

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

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*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](#)

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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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