pointing to [this report](#) on his website.

## Physicians report only FDA-recognized adverse events

[Ralph Edwards](#), former director of the Uppsala Monitoring Centre and until recently editor-in-chief of the International Journal of Risk & Safety in Medicine, told The BMJ the regulators may be relying too heavily on past epidemiological data, especially for new types of adverse events. “If something hasn’t been heard of before, it tends to be ignored,” he said.

Without guidance to report potential risks, doctors also face barriers. “Physicians are only willing to talk about FDA-recognized vaccine adverse events,” stated physician “Helen” in a 2021 meeting between the FDA and physicians and advocates, according to The BMJ.

[Svetlana Blitshteyn](#), a neurologist and researcher at the University at Buffalo, New York, told The BMJ if physicians are not educated to look for a specific condition, they’re unlikely to test for it or know how to treat it.

Sullivan told The Defender he believes his experience of developing pulmonary hypertension after taking the mRNA vaccine is one such safety signal the CDC and FDA are overlooking – a condition he believes many athletes have unknowingly developed.

[Sullivan co-authored a paper](#) of his and one other similar case of post-vaccine pulmonary hypertension. According to the paper:

“Pulmonary hypertension is a serious disease characterized by damage to lung vasculature and restricted blood flow through narrowed arteries from the right to left heart. The onset of symptoms is typically insidious, progressive and incurable, leading to right heart failure and premature death.”

“Athletes are canaries in the coal mine,” Sullivan told The Defender, speaking of the unusual numbers of [athlete](#)

[deaths](#) since the rollout of the vaccine. Sullivan thinks that those with superior physical conditioning, like him, stand a better chance of survival with early detection.

However, he said, “Athletes will get echocardiography, and it will be essentially normal. The only way to tell for sure is to do a right-heart catheterization” that can identify the anomaly.

Sullivan believes the lives of many athletes could still be saved if the reporting system recognized and investigated the signal – and said he would be happy to join a project dedicated to this goal.

He also told The Defender he believes many of the [sudden deaths](#) reported in the 25- to 44-year-old age group are a result of this hidden condition.

### **‘The buck stops with the CDC for reforms’**

Critics point to choices by the CDC as compounding VAERS’ passive design and understaffing issues.

Despite over 1.7 million reports since the COVID-19 vaccine rollout, staffing was not boosted accordingly, according to statements the CDC made to The BMJ.

A Freedom of Information Act request by The BMJ revealed Pfizer has nearly 1,000 more full-time employees working on vaccine surveillance than the CDC. Records showed in 2021, Pfizer on-boarded 600 additional full-time employees to handle the volume of adverse reports and planned to hire 200 more.

Physician “Helen” in The BMJ article called for an end to the “negative feedback loop” whereby the FDA fails to list adverse reactions because passive surveillance systems like the FDA’s don’t display them, while at the same time, because of that lack of disclosure, “physicians are blinded to the adverse reactions in their patients, and thus aren’t reporting them.”



“The buck stops with the CDC for reforms needed to open up data,” Benavides told The Defender, adding several suggestions that could immediately improve VAERS:

“Revert back to pre-January 2011 when VAERS did append initial reports with follow-up data, including death. Take off the arbitrary 30-minute time limit to file a report before getting kicked off. Make the process easier to submit follow-up data.”

When asked why the incompetence of VAERS had been allowed to continue for so long, Sullivan told The Defender, “Because of the lack of product liability” for the vaccines “and the surge to defend economic interests.”

Sullivan said he’d like to see the following changes to the system:

- Pharmaceutical advertising banned.
- Pharmaceutical company revenues devoted to advertising instead be spent on R&D.
- The tax money collected on pharma profits be directly sent to victim injury funds.

### **Yale cardiologist takes on study of COVID vaccine injuries**

Benavides said he spoke with Sen. Ron Johnson (R-Wis.) Monday and is also in discussion with Rep. Marjorie Taylor Greene (R-Ga.) of the [House Select Subcommittee on the Coronavirus Pandemic](#) to address the concerns with VAERS, including the under-publishing of reports.

“That’s a long overdue prospect and it would be incredible to actually get some analysis by that committee,” he said.

Another bright spot comes from news reported in The BMJ’s investigation that [Dr. Harlan Krumholz](#), a cardiologist and researcher at Yale University, has been recruiting members of React19 to [study](#) their vaccine injuries.

“We are working hard to understand the experience, clinical

course, and potential mechanisms of the ailments reported by those who have had severe symptoms arise soon after the vaccination,” Krumholz told The BMJ.

Sullivan told The Defender that medical science is “just beginning to catalog the damage to the heart” from the vaccines but that “in order to treat something, you have to diagnose it” – and that, because of the shortcomings with VAERS, “we have yet to scratch the surface of that.”

Sullivan, now almost three years into his ordeal, is outliving his initial prognosis.

“I have a grim diagnosis hanging over me, but I’m optimistic because I’m still here,” he said. “I had something bad happen to me, but I’ve met so many amazing, wonderful people along the way who are just interested in truth.”

“I’m going to live the best and most productive life I can with the time I have left,” Sullivan said, helping others who “have this cloud hanging over their future.”

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*John-Michael Dumais is a news editor for The Defender. He has been a writer and community organizer on a variety of issues, including the death penalty, war, health freedom and all things related to the COVID-19 pandemic.*

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# Baby Who Died 34 Hours After Vaccines Had Toxic Level of Aluminum in His Blood, Report Confirms

## [Baby Who Died 34 Hours After Vaccines Had Toxic Level of Aluminum in His Blood, Report Confirms](#)

*The parents of 62-day-old Sawyer learned their baby's blood contained 95 micrograms per liter of aluminum, a level that would be toxic for adults. The toxicologist who read Sawyer's report said the aluminum and antigen levels in the blood were due to the vaccines.*

by [John-Michael Dumais](#), [The Defender](#)

September 14, 2023

A Maine couple last week finally got the answers they'd been seeking for nearly a year, ever since their 62-day-old son, Sawyer, died Oct. 28, 2022 – 34 hours after receiving his scheduled childhood vaccines.

According to a toxicology report, Sawyer's blood contained 95 micrograms per liter of aluminum, a level that would be toxic for adults.

A toxicologist told the couple the aluminum and antigen levels in the blood were due to the vaccines. She also said a viral infection Sawyer was being treated for could have been a contributing factor.

Sawyer's parents, Melissa – a registered nurse – and her fiancé Nick shared their story last week with journalist [Jennifer Margulis](#).

In an interview this week with [The Defender](#), the couple detailed their search for truth, beginning with how Maine's medical examiner refused repeated requests to perform lab tests that might have shown the culpability of the vaccines – and instead initially [ruled Sawyer's death](#) “asphyxiation due to inappropriate sleep position and environment.”

## **The story of baby Sawyer**

On Oct. 20, 2022, Melissa took Sawyer to a doctor for a persistent rash around his torso. The doctor diagnosed a viral infection, gave Melissa some medicinal cream and told her to monitor Sawyer's temperature for possible fever.

Exactly one week later, Melissa went to the same pediatrician for a baby wellness checkup, where the doctor insisted Sawyer, despite Melissa's reservations and the baby still having a rash, receive the scheduled childhood vaccines.

These included: [RotaTeg](#) (for rotavirus), [Hib](#) (for Haemophilus influenzae b), [Pprevnar 13](#) (for 13 types of pneumococcal bacteria) and [Pediarix](#) (for diphtheria, tetanus, pertussis, hepatitis B and polio).

[Dr. Lawrence Palevsky](#), a pediatrician, told The Defender, “I don't know of any official warnings against vaccinating sick children,” but “there are no upsides to vaccinating a sick child. There are only downsides.” He added, “And, there are no upsides to vaccinating any child.”

Melissa told The Defender that, despite her medical training,

she became skeptical of vaccines just two days prior when she watched a video of a toxicologist talking about the dangers of vaccines for children. She discussed the upcoming vaccinations with her fiancé, and they decided to go ahead with them.

"We were afraid that the medical system was going to judge him and judge us and not let him into school," Nick said. "We just hadn't done any research on it."

Nick has two daughters from a previous marriage, ages 11 and 19, who received all of their childhood vaccines "and nothing ever happened," he said.

After the doctor's visit, Sawyer arrived home screaming and Melissa gave him the baby [Tylenol](#) recommended by the doctor.

By the next day, the baby had calmed somewhat but was still acting "fussy and uncomfortable," so Melissa gave him more Tylenol and some expressed breastmilk.

When Nick got home from work that day, they put Sawyer into his bassinet for a nap around 5:30. By 6:15 the baby was fussing, and with some help was able to get back to sleep. He slept off and on for another four hours, while his parents kept tabs on him via his baby monitor and visits to his room.

The last time Melissa checked on Sawyer, he wasn't moving or breathing. She picked up his limp and lifeless body and started screaming. Nick rushed in to help but it was already too late.

Emergency medical technicians arrived after the couple called 911. They tried but were unable to revive Sawyer.

The county and state police also responded and, because it was an infant death, opened a formal investigation and ordered an autopsy.

Chief Medical Examiner [Mark Flomenbaum](#) performed the autopsy the next day. Although he found Sawyer to be "well developed"

and without signs of injury or bruising, Flomenbaum filed a death certificate citing asphyxiation due to a “sub-optimal sleeping environment” – essentially blaming the parents.

“It was near Christmas when we got the autopsy results,” Melissa told The Defender. “We read them on Christmas Eve. ... We did nothing for the entire weekend.”

Asked if they ever learned what the medical examiner saw to make his determination, they said no. “The only thing in his basket was the blanket he was laying on.”

The police looked for evidence of child abuse or alcoholism, but quickly concluded it was an accidental death.

Melissa, grief-stricken, told everyone she could to investigate the possible role of vaccines in Sawyer’s death.

She first called the medical examiner to see if he would do testing to determine if sudden infant death syndrome (SIDS) was responsible, but was told there was no need “because it wouldn’t show the cause of his passing,” she recalled being told.

## **The hunt for answers**

That’s when the couple’s hunt for answers began. “I was looking up people on the internet, on social media. I was calling any number I could find,” Melisssa said.

Finally, she discovered a [suite of pathology tests](#) that could determine whether vaccines played a role in Sawyer’s death.

The tests measure C-reactive protein (indicating brain inflammation), liver enzymes, aluminum and mercury in brain and blood tissue, formaldehyde and [formalin](#) (another name for formaldehyde). A cytokine panel would also identify various blood factors and vaccine titer levels.

Melissa mailed and emailed Flomenbaum’s office to formally

request the full battery of tests. The doctor refused, dismissing her concerns and telling her that heavy metals do not cause SIDS.

“They gave me a reason why each test didn’t need to be done,” she said.

Further emails to the state medical examiner’s office, from both parents, have been bouncing back as “undeliverable” since.

A friend of Melissa’s told her about [Health Choice Maine](#), a statewide nonprofit working to protect health freedom and parental rights. There she met Tiffany Kreck, Health Choice Maine’s executive director, who helped Melissa organize her own investigation.

“Families being bullied by a doctor or threatened with CPS [child protective services] or whatever, can reach out, and we will, to the best of our ability, help them navigate it,” Kreck told The Defender.

Melissa said Tiffany gave her a list of things they had to do, “like getting reports and billing information, people to contact, and that’s what I did.”

Their primary goal was to find a competent pathologist to perform the lab tests Melissa had requested. They searched the entire country – even enlisting the help of [Laura Bono](#), vice president of [Children’s Health Defense](#), Kreck told The Defender – but came up empty.

Kreck told Melissa they would not be mentioning anything about vaccines to the prospective pathologists, so they would be less likely to reject the request.

The biggest obstacle was finding a doctor who was willing to order the tests.

Her ob-gyn told her that it was “out of his scope of

practice.”

She called her primary care physician and told him she thought the vaccines had played a role in her son’s death “and he denied it,” she said. Her pediatrician also said no.

## **The toxicology report and next steps**

Finally, they found someone in-state who, responding to Melissa’s grief, agreed to perform the tests on June 21. Although some of Sawyer’s tissue samples had degraded, the pathologist was able to perform enough tests to issue a [definitive report](#) last month.

The report was technical and was not accompanied by any guidance or recommendations.

Melissa said, “They never called me and said, ‘Oh, listen, this is high. This could be due to his vaccines. We will do a VAERS [Vaccine Adverse Event Reporting System] report, you know, and advocate for other infants that pass away.’ No, we didn’t get anything from them.”

So they had to hire a private toxicologist who could interpret the report. That second report arrived last week.

“And she was the one that called us the other day and told us that his aluminum levels were very high,” Melissa said, “and that we needed to seek some legal services.”

The report showed baby Sawyer had 95 micrograms of aluminum per liter of blood, a level that would be toxic for adults. The toxicologist told the couple the aluminum and antigen levels in the blood were due to the vaccines. She also said the baby’s illness could have been a contributing factor.

[Kreck told Margulis](#), “This additional pathology report shows how much are medical examiners don’t know because they won’t look.”



The report also showed high levels of lead, which would not be due to vaccines, the toxicologist said, and asked about lead levels in their house or water. But given that the baby had only consumed breastmilk and was not yet old enough to crawl around on the floor, the question remains open.

After receiving the confirmation about the aluminum, the couple felt “exonerated” from the implication they were responsible for Sawyer dying from asphyxiation, “but we also still feel like we failed our baby,” Melissa told The Defender.

“Me being a nurse,” she said, “I felt like I failed him both as a nurse and a mother.”

Nick added, “From the father’s standpoint, you’re supposed to protect your family, and I failed at that. It weighs on me every second of the day.”

Melissa and Nick are planning to file a claim with the [National Vaccine Injury Compensation Program](#) (VICP). She said she still feels skeptical “because I know how the government and the medical system are.”

Kreck is helping the couple prepare for the VICP meeting. “We are doing every test that we can possibly do and trying to cross all of our t’s and dot all of our i’s before we go into the VICP,” Kreck said, “which is historically difficult and harsh on what they perceive to be SIDS cases.”

A couple told The Defender they got help reporting the case to VAERS last November, but have never received any follow-up. They did, however, confirm that Sawyer’s case was in the database.

Health Choice Maine is also exploring options for a lawsuit challenging the finding on the state medical examiner’s death certificate.

## Dealing with the grief

Just three months after the ordeal, a therapist told Melissa, who was still grieving for her child and searching for answers, that she had an “adjustment disorder.”

“She was pretty much telling me that I was not adjusting to losing my son quick enough, and recommended trauma therapy,” Melissa said.

She left the office crying, wondering if something was wrong with her or not being able to let go of her grief. “I haven’t had good luck with therapists,” she told The Defender.

“I’ve been going through this all on my own, trying to go through reports and all the information about my baby’s life and his medical records. And I’m doing all this while trying to grieve the loss of him and it is horrifically painful,” she said. “It’s something no parent should ever have to go through.”

One therapist told Melissa to take mood stabilizers and anti-depressants. “The mental health care system has not been very helpful in this at all,” Nicked added.

Nick found that going back to work and keeping busy was the most therapeutic approach for him. “Just keeping my mind focused on other stuff, you know, while carrying all that around,” he said.

Nick has joined Melissa in several of her therapy sessions, which he found very helpful.

The couple found a grief support group called Empty Arms for parents who have lost a child, which has been “amazing,” Melissa said. The group does a butterfly release for the deceased on Memorial Day and an annual remembrance walk.

They have found support from family members as well, although Melissa said it has been hard to talk to her family about the

vaccine connection.

The couple said the loss has brought them closer together. "I couldn't keep going, fighting the fight we're fighting right now, without her," Nick said. "And you don't realize how much you love someone and just how precious life is and what you have in front of you is."

"Cherish it and love it, don't let it go," he said.

"We lost the biggest and best part of us both and if we didn't stay together, I'd feel like I was losing another piece," Melissa said.

### **The couple's journey to warn others**

"I just want to make other people aware and I want to put a stop to this," Melissa said.

Melissa said she warns mothers of sick children to cancel their appointments for vaccines at least until the child has recovered. She added:

"Children do not need vaccines. And if they were to get them, they don't need them until they're at least two years old. The problem is, is they have a blood-brain barrier that has not closed up until they're two years old or later.

"And if you get vaccinated before two years old, the aluminum can cross that blood-brain barrier. That's why levels are so high and it stops respiration and causes cardiac arrest."

Nick said, "I wouldn't tell anybody 'Don't vaccinate your children.' But I would definitely say 'Do your research. Go to the end of the internet, make sure what you're doing is right, that you know all the possible outcomes.'"

"Be more educated and be a strong advocate for your baby," he added. "Because it's your baby, not the doctor's."

Asked why more medical professionals don't speak out, Melissa

simply said "Career suicide."

"I don't even wanna be a nurse anymore," she said. "Why would I want to be? But I have to pay my bills."

"Doctors don't have any better education on vaccines than most 10th graders," she said. "Even as a nurse, we don't get the education. We just got the schedule."

She also said that medical examiners should have the right to test for vaccine injuries during the autopsy and identify them as a cause on the death certificate. "The vaccines are killing people and babies and they're trying to cover it up," she said.

While the couple said they found it helpful to share their story, they also admitted to wanting to keep a low profile. "It's kind of a quiet subject for us because we've got to protect ourselves now," Melissa said.

The couple is looking for a good support system. "We're looking for people to stand behind us and support us as we go through this journey, for the next questionable amount of years, to get justice for our baby. It might drag on for a while," Melissa said.

When asked about what gives them the strength to stand up and share their story, despite the backlash that such activism could invite, Melissa said:

"This is the only way that I feel like I can mother my baby anymore. And my baby deserves justice. And we deserve to know the truth.

"He is our reason for living right now. And he is our motivation."

### **Questions about the state medical examiner**

Kreck told The Defender that state medical examiner Flomenbaum

came from Massachusetts where he had been fired as the state medical examiner. "It looks like he tried to sue them for wrongful termination and lost," Kreck said.

Flomenbaum earned a national reputation as a top medical examiner through his work identifying bodies in New York City after the 9/11 attack in 2001, according to an article in the [Portland Press Herald](#).

He was fired from his Massachusetts position for losing a body and having a backlog of bodies waiting to be examined.

In 2019, the Maine attorney general's office investigated and later cleared Flomenbaum over criticism that he was running a side business as a consultant in out-of-state death cases.

The Press Herald article details more of Flomenbaum's controversial history, which included a Connecticut prosecutor's letter to then-Attorney General Jane Mills telling her that a judge had determined his testimony in a child manslaughter case was "not credible."

Flomenbaum was reprimanded in 2021 by Maine Governor Mills for inappropriate and unprofessional behavior in the workplace, after which he announced he would not be seeking reassignment to the position.

"He was only supposed to have a month or so left of his term back then and he's still in office now. That all sounds very odd and fishy," Kreck said.

Melissa told The Defender that Flomenbaum had recently left the medical examiner's office, putting the disposition of Sawyer's remains in question.

The couple, with the aid of Health Choice Maine, is seeking to remove Sawyer's blood and tissue samples from the medical examiner's office.

Anyone with information about where a new location might be

found to accommodate Sawyer's remains is encouraged to email Tiffany Kreck at [tiffany@healthchoicemaine.org](mailto:tiffany@healthchoicemaine.org).

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# Vandana Shiva: Bill Gates and Silicon Valley Behind Push for 'Farming Without Farmers, Food Without Farms'

[Vandana Shiva: Bill Gates and Silicon Valley Behind Push for 'Farming Without Farmers, Food Without Farms'](#)

*On the latest episode of Russell Brand's "Stay Free," scholar, environmental activist and food sovereignty advocate Vandana Shiva, Ph.D., discussed food fascism, the power of "philanthropy," digital enslavement and how people can free themselves from this system.*

by [Brenda Baletti](#), Ph.D. , [The Defender](#)

August 2, 2023

“Human beings cannot have a relationship with nature, land and one another, it seems increasingly, without the intercedence of this corporate power,” comedian and political commentator Russell Brand told scholar and environmental activist [Vandana Shiva, Ph.D.](#), on the latest episode of his “[Stay Free](#)” podcast.

Brand asked Shiva, a food sovereignty and environmental activist, to explain how this corporate takeover of nature happened.

Shiva said the privatization of land and resources under colonialism was the first step in transforming nature into “either a mine or a dump.”

Today, she said, privatization has become so entrenched that mega-corporation [Cargill](#) can own every chicken, chicken production facility, and every input needed to raise chickens, and then dump all of its waste into public rivers.

The situation we face today could not have happened, she said, without the criminalization of farmers – for which she held media organizations like [The Guardian](#) responsible because they attack farmers instead of the corporations.

“If the drivers are the corporations,” she said, “you have to have the guts to bite the corporations. You don’t target the victims. The farmers are victims of this system.”

### **Who are the real ‘food fascists’?**

Brand asked Shiva why the global uprising of farmers – from Sri Lanka and India to Germany, England and [the Netherlands](#) – against the globalization of agriculture had come to be cast as a right-wing idea by the press.

Shiva said Mussolini himself defined fascism as “the convergence of economic and political power.” “Food fascism,” she said, “is the recent control over our food systems by giant corporations and the billionaires.”

Under colonialism, the British controlled the land, she said, but they didn't control the food. The advent of agricultural industrialization, the green revolution and globalization made it possible for corporations to take [control of food](#).

The call for "[food sovereignty](#)," she said, "came as the call as opposite to the food dictatorship and food fascism."

Now, she said, those people want to complete the separation of people from the land that began with colonialism.

Today, they want "farming without farmers."

Being able to plant a seed, input love, knowledge and sun and produce food, "is the only truly independent production system and it's that freedom they want to attack," Shiva said, because they are threatened by it.

So they discredit farmers by calling them "fascists" and "right wing."

"And anybody who facilitates that is essentially doing the work of these globalists," she said, "they're the fascists."

### **How 'philanthropy' buys control**

Today, people who talk about the disproportionate power and influence that billionaires like [Bill Gates](#) have over global agriculture and health are regarded as "conspiracy theorists," Brand said.

He asked Shiva to explain Gates' rise to power in plain language and with facts.

Shiva said people like Gates became wealthy through neoliberal trade liberalization, where trade in information, in the software and other forms of data Gates produced, went completely untaxed.

Then, she said, they used that money "philanthropically" to gain control of other sectors.



By donating massive sums of money to the [global seed bank](#), to the [World Health Organization](#) and to [media organizations](#) such as The Guardian and the BBC, Gates and other billionaires took control of those institutions.

It even gives them the power to control governments, she said, who have been made desperate for money through indebtedness.

Gates and Silicon Valley, she said, “are very big players in the [fake food future](#) of farming without farmers, food without farms.” And they get journalists such as The Guardian’s [George Monbiot](#) to promote it.

## **Chasing enslavement**

Shiva said this vision is built on “an imagined promise of an imagined future that we are never gonna arrive at. Because when you get there, you’ll find it doesn’t belong to you. It belongs to them.”

The systems that support their vision of the future appear to offer us convenience, but in reality, she said, maintaining them takes all of our time.

Many indigenous people, she said, still have a lot of time to enjoy life “because they’re not chasing enslavement through consumption.”

Shiva wondered why people would want a “smart home,” where, for example, “the fridge will tell you your milk is getting old. How dumb are we getting that we can’t open the door of our fridge and know our milk is getting old?”

“All that is surveillance data,” she said.

And processing that data takes big servers. “The tiny bits of enslavement we are getting into is [producing] 4% of greenhouse gases, which is more than the aviation sector,” she said.

She added:

“So, not only is it a very foolish kind of slavery, it’s a huge ecological footprint on the planet. Yes. And we can’t afford it. So we have to learn to walk lightly.”

## **Data is the new oil**

Brand said he was alarmed at the increasing pace of “desacralization” where people prioritize materialism over spirituality and lose control over their lives. He asked Shiva how she thought censorship, the [inhibition of free speech](#) and the ability of the media to shut down dialogue, fed into this process.

Shiva said it was part of “a system of total control,” that makes that control highly profitable.

What’s new in this system according to Shoshana Zuboff’s “[The Age of Surveillance Capitalism](#)” is that today, human beings themselves have been turned into raw material whose data can be extracted.

“That is the capital of today. Big data is the new oil, and then it’s used to manipulate us,” she said, adding “Any system that allows you the awareness of your real freedom must be censored.”

The strange thing, Brand said, is that this system of technological domination was sold to people as a way of empowering them and giving them their freedom.

[Technology](#) should be a tool, she said, but it “has been elevated to a god” and those opposed to that transformation are discounted, through Orwellian doublespeak, as “right wing.”

But, Shiva said, the last few years have shown there are three things people cannot give up:

“First, your ability to know and distinguish between truth and untruth. ... And not allow post-truth to be projected as truth and the truth speakers to be projected as conspirators.

“The second is our ability to relate to each other without the intervention of a surveillance state and surveillance corporation.

“And third, because food is what makes us, it becomes our blood, ourselves, our brain.”

In other words, Brand said:

“Speak freely. Tell the truth. Communicate freely. Grow your own food. Don’t eat things grown in labs. Don’t [eat bugs](#). And don’t listen to people who want to promote it.”

**Watch here:**

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# **‘Death Sentence for Millions’: WHO, EU Launch New**

# Global Vaccine Passport Initiative

## [‘Death Sentence for Millions’: WHO, EU Launch New Global Vaccine Passport Initiative](#)

*Technology expert Michael Rectenwald, Ph.D., told The Defender that, under the guise of preserving freedom, a digital passport system “means restraints on movement and living for the unvaccinated and forced vaccination to participate in life.”*

by [Michael Nevradakis](#), Ph.D., [The Defender](#)

June 6, 2023

The World Health Organization (WHO) and the European Commission – the executive branch of the European Union (EU) – on Monday launched a “[landmark digital health partnership](#)” marking the beginning of the WHO Global Digital Health Certification Network (GDHCN) to promote a global interoperable digital vaccine passport.

Beginning this month, the WHO will adopt the EU’s system of digital [COVID-19](#) certification “to establish a global system that will help [facilitate global mobility](#) and protect citizens across the world from on-going and future health threats, including pandemics,” according to Monday’s announcements by the WHO and the European Commission.

*WHO & [@EU\\_Commission](#) launch landmark digital health initiative to help protect people across the world from on-going & future health threats*

*This is the first building block of the WHO Global Digital Health Certification Network that will develop a wide range*

of digital products... [pic.twitter.com/IPlxn8wAXv](https://pic.twitter.com/IPlxn8wAXv)

– World Health Organization (WHO) (@WHO) [June 5, 2023](#)

The WHO and European Commission claim the [GDHCN initiative](#), which has been in the works since 2021, “will develop a wide range of digital products to deliver better health for all.”

The organizations said the WHO will not collect individuals’ personal data via these digital passports – stating that such data collection “would continue to be the exclusive domain of governments.”

WHO Director-General Tedros Adhanom Ghebreyesus lauded the new agreement:

“Building on the EU’s highly successful digital certification network, WHO aims to offer all WHO Member States access to an open-source digital health tool, which is based on the principles of equity, innovation, transparency and data protection and privacy.

“New digital health products in development aim to help people everywhere receive quality health services quickly and more effectively.”

However, experts who spoke with [The Defender](#) said the ramifications of such a system for human liberty and freedom of movement raised concerns.

Independent journalist James Roguski told The Defender the WHO is not waiting for a successful conclusion of these negotiations in order to implement initiatives such as a global digital vaccine passport. He said:

“The announcement by the WHO and the European Commission regarding the launch of their digital health partnership was hardly a surprise. Over a month ago, the WHO quietly published

that they were working on ‘operationalizing’ the very things that were being ‘negotiated.’

“This is just one example that clearly shows that the super-secret ‘negotiations’ regarding the [International Health Regulations](#) (IHR) are a charade.”

[Michael Rectenwald, Ph.D.](#), author of “[Google Archipelago](#): The Digital Gulag and the Simulation of Freedom,” told The Defender that, under the guise of preserving freedom, a digital passport system “means restraints on movement and living for the unvaccinated and forced vaccination to participate in life.”

The announcement of the WHO-European Commission collaboration came just days after the conclusion of the WHO’s annual World Health Assembly (WHA).

While the pandemic treaty and IHR amendments were not finalized at this year’s meeting, high-level WHO officials warned of the risk of a future pandemic and spread of a deadly “[Disease X](#),” and expressed the need to “[restrict personal liberties](#)” during a future health emergency.

The EU has been a strong proponent of [digital vaccine passports](#), first launched for its member states in late 2020 – concurrent with the introduction of the COVID-19 vaccines – under the name “Green Pass.” The EU’s experience with the digital passes is noted in Monday’s announcement, which states:

“One of the key elements in the European Union’s work against the COVID-19 pandemic has been digital COVID-19 certificates. To facilitate free movement within its borders, the EU swiftly established interoperable COVID-19 certificates.

“Based on open-source technologies and standards it allowed also for the connection of non-EU countries that issue certificates ... becoming the most widely used solution around

the world.”

Roguski told The Defender the EU also was among the strongest proponents of vaccine passports during ongoing negotiations for the WHO’s “pandemic treaty” and amendments to the IHR.

“They really want the global digital health certificate,” Roguski told The Defender in March. “Primarily, that’s coming from the European Union.”

### **‘Pandemic passports a death sentence for millions’**

[According to Roguski](#), the EU, during negotiations for the IHR amendments, put forth proposals that seek to “‘normalize’ the implementation of a global digital health certificate.”

The Czech Republic called for [Passenger Locator Forms](#) “containing information concerning traveller’s destination,” preferably in digital form, for the purpose of contact tracing.

They also proposed that the WHO’s Health Assembly “may adopt, in cooperation with the International Civil Aviation Organization [ICAO] ... and other relevant organisations, the requirements that documents in digital or paper form shall fulfill with regard to interoperability of information technology platforms, technical requirements of health documents, as well as safeguards to reduce the risk of abuse and falsification.”

The WHO lists ICAO as an [officially recognized “stakeholder.”](#)

The Czech Republic and the EU proposed documentation not just for vaccination, but “test certificates and recovery certificates” in cases “where a vaccine or prophylaxis has not yet been made available for a disease in respect of which a [public health emergency of international concern](#) has been declared.”

Plans for the WHO’s GDHCN have been in the works since at

least August 2021, when the WHO released a document titled "[Digital documentation of COVID-19 certificates](#): vaccination status: technical specifications and implementation guidance, 27 August 2021."

The [GDHCN framework](#) made its way onto the [agenda of this year's WHA](#), which stated:

"The Secretariat has developed SMART (Standards-based, Machine-readable, Adaptive, Requirements-based, and Testable) Guidelines on the digital documentation of COVID-19 certificates, comprising recommendations on the data, digital functionality, ethics, and trust architecture needed to ensure the interoperability of immunization and health records globally."

The WHO also announced the successful completion of a "technical feasibility study for establishing a federated global trust network, which tested the ability to interoperate the health content and trust networks across existing regional efforts."

EU officials have frequently praised themselves over the launch of the bloc's "[Green Pass](#)," touting how individuals' [privacy would be protected](#) on the app. The introduction of the "Green Pass" was accompanied by statements by European Commission President Ursula von der Leyen calling for a "discussion" on [mandatory vaccinations](#) in the EU.

One of the [EU's stated priorities](#) as part of its 2019-2024 five-year plan is to create a "[Digital Identity for all Europeans](#)." Namely, each EU citizen and resident would have access to a "personal digital wallet," which would include national ID cards, birth and medical certificates, and drivers' licenses.

These proposals and initiatives appear to be closely aligned with the United Nations' [Sustainable Development Goals](#) (SDGs), and in particular, [Target 16.9](#), which calls for the provision



of a digital legal identity for all, including newborns, by 2030.

Tedros said the SDGs are “our north star,” while addressing this year’s WHA.

Rectenwald called “pandemic passports” a “death sentence for millions.” He told The Defender:

“Despite the studies demonstrating that vaccines to curb pandemics have been deadly and useless, the WHO is doubling down on vaccine mandates.

“Pandemic passports equal a death sentence for millions and the abrogation of rights for the non-compliant. The WHO should be stopped before it completes the construction of a global totalitarian system.”

***Michael Nevradakis**, Ph.D., based in Athens, Greece, is a senior reporter for The Defender and part of the rotation of hosts for CHD.TV’s “Good Morning CHD.”*

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# Two Massachusetts Towns Call a Halt to 5G Towers Until FCC Complies With Court Order to Review Science

## [Two Massachusetts Towns Call a Halt to 5G Towers Until FCC Complies With Court Order to Review Science](#)

*The residents of two Massachusetts towns on Monday voted to put a hold on 5G cell tower projects until the Federal Communications Commission completes a court-ordered review of the latest science related to the effect of radiofrequency radiation emissions on human health and the environment.*

by [Suzanne Burdick, Ph.D., The Defender](#)

May 5, 2023

The residents of two Massachusetts towns on Monday voted to [put a hold on 5G cell tower projects](#) until the Federal Communications Commission (FCC) completes a court-ordered review of the latest science related to the effect of radiofrequency (RF) radiation emissions on human health and the environment.

The residents in Sheffield and Great Barrington said they will consider all applications from telecommunications companies seeking to build wireless infrastructure in their town as “incomplete” until the FCC reviews “studies from scientists independent from industry” who have “fully investigated” the “safety” of 5G small cell technology and until the agency has updated” its RF radiation regulations based on the review’s findings.

The citizens passed this warrant – listed as [article 32](#) in Sheffield and [article 38](#) in Great Barrington – at their annual town hall meeting.

In the warrant, the residents cited two separate rulings by the U.S. Court of Appeals for the District of Columbia Circuit that mandated the FCC conduct such a review and noted that the FCC has failed to comply with the court orders.

The District of Columbia Circuit in a [2019 ruling](#) told the FCC it had to follow [National Environmental Policy Act](#) guidelines by conducting an environmental impact review for 5G small cell infrastructure projects.

The same court [ruled in 2021](#) that the FCC had not adequately [reviewed the scientific evidence](#) regarding the safety of RF radiation and 5G for humans and the environment – and that it must do so.

By failing to comply with the two court orders, the FCC has failed to adequately show that 5G radiation is safe for the environment or humans, according to Cecelia Doucette, a technology safety educator and the director of [Massachusetts for Safe Technology](#).

The agency needs to thoroughly examine the scientific evidence of harm and update its RF exposure guidelines, Doucette told [The Defender](#).

“The harm from wireless radiation is happening right now,” she said. “It’s up to us as citizens to create the change and we are so inspired by the hard work the voters in Sheffield and Great Barrington have put in.”

She added:

“Every citizen should feel empowered to look at the science, work with their neighbors and towns, and put protections in place. It’s just common sense once you know the facts.

“Don’t wait for someone else to fix this for you, electropollution is too dangerous for us, our children and our pollinators.”

Nina Anderson, president of the [Scientific Alliance for Education](#) (S.A.F.E.) – a non-profit focused on “educating the public on health issues that may or may not be public knowledge” – [called the vote](#) “the first step in trying to protect our towns from intrusion by industry who has not complied with the court order and not proven this technology is safe.”

[Children’s Health Defense](#) (CHD) last month [petitioned the FCC](#) to “[quit stalling](#)” and comply with the District of Columbia Circuit’s [2021 order](#).

The order stemmed from [CHD’s historic win](#) in a case challenging the FCC’s decision not to review its [1996 health and safety guidelines](#) for RF exposure.

The court in its [2021 ruling](#) said, “The FCC completely failed to acknowledge, let alone respond to, comments concerning the impact of RF radiation on the environment ... The record contains substantive evidence of potential environmental harms.”

Patricia Burke of [Safe Tech International](#) told The Defender:

“When citizens begin to look more deeply at the issues regarding wireless safety, including the conclusions that the Circuit Court reached in its 2021 ruling against the FCC, they realize that there is a problem.”

Burke said she was “so grateful to the sincere individuals who have been working behind the scenes in these towns and in others to facilitate conversations supporting necessary policy changes.”

## **Vote coincides with 1,000 days of Pittsfield residents' battle with Verizon**

The citizens of Sheffield and Great Barrington – both of which are agricultural communities – wanted “to be convinced that their crops will not suffer if the myriad of 5G transmitters negatively affect the bees,” according to a [S.A.F.E press release](#).

The release stated:

“Their [the citizens’] warrant asks for input from scientists who are independent from the telecom industry who can give an unbiased report.

“The petitioners related telecom’s rollout of 5G without sufficient research as similar to big tobacco’s promotion of cigarettes. It was years later and many cancer deaths before regulations were enacted limiting smoking in public places and adding warning labels to packaging.”

Voters “spoke out” saying they wanted to know that a similar fate would not come to pass for those suffering from electro-hypersensitivity syndrome “with no recourse to remove the transmitters causing the problem,” the release added.

Monday’s vote coincided with residents of Pittsfield, Massachusetts, marking [1,000 days](#) of being driven from their homes by a Verizon cell tower they allege [made them sick](#).

The residents – who live in the “Shacktown” section of Pittsfield and are represented in court by lawyers supported by CHD – want Verizon to remove or relocate the tower and [currently await](#) a judge’s ruling on whether to allow their lawsuit to go forward or grant Verizon’s motion to dismiss the suit.

*This article was originally published by The Defender – Children’s Health*

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# 500 Australians Join World's First COVID Vaccine Injury Class Action Lawsuit

## [500 Australians Join World's First COVID Vaccine Injury Class Action Lawsuit](#)

*Dr. Melissa McCann raised more than \$110,000 to crowdfund the case, which accuses the Australian government of negligence related to the approval and monitoring of COVID-19 vaccines.*

by [Suzanne Burdick, Ph.D.](#), [The Defender](#)

April 27, 2023

At least 500 Australians have already joined a “landmark” COVID-19 vaccine injury [class action lawsuit](#) filed this week [against the Australian government](#) and the medicines regulator seeks redress for those allegedly injured or left bereaved by the COVID-19 vaccines.

The suit accuses the [Australian government](#), the country's [Therapeutic Goods Administration](#) (TGA) and [Department of Health and Aged Care](#), and a number of senior public servants of negligence related to the approval and

monitoring of [COVID-19](#) vaccines, breach of statutory duty and misfeasance in public office.

The action was filed in the Federal Court of Australia, New South Wales Registry.

[According to the lawsuit](#), the respondents approved the vaccines “with no proper or reasonable evidentiary or logical basis to reasonably determine the Vaccines to be safe, effective and possessing a positive risk-benefit profile.”

[Natalie Strijland](#), the litigator who filed the suit, [said in a statement](#):

“The action will argue that the Therapeutic Goods Administration did not fulfil their duty to properly regulate the Covid-19 vaccines, resulting in considerable harm and damage to Australians.”

The suit alleges the government “acted negligently in approving the vaccines and also by failing to withdraw them” based upon the “known evidence” of risk.

“Australians who have experienced a serious adverse event following Covid-19 vaccination are invited to step forward and register for this class action,” Strijland said.

A spokesperson for the Department of Health and Aged Care said that the department [“is aware” of the lawsuit](#) and that “as the matter is before the court it is not appropriate to comment further.

Class actions provide “a path to justice” for people who may not have the resources to file a court claim on their own, said [Alison Bevege](#), a journalist who has written for Reuters and Daily Mail, in an April 26 Substack post.

Those injured by COVID-19 vaccines have been “ignored, denied, belittled and marginalised,” Bevege added.

## Australian doctor crowdsourced \$110,000 to bring class action suit

[Dr. Melissa McCann](#), a general practitioner who also holds a Graduate Certificate of Allergic Diseases, raised more than [\\$110,000 to crowdfund the case](#).

Commenting on the lawsuit, McCann tweeted:

*Thank you for sharing this news [@RefugeOfSinner5](#) These injured and bereaved have suffered immense loss, pain and grief. Just as heartbreaking has been the gaslighting and silence, which has left them feeling abandoned. We cannot simply 'move on' from covid and leave them behind. <https://t.co/TSxqYagt0f>*

– DrMelissaMcCann (@drmelissamccann) [April 26, 2023](#)

According to McCann, the class action suit was necessary because Australia's federal vaccine injury compensation program – the [COVID-19 Vaccine Claims Scheme](#) – was “[not fit for purpose](#)” and had left many [vaccine-injured Australians](#) “abandoned with no support” after being promised “fair and accessible” compensation.

[Services Australia](#) as of April 12 had received 3,501 applications and paid 137 claims totaling more than \$7.3 million, with 2,263 claims still in progress and 696 deemed not payable, [news.com.au reported](#).

By comparison, the U.S. government, as of April 1, approved its first three payments to [people injured by COVID-19 vaccines](#) – amounting to a total of \$4,634.89. Since the start of the pandemic, Americans claiming injuries related to COVID-19 vaccines and other countermeasures submitted 11,425 [requests for compensation](#).

McCann earlier in February told “crowded halls filled with



thousands of Australians” of how TGA and its leadership [concealed fatal vaccine-induced myocarditis](#) from the public, noted [Peter McCullough, M.D., MPH](#), a board-certified cardiologist and internist.

“TGA had determined that several young previously healthy children died of [COVID-19 vaccine-induced myocarditis](#). Redacted letters from the TGA to McCann indicated these facts and an admission of willful concealment,” McCullough said.

### **‘I’d never known what a heart attack would feel like’**

Among those represented in the lawsuit is Melbourne teacher [Gareth O’Gradie](#), a previously healthy father of two who before he got his first Pfizer shot in July 2021, was into running, footy, cricket and tennis.

“Six days after [the vaccination] I had sudden-onset chest pain, shortness of breath, fever, chills, sweats,” he [told World Freedom Alliance](#). “I’d never known what a heart attack would feel like, but that’s the type of thing I expected.”

O’Gradie, 41, was rushed to the hospital, where he was diagnosed with vaccine-induced [pericarditis](#). He said:

“In the end I had open heart surgery to remove the pericardium, which had become inflamed and stuck to my heart. It’s extreme.

“All the heads of different departments, cardiology, rheumatology, cardiothoracic, all had conferences to say, ‘We’ve tried this, what is the next step for this recurrent pericarditis we can’t control the pain for?’ It wasn’t an easy decision.

“They said, ‘Nothing’s working – this is what we can offer.’”

O’Gradie – who said he is “[pro-science](#)” and has never been “anti-vaccine” – believes the government provided “[misinformation about the safety](#)” of the vaccines.

“There was a lot of, you know, ‘We need to not scare the public as part of the vaccine rollout, so let’s not publicise these things,” he [told news.com.au](#). “There was a large, intentional withholding of information – that doesn’t give people informed consent.”

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# U.S. Military Runs COVID Vaccines, Former Pharma Exec Tells RFK Jr.

**[U.S. Military Runs COVID Vaccines, Former Pharma Exec Tells RFK Jr.](#)**

*The U.S. government’s COVID-19 vaccination effort is a biological weapon project run by the U.S. Department of Defense, according to Alexandra Latypova, a former pharmaceutical research and development executive.*

by [Suzanne Burdick](#), Ph.D., [The Defender](#)

March 30, 2023

The U.S. government's COVID-19 vaccination effort is a biological weapon project run by the U.S. Department of Defense (DOD), according to Alexandra Latypova, a former pharmaceutical research and development executive with 25 years of industry experience.

[Latypova](#), who oversaw compliance for more than 60 clinical trials, knows the regulatory standards pharmaceutical companies historically were required to meet before bringing a product to market.

"People misunderstand that this is just another instance of [Big Pharma](#) corruption," she told Robert F. Kennedy, Jr., chairman and chief litigation counsel for [Children's Health Defense](#), during an episode of "[RFK Jr. The Defender Podcast](#)." "It's much, much bigger than that."

Latypova said we have government reports describing the [COVID-19](#) vaccines as a biological weapon. "I have a question to our government," she said. "What is it that they're exactly forcing on us?"

The DOD is "fully in charge" of the COVID-19 vaccine clinical trials and the vaccine's manufacturing and distribution, and it owns the vaccine "until it is injected into a person," she said.

By creating a "pseudo-legal structure" over time that included [Emergency Use Authorization](#) (EUA) and [other transaction authority agreements](#) – called OTAs – the U.S. government allowed the military to take over the distribution of vaccines without adhering to historical safety testing guidelines or product recall procedures.

According to Latypova, the notion that the COVID-19 vaccines met regulatory standards for safety and effectiveness was the "biggest lie that was sold to the public."

“I am describing a very illegal structure that’s made legal on paper,” she said. “It’s unlawful. They – the government – are driving this.”

Kennedy agreed with Latypova and pointed out that OTA was designed to allow the Pentagon to quickly buy weapons and weapons systems without paying attention to any existing regulatory authorities.

Kennedy said:

“What they’ve done is they’ve taken that authority and they’ve applied it to the vaccines so they’re purchasing the vaccines under OTA as a demonstration product.

“It’s all a huge military operation and the involvement of the drug companies is a kind of window dressing.”

The DOD paid the pharmaceutical companies for their brand names so people would think they were getting something from Pfizer or Moderna – but all of the distribution and manufacturing is done by the military, Kennedy said. The pharmaceutical companies were brought in to put their name on it and then to pretend to do clinical trials, he said.

Latypova and Kennedy discussed how the military accomplished this without most workers involved in the production and distribution of the vaccine catching on.

They also discussed how citizens and lawyers might effectively challenge the Pentagon’s COVID-19 vaccination project in the court system.

*The views and opinions expressed in this article are those of the authors and do not necessarily reflect the views of Children’s Health Defense.*

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# In Majority Ruling, Federal Appeals Court Again Blocks Biden's COVID Vaccine Mandate for Federal Workers

## [In Majority Ruling, Federal Appeals Court Again Blocks Biden's COVID Vaccine Mandate for Federal Workers](#)

*A federal appeals court on Thursday blocked President Biden's executive order mandating federal workers nationwide get vaccinated against COVID-19 in a majority ruling that said the president does not have the authority to mandate the vaccines.*

by [Brenda Baletti](#), Ph.D., [The Defender](#)

March 24, 2023

A federal appeals court on Thursday blocked President Biden's executive order mandating federal workers nationwide get vaccinated against COVID-19.

[The decision](#) by the 5th U.S. Circuit Court of Appeals in New Orleans reverses an [April 2022 ruling](#) by a three-judge panel,

from the same court, which upheld the federal mandate.

Thursday's decision keeps a [preliminary injunction](#) – issued in January 2022 by a Texas judge – in place while the case is litigated.

The decision was made in an [en banc hearing](#), meaning the full 16-judge court ruled on the case, rather than a panel of judges selected from the bench. A 10-judge majority ruled to uphold the injunction.

[Feds for Medical Freedom](#), the plaintiffs in the case, said in a [press statement](#):

“Our members have always argued that federal law does not permit the federal government to force federal workers – or any law-abiding citizen – to inject their bodies with something against their will. ...

“It was incredibly vindicating to hear the court echo those arguments and to draw clear limits around federal authority as it relates to forced vaccinations and medical freedoms.”

Marcus Thornton, president and co-founder of the group told [The Defender](#):

“This is a huge win but we're just getting warmed up. We demand accountability. We need a bureaucracy reflective of our nation's political diversity – which serves the whole country, and not just one party. We must ensure this never happens again – not to us, and not to future generations.

“There is so much more at stake than a question of vaccines. This fight is about the survival of the country and the ideals established by our founding fathers.”

Thornton said that since Feds for Medical Freedom was founded, the group has been “censored, shadow-banned, de-platformed too many times to count.”

He credited Thursday's win to "the bravery and tenacity of those who were willing to put their careers on the line to defend our freedoms."

The White House, which continues to defend the mandate, citing the high compliance rate among the federal workforce, issued a statement Friday saying that "Vaccination remains one of the most important tools to protect people from serious illness and hospitalizations" against COVID-19, [The Associated Press reported](#).

### **Executive order was contentious from the start**

Biden introduced [Executive Order 14043](#) in September 2021, requiring more than 3.5 million federal executive branch workers to undergo COVID-19 vaccination unless they secured [approved medical or religious exemptions](#).

Those who didn't comply were threatened with disciplinary action, including termination.

In December 2021, Feds for Medical Freedom, a nonprofit representing more than 8,500 federal employees who don't want the vaccine, [sued the Biden administration](#) and several federal agencies.

Other parties to the lawsuit include [AFGE Local 918](#), a union representing employees in the U.S. Department of Homeland Security's Federal Protective Service and several other individuals and federal contractors.

The groups sought to block two COVID-19 vaccine mandates: one covering [federal employees](#) and the other for federal contractors. They also asked for injunctions against both orders.

The court declined to enjoin the contractor mandate because it was already under a [nationwide injunction](#).

Lawyers representing the Biden administration argued the

Constitution gives the president, as head of the federal workforce, the same authority as the CEO of a private corporation, and that therefore mandating vaccination was under the president's authority.

The plaintiffs disagreed, countering that such action oversteps a president's powers, [The Defender reported](#).

U.S. District Judge Jeffrey Brown, in Jan. 2022, issued an injunction blocking the federal mandate. [Judge Brown ruled](#) that the Biden administration did not have the authority to impose the mandate.

At that time, the administration said nearly 98% of federal employees had been vaccinated against COVID-19, [the AP reported](#).

From there, the case moved to the 5th Circuit.

In February 2022, a 5th Circuit panel of judges [declined to block Brown's ruling](#) and instead asked both parties to file arguments to the court in March.

The majority ruling by a [three-judge panel in April](#) reinstated the mandate, determining that the court did not have the jurisdiction to rule in the case.

The panel ordered the district court to dismiss the case, arguing that under the [Civil Service Reform Act](#) of 1978, the plaintiffs should have [filed their complaints elsewhere](#), such as in administrative venues like the Merit Systems Protection Board.

In [June 2022](#), the federal appeals court agreed to reconsider its decision to reinstate the mandate and scheduled the en banc oral arguments, leading to Thursday's ruling.

**Biden administration exceeded its authority, judges**



## **rule**

The 16-judge appeals court ruled on Thursday that the court does in fact have jurisdiction over the case.

The judges said the Civil Service Reform Act did not apply in this case because the workers were challenging the mandates on the grounds that the administration exceeded its authority.

Judge Andrew Oldham, nominated to the court by then-President Donald Trump, wrote the 10-member majority opinion.

Oldham and the majority said that federal law does not apply to “private, irreversible medical decisions made in consultation with private medical professionals outside the federal workplace.”

They added:

“The fact that the President ordered employees to make medical decisions outside of the workplace – and to live with those irrevocable decisions even after they leave the federal workforce – bolsters plaintiffs’ argument that the mandate is not a ‘working condition.’”

Judge Stephen Higginson, a nominee of President Barack Obama, wrote the main dissenting opinion.

“For the wrong reasons, our court correctly concludes that we do have jurisdiction,” Higginson wrote.

“But contrary to a dozen federal courts – and having left a government motion to stay the district court’s injunction pending for more than a year – our court still refuses to say why the President does not have the power to regulate workplace safety for his employees.”

In the next district court arguments, Oldham wrote:

“The plaintiffs will have to prove that whatever injunction they request is broad enough to protect against their proven

injuries and no broader.

“And the Government will have another chance to show that any permanent injunction should be narrower than the preliminary one.

“And both sides will have to grapple with the White House’s announcement that the COVID emergency will finally end on May 11, 2023.”

The government may also have to contend with more lawsuits. Feds for Medical Freedom said it intends to file new suits in federal court “for violations of our members’ rights, including under the Religious Freedom Restoration Act and the U.S. Constitution. We will be fighting for justice for those whom the vaccine has injured.”

The group added:

“As this decision makes clear today, many in the government overstepped their legal bounds, and we are going to hold them accountable.”

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*Cover image credit: [melodiustenor](#)*

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# Report Linking Fluoride to Lower IQ in Children Made Public After CDC, HHS Tried to Block It

## [Report Linking Fluoride to Lower IQ in Children Made Public After CDC, HHS Tried to Block It](#)

*The National Toxicology Program on Wednesday Released a Draft Report Linking Prenatal and Childhood Fluoride Exposure to Reduced IQ in Children, After Public Health Officials Tried for Almost a Year to Block Its Publication.*

by [Brenda Baletti](#), Ph.D., [The Defender](#)

March 16, 2023

The National Toxicology Program (NTP) on Wednesday released a [draft report](#) linking prenatal and childhood fluoride exposure to reduced IQ in children, after public health officials tried for almost a year to block its publication.

The U.S. Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC) initially [blocked the NTP](#) from releasing the report, according to emails obtained via a Freedom of Information Act (FOIA) request.

But a [court order](#) stemming from [a lawsuit](#) filed by Food and Water Watch against the U.S. Environmental Protection Agency (EPA) forced the report's release this week.

The [NTP](#), an interagency program run by HHS that researches and

reports on environmental toxins, conducted a six-year systematic review to assess scientific studies on fluoride exposure and potential neurodevelopmental and cognitive health effects in humans.

The report, containing a monograph and a meta-analysis, went through two rounds of peer review by the National Academies of Sciences, Engineering, and Medicine. Comments from reviewers and HHS and NTP's responses also were included in the report released Wednesday.

According to its website, the NTP "removed the hazardous classification of fluoride" in response to comments in the peer-review process. Yet, the report states:

*"Our meta-analysis confirms results of previous meta-analyses and extends them by including newer, more precise studies with individual-level exposure measures.*

*"The data support a consistent inverse association between fluoride exposure and children's IQ ...*

*"The results were robust to stratifications by risk of bias, gender, age group, outcome assessment, study location, exposure timing, and exposure type (including both drinking water and urinary fluoride)."*

"These findings fly in the face of the empty, unscientific claims U.S. health officials have propagated for years, namely that water fluoridation is safe and beneficial," said Robert F. Kennedy, Jr., [Children's Health Defense](#) chairman and chief litigation counsel. "It's past time to eliminate this neurotoxin from our water supply."

The controversial report will play a key role in determining the outcome of a lawsuit brought in 2017 by several nonprofits against the EPA to end fluoridation of drinking water, plaintiffs' attorney [Michael Connett](#) told [The Defender](#).

“We had to fight hard to have this report even made public,” Connett said. “They [CDC and HHS] buried this. If they had gotten their way, this report would have never even seen the light of day,” Connett said.

Since the trial began in 2020, U.S. District Judge [Edward Chen](#) has been waiting for the NTP to complete a systematic review of fluoride’s neurotoxicity before ruling on the case.

Groups like the [American Dental Association](#) publicly pressured the NTP to “exclude any neurotoxin claims” from the reports.

Connett said during the trial, the EPA repeatedly claimed that the plaintiffs’ allegations about toxicity could not be verified because there was no “systematic review.”

The documents released Wednesday fill that gap.

Connett said:

*“So now what do we have? We have a systematic review by one of the pioneering, leading, most authoritative research groups on toxicology in the world.*

*“They just completed a systematic review that took them six years to complete, so if that’s not enough to demonstrate a hazard under the toxic substances control act, then how would any citizen group ever be able to meet the standard?”*

## **The findings: fluoride and lowered IQ in children**

According to the NTP report:

*“The current bodies of experimental animal studies and human mechanistic evidence do not provide clarity on the association between fluoride exposure and cognitive or neurodevelopmental human health effects.”*

Yet, the report’s summary contradicts this statement by

summarizing the evidence informing this conclusion, stating that nearly all studies examined for this literature review found evidence of cognitive or developmental issues associated with fluoride.

According to the report, 8 of the 9 “high-quality studies examining cognitive or neurodevelopmental outcomes reported associations with fluoride exposure.”

Of the 19 high-quality studies assessing the association between fluoride and IQ in children, 18 reported an association between higher fluoride exposure and lower IQ in children. Forty-six of the 53 low-quality studies also found evidence of that association.

The meta-analysis also states:

*“The body of evidence from studies on adults is also limited and provides low confidence that fluoride exposure is associated with adverse effects on adult cognition. There is, however, a large body of evidence on IQ effects in children.”*

The monograph and meta-analysis found that fluoride exposure at levels equivalent to 1.5 mg/L is associated with lower IQ in children. The abstract concludes:

*“This review finds, with moderate confidence, that higher fluoride exposure (e.g., represented by populations whose total fluoride exposure approximates or exceeds the World Health Organization Guidelines for Drinking-water Quality of 1.5 mg/L of fluoride) is consistently associated with lower IQ in children.”*

Levels of fluoride found in drinking water in the U.S. are typically 0.7 mg/L, which is lower than the 1.5 mg/L levels found to be neurotoxic by the reports.

On that basis, HHS’ review of the reports recommended the NTP

revise its assessment such that, “all conclusory statements in this document should be explicit that any findings from the included studies only apply to water fluoride concentrations above 1.5 mg/L.”

The NTP responded:

*“We do not agree with this comment. Our assessment considers fluoride exposures from all sources, not just water.*

*As discussed in the pre-publication 2022 NTP Monograph, because fluoride is also found in certain foods, dental products, some pharmaceuticals, and other sources, individual behaviors are likely an important determinant of actual exposures.”*

Rick North, former CEO of the American Cancer Society’s Oregon division and [Fluoride Action Network](#) board member told The Defender that “people consume large amounts of fluoride through tea and other drinks and processed foods made with fluoridated water, not to mention pesticide ingestion and fluoride from air pollution.”

He also said that people’s fluoride exposure can depend on how much water they drink.

“Think about it,” North said. “Your level of risk depends upon, incredibly, how thirsty you are. That’s how absurd the entire premise of water fluoridation is,” he said.

The NTP confirmed that people exposed to levels of fluoride lower than 1.5 mg/L in the water system could have high levels of fluoride in their systems. It stated:

*“Even in the optimally fluoridated cities [fluoridated at 0.7 mg/L] in Canada studied by [Green et al. \(2019\)](#), individual exposure levels, as documented by repeated urinary measurements, suggest widely varying total exposures from water combined with fluoride from other sources.”*

It added, “our moderate confidence conclusion is primarily based on studies with total fluoride exposure that approximates or exceeds what is generally associated with consumption of optimally fluoridated water [0.7 mg/L] in the United States.”

“We have stressed in our monograph that our conclusions apply to total fluoride exposures rather than to exposures exclusively through drinking water.”

“What the NTP is pointing to here is that in some communities, where the dose of fluoride in the water is 0.7 mg/L, the NTP has found levels of fluoride found to be associated with lower IQ,” Connett told The Defender.

Also, different people have different risk levels, he said. [Pregnant women](#) and bottle-fed babies, for example, are some of the populations at highest risk.

On this point, the NTP responded to a different HHS critique, writing, “We have no basis on which to state that our findings are not relevant to some children or pregnant people in the United States.”

“The margin of safety here just doesn’t exist – it is precariously small,” Connett said. He added that the lawsuit is “basically a risk assessment of fluoride.”

Under the [Toxic Substances Control Act](#) (TSCA), which is the law at stake in the lawsuit, the [EPA carries out risk assessments](#) for potential toxins.

To do a risk assessment, the EPA first identifies a hazard and determines at what dose – what level of human exposure – that hazard harms human health.

Then the agency determines in a given case whether the margin between the existing hazard levels and the human exposure levels is unacceptably close, which would make a toxin pose a



risk to human health.

Connett said that in EPA's previous risk assessments for other [chemicals](#), such as [methylene chloride](#) or [bromopropane](#), evaluated according to the [2020 risk evaluation](#) method that guides this case, the agency found the hazard level exceeds the human exposure level by much higher margins – “usually in a range of ten to 20 times higher,” yet it has deemed those chemicals to present an unreasonable risk to human health.

In other words, the substances were found to be toxic to humans at levels significantly lower than what people may be exposed to in regular use, yet the EPA determined them to be risks.

When it makes that determination, the EPA must then [take steps](#) to mitigate the risk.

That can also be the finding in this case. According to a [pre-trial document](#), both sides in the case agreed to the “undisputed fact” that the “EPA does not require that human exposure levels exceed a known adverse effect level to make an unreasonable risk determination under TSCA.”

The NTP documents also raised flags about the implications of seemingly small neurotoxic effects:

*“Research on other neurotoxicants has shown that subtle shifts in IQ at the population level can have a profound impact on the number of people who fall within the high and low ranges of the population’s IQ distribution.*

*“For example, a 5-point decrease in a population’s IQ would nearly double the number of people classified as intellectually disabled.”*

**Top HHS and CDC officials tried to ‘water down’ and**

## block the report

In 2016, a group of six nonprofit organizations and several individuals [petitioned the EPA](#) to end [fluoridation of drinking water](#) in the U.S. based on evidence of health risks associated with fluoride, namely neurotoxicity.

The EPA rejected the petition.

In response, [Food and Water Watch](#), Fluoride Action Network and others sued the EPA in 2017, seeking an end to water fluoridation.

The plaintiffs argued that water fluoridation violates the EPA's [Toxic Substances Control Act](#) and that fluoride is neurotoxic and [lowers children's IQ](#).

They based their initial claims on dozens of [studies](#) and [reviews](#) demonstrating fluoride's neurotoxicity. Studies have also linked fluoride to a variety of other [health risks](#) in both children and adults, and evidence shows it to be an [endocrine disruptor](#).

The EPA denied water fluoridation causes harm.

A seven-day trial took place in federal court in San Francisco in June 2020, but Judge Chen put the proceedings [on hold](#) pending the release of NTP's systematic review of research available on the neurotoxic effects of fluoride.

The report, slated for release in May 2022, was delayed several times and sent for several rounds of peer review.

"The people on the [NTP] committee were experts in their fields who put years into this study, going back and forth with one external review after another," North said. "You couldn't ask for more peer review than what it already had. There were constant attempts to delay it, to water it down."

In late October 2022, Judge Chen ended the stay on the NTP

review, [ruling that](#) the parties involved could view the NTP review in its unpublished form to better inform his final decision.

However, due to concerns from the EPA, he also ruled the report could not be made public unless the NTP released it.

In December 2022, the plaintiffs filed several exhibits with Judge Chen, including a redacted version of the NTP's assessment of fluoride's neurotoxicity and [internal emails between the CDC and the NTP](#) obtained through FOIA demonstrating that HHS blocked the release of the long-delayed review, the plaintiffs argued.

The documents showed that on May 11, NTP notified the agencies that it was going to [release the report](#) on May 18, but the CDC opposed the release.

Emails also indicated that HHS Assistant Secretary for Health Rachel Levine was going to "get involved," and, "the May 18 release date for [the monograph] is almost certainly not going to happen," [the Defender reported](#).

Connett said:

*"It was only because we were tipped off by someone with knowledge on the inside that something was amiss that we went and did extensive FOIA requests and we were able to get documents showing that the NTP scientists considered this report to be complete and ready for publication last May, May of 2022."*

North said it was clear the agencies were blocking the release of the report, which was ready for publication.

"This was a clear case of stonewalling," North said. "The National Toxicology Program, after over six years of research and numerous outside peer reviews, had completed its state-of-the-science report."

Connett added:

*“We have emails showing that Levine is the one who put it on hold. Rachel Levine said not to publish this report at this time. Then we got the FOIA emails showing that and NTP said they may not publish this [the report] at all. They may not publish it in final form but we did get them to agree to at least post a draft report. They will consider it a draft report.”*

On January 20, Judge Chen [denied the EPA's request](#) to add another six-month period to the stay he lifted in his October ruling.

The monograph and meta-analysis released yesterday on the NTP's website are both labeled “draft.”

“Unfortunately, fluoridation promoters and high-level government officials have continued to label it a draft,” North said. “It wasn’t.”

Experts associated with the lawsuit against the EPA will now analyze and interpret the report in future hearings and then Judge Chen will rule.

The next hearing date is scheduled for April 11, 2023. At that time, the judge will set a date for the next phase of the trial.

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# Mother Sues D.C. Doctor Who Gave Kids COVID Vaccines Without Consent

## [Mother Sues D.C. Doctor Who Gave Kids COVID Vaccines Without Consent](#)

*Children's Health Defense is funding a lawsuit by a D.C. mother alleging a doctor vaccinated two of her children for COVID-19 without her consent after falsely telling the teens the shots were required for school.*

by [Brenda Baletti](#), Ph.D., [The Defender](#)

March 6, 2023

The mother of two children who were given COVID-19 vaccines without the mother's consent is suing the doctor who administered the vaccines.

An attorney representing NaTonya McNeil last week filed a lawsuit in Superior Court for the District of Columbia against [Janine A. Rethy](#), M.D., M.P.H.

According to the complaint, on Sept. 2, 2022, McNeil took her two older children, ages 15 and 17, to the [KIDS Mobile Medical Clinic/Ronald McDonald Care Mobile](#) clinic, operated by Georgetown Hospital, to complete their required annual physical exam for the 2022-2023 school year.

The lawsuit alleges Rethy, director of the mobile clinic, held the children in the examination room longer than necessary for

a regular check-up and vaccinated them against [COVID-19](#) over their objections and without consulting their mother

In order to attempt to obtain the children's consent – which they are not legally able to provide without a parent or guardian – the doctor falsely informed the children the COVID-19 vaccine was mandatory for school attendance and told them they could not lawfully decline it if they wanted to attend school.

The suit, filed by D.C. Attorney [Matthew Hardin](#), seeks damages for false imprisonment, battery and fraud.

[Children's Health Defense](#) (CHD) is financing the lawsuit because, according to CHD President and General Counsel Mary Holland, "CHD couldn't just sit still and not allow this wrong to go unpunished and not bring this to the public's attention."

In an exclusive conversation with [The Defender](#), McNeil explained why she is suing the the doctor:

"I just feel like people shouldn't be able to do whatever they want to do to other people and especially not to children. As a mother, I feel like, 'You all just took all my rights away from me to do what you wanted to do to my kids.'

"I do want justice to be done in this case. I feel like something needs to be done. This can't just continue to happen."

### **'I feel violated'**

According to the complaint, Rethy's stated goal is to vaccinate all children against COVID-19. The complaint quotes her statement to the press:

"Our goal is to increase vaccination rates in children here in D.C. . . . For more than 30 years our role has been to be in the community to help address the problem of health

disparities, bringing families care where they are.

“For this particular effort, we are glad to be partnering with DC Health to provide both regular childhood vaccines and COVID-19 vaccines to all children.”

In addition to her role as director of the mobile clinic, Rethy is chief of MedStar Georgetown University Hospital’s Division of Community Pediatrics and assistant professor of pediatrics at Georgetown University School of Medicine.

McNeil said that when she took her older children to the clinic, she stayed outside the examination room to care for her infant. As soon as the children entered the doctor’s office, she called her daughter’s cellphone to let Rethy know she was just outside the door if the doctor needed to consult her for anything.

According to McNeil, the doctor did not ask or inform her about any vaccinations, and did not ask her to sign anything. At the end of the physical, Rethy came out to talk to her.

McNeil said the doctor explained her son’s asthma treatment plan, but that’s all they discussed.

As they were heading home, McNeil said she was shocked when her daughter complained that her arm hurt “pretty bad.” When McNeil asked her why it hurt, her daughter said she was given the COVID-19 shot, even though she told the doctor she didn’t want it.

When McNeil asked her why she allowed the doctor to administer the shot, her daughter said:

“When she had the needle in her hand and she was coming towards me, I backed up and I asked her what is that needle, and she said it was the COVID shot and I ... told her I didn’t want it and she said, ‘Well it is mandatory, you have to get it in order to go to school.’”

Rethy allegedly administered the shot to her daughter, and then to her son. McNeil said:

“He’s 14 and he said they didn’t even ask him if he wanted it or not, but when they gave it to him, he said he thought he had to get it because his sister got it.”

According to the complaint, both children received the Pfizer/BioNTech vaccine, authorized for emergency use, and the meningococcal vaccine. Her son was also injected with Tdap.

Both children were upset and angry they had been coerced into vaccination, the complaint says.

### **No school mandate, despite what clinic and doctor alleged**

When she got home, McNeil said she called the doctor’s office, and asked them why they vaccinated her children without her consent.

“I would have never consented to you all vaccinating my children,” she said. “I’m not vaccinated and I’m not getting vaccinated and my kids were never supposed to be vaccinated for COVID period, under no circumstances.”

She said the person on the phone said they were supposed to get them for school.

After hanging up, McNeil said she was “so irritated I even started crying” because she couldn’t believe “they put this poison” into her children’s bodies.

In July 2022, D.C. public schools [imposed a vaccine mandate](#) for schoolchildren ages 12 and up for the 2022-2023 school year. But on Aug. 26, just weeks after imposing the mandate, [officials walked it back](#), postponing it until 2023.

That means when McNeil’s children saw the doctor, there was no school vaccine mandate in place, despite what the Rethy



allegedly told the children.

## **The age of consent**

The District of Columbia in March 2021 enacted the [D.C. Minor Consent for Vaccination Amendment Act of 2020](#) (D.C. Minor Consent Act), allowing children 11 and older to consent to the administration of any vaccine – [including COVID-19 shots](#) – recommended by the Advisory Committee on Immunization Practices (ACIP) – without parental knowledge or consent if the medical provider believed “the minor is capable of meeting the informed consent standard.”

The law also required healthcare personnel to provide accurate immunization records to the Department of Health and to the student’s school, but not to parents with religious exemptions.

CHD and Parental Rights Foundation filed [a lawsuit](#) seeking a court order to declare the D.C. Act unconstitutional.

A judge for the U.S. District Court for the District of Columbia on March 18, 2022, granted [a preliminary injunction](#) prohibiting the D.C. mayor, Department of Health and public schools from enforcing the law.

That means at the time McNeil’s children visited the clinic, they could not legally provide consent to be vaccinated without their mother’s consent.

McNeil said:

“To do that to my little children, my innocent children. They took her rights. When she backed away from you [the doctor] and said she didn’t want it, that should have been the end of it.

“Or you [the doctor] should have called me on the phone to find out what I feel about the situation. But you [the doctor] basically told my child a lie so you [she] could do what you

[she] wanted to do to my kid.”

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# ‘Tragic’: CDC Adds Original COVID mRNA Vaccine to Childhood Schedule Despite Known Harms

[‘Tragic’: CDC Adds Original COVID mRNA Vaccine to Childhood Schedule Despite Known Harms](#)

*The Centers for Disease Control and Prevention on Thursday added the two-shot primary series mRNA COVID-19 vaccine to its routine immunization schedule for children and adults, formalizing the agency’s vaccine advisory committee’s unanimous recommendation made in October 2022.*

by [Brenda Baletti](#), Ph.D., [The Defender](#)

February 10, 2023

The Centers for Disease Control and Prevention (CDC) on Thursday added COVID-19 vaccination to its routine [immunization schedule](#) for children and adults.

Although the CDC does not have the authority to set requirements itself, the agency's immunization schedule provides formal guidance for state and local public health officials who set the rules for which vaccines are required to attend school.

The schedule also is the basis for vaccine recommendations made by most physicians.

"Given all that we have learned about the dangers and ineffectiveness of [COVID-19](#) shots over the last two years, it is horrifying to see the CDC now recommend this as a routine shot to children," Mary Holland, [Children's Health Defense](#) (CHD) president and general counsel told [The Defender](#).

"Although it is unsurprising given the agency capture, it is nonetheless tragic," she added.

Thursday's move formalized the recommendation by the agency's vaccine advisory committee, which on Oct. 20, 2022, [voted unanimously](#) (15-0) to recommend adding COVID-19 vaccines for [children as young as 6 months old](#) to the new [Child and Adolescent Immunization Schedule](#).

*This reckless action is final proof of the cynicism, corruption + capture of a once exemplary public health agency. ACIP members have demonstrated that fealty to their pharma overlords eclipses any residual concerns they may harbor for child welfare.* <https://t.co/UkRQBxAvo2>

– Robert F. Kennedy Jr (@RobertKennedyJr) [October 20, 2022](#)

Under the new guidelines, the [CDC recommends](#) healthy children 6 months to 11 years old receive a primary series of two doses

of the mRNA Moderna or Pfizer-BioNTech monovalent COVID-19 vaccine, followed by a booster of the bivalent shot.

It recommends that healthy people age 12 and older receive two doses of either the Moderna, Pfizer or Novavax vaccine followed by a bivalent booster.

All COVID-19 vaccines being administered in the U.S. to people under 18 are Emergency Use Authorized (EUA) products. The U.S. Food and Drug Administration (FDA) did [grant full approval](#) to Pfizer's Comirnaty COVID-19 vaccine for ages 12 and older, however, the [Comirnaty vaccine](#) is not available in the U.S. – which means all children who get the Pfizer vaccine are getting an EUA product.

In Wednesday's [congressional hearing](#) on the Biden administration's response to COVID-19, [Rep. Dan Crenshaw](#) (R-Texas) asked CDC Director [Dr. Rochelle Walensky](#), why the CDC broke with its own norms and put an EUA vaccine on the childhood immunization schedule for a disease that poses [very little risk to children](#) and for which the vaccine poses many potential side effects without preventing transmission.

Walensky responded:

"The reason that the ACIP [Advisory Committee on Immunization Practices] recommended the CDC put the COVID-19 vaccine on the pediatric schedule was only because it was the only way it could be covered in our 'Vaccines for Children' program.

"It was the only way that our under-uninsured children would be able to have access to the vaccines ... That was the reason to put it there."

*Dr. Rochelle Walensky on Why an Experimental Vaccine was Added to the Childhood Schedule*

*"The reason ACIP recommended...getting the COVID-19 vaccine on the pediatric schedule, it was ONLY because it was the only*

way it could be covered in our 'Vaccines for Children' program" [pic.twitter.com/k1CVf4cv09](https://pic.twitter.com/k1CVf4cv09)

– Chief Nerd (@TheChiefNerd) [February 8, 2023](#)

Data collected by the CDC through its Vaccine Adverse Event Reporting System ([VAERS](#)) and a growing number of other sources indicate [serious health risks](#) associated with COVID-19 vaccination for children.

“The COVID vaccines have not been shown to be either effective or safe for children,” CHD argued in an [amicus brief filed in Louisiana](#) last year. “The [benefits to children](#) are minuscule, while the risks – including the risk of potentially [fatal heart damage](#) – are ‘known’ and ‘serious,’ as the FDA itself has acknowledged.”

Other changes to the childhood schedule include adding the [PVC15 shot](#), a pneumococcal conjugate vaccine used to help protect against pneumococcal bacteria and only recently approved for children; updated guidance for the flu and hepatitis B vaccines; and new recommendations for the measles, mumps and rubella (MMR) and polio vaccines.

The CDC now recommends an additional dose of the MMR vaccine in places where there is a mumps outbreak. It also recommends an additional poliovirus vaccine for children and adults if [new polio cases](#) emerge.

This would mean the childhood vaccination schedule would increase the number of recommended injections from 54 to 72 over the course of a person’s childhood, between the ages of 6 months and 18 years, [The Defender reported](#) last year.

**CDC schedule protects pharmaceutical companies from liability for vaccine injuries**

[Vaccine makers are not liable](#) for injuries or deaths

associated with EUA vaccines but can be held liable for injuries caused by a fully licensed vaccine – unless that vaccine is added to the CDC’s childhood vaccination schedule.

Parents of children injured by vaccines listed on the childhood schedule can seek compensation through the taxpayer-funded [National Vaccine Injury Compensation Program](#) (NVICP), a no-fault alternative to the traditional legal system for resolving vaccine injury claims.

However, the revisions voted on by the [ACIP committee](#) last year explicitly state (slide 24) that the pneumococcal polysaccharide vaccine (PPSV23) and COVID-19 vaccines are not covered under the NVICP.

Instead, the COVID-19 vaccines added to the childhood schedule will remain covered by the [Countermeasures Injury Compensation Program](#) (CICP). To date, only 19 claims related to COVID-19 filed with the CICP have been found eligible for compensation, though no compensation has yet been paid.

Since it was established in 2010, the CICP only compensated 30 of the nearly 12,000 claims filed.

## **Are we seeing ‘the beginning of the end of Big Pharma’s reign’?**

The addition of the COVID-19 vaccine to the immunization schedule “helps ‘normalize’ this vaccine and sends a powerful message to both healthcare providers and the general public that everyone ages 6 months and older should stay up to date with recommended COVID-19 vaccines (including a booster, when eligible), just as they would with any other routinely recommended vaccine,” Dr. Neil Murthy and Dr. A. Patricia Wodi said in a statement [reported by CNN](#).

This “normalization” comes at a time when over 85% of the U.S. population hasn’t been boosted, despite the massive [government-sponsored media push](#).

Nationally, only [12% of children ages 6 months to 4 years](#) have received one dose of the vaccine. Only 58% of children ages 12 to 17 and 32% of children ages 5 to 11 have received two doses of the vaccine. Numbers vary widely across states.

Holland commented on the implications of adding this shot to the schedule:

“The childhood schedule is already unscientific and unjustifiable. Adding this shot may well be the straw that breaks the camel’s back. Parents are likely to resist, finally calling the entire childhood vaccine schedule into question.

“That day has been long in coming, but it is now here. I believe we are now watching the beginning of the end of [Big Pharma](#)’s reign over the nation’s children.”

At Wednesday’s congressional hearing, lawmakers repeatedly raised concerns about how regulatory agencies’ flawed recommendations led to a lack of confidence in public institutions.

[Rep. Cathy McMorris Rodgers](#) (R-Wash.) said, “There’s serious distrust today with our public health agencies. [Polling indicates] 40% of the public does not trust our public health agencies to handle the next public health emergency.”

Walensky indicated that vaccination rates for all vaccines on the childhood schedule among [kindergarten children](#) declined last year, dropping from 95% to 93% over the last two years, amounting to hundreds of thousands of parents opting not to comply with the childhood vaccination schedule.

The most recent [VAERS data](#) on vaccine injuries, updated Feb. 2 for children 6 months to 5 years old who received a COVID-19 vaccine, showed reports of [5,737 adverse events](#), including [244 cases rated as serious](#) and [14 reported deaths](#).

For 5- to 11-year-olds, there were [16,910 reports of adverse](#)

[events](#), including [805 rated as serious](#) and [33 reported deaths](#).

VAERS is the primary government-funded system for reporting adverse vaccine reactions in the U.S. While reports submitted to VAERS require further investigation before a causal relationship can be confirmed, VAERS historically has been shown to report only [1% of actual vaccine adverse events](#).

According to [Retsef Levi, Ph.D.](#), with the Massachusetts Institute of Technology, the vaccines “cause unprecedented levels of harm, including the death of young people and children.”

Multiple studies have determined that the vaccines increase the risk of [myocarditis and pericarditis](#), particularly in young men.

An October 2022 study revealed the [CDC was aware](#) of the safety signal for these side effects months before it informed the public.

At the recent [FDA vaccine advisory committee meeting](#), several committee members also raised concerns about recommending annual bivalent boosters for children given the lack of data.

[Dr. Archana Chatterjee, Ph.D.](#), committee member and dean of the Chicago Medical School and vice president for medical affairs at Rosalind Franklin University said:

“As we look at this question [simplifying the vaccination schedule] for young children, the data is just too few for us to really make scientifically sound decisions regarding this question. The trial data need to be much more robust than we have seen in the past.”

In light of data like this, vaccination for COVID-19 for children and healthy people is losing public and even governmental support in some places.

Under public pressure and facing a series of lawsuits, last



week [California dropped its plan](#) to mandate COVID-19 vaccination for school children.

As of Feb. 6, 21 states have legislation or executive orders banning student vaccine mandates, according to the [National Academy for State Health Policy](#), a nonpartisan organization of state health policymakers.

Only the District of Columbia currently has a vaccine mandate for school children, although it is not set to go into effect until the 2023-2024 school year.

As of Feb. 12, the U.K. will [no longer recommend COVID-19 boosters](#) for healthy people under age 50.

[Denmark ended](#) its universal COVID-19 vaccination campaign for healthy individuals in February 2022.

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*Cover image credit: [nonperson](#)*

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# Scientist Tells RFK, Jr.: ‘Militaristic’ Medicine

# Linked to Excess Deaths, Especially Among Poor and Disabled

## [Scientist Tells RFK, Jr.: 'Militaristic' Medicine Linked to Excess Deaths, Especially Among Poor and Disabled](#)

*COVID-19 countermeasures – such as lockdowns and social distancing – were key contributors to the rise in excess deaths since the onset of the pandemic, according to Denis Rancourt, Ph.D., all-cause mortality researcher and lead scientist for 23 years at the University of Ottawa in Canada.*

by [Brenda Baletti](#), Ph.D., [The Defender](#)

February 9, 2023

The narrative that the COVID-19 virus was largely responsible for excess deaths during the pandemic isn't supported by statistical analyses, according to [Denis Rancourt, Ph.D.](#), all-cause mortality researcher and former physics professor and lead scientist for 23 years at the University of Ottawa in Canada.

During an episode of “[RFK Jr. The Defender Podcast](#),” Rancourt told Robert F. Kennedy, Jr., chairman and chief litigation counsel for [Children's Health Defense](#), that the numbers suggest [COVID-19](#) countermeasures – such as lockdowns and social distancing – imposed by governments and public health officials were key contributors to the rise in [excess deaths](#) since 2020 when the pandemic began.

Rancourt – author of more than 100 peer-reviewed journal

articles – said that if the COVID-19 virus had a “certain property” that was most responsible for causing death while the virus spread, then that idea should be reflected in the [rate of deaths](#) during that time period.

“But in fact,” he told Kennedy, “that’s not what was happening in terms of the overall deaths.”

Rancourt said:

“The people who died were overwhelmingly disabled and extremely poor, and they were obese and they had diabetes, and they normally get a lot of antibiotics.

“A lot of them were institutionalized, and they were now isolated in their rooms and no one wanted to touch them and so on. These are the people who died, overwhelmingly: 1.3 million in the U.S.

“That’s the kind of evidence that leads us to conclude that it was about the measures – what was being done – and how treatment was being done or not done.”

According to Rancourt, looking at which states and jurisdictions applied strong [lockdown measures](#) is a “proxy for what’s going on” in that area with the people who live there.

“The states and the jurisdictions that applied strong lockdowns are also the same states that have a more militaristic approach to medicine in the big hospitals and in how they treat institutionalized people.”

## **Psychological stress, social isolation take higher toll on poor, disabled**

Rancourt said his data showed that “when you destroy people’s lives by destroying the local economies, and you tell people they have to be isolated – they have to stay at home, they can’t have social contact – they’re going to be psychologically stressed.”

Moreover, he said, this was further compounded particularly for individuals with mental or physical disabilities, who were already living in a medical institution and who, therefore, experienced extreme social isolation.

Suddenly, the individuals' caregivers are wearing masks and do not want to touch them, Rancourt explained.

"They [the individuals] have to be isolated in their room," Rancourt said. "They can only go to a certain washroom at a certain time."

Rancourt said he talked to people who were isolated in this way, and "it was horrendous for them."

According to Rancourt, the notion that COVID-19 primarily killed the elderly is not supported by all-cause mortality statistics because factors other than age – such as mental disability and poverty – appear to play a larger role.

"The correlation is to disability and to poverty," he said. "It's not to age. You cannot find a clear correlation to age. We weren't able to find it."

"So it wasn't just the elderly that were killed at that time – institutionalized young people were also killed."

Rancourt said:

"It's not an exaggeration to say that they were ... I think 'scared to death' is not the right way to put it, but 'demolished to death.' Their lives were dissolved. They could have no social contact. All of a sudden they lost their caregivers. They were locked in.

"I think that many, many people were killed this way and it's hard to have that discussion with scientists because they cannot let go of their theoretical immunology and everything they want to believe about how viruses spread and so on."

## 3.7 million excess deaths in India linked to vaccine rollout

Kennedy and Rancourt also discussed a study Rancourt recently published that “shows 3.7 million excess deaths [were] almost certainly [related to the COVID-19 vaccine](#) and not related to COVID-19 [the virus].”

According to Rancourt, a “very dramatic” surge in the number of overall deaths in India – “like 500% more than the baseline total deaths in India major” – coincided with the rollout of the vaccine in India.

“We concluded in our study that it was the vaccines that were doing this because we had seen in the United States peaks like that, when you had the so-called vaccine equity programs that would go into institutions and vaccinate people that had not yet been vaccinated, who were more fragile.”

**Watch the interview here:**

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# Pfizer Vaccine Bonanza Slows – But Bill Gates Sold Early, Made Huge Profits

## Pfizer Vaccine Bonanza Slows – But Bill Gates Sold Early, Made Huge Profits

*Pfizer on Tuesday announced 2022 profits of \$31.4 billion on record sales of \$100.3 billion but warned investors to set their sights much lower in 2023, as sales of COVID-19 vaccines and Paxlovid slow amid growing questions about their safety and efficacy.*

by [Brenda Baletti](#), Ph.D., [The Defender](#)

February 1, 2023

Pfizer on Tuesday announced 2022 profits of \$31.4 billion on record sales of \$100.3 billion. Sales from its COVID-19 vaccine and [Paxlovid](#), used to treat COVID-19, totaled \$56 billion – more than half the vaccine maker's annual revenue.

However, the company warned investors to expect [sales of those two products to plummet](#) up to 58% in 2023, to only about \$21.5 billion – \$3 billion short of [Wall Street projections](#). Pfizer projected total 2023 revenue of only about \$67-\$71 billion.

The news followed on the heels of a [string of developments](#) calling into question the COVID-19 vaccines – including [comments last week by billionaire and vaccine investor Bill Gates](#), who criticized the efficacy and durability of the vaccines during a talk at Australia's Lowy Institute.



Robert F. Kennedy Jr.   
@RobertKennedyJr

...

Bill Gates just admitted mRNA jabs don't stop infection, don't block transmission, don't block mutants, don't last, don't work at all — after he sold stock in his vaccine ventures 😂😂😂. Thanks, Suckers!



childrenshealthdefense.org

Bill Gates — After Reaping Huge Profits Selling BioNTech Shares — Trashes E...

Bill Gates, long recognized as one of the world's foremost proponents of vaccines, raised some eyebrows at a recent talk in Australia when he admitte...

Investigative journalist Jordan Schachtel on Tuesday revealed the extent of [Gates' profit-making](#) from his investments in Pfizer partner BioNTech. The Bill & Melinda Gates Foundation made 15 times its initial investment when the foundation sold its BioNTech shares at the height of their value in 2021.

Pfizer's stock fell 15% in January.

Pfizer and Moderna [said they likely will quadruple](#) the price of their COVID-19 vaccines to between \$110 to \$130 per dose when the U.S. government stops paying for the shots later this year.

**Bill Gates reaped massive profits from 'impeccably timed' sale of Pfizer stock**

Schachtel reviewed Securities and Exchange Commission (SEC)

filings and found the Gates Foundation downsized its BioNTech holdings by 86% – from 1,038,674 to 148,674 shares – over the third quarter of 2021, BioNTech’s best-performing quarter.

The foundation had purchased the shares in September 2019 – just months before the pandemic was announced – at a pre-public offering price of \$18.10 per share.

When the foundation sold the shares – at an average sale price of \$300 per share – it pocketed a profit of approximately \$260 million, or more than 15 times its original investment.

Schachtel said \$242 million of that profit is untaxed because the money was invested through the foundation.

The Gates Foundation sold an additional 2 million shares prior to the third quarter of 2021, and subsequently sold 1.4 million shares of [CureVac](#), a German-based mRNA company, making another \$50 million, Schachtel found.

“Bill Gates secured hundreds of millions of dollars in profits from his foundation’s impeccably timed investment in BioNTech – the Pfizer partner for its mRNA Covid shots – before dramatically reversing course and proceeding to openly cast doubt on the whole of mRNA technology,” [Schachtel wrote](#).

After dumping his stocks, in November 2021, Gates said, “[We need a new way of doing the vaccines](#),” because the vaccines didn’t stop transmission, despite all of his [previous claims](#) to the contrary.

Speaking at the Lowy Institute, Gates said:

“We also need to fix the three problems of [COVID-19] vaccines. The current vaccines are not infection-blocking. They’re not broad, so when new variants come up you lose protection, and they have very short duration, particularly in the people who matter, which are old people.”

With those comments, “Gates amped up his doubtful rhetoric



about mRNA, continuing to distance himself from the once hyped technology that he used to secure hundreds of millions of dollars in pandemic profits,” Schachtel said.

## **More questions swirl around COVID vaccines**

Over 85% of the U.S. population hasn’t been boosted, despite the massive [government-sponsored media push](#), suggesting people aren’t buying the narrative that the boosters are necessary, safe and effective, [Russell Brand said](#).

The U.K. announced last Wednesday it will [no longer recommend COVID-19 boosters](#) for healthy people under 50 and will discontinue free distribution of the primary two-shot series.

[Denmark ended](#) its universal COVID-19 vaccination campaigns for healthy individuals in February 2022.

The U.S. Food and Drug Administration last month said it is considering changing the [vaccination schedule](#), recommending adults be [boosted just once a year](#) to “stay protected” against COVID-19.

And the [Biden administration announced](#) that it will end the COVID-19 national and public health emergencies on May 11, which will end government-sponsored testing, vaccination and treatment.

Several prominent doctors have also publicly raised concerns about the adverse effects of the vaccines.

British cardiologist [Dr. Aseem Malhotra](#) recently [“truthbombed” the BBC](#) during a live appearance telling viewers the mRNA COVID-19 vaccines pose a cardiovascular risk.

This weekend a number of healthcare professionals and doctors also took to Twitter, swearing not to take any more vaccines without randomized controlled trials.

[Vinay Prasad, M.D., MPH](#), said he [wouldn’t take any additional](#)

[shots](#) until clinical trial data become available. “I took at least one dose against my will,” Prasad said. “It was unethical and scientifically bankrupt.”

Notable participants in the campaign also include [Dr. Todd Lee](#), an infectious disease expert at McGill University, [Dr. Mark Silverberg, Ph.D.](#), who founded the Toronto Immune and Digestive Health Institute, [Dr. Tracy Høeg, Ph.D.](#), an epidemiologist at the University of California, San Francisco and [Kevin Bass, M.S.](#), a medical student whose [op-ed in Newsweek](#) Monday called out the scientific community for its role in perpetuating a false COVID-19 narrative.

Late Sunday night, Retsef Levi, Ph.D., with the Massachusetts Institute of Technology, posted a video on Twitter calling for an end to COVID-19 mRNA vaccination, [The Defender reported](#).

Levi said the vaccines failed to deliver the promised efficacy, and that based on his risk analysis, the vaccines “cause unprecedented levels of harm, including the death of young people and children.”



Retsef Levi  
@RetsefL



The evidence is mounting and indisputable that mRNA vaccines cause serious harm including death, especially among young people. We have to stop giving them immediately!



From Dr Aseem Malhotra

1:28 AM · Jan 30, 2023 · 1.8M Views

3,811 Retweets 704 Quote Tweets 8,179 Likes

Meanwhile, Pfizer officials face [a potential ban from the European Parliament](#) due to the company's lack of transparency regarding COVID-19 vaccine purchase agreements during the pandemic.

## **Pfizer in a 'transition year,' CEO says**

Pfizer CEO Albert Bourla said in the [earnings press release](#) that 2023 would be a "transition year" for Pfizer's COVID-19 products, before likely returning to growth in 2024.

Bourla said:

"Our focus is always on what is next. As we turn to 2023, we expect to once again set records, with potentially the largest number of new product and indication launches that we've ever had in such a short period of time."

[Reuters reported Tuesday](#) that Pfizer also will lose patent

protections for some big-selling drugs after 2025.

To make up for the loss of revenue the vaccine maker has turned to acquisitions, [spending about \\$25 billion](#) to buy Biohaven Pharmaceutical, Arena Pharmaceuticals and Global Blood Therapeutics.

The company also launched five new products last year and hopes to introduce as many as 14 more over the next year and a half, including a [vaccine for respiratory syncytial virus](#) and an [mRNA flu vaccine](#).

Pfizer expects the vaccination rate to increase again after 2023, [Fierce Pharma reported](#), assuming a [combined COVID-19/flu shot](#) is developed.

During a meeting last week of the FDA's vaccine advisory committee, the agency said it was [investigating whether the stroke safety signal](#) the FDA identified, associated with the bivalent vaccines, might be related to the co-administration of the flu and COVID-19 vaccines.

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# Davos: Gates, Schwab, Global Elites Face Growing Criticism of Their 'Master the Future' Agenda

## Davos: Gates, Schwab, Global Elites Face Growing Criticism of Their 'Master the Future' Agenda

*Thousands of prominent political and business figures are congregating in Davos, Switzerland, this week for the annual meeting of the World Economic Forum, as critics accused them of "centralizing power into the possession of hand-picked global elites."*

by [Michael Nevradakis](#), Ph.D., [The Defender](#)

January 18, 2023

Thousands of prominent political and business figures are congregating in Davos, Switzerland, this week for the [annual meeting of the World Economic Forum](#) (WEF), whose theme, "[Cooperation in a Fragmented World](#)," focuses on the "[cost of living crisis](#)."

In recent years, the WEF and its founder and chairperson, German engineer and economist [Klaus Schwab](#), generated controversy by promoting ideas such as the "[The Great Reset](#)" and the "[Fourth Industrial Revolution](#)."

In promoting "The Great Reset" in 2020, [Schwab said](#) the [COVID-19](#) "pandemic represents a rare but narrow window of opportunity to reflect, reimagine, and reset our world."

The WEF's 2016 [vision for the future](#) – “Welcome to 2030. I own nothing, have no privacy, and life has never been better” – has also raised eyebrows.

In its [mission statement](#), the WEF claims “it is independent, impartial and not tied to any special interests.”

The statement continues:

“The Forum strives in all its efforts to demonstrate entrepreneurship in the global public interest while upholding the highest standards of governance. Moral and intellectual integrity is at the heart of everything it does.”

However, critics [describe the WEF](#) as a “fanatical political organization masquerading as a neutral entity” with the goal of “centralizing power into the possession of hand-picked global elites” and for operating with [no public input or accountability](#).

Some critics argue the WEF's annual meeting “acts as the go-to in-person, invite-only, closed to ideological outsiders policy and ideas shop for the global ruling class.”

Statements emerging from this year's meeting have done little to quell concerns about the WEF's real agenda.

[The Defender](#) examines some of the key themes of this year's meeting – taking place under a militaristic security blanket and amid accusations that participants are not practicing what they preach when it comes to their own behavior.

Key themes this year include “combating misinformation,” promoting “public-private partnerships,” “green” politics, buzzwords such as “DEI,” “resiliency” and “sustainability,” “health security,” and continued digitization via the metaverse and “smart” technologies.

## Schwab opines on the importance of 'mastering the future'

In a [press release promoting this year's WEF meeting](#), Schwab stated:

"We see the manifold political, economic and social forces creating increased fragmentation on a global and national level. To address the root causes of this erosion of trust, we need to reinforce cooperation between the government and business sectors, creating the conditions for a strong and durable recovery.

"At the same time there must be the recognition that economic development needs to be made more resilient, more sustainable and nobody should be left behind."

In [his opening address](#), Schwab said that current crises around the world, ranging from COVID-19 to the high cost of living, are "serving as [catalytic forces for the economic transformation](#)," adding that "through collective responsibility, innovation and human goodwill and ingenuity, we have the capacity to turn such challenges into opportunities."

Schwab asked what it means to "[master the future](#)":

"What does it mean to master the future? I think to have a platform where [all stakeholders of society are engaged](#) – governments, business, civil societies, young generation ... I think is the first step to meet all the challenges."

Schwab also used his opening remarks to address criticism levied against the WEF in recent years. However, he said the WEF and its global partners must "overcome" such "[negative critical and confrontational attitudes](#)."

In a blog post, [investigative journalist Jordan Schachtel](#) noted that the WEF appears to be "playing defense"

in response to the “major headwinds” its “extremist agenda” faces, by claiming that it is the victim of “disinformation campaigns.”

For instance, an Aug. 5, 2022, article in Canada’s [The Globe and Mail](#) stated the infamous “own nothing and be happy” quote “sparked a misinformation campaign,” even though Schachtel noted that the phrase originated from the WEF itself. The article containing the quote was written by [Adrian Monck](#), now the WEF’s managing director.

And [Florida Gov. Ron DeSantis](#) recently [attacked the WEF](#), remarking that “They run everything and everyone else is basically a serf.”

## **‘Annual pilgrimage to genuflect to Bill Gates and Klaus Schwab’**

The roster of [speakers at this year’s WEF meeting](#) represents a proverbial “who’s who” of the global political, business, journalistic and nonprofit elite.

Referencing the significant number of journalists participating as panelists and speakers, Robert F. Kennedy, Jr., chairman and chief litigation counsel for [Children’s Health Defense](#), said:

“The American press makes its annual pilgrimage to genuflect to Bill Gates and Klaus Schwab and get its marching orders from the billionaires.”

Among this year’s [WEF meeting speakers](#) are 52 heads of state and government, including representatives of royal families, and 56 national finance ministers, 35 ministers of foreign affairs, 30 ministers of commerce and 19 governors of central banks.

Indeed, a [record number of heads of state](#) is attending this year’s meeting.



The [U.S. contingent at this year's meeting](#) includes key Biden administration and intelligence community figures, including [FBI](#) Director Christopher Wray, Director of National Intelligence Avril Haines, Special Presidential Envoy for Climate John Kerry, Secretary of Labor Martin J. Walsh, [U.S. Agency for International Development](#) Administrator Samantha Power, U.S. Trade Representative Katherine Tai and several members of Congress from both parties.

Schachtel said the U.S. delegation is smaller than last year's, which he attributed to "the massive blowback the World Economic Forum has received."

Key international figures on this year's roster include U.N. Secretary-General António Guterres, [WHO Director-General Tedros Adhanom Ghebreyesus](#), [Secretary General of NATO Jens Stoltenberg](#), [Christine Lagarde](#), president of the European Central Bank and former managing director of the [International Monetary Fund](#) (IMF) and former Vice President Al Gore.

More than a dozen representatives of the EU are attending, including [President of the European Commission Ursula von der Leyen](#), [President of the European Parliament Roberta Metsola](#), and other key officials, including the EU's commissioner for the economy and its executive vice president for the European Green Deal.

European heads of state, such as [German Chancellor Olaf Scholz](#) and Prime Minister of The Netherlands Mark Rutte, are among the speakers, alongside European royal figures such as Queen Mathilde of the Belgians, Queen Máxima of the Netherlands and Prince Albert II of Monaco. A [large contingent of Ukrainian politicians](#) also is attending.

[Big Pharma](#) also is strongly represented in this year's speaker list. Attendees include Pfizer CEO Albert Bourla – who at last year's WEF meeting discussed how [microchips will one day be added to pills](#) – [Moderna CEO Stéphane Bancel](#), top-level

executives of AstraZeneca, [Bayer](#), Merck and Sanofi, and [Adar Poonawalla of India's Serum Institute](#), the world's largest vaccine manufacturer.

Key business and financial figures on the speaker's list include [BlackRock CEO Larry Fink](#), [Amazon](#) CEO Andy Jassy, JPMorgan Chase CEO Jamie Dimon, Citigroup CEO Jane Fraser and [Bain & Company](#) Chairman Orit Gadiesh, alongside the governors of central banks of countries such as France, Israel and The Netherlands.

Five representatives of the Bill & Melinda Gates Foundation are on the speaker's list, as are editors and journalists from outlets such as The [Associated Press](#), [Reuters](#) and [The Washington Post](#), and Axios, Bloomberg, CBS, CNBC, CNN, Deutsche Welle, The Economist, the Financial Times, Forbes, Foreign Affairs, Fortune, Fox Business, NBC, [The Atlantic](#), The New York Times, Politico and The Wall Street Journal.

There's also no shortage of [Big Tech](#) and fintech representatives on the WEF speakers lineup, including executives from Google, LinkedIn, Meta, Microsoft, TikTok, alongside [Mastercard](#) and Visa.

In all, more than [2,700 participants from 130 countries](#) are listed.

Notably, [George Soros](#), chair of Soros Fund Management and founder of the Open Society Foundations, said in a Jan. 10 tweet that he will not be in attendance at this year's WEF meeting "due to an unavoidable scheduling conflict." Soros' son, Alexander Soros, deputy chair of the Open Society Foundations, is on the roster, however.

According to [Andrew Lawton](#), a journalist with Canadian outlet True North:

"Everyone at the World Economic Forum annual meeting – including journalists and participants – has to take a PCR

test upon arrival. If you don't take a test, the chip in your ID badge is deactivated. If you test positive for COVID the badge is also deactivated."

An intense security curtain has been set up in Davos, with [police](#) and [military roadblocks](#) and checkpoints, [fingerprint scanning](#) and an "unofficial" "[World Economic Forum Police](#)."

[Lawton reported](#) that "private bilateral and multilateral" meetings among participants are likely also being held, "which don't appear on the programme."

### **'We are a select group of human beings'**

Despite the presence of so many high-level figures at the annual WEF meeting, [Schwab has previously said](#) he doesn't make "political statements or economic statements which are ... in any way influencing political personalities."

However, [Schwab was photographed mingling with global heads of state](#) at the November 2022 G20 conference in Indonesia.

Schwab also previously proclaimed that [alumni](#) of his [Forum of Young Global Leaders](#) have "[penetrated](#)" the governments of multiple countries, where [WEF policies are widely being adopted](#).

In the leadup to this year's meeting, the [WEF raised some eyebrows](#) with its list of the "Top 10 Risks" facing the world over a two- and 10-year period, including the "cost of living crisis," "erosion of social cohesion" and "large-scale involuntary migration."

According to Lawton, corporate executives view the benefit of participation in the WEF meeting as "[face-time with politicians](#)," while NGO leaders focus on getting "an audience with business leaders (potential donors) and policy-makers."

However, Lawton noted that attendance at [speeches by world](#)

[leaders](#) in Davos is “sparse.”

Nevertheless, perhaps revealing how participants view their role as WEF invitees, Kerry, speaking at this year’s meeting, said, “[We are a select group of human beings](#)” who “sit in a room and come together and actually talk about saving the planet.”

This theme of “saving the planet” is evidenced by the titles of some of the [panels at this year’s WEF meeting](#), including “[Leading the Charge through Earth’s New Normal](#),” “[Tackling Harm in the Digital Era](#)” and “[Why We Need Battery Passports](#).”

## **Leaders tackle ‘clear and present danger’ of ‘misinformation’ and ‘disinformation’**

One of the key themes permeating this year’s WEF meeting is the perceived need to tackle so-called “misinformation” and “disinformation.”

This was evidenced, for instance, by a panel “[The Clear and Present Danger of Disinformation](#)” panel, which included [former CNN personality Brian Stelter](#), Times Publisher Arthur Gregg Sulzberger, European Commission Vice President Věra Jourová, Rep. Seth Moulton (D-Mass.) and Internews CEO Jeanne Bourgault.

[During this session](#), [Moulton](#) blamed “[mis info](#)” for not “get[ting] people to take a COVID vaccine,” while Sulzberger described “disinformation” as “the most existential” challenge society faces, and Jourová suggested “disinformation” could be fought via enacting “increased regulations,” calling on the U.S. to pass hate speech legislation.

[Sen. Joe Manchin](#) (D-W.Va.), speaking on another panel, said, “The problem we have is the open press system and basically all the platforms.”

## **Public-private partnerships: solutions to the world's problems or 'top-down vision for technocratic tyranny'?**

In its Twitter bio, the [WEF describes itself](#) as “The international organization for public-private cooperation.” This is evident in its description of this year's meeting, where the [WEF says](#), “We'll look at how we can tackle the numerous and interlinked challenges the world is facing and find solutions through public-private cooperation.”

A Jan. 17 press conference at this year's meeting, for instance, was titled “[Philanthropic-Public-Private Partnerships for Climate & Nature](#),” and included participants from the Bezos Earth Fund and McKinsey & Company, as well as Børge Brende, former Norwegian foreign minister and current WEF president.

Brende said, “Time is running out to address critical global challenges” and he introduced the concept of “[stakeholder geopolitics](#)” as a means of tackling them.

Also on Jan. 17, Spain's foreign minister, [José Manuel Albares Bueno](#), said the COVID-19 and Ukraine crises “have shown us that the best method is to do things together,” as “we get out of crises quicker and in better shape.”

Schachtel described this focus as “a [public-private fascist movement](#),” where the WEF partners with the “most influential individuals in business, along with central bankers, governmental head honchos, and international organizations, in order to facilitate their top-down vision for technocratic tyranny, or what they call ‘stakeholder capitalism.’”

## **Leaders arrive in ‘droves of private jets’ to talk ‘Green’ politics**

Lawton reported that multiple participants at this year's conference discussed ideas for how we can transition to a

["climate positive lifestyle."](#)

Gore suggested that activities considered to be ["anti-climate"](#) should be defunded, while [Guterres said](#), "To stop our 'self-defeating war on nature,' we must close the emissions gap, phase out coal, and supercharge the renewable revolution," adding that oil companies have perpetuated a ["big lie" on climate change](#).

In turn, Oxford University professor Ngaire Woods suggested the implementation of a ["real carbon price"](#) by every country, in order to accelerate the energy transition, while in an interview outside the official meeting schedule, Schwab Foundation member [Kola Masha](#) talked about "forcing" environmental policy on the public.

Lawton observed that all [WEF meeting participants](#), upon registration, were surveyed "to calculate their carbon footprint for attending the meeting in Davos."

Perhaps belying the underlying goal of purported "green" proposals, Kerry said, during a panel titled ["Philanthropy: A Catalyst for Protecting Our Planet"](#), that the only way to achieve a 1.5 degree Centigrade reduction in the global temperature was ["Money, Money, Money, Money, Money, Money, Money."](#)

Articles on the WEF website complementing the meeting program suggest, "Why you should consider adding carbon credits to your climate action plan," and how [cities can adopt "environmental, social, governance"](#) (ESG) management utilizing the metaverse and blockchain, and ideas like the ["15 minute city"](#) and ["traffic filters."](#)

In an interview with [Nicholas Lyons](#), Lord Mayor of the [City of London](#), when asked why WEF participants engaged with China in light of its severe lockdowns, he pivoted to climate change, stating, "Human rights issues are always a concern ... but also you have to understand, the biggest challenge facing the world

is climate change.”

In a press release preceding the start of this year’s gathering, [Greenpeace criticized the “hypocrisy” of the WEF delegates](#), who “arrive in droves of private jets.”

## **‘DEI,’ ‘ESG,’ ‘resiliency’ and ‘sustainability’: Popular buzzwords dominate panel discussions**

This year’s WEF meeting program, and the talks delivered by many of its participants, are peppered with repeated mentions of in-vogue buzzwords, including “DEI” (diversity, equity, inclusion), “resiliency” and “sustainability.”

This is evident in the [WEF’s description](#) of the meeting, where Schwab is quoted saying, “There must be the recognition that economic development needs to be made more resilient, more sustainable and nobody should be left behind,” while the description also talks about the need for “industry resilience.”

[Vicki Hollub](#), CEO of Occidental Petroleum, commented during the meeting that, “As we transition, we must not leave developing countries behind,” while [Bob Sternfels](#), global managing partner of McKinsey & Company, said, “Companies that act in a resilient way outperform their peers by up to 50%.”

Fink, a member of the [WEF Board of Trustees](#) and a major proponent of ESG, participated in the “[Relaunching Trade, Growth and Investment](#)” panel. Another panel, “Technology for a More Resilient World,” included participants from the WEF, [IBM](#), Accenture and The Atlantic.

And as part of the agenda for this year’s meeting, the WEF also suggested that “[consumers want sustainable options](#)” and provided suggestions for “what producers, suppliers, and retailers can do now.”

Notably, however, in [remarks made to Bloomberg](#), Fink

complained that “the narrative around ESG investing has become ugly” and has led to “huge polarization” – a statement perhaps indicative of the increasing criticism being levied toward Fink, BlackRock, the WEF and other associated entities.

For instance, in a recent tweet, Twitter owner and CEO [Elon Musk remarked](#) “The S in ESG stands for Satanic.” The WEF’s Twitter account is not included in the “[How to follow Davos 2023](#)” pamphlet distributed by the WEF.

Delegates at BlackRock’s pavilion [refused to answer one reporter’s questions](#).

And, perhaps spelling out what underscores discussions of “inclusiveness,” “sustainability” and “resilience,” a WEF article accompanying this year’s meeting agenda titled “[5 dimensions of leadership to address complex challenges](#)” includes, as one of its dimensions, “Muscles: perseverance to translate ideas into action.”

## **Future ‘pandemics’ and ‘global health security’: Will tuberculosis be the next pandemic scare?**

Another prominent theme at this year’s WEF meeting is how to deal with “future pandemics” and “global health security.”

One panel discussion, “[State of the Pandemic](#),” included Bancel and representatives of the [Gates-affiliated GAVI, The Vaccine Alliance](#), the Harvard School of Public Health and European news outlet Euronews.

Participants in “[Ending Tuberculosis: How Do We Get There?](#)” included WHO Secretary-General Tedros and representatives from the WEF, The Washington Post, the Wellcome Trust and The Global Fund.

During this panel discussion, [Tedros warned](#) that “a resurgence of tuberculosis may be coming ... sooner or later.” In response, Twitter commentator “Chief Nerd” wrote,



“fortunately, [BioNTech & Bill Gates started testing a mRNA vaccine](#) for TB last year.” The author provided a link to a [relevant article from GAVI’s website](#).

Another panel, “[Putting Health at the Heart of Climate Action](#),” bridged the topics of “global health” and “climate change,” and included panelists from Sanofi, the [Africa CDC](#) and UNICEF.

Articles on the WEF website accompanying the meeting agenda include, “[A universal flu vaccine: Here’s what you need to know](#)” and “[Let’s bring together countries and corporations to grow global pathogen surveillance](#).”

Other articles promoted a “[digital transformation](#)” of [healthcare infrastructure](#) and telemedicine as a means of achieving “[global health equity](#).”

Investigative journalists Avi Yemini and Ezra Levant of Rebel News located [Pfizer CEO Albert Bourla on the streets of Davos](#) today and bombarded him with 29 questions – to which Bourla provided two responses: “Thank you very much” and “Have a nice day.”

In a separate street interview, AstraZeneca Chairman Leif Johansson was more talkative, admitting to Yemini that the COVID-19 vaccines [never stopped the spread](#), but nevertheless justifying the vaccine mandates. According to Yemini, “He scrambled behind the restricted area before I could ask about the recent rise in ‘sudden deaths.’”

## **The ‘metaverse’ and ‘smart’ technologies: global ‘cooperation’ or global control?**

This year’s meeting continues the WEF’s promotion of digital technologies such as the “metaverse” and other “smart” technologies, as solutions for multiple global challenges.

[According to Schachtel](#), the WEF will announce “the first, and

long-awaited, outputs of the Defining and Building the Metaverse Initiative,” including [briefing papers](#) on “Interoperability in the Metaverse” and “Demystifying the Consumer Metaverse.”

Also this year, Schwab, Microsoft Vice Chairman and President Brad Smith, and Julie Sweet, chair and CEO of Accenture, shared a vision for the so-called “[Global Collaboration Village](#).” Schwab said the initiative can be “trusted” because [INTERPOL is participating](#) in the effort.

This “Global Collaboration Village” was first [announced in May 2022](#), as a means to “harness the power of the [metaverse](#) to grow and diversify participation in advancing the global public interest.” Panelists this year presented the benefits of a “[global VR society](#)” – referring to virtual reality – that would be “without borders.”

The [embattled](#) von der Leyen said this week, “the next decades will see the [greatest industrial transformation of our times](#), maybe of any time,” in a clear reference to “The Great Reset” and the “Fourth Industrial Revolution.”

[Investigative journalist Noor Bin Ladin](#) characterized von der Leyen’s statement as a “chilling message if you know what this Globalist shill is talking about: Internet of Things (IoT), 5G, and other recent technology advancements [which] are absolutely essential for ... the digital jails in which we’ll be trapped.”

Other metaverse-related panels and events this year include “[Deployment in the Industrial Metaverse](#)” and “[How to Build a Metaverse for All](#),” accompanied by articles suggesting [how the metaverse can impact industry](#), [shape inclusiveness](#) and explaining [why and how it needs to be regulated](#).

*This article was originally published by The Defender – Children’s Health*

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# Children's Health Defense Defeats NY State Healthcare Workers COVID Mandate

[Children's Health Defense Defeats NY State Healthcare  
Workers COVID Mandate](#)

[Children's Health Defense](#)

[Press Release](#)

[January 13, 2023](#)

*For Immediate Release*

In a groundbreaking [decision](#) filed today, NY State (NYS) Supreme Court Judge Gerard Neri held that the COVID-19 vaccine mandate for healthcare workers is now “null, void, and of no effect.” The court held that the NYS Dept. of Health lacked the authority to impose such a mandate as this power is reserved to the state legislature. Furthermore, the court found that the mandate was “arbitrary and capricious” as COVID-19 vaccines do not stop transmission, vitiating any rational basis for a mandate.

Children's Health Defense (CHD) financed this lawsuit on behalf of Medical Professionals for Informed Consent and several individual healthcare workers. Sujata Gibson, lead attorney, said, "This is a huge win for New York healthcare workers, who have been deprived of their livelihoods for more than a year. This is also a huge win for all New Yorkers, who are facing dangerous and unprecedented healthcare worker shortages throughout New York State."

CHD President Mary Holland stated, "We are thrilled by this critical win against a COVID vaccine mandate, correctly finding that any such mandate at this stage, given current knowledge is arbitrary. We hope that this decision will continue the trend towards lifting these dangerous and unwarranted vaccine mandates throughout the country."

We are off to a great start in 2023.

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**Mary Holland of Children's Health Defense Leads Discussion of the Documentary "The Viral Delusion: The Tragic Pseudoscience of SARS-**

# CoV2 & The Madness of Modern Virology”

[Mary Holland of Children’s Health Defense Leads Discussion of the Documentary “The Viral Delusion: The Tragic Pseudoscience of SARS-CoV2 & The Madness of Modern Virology”](#)

by [Children’s Health Defense](#)

*Mary Holland, CHD president with David Rasnick, PhD biochemist and Mike Wallach, creator “The Viral Delusion”*

September 26, 2022

Mary Holland takes on the controversial subject of whether the existence of the COVID virus + other viruses, like the HIV virus – have been thoroughly proven. She brings on two guests, David Rasnick, Ph.D. and filmmaker of the series ‘The Viral Delusion’ Mike Wallach, to discuss this topic and educate viewers on the truth behind ‘public health’ and those in power who control it. Don’t miss this episode!

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[Mirrored copies of the video are available at TCTL [Odysee](#), [BitChute](#) & [Brighteon](#) channels.]’

**Excerpt from the documentary trailer:**

**“For two years, the world has wondered whether the virus that changed our lives emerged from nature or if it leaked from a lab. But a third perspective has been growing among doctors and scientists, that there never was a virus at all. That a host of various sicknesses were repackaged and sold to the public as virally caused without any such proof in scientific papers. Their perspective just might change everything we thought we knew. This is their shockingly compelling story.”**

Watch the documentary “The Viral Delusion”:  
<https://paradigmshift.uscreen.io/>

## **References:**

### **Books mentioned:**

**Vaccine Epidemic: How Corporate Greed, Biased Science, and Coercive Government Threaten Our Human Rights, Our Health, and Our Children** by Louise Kuo Habakus, Mary Holland

**Dissolving Illusions** by Suzanne Humphries, Roman Bystryanyk

**DDT/Polio: Virology vs Toxicology** by Jim West

**Virus Mania: How the Medical Industry Continually Invents Epidemics, Making Billion-Dollar Profits At Our Expense** by Torsten Engelbrecht, Claus Köhnlein, Samantha Bailey

Also mentioned is the work of David Crowe in regards to the covid pandemic narrative and his prior work in exposing the erroneous AIDS narrative. See video: [Rethink All Viruses](#), by David Crowe and [Flaws in Coronavirus Pandemic Theory](#) by David Crowe (available via Archive.org or view and download [here](#).)

### **See related:**

[\*The Viral Delusion \(2022\) Docu-Series: The Tragic Pseudoscience of SARS-CoV2 & the Madness of Modern Virology\*](#)

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# One in Every 16 Irish Boys has Autism: Crisis Worse than COVID-19 and Nobody Cares

## [One in Every 16 Irish Boys has Autism: Crisis Worse than COVID-19 and Nobody Cares](#)

by [Robert F. Kennedy, Jr.](#), Chairman, [Children's Health Defense](#)  
May 28, 2020

According to [National Health data released last week](#), autism incidence among Irish children is now at 4.3%, an 82% rise in five years. One in 16 boys is affected. [US rates](#) trail Ireland's slightly only because [CDC lies to minimize the crisis](#).

In 2016, [Judith Pinborough-Zimmerman](#), CDC's Principal Investigator for the Autism Monitoring Network (ADDM) filed a federal whistleblower suit charging that CDC routinely forces its investigators to falsify data to hide the Autism Pandemic. "The autism explosion is an acute embarrassment to CDC so they fix the numbers."

The autism crisis dwarfs COVID-19. Bill Gates' Institute for Health Metrics predicts [81,766 deaths](#) from COVID. The [average age of death](#) is 75. In contrast, autism attacks infants presaging a [lifetime of nightmarish agony](#). Half will never go on a date, write a poem, hit a baseball, join the military, pay taxes, cast a vote, run for office, speak, or use a toilet. Their [cost of care](#) is over 1/4 trillion U.S. dollars annually and rising.

EPA scientists say [the epidemic began in 1989](#), the year the CDC [dramatically expanded the childhood vaccine schedule](#), multiplying infant exposures to neurotoxins like mercury and aluminum. [CDC's massive 1999 study of the VSD](#)—America's largest medical database—showed that children receiving the Hep B vaccine in their first 30 days had an [1135% increased risk for an autism diagnosis](#). CDC and Pharma knew at that moment that vaccines were causing the epidemic.

They hid the VSD study, closed the database to independent scientists and commissioned a sketchy cabal of tobacco scientists, grifters, [felons](#) and Pharma biostitutes to gin up dozens of [fraudulent vaccine studies](#) purporting to “prove that vaccines don't cause autism.” They blocked studies of all vaccines given to children under six months. Tony Fauci played a key role in the cover up. Fauci distributes [\\$5 billion annually in research grants](#) and assured that studies of autism's environmental causes never get funded. When in 2008 NIH's Autism Coordinating Committee voted \$16 million to [study the links between autism and vaccines](#), [Tom Insel killed those studies](#). Fauci and Insel have committed some of the most consequential criminal conspiracies in history. Children's Health Defense will bring these criminals to justice.

**[Connect with Children's Health Defense](#)**