Letter to Dr. Sanjay Gupta

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by <u>Robert F. Kennedy, Jr., Chairman, Children's Health Defense</u> April 16, 2020

Dear Sanjay,

Last week, your CNN producer, Matthew Reynard, notified me that CNN is featuring me in a documentary about "vaccine misinformation". As usual, Mr. Reynard did not point out a single factual assertion by me that was incorrect (I carefully source all of my statements about vaccines to government databases or peer-reviewed publications). CNN uses the term "vaccine misinformation" as a euphemism for any statement that departs from the Government / Pharma orthodoxy that all vaccines are safe, necessary, and effective for all people.

I respectfully point out that CNN and particularly you, Sanjay, are today among the most prolific broadcasters of 'vaccine misinformation.'

I have always admired you, Sanjay. Your obvious talents aside, you seem to be genuinely compassionate and to value integrity. Earlier in your career, you showed a courageous willingness to challenge Big Pharma's vaccine orthodoxies. However, I respectfully point out that CNN and particularly you, Sanjay, are today among the most prolific broadcasters of "vaccine misinformation". Over the last several years, I cannot recall seeing a single substantial CNN segment on vaccines that did not include easily verified factual misstatements. CNN's recent special, "Pandemic", was a showcase of erroneous assertions about the flu vaccine. Since I don't like to think that you deliberately mislead the public-particularly about critical public health choices–I have taken the time to point out some of your most frequent errors. I hope you will take time to read this. This critique has special relevance during the current coronavirus crisis, not to mention its important implications for the roles of government and press in a democracy. CNN and other media outlets treat CDC, NIH, and WHO pronouncements as infallible truths. In fact, regulatory capture has made these agencies subsidiaries of Big Pharma, and the lies that CDC has been telling us about flu are now muddying the debate over coronavirus.

Furthermore, of the mere 257 cases that could reasonably be blamed on the flu in CDC's mortality data, only 7 percent were laboratory confirmed cases of influenza.

1. CNN assertion: In your annual flu shot promotions, you routinely parrot CDC's estimates of overall flu deaths which have ranged in recent years from 36,000 for the 1990-1991 flu season to 80,000 for the 2017-2018 flu season.

Fact: The HHS's mortality and morbidity data-available on the <u>National Center for Health Statistics</u> (NCHS) website-show that CDC's (and CNN's) annual estimates are off by orders of magnitude.

NCHS data report the average number of mortalities attributable to influenza on death certificates is little more than 1,000. CDC devises its inflated estimate by deliberately conflating flu deaths with pneumonia deaths. This device is deceitful since most of these fatalities are unrelated to the flu (and therefore, impervious to flu vaccines). In 2005, the British Medical Journal (BMJ) Editor, Dr. Peter Doshi, published a comprehensive rebuke of CDC's annual ritual of exaggerating flu mortalities entitled "Dissecting CDC's Deception: Are US Flu Death Figures More PR Than Science?" Doshi accuses the CDC of purposefully inflating flu deaths to frighten the public into purchasing vaccines. To illustrate CDC's chicanery, Doshi observed that CDC's announced number of reported pneumonia and influenza deaths in 2001 at 62,034. Yet less than half of one percent of those were actually attributed to influenza. Furthermore, of the mere 257 cases that could reasonably be blamed on the flu in CDC's mortality data, only 7 percent were laboratory confirmed cases of influenza. That's 18 lab confirmed influenza cases out of 62,034 "pneumonia and influenza" deaths—or just 0.03 percent, according to HHS's own National Center for Health Statistics (NCHS).

Subtracting pneumonia, the true number of influenza-associated deaths from 1979 to 2002 averaged 1,348, according to the NCHS data. CNN routinely reports figures forty times this number.

Dr. Doshi charges the CDC with deliberately lying about annual flu deaths to "[work] in manufacturers' interest by conducting campaigns to increase flu vaccination". He warns that "by arbitrarily linking flu with pneumonia, current data are statistically biased."

By faithfully parroting CDC inflated numbers—with no due diligence—CNN has made itself complicit in this annual charade, making it difficult now to accurately assess the relative risk of COVID-19 as compared to flu and, therefore, rationally measure an appropriate response.

... 2010 meta-analysis of published influenza vaccine studies found that the influenza vaccination has no effect on hospitalization, and that there is no evidence that vaccines prevent viral transmission or complications.

2. CNN assertion: <u>CNN routinely promotes the flu shot</u> for everyone older than 6 months, proclaiming that the best way to protect against serious cases of the ailment "<u>is to get a flu</u> <u>shot</u>".

<u>Fact:</u> In reality, there is absolutely no scientific basis for the CDC's assertion that the influenza vaccine is the most effective way to prevent the flu.

The Cochrane Collaboration's comprehensive 2010 meta-analysis of published influenza vaccine studies found that the

influenza vaccination has "no effect" on hospitalization, and that there is "no evidence that vaccines prevent viral transmission or complications."

The Cochrane Researchers concluded in 2010 that the scientific evidence "seem[s] to discourage the utilization of vaccination against influenza in healthy adults as a routine public health measure."

Four years later, <u>Cochrane published a follow-up meta-</u><u>review</u> including dozens of more recent scientific studies and again concluded bluntly that the body of scientific data provides "no evidence for the utilization of vaccination against influenza in healthy adults as a routine public health measure."

In other words, despite CNN's relentless hectoring, there is no scientific evidence that all the <u>billions of dollars</u> <u>America spends on influenza vaccination</u> each year actually provides any health benefit, much less a net economic benefit—apart from the financial windfall to the four pharmaceutical companies that manufacture these vaccines—and who happen to be among CNN's top advertisers.

...[a study published in PNAS] found that influenza vaccination actually increased transmission of the virus, with vaccinated individuals shedding more than six times as much aerosolized virus in their breath than unvaccinated individuals.

3. CNN assertion: You and CNN frequently parrot CDC's claim that a flu shot reduces the chances that an individual will transmit the flu to others. *Pandemic* repeated this assertion. CNN offers this supposed benefit as the justification for school vaccine mandates.

Fact: However, in their 2010 systematic meta review of the literature, the Cochrane researchers found "no evidence that vaccines prevent viral transmission or complications".

Even more worrisome, <u>a study from January 18, 2018</u>, in

the Journal of the Proceedings of the National Academy of Sciences of the United States of America, PNAS, found that influenza vaccination actually increased transmission of the virus, with vaccinated individuals shedding more than six times as much aerosolized virus in their breath than unvaccinated individuals.

Those scientists were not altogether surprised by this finding explaining that "certain types of prior immunity"—in this case, the kind of immunity conferred by the vaccine as opposed to naturally acquired immunity—"promote lung inflammation, airway closure, and aerosol generation." They conclude that, "If confirmed, this observation, together with recent literature suggesting reduced protection with annual vaccination, would have implications for influenza vaccination recommendations and policies."

<u>4. CNN assertion</u>: CNN frequently repeats CDC's advice that <u>children should get the flu shot</u>, which you assure CNN's audience has been proven safe.

<u>Fact</u>: <u>A 2012 Cochrane review</u> looking at studies of influenza vaccination in healthy children found no *safety studies in children under age two*, and declared that safety studies were "*urgently required*".

Every influenza vaccine package insert contains warnings about the lack of safety studies in pregnant women and nursing mothers.

<u>5. CNN assertion</u>: <u>CNN also promotes CDC's recommendation</u> that all pregnant women get a flu shot.

Fact: CDC recommends the flu shot for pregnant women despite the fact that FDA-the agency charged with assessing vaccine safety-has refused to license the flu shot during pregnancy due to grave safety concerns. (Sanjay; I encourage you to confront FDA and make inquiries about this inter-agency conflict.) Every influenza vaccine package insert contains warnings about the lack of safety studies in pregnant women and nursing mothers.

<u>A 2014 Cochrane review</u> found that the number of randomized, placebo-controlled trials examining the safety and effectiveness of vaccinating pregnant women was zero.

A 2019 article by Alberto Donzelli in <u>Human Vaccination &</u> <u>Immunotheraputics</u>, asks the question, <u>"Influenza vaccination</u> for all pregnant women?" and argues, "So far the less biased <u>evidence does not favour it</u>". Donelli found that public health recommendations on flu shots during pregnancy had systematically overestimated "the vaccine effectiveness and safety"—and that the published science showed "an excess of local adverse effects and a tendency for serious adverse events with uncertain or very limited protection against influenza". Donzelli observes that flu vaccine trials in Africa and Asia have shown excessive infection and deaths in infants associated with flu shots during pregnancy.

Although the vaccination rate for elderly people had increased by as much as 67 percent from 1989 to 1997, there was no evidence that vaccination reduced hospitalizations or deaths. On the contrary, mortality and hospitalization rates continued to increase rather than decline.

6. CNN assertion: <u>CNN urges seniors to get their flu</u> <u>shots</u>. <u>CDC credits the vaccine</u> with a dramatic reduction in influenza-related deaths among the elderly.

Fact: The scientific community has thoroughly debunked CDC's claims that the flu shot reduces death among seniors.

Researchers from the National Institutes of Health (NIH) ridicule CDC's mortality claims in <u>a study published in April</u> <u>2005 in Archives of Internal Medicine</u> (now JAMA Internal Medicine). Those NIH researchers pointed out that, despite a dramatic increase in vaccination coverage among people aged 65 or older-from at most 20 percent before 1980 to 65 percent in 2001-pneumonia and influenza mortality rates "rose substantially during this period". The lead author of the 2005 NIH study, Lone Simonsen, was also coauthor with W. Paul Glezen of a <u>2006 commentary</u> in the *International Journal of Epidemiology* that reiterated the problems with the CDC's claims. "Although the vaccination rate for elderly people had increased by as much as 67 percent from 1989 to 1997, there was no evidence that vaccination reduced hospitalizations or deaths. On the contrary, "mortality and hospitalization rates continued to increase rather than decline".

The 2005 NIH study authors commented that this result was "surprising" since vaccination was supposed to be "highly effective at reducing influenza-related mortality"—an assumption underlying CDC policy that "has never been studied in clinical trials".

Similarly, <u>a 2008 review in Virology Journal</u>, observes that contrary to the CDC's claims of a great beneficial effect on mortality, "influenza mortality and hospitalization rates for older Americans significantly increased in the 80s and 90s, during the same time that influenza vaccination rates for elderly Americans dramatically increased."

In a 2013 BMJ commentary, Dr. Doshi asked, "what evidence is there that influenza vaccines reduce deaths of older people—the reason the policy was originally created? Virtually none…" This means that influenza vaccines are approved for use in older people despite any clinical trials demonstrating a reduction in serious outcomes."

"Perhaps most perplexing," Doshi added, "is officials' lack of interest in the absence of good quality evidence."

7. CNN assertion: You <u>frequently inform the CNN audience</u> that "the flu vaccine is safe, and significant side effects are very rare."

Fact: Actual injury rates are impossible to determine since flu shots are exempt from pre-and-post-marketing placebo studies required of other medicines, and because HHS's postmarketing surveillance system, the Vaccine Adverse Events Reporting System [VAERS], captures "fewer than 1% of vaccine injuries" according to a 2010 HHS-funded study. Nevertheless, some alarming metrics ought to give you pause when you offer these assurances to millions of viewers; Flu vaccines account for nearly $\frac{1}{4}$ of payouts for injuries by the Vaccine Injury Compensation Fund (VICA). The Vaccine Court has paid out nearly \$1 billion for injuries and deaths caused by flu shots.

GSK's vaccine, <u>Flulaval</u> lists, on its manufacturing inserts, over 45 chronic diseases and adverse reactions that FDA believes may be linked to the vaccine. These include a long menu of immune system, allergic, musculoskeletal, psychiatric, respiratory, skin, vascular, and neurological disease including seizure, paralysis, and syncope.

Australian data link the influenza vaccine during the 2009 – 2010 flu season to a <u>1-in-110 risk in children of having</u> <u>febrile convulsions</u>. The pandemic H1N1 influenza vaccine in Europe was associated with a 1-in-55,000 risk of developing narcolepsy. CDC acknowledges that the Pandemrix flu vaccine is associated with an "<u>increased risk of narcolepsy</u>".

A <u>2015 meta-analysis</u> published in the journal *Vaccine* has acknowledged "a small but statistically significant association between influenza vaccines, particularly the pandemic ones, and Guillen-Barre Syndrome (GBS)".

A <u>2004 study</u> in the Journal of the American Medical Association, *JAMA*, noted that GBS was "the most frequent neurological condition reported after influenza vaccination to the Vaccine Adverse Events Reporting System (VAERS)".

The 2010 Cochrane meta-analysis chided that the post-mortality studies found that a statistically significant association between the influenza vaccine and GBS "demonstrate the danger of commencing a large vaccination campaign without adequate

harms assessment."

... the flu shot increases the risks from coronavirus by 36%.
8. CNN assertion: On March 5, 2020, you and Anderson Cooper did a "Town Hall" segment, "Corona Facts and Fears", in which you fervently urged listeners to get the flu shot as the best way to keep healthy during the coronavirus pandemic. According to Anderson, "If you are concerned about

coronavirus, you should get a flu shot".

<u>Fact:</u> However, the only study we have been able to find assessing flu shots and coronavirus is a <u>January 2020 US</u> <u>Pentagon study</u> that found that the flu shot INCREASES the risks from coronavirus by 36%. "Receiving influenza vaccination may increase the risk of other respiratory viruses, a phenomenon known as "virus interference…'vaccine derived' virus interference was significantly associated with coronavirus…"

Many studies suggest the flu vaccine increases vulnerability to both flu infections and the remaining 85% -93% of non-flu respiratory infections.

<u>9. CNN assertion</u>: Sanjay, I've watched <u>your video</u> assuring the public that getting the flu shot cannot increase one's chances of getting the flu.

Fact: While that assertion has some meager support from a very small number of studies, the overwhelming weight of published science suggests that getting an annual flu shot can actually increase your risk of both flu and flu-like illnesses.

Only about 7 percent to 15 percent of what are called "*influenza-like illnesses*" are actually caused by influenza viruses. Many studies suggest the flu vaccine <u>increases</u> <u>vulnerability to both flu infections and the remaining 85%</u> -93% of non-flu respiratory infections.

<u>A 2011 study of healthy Australian children</u> published in the *Pediatric Infectious Disease Journal* found that seasonal flu shots increase the risk of flu by 73% and doubled the risk of non-flu respiratory infections.

Similarly, another 2012 randomized controlled trial published in *Clinical Infectious Diseases* found that influenzavaccinated children had no significantly lessened risk from influenza and also a higher risk of infection from noninfluenza viruses.

Furthermore, the flu vaccine depletes capacity to fight off future flu infections. In April 2010, a study (by Skowronek, et al) published in the journal *PLoS Medicine* reported the "unexpected" finding from four epidemiologic studies in Canada that receipt of the influenza vaccine for the 2008 – 2009 season, while apparently effective in reducing the risk of illness due to the seasonal flu, was associated with an increased risk of illness due to the pandemic influenza A (H1N1) "swine flu" virus during the spring and summer of 2009. The scientists suggested that this finding could be due to the difference in the way the vaccine affects the immune system compared with natural infection.

Under this hypothesis, repeated vaccination "effectively blocks the more robust, complex, and cross-protective immunity afforded by prior infection."

When unvaccinated people are infected with the seasonal influenza virus, they often develop a robust cell-mediated immunity that not only protects against that strain of the virus but is also cross-protective against *other* strains.

People who've annually received the influenza vaccine, on the other hand, "may have lost multiple opportunities for infection-induced cross-immunity."This is because the vaccine is designed to stimulate a strong antibody response, or humoral immunity, but does not confer the same kind of robust cell-mediated immunity as natural infection.

NIH researchers in their 2005 study also acknowledged the

superior effectiveness of *naturally acquired* immunity at reducing mortality, pointing out that senior citizens who contracted the H3N2 influenza pandemic infection demonstrated a robust immunity in subsequent flu seasons when compared to vaccinated individuals. *The sharp decline in influenza-related deaths among people aged 65 to 74 years in the years immediately after the 1968 flu pandemic* was most likely due to the acquisition of natural immunity to these viruses (from natural infections).

Another study published in 2011 in the Journal of Virology confirmed that annual influenza vaccination indeed hampers the development of a robust cell-mediated immunity. Annual vaccination for influenza, the authors concluded, "may render young children who have not previously been infected with an influenza virus more susceptible to infection with a pandemic influenza virus of a novel subtype."

A 2018 CDC study found there was an increase of acute respiratory infections caused by non-influenza respiratory pathogens following influenza vaccination compared to unvaccinated children during the same period. The authors recommended that potential mechanisms for this association warrant further investigation.

While most studies have looked at only one or two flu seasons, a CDC-funded study published in September 2014 in Clinical Infectious Diseases considered the long-term effects of repeated annual vaccination by looking at five years of vaccination data.

The CDC researchers found that the *more* that people had been vaccinated in prior years, the *less* effective the vaccine are at preventing the most recent season's dominant H3N2 virus.

As they put it, "vaccine-induced protection was greatest for individuals not vaccinated during the prior 5 years."

Essentially, the immune system remembers the original

infection and puts out a rapid defense against it, at the expense of developing a new but more appropriate response specifically to the currently infecting strain.

The CDC scientists warned that their data "raises relevant questions about the potential interference of repeated annual influenza vaccination and possible residual protection from previous season vaccination"; the authors called for further studies.

10. CNN assertion: One final observation about a different vaccine; In CNN's regular promotion of measles vaccines, <u>CNN</u> and Sanjay frequently claim that natural measles mortalities are 1-2 in 1000. Those estimates seem calculated to frighten people into taking a measles shot and to drive MMR mandates.

Fact: CDC's 1963 mortality and morbidity data show that prior to the introduction of the measles vaccine, improvements in nutrition and hygeine had already driven US measles mortality in U.S. to 400 per year, a population ratio of 1/500,000 and a death-case ratio of 1 in 10,000-about the same risk of dying from a lightning strike. Most of those mortalities were among malnourished children, many of whom suffered from intellectual disabilities. The best evidence suggests that measles mortalities would have continued to drop with the introduction of food stamps, W.I.C, and other childhood nutritional programs passed during the War on Poverty after 1964 to relieve hunger in impoverished communities.

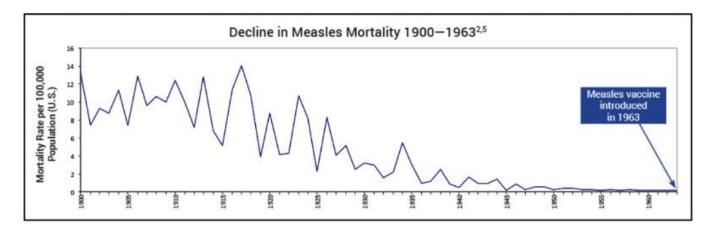


Figure 1: Measles death declined 98% from 1900 to 1963, before the measles vaccine was introduced.

Conclusion

In their 2010 meta-analysis, the Cochrane researchers accused the CDC of deliberately misrepresenting the science in order to support their universal influenza vaccination recommendation. Nevertheless, CNN continually broadcasts CDC pronouncements as gospel and, ironically, ridicules those of us who actually read the science as "purveyors of 'vaccine misinformation'".

Multiple comprehensive federal investigations and whistleblower declarations have documented the corrupt relationship between the CDC's Vaccine Branch and the four vaccine makers: Merck, Pfizer, Sanofi, and GSK. These include a 2000 report by the US Congress Government Oversight Committee , a 2009 report by the Federal HHS Inspector General, a 2014 letter by David Wright, Director of HHS Office of Research Integrity, and a 2011 letter to Carmen S. Villar, chief of staff for Tom Frieden, from an organization of CDC scientists calling itself "SPIDER".

In 2014, CDC's senior vaccine safety scientist, Dr. William Thompson, a 17-year CDC veteran, who continues to work for CDC, confessed in a series of depositions, and public and private statements, that his <u>CDC</u> bosses in <u>CDC's Immunization</u> Branch had systematically ordered him and other researchers to

destroy data and falsify study outcomes to hide CDC research linking vaccines to the exploding epidemic of childhood chronic diseases including autism. Doesn't the abundant evidence of corruption at the Federal health agencies amplify CNN's obligation to treat government pronouncements with skepticism?

[The CDC] stressed that it was especially important to inspire "concern, anxiety, and worry" among young, healthy adults who don't regard the flu with sufficient dread.

At a 2004 workshop for the Institute of Medicine, CDC unveiled a blueprint for the agency's annual campaigns of fear and deception in a PowerPoint entitled "'Recipe' for Fostering Public Interest and High Vaccine Demand". CDC's in-house P.R. flack Glen Nowak explained that it was necessary to use fear marketing to sell vaccines. CDC's campaign called for encouraging television medical experts (like Sanjay and Elizabeth Cohen) to "state concern and alarm" about "and predict dire outcomes" from the flu season. To inspire the necessary terror, the CDC planned to encourage its tame journalists to describe each season as "very severe", "more severe than last or past years", and "deadly". CDC's press flacks stressed that it was especially important to inspire "concern, anxiety, and worry" among young, healthy adults who don't regard the flu with sufficient dread.

As the CDC bluntly stated it, "Health literacy is a growing problem". In other words, the CDC considers it to be a problem that people are increasingly doing their own research and becoming more adept at educating themselves about health-related issues; Why? Because people who do their own research, read the science, and make informed choices rather than blindly following the CDC's recommendations are less likely to get the flu shot.

"Drug companies", Dr. Doshi observes, "have long known that to sell some products, you would have to first sell people on the disease." Only, in the case of the influenza vaccine, Doshi adds, "the salesmen are public health officials". These public health officials have, in turn, transformed trusted journalists and television doctors into Pharma marketing reps.

CNN likes to portray CDC's annual flu shot campaigns as an important public health ritual. The peer-reviewed science exposes CDC's campaigns as a mercantile propaganda project that is costly and may be injuring public health. CNN can fault CDC officials as the source of its "vaccine misinformation". But this is a weak gesture. "People in power lie", my father once told me. The function of journalism is to apply scrutiny and skepticism to the pronouncements of government officials and powerful corporations.

Finally, Sanjay, you and Anderson Cooper often comment with dismay on the monumental tragedy, for our democracy, of having a president who habitually lies. But presidents come and go; the more enduring tragedy, arguably, is that we cannot trust our news media to tell us the truth about vital health issues when advertising dollars are at stake. You scratch your head and wonder how all those Trump supporters don't share your indignation at President Trump's mendacity. One answer is that they are disheartened by once-trusted media outlets who have also set the precedent of routinely lying and violating the public trust, wounding in the process our democracy, public faith in critical institutions, and the health of our children.

Sincerely,

Robert F. Kennedy Jr President, Children's Health Defense

P.S. Just as a reminder, here is a 60 Minutes program from over 30 years ago. This is what journalism looked like before Pharma purchased the media.