“HOW WILL WE KNOW that a COVID-19 vaccine is safe?”
PERSPECTIVE

from 40 years as a pediatrician

Primary care, complex chronic disease, & medical education

Elizabeth Mumper, MD, IFMCP
Advocates for Children
Advocates for Families
In the foothills of the Blue Ridge mountains
According to a late August NBC News poll, ONLY 44% of Americans said they would get a COVID vaccine. When Americans who wouldn't take a vaccine for various reasons were polled, 58% were primarily concerned about side effects.
THE COVID RESPONSE has greatly affected the lives of individual Americans.

Recent data has shown that 60% OF SMALL BUSINESSES which were forced to close won’t reopen. These businesses and the employment they provided ARE GONE.

GOVERNMENT-IMPOSED LOCKDOWNS HAVE CAUSED a sharp increase in unemployment, alcohol consumption, domestic abuse, child abuse, depression, and more.
Yelp says 60% of US businesses that closed due to COVID-19 won't re-open

Nearly 16,000 restaurants have permanently closed since the pandemic started, and even more closures are on the horizon.
The issue of a COVID vaccine has become central to

GETTING BACK TO NORMAL

Children’s Health Defense feels that a proper analysis of the vaccine's safety is in order.
THE HIGHJACKING OF THE AMYGDALA BY FEAR
THE HIGHJACKING OF THE AMYGDALA BY FEAR
Vaccines sometimes get more credit than they deserve. They are not the silver bullet many believe.

United States: Disease Mortality Rates

Despite common belief, infectious disease deaths decreased 85-99%* before vaccines were introduced in the U.S. Diseases without vaccines – including scarlet fever, tuberculosis, cholera, and typhoid – followed the same trend.

WILL THIS BE A RUSHED VACCINE?

Government agencies like the CDC have been unduly influenced by political motives and big business.

In many ways the CDC functions as a vaccine company. Of its $11 billion annual budget, approximately $4.6 billion is used for the purchase of vaccines.

The vaccine regulatory agencies have economic interests in approving and disseminating vaccines, and this conflict of interest can motivate the agencies and their leadership to rush vaccines to market.
The public health authorities and vaccine manufacturers are scrambling to reassure the public regarding vaccine safety.

However, an examination by Children’s Health Defense reveals that there are outstanding problems in the assessment of vaccine safety that pertain not only to the COVID-19 vaccine candidates, but to existing, approved vaccines as well.
REMEMBER PUBLIC HEALTH AGENCIES SERVE YOU.

YOU HAVE THE RIGHT
to access any data collected by the public health agencies.

YOU HAVE THE RIGHT
to see and understand any analysis they do.

YOU HAVE THE RIGHT
to demand transparency and point out any scientific biases in their processes.

YOU HAVE THE RIGHT
to determine the costs/benefits of any recommendations they make.

And

YOU HAVE THE RIGHT TO DECIDE
whether to take the COVID vaccine or not.
Our bodies defeat infections in part because our immune system's genes are many and diverse. This genetic heterogeneity, however, has a downside: it means that we each respond differently to vaccines. For example, compared with women men routinely produce fewer pathogen-fighting antibodies after vaccination. A push to replace one-size-fits-all vaccines with genetically "personalized" immunizations that are safe and effective for everyone.

The idea of tailored vaccines is hardly new. Gregory Poland, the head of the Mayo Clinic's Vaccine Research Group, has been working to unite the fields of genomics and vaccinology—what he calls "vaccinomics"—for 22 years.
“WHAT DOES A SAFE and effective vaccine look like?”
WHAT ARE REASONABLE CRITERIA FOR A SAFE VACCINE?

We have many hundreds of doctors and scientists who’ve studied vaccines, their ingredients, and the physiological mechanisms in the body which are affected by those ingredients.

The following criteria, and the rationale for these criteria, are the result of their dedicated work.
1. THE VACCINE WOULD BE TESTED AGAINST A TRUE PLACEBO (inert saline)

Unlike drugs, which are required to be safety tested against an inert placebo, vaccines fall under the category of “biologics” and are not tested against an inert saline placebo.

As an example, Merck’s HPV vaccine was tested against a dangerous aluminum adjuvant that can trigger autoimmune disorders and not against an inert saline placebo.
A SAFE VACCINE WOULD BE TESTED FOR A LONG ENOUGH PERIOD TO PROPERLY TRACK ADVERSE EVENTS. In addition, post approval surveillance would be conducted to measure long-term effects.

Most vaccines are only monitored for side effects for a period of 2 to 5 days, as stated on the vaccine insert literature and can take months to years to be detected.

Autoimmune, neurodevelopmental, and chronic conditions can take months or years to be detected.

As an example, Merck’s hepatitis B vaccine given to one-day-old infants was only safety tested for 5 days.
WHY POST APPROVAL SURVEILLANCE IS SO NECESSARY:

Over the last 5 years, the Vaccine Adverse Event Reporting System (VAERS) has recorded an average of 45,000 adverse events each year.

According to the Dept. of Health & Human Services’ own records, that number only represents 1% of all adverse events due to the large majority going unreported or unidentified.

These adverse events need to be investigated so any causal relationship between the vaccine and these events can be identified.

Most people are not aware that vaccine injuries and deaths DO occur, and the government has actually paid out over $4.4 billion to the vaccine-injured through its National Vaccine Injury Compensation Program.
EXPERIMENTAL mRNA and DNA GENE TECHNOLOGIES should undergo years of testing before being used on the public.

This mechanism of action for a vaccine has never before been approved for widespread use in healthy populations.

DNA vaccines are designed to make permanent changes to an individual’s DNA.

mRNA vaccines have an “intrinsic” inflammatory effect and could lead to autoimmune events.

The unforeseeable consequences of this kind of experimentation may take years to manifest.

Some scientists suggest there should be a minimum of 10 years of careful research before any such technology is used on a wide-scale basis on the public.
* NOTE REGARDING COVID VACCINE CANDIDATES *

Both Moderna and Pfizer / BioNTech are using mRNA technology in their vaccines.

These gene technology vaccines have never before been approved in this context and there are no long-term studies.

It could take months or even years before the side effects of manipulating genetic machinery manifest.
VACCINES SHOULD BE FREE OF MERCURY, ALUMINUM AND NANO-METALS

We have 240 studies showing that mercury is not safe. There are no safety studies that show that it is safe when used in vaccines.

Due to safety concerns, the Public Health Service recommended removal of mercury from childhood vaccines. However, mercury is still present in many annual flu vaccines.

Aluminum is a known neurotoxin which can induce neurodevelopmental disorders, brain inflammation, and autoimmune conditions.

A two-month-old infant following the CDC schedule can receive a single-day dose of aluminum that exceeds the FDA’s maximum allowable dose by more than 50 times.

A 2017 Italian study showed that nearly all vaccines are contaminated with nanometals.
The literature confirming the toxicity of mercury goes well beyond its associations with autism. This document includes abstracts for over 240 studies that confirm the harmful effects of mercury from any source on brain cells, immune cells and other systems in the body. These include cellular, animal and human studies. There can be no justification for any intentional use of mercury given the extent of this literature.

The following pages are abstracts from the peer-reviewed 240+ studies.
* NOTE REGARDING COVID VACCINE CANDIDATES *

It appears that the GlaxoSmithKline / Sanofi vaccine will contain nano-aluminum, and that is certainly a major concern about this candidate.
VACCINES SHOULD BE FREE OF ADJUVANTS PROVEN TO BE DANGEROUS, including but not limited to squalene, aluminum, and PEG (polyethylene glycol).

An adjuvant is a substance added to a vaccine for the specific purpose of eliciting a stronger immune response. **Squalene is but one of many adjuvants used, and it was found to have harmful effects such as inducing autoimmune conditions and narcolepsy.**

PEG is another adjuvant that triggers a serious adverse immune response and can result in **anaphylaxis** (i.e. severe allergic reaction or shock).
Antibodies to squalene in Gulf War syndrome

Gulf War Syndrome (GWS) is a multisystemic illness afflicting many Gulf War-era veterans. The molecular pathological basis for GWS has not been established. We sought to determine whether the presence of antibodies to squalene correlates with the presence of signs and symptoms of GWS. Participants in this blinded cohort study were individuals immunized for service in Desert Shield/Desert Storm during 1990-1991. They included 144 Gulf War-era veterans or military employees (58 in the blinded study), 48 blood donors, 40 systemic lupus erythematosus patients, 34 silicone breast implant recipients, and 30 chronic fatigue syndrome patients. Serum antibodies to squalene were measured. In our small cohort, the substantial majority (95%) of overtly ill deployed GWS patients had antibodies to squalene. All (100%) GWS patients immunized for service in Desert Shield/Desert Storm who did not deploy, but had the same signs and symptoms as those who did deploy, had antibodies to squalene. In contrast, none (0%) of the deployed Persian Gulf veterans not showing signs and symptoms of GWS have antibodies to squalene. Neither patients with idiopathic autoimmune disease nor healthy controls had detectable serum antibodies to squalene. The majority of symptomatic GWS patients had serum antibodies to squalene.
PEG will be in the Moderna vaccine and is a major concern.

The presence of PEG could trigger a serious adverse immune response and can result in anaphylaxis (i.e. severe allergic reaction or shock).

"Published, peer reviewed scientific studies have documented that 72% of the US population has anti polyethylene glycol (PEG) antibodies, 8% of that group having high levels of these antibodies, putting them at risk for anaphylaxis. In the presence of PEG in the body, these antibodies cause an immune system reaction ranging from localized to systemic and of no danger to life threatening. Moderna's fast-track vaccine contains PEG as an essential part of the vaccine"
VACCINES SHOULD BE FREE OF AVIAN, BOVINE, PORCINE, MONKEY, AND MOUSE VIRUSES

The Oxford AstraZeneca vaccine candidate is using a chimp adenovirus spliced with other proteins.

Vaccines are often produced in animal serums and are therefore often contaminated with retroviruses from other animal species.

Many of these viruses, such as SV40 (simian virus 40), have been shown to be cancer-causing when introduced into the human body.

With the advances in medicine, there are better methods for producing vaccines which do not require animal serum cultures.

It bears noting that SARS COV2 (COVID19) is an animal virus that allegedly originated in bats.
VACCINES SHOULD BE FREE OF HUMAN DNA AND ABORTED HUMAN FETAL TISSUE.

A human fetal cell line dating back to the 1960s has been used in vaccines for the last 30 years.

An Italian study identified the presence of a complete, abnormal human genome of a male fetus in the MMRV vaccine. (Measles-Mumps-Rubella-Chickenpox vaccine)

In response to public concerns, it seems the practice of using human fetal tissue in the production of vaccines is gradually being phased out.
The Trouble with the world is not that people know too little; it's that they know so many things that just aren't so.

MARK TWAIN

Whenever you find yourself on the side of the majority, it is time to pause and reflect.

MARK TWAIN
New Data Shows DNA From Aborted Fetal Cell Lines in Vaccines

October 03, 2019

By The Corvelva Team

The Italian vaccine research and advocacy organization Corvelva recently released new data regarding the use of aborted fetal cell lines in vaccines. The research reports the results produced from the MRC 5 cell line analysis, particularly the one contained in GlaxoSmithKline’s tetravalent measles-mumps-rubella-chickenpox (MMRV) vaccine.

childrenshealthdefense.org/aborted-fetal-cells

THE CORVELVA TEAM SUMMARIZED THEIR FINDINGS AS FOLLOWS:

1 - The fetal cell line was found to belong to a male fetus.

2 - The cell line presents itself in such a way that it is likely to be very old, thus consistent with the declared line of the 1960s.

3 - The fetal human DNA represented in this vaccine is a complete individual genome, that is, the genomic DNA of all the chromosomes of an individual is present in the vaccine.

4 - The human genomic DNA contained in this vaccine is clearly, undoubtedly abnormal, presenting important inconsistencies with a typical human genome, that is, with that of a healthy individual.

5 - 560 genes known to be associated with forms of cancer were tested and all underwent major modifications.

6 - There are variations whose consequences are not even known, not yet appearing in the literature, but which still affect genes involved in the induction of human cancer.

7 - What is also clearly abnormal is the genome excess showing changes in the number of copies and structural variants.
VACCINES SHOULD BE FREE OF RFID BIO-CHIPS AND NANO TECHNOLOGY AGENTS

Bio-chips and nano-technology agents could be introduced to the body via vaccines for the purpose of creating a communications interface between a person's biology / physiology / psychology and outside technologies.

This is the new frontier being explored by tech companies and military research agencies such as DARPA.

Polling data shows that more than 70% of the American public is against this merging of biotech, nanotech, and gene editing in humans.
FDA Nears Approval of Injectable Biochip Implants for COVID Detection, Linked to Computers

The Department of Defense, and the Bill and Melinda Gates Foundation, have partnered with a Silicon Valley company, Profusa, to implement a technology which could control our minds and bodies. What may seem like science fiction, is in fact happening in real-time.

A permanent chip made of an advanced material called hydrogel irreversibly ties humans to the Internet “cloud.” The chip, about the size of a grain of rice, provides feedback to a database on changes in body chemistry and other biometrics. The company says technology will be used to detect COVID in the general population, before symptoms show.

The latest revised CDC overall survival rate for the COVID virus is 99.8%, versus 99.9% for the common flu. Nevertheless, nearly 150 days after governments proclaimed that 15 days of “lockdowns” and social distancing would be necessary to “flatten the curve” so that hospitals would not be overwhelmed, US governors still exert emergency powers based on the announcement of “new cases.”
* NOTE REGARDING COVID VACCINE CANDIDATES *

Independent testing would need to be conducted to identify the presence of RFID bio-chips or nano-technology agents.

It is highly unlikely that these agents would be listed on the vaccine insert under “ingredients.”
THE LIABILITY PROTECTION PROVIDED TO VACCINE MAKERS creates perverse incentives to rush the vaccine and ignore safety concerns.

Vaccine makers need to bear the primary responsibility and financial liability for ensuring that their products are safe.

Most people are not aware that vaccine injuries and deaths DO occur, and the government has actually paid out over $4.4 billion to the vaccine-injured through its National Vaccine Injury Compensation Program.
* NOTE REGARDING COVID VACCINE CANDIDATES *

Due to the Public Readiness and Preparedness Act (PREP Act) of 2005, even if one is severely harmed by a COVID vaccine, the individual has no ability to sue the vaccine makers (pharmaceutical companies).

They’ve been granted immunity.
CONCLUSIONS

Despite the safety assurances of public health authorities, we believe that these 9 reasons constitute valid outstanding safety concerns. The inescapable conclusion is that existing safety measures are simply inadequate.

According to a 2011 peer-reviewed study in Academic Pediatrics, 54% of American children have at least 1 of 20 different chronic health conditions.

There is a strong possibility that these trends are a result of the current vaccine schedule for children.
Public health authorities have repeatedly ignored these 9 vaccine safety criteria. We consider such an oversight to be unethical and inadequate to protect the health of our children.

In contrast, there is an ever-growing body of evidence showing that denial of each of these points has contributed to an epidemic of autism, neurodevelopmental disorders, autoimmune conditions, chronic health conditions, and more.
THE COVID VACCINE CANDIDATES
At this stage there is very little transparency regarding the vaccines being tested and their ingredients. The public may not discover a vaccine’s ingredients until the vaccine is produced and we have the opportunity to read the product inserts.

Even then, it would only be through independent testing labs that we would be able to determine the presence of substances not listed on those inserts, such as animal retroviruses, human fetal tissue, nano-technology, or sterilization agents.
MODERNA THERAPEUTICS

CANDIDATE 1
(in phase 3 trials)

- mRNA technology
- contains the adjuvant PEG (polyethylene glycol)
- In the first phase of human trials 100% of participants in the medium and high dose groups had some form of adverse event. 21% of participants in the high dose group had a serious adverse event.
BIONTECH & PFIZER

CANDIDATE 2  
(in phase 2/3 trials)

• mRNA technology
• contains the adjuvant PEG (polyethylene glycol)
• Working on 4 different vaccines concurrently
• no second dose was given in one trial due to “unsatisfactory tolerability”
the trials were suspended temporarily due to two severe adverse events, one case of transverse myelitis and one case of multiple sclerosis (which has since been dismissed as coincidental)

use of a genetically-engineered chimp adenovirus

the meningitis vaccine (documented to have some of the most pronounced side effects) was used as the placebo.
ABOUT TRANSVERSE MYELITIS

Transverse myelitis is an inflammatory disease process of the spinal cord.

It is a common vaccine side effect and is listed on the vaccine inserts of 10 different vaccines.

Three different hepatitis B vaccines for one day-old infants and Merck’s HPV vaccine all list “transverse myelitis” as a possible side effect.

One well-documented case of transverse myelitis from vaccines was the case of Colton Berrett, who as a healthy, athletic teenager developed the condition after administration of Merck’s HPV vaccine.
In the last two decades, the Vaccine Injury Compensation Program has awarded compensation on 266 post-vaccination cases of transverse myelitis with total awards of $155 million, including estimated annuities. 80 more cases are still pending.

Transverse myelitis is one of several autoimmune illnesses affecting the nervous system linked to vaccines. Others include Guillain-Barré Syndrome (GBS), Multiple Sclerosis (MS), Myasthenia Gravis (MG), Acute Disseminated Encephalitis (ADEM) and Chronic Inflammatory Demyelinating Polyneuropathy (CIDP).

Following the 1976 Swine Flu vaccine program, an untested flu vaccine was administered to 46 million Americans resulting in 4,000 claims amounting to 3.5 billion dollars in damages. Two-thirds of the claims were for neurological damages such as Guillain Barre' and and even death.
JOHNSON & JOHNSON
CANDIDATE 4
(in phase 1/2 trials)

• genetic splicing of adenovirus with coronavirus spike protein
SANOFI & GLAXOSMITHKLINE

CANDIDATE 5
(in phase 1 trials)

• use of a genetically-engineered virus

• AS03 adjuvant contains nano-aluminum
THERE ARE ANOTHER 8 MANUFACTURERS which have vaccines in the PRECLINICAL PHASES of testing.

- It is noteworthy that 4 of those 8 are using mRNA technology.
* ADDITIONAL NOTES REGARDING COVID VACCINE CANDIDATES *

Animal trials were skipped over, and this is an important stage where you can identify issues like inflammation. Animal testing is being done in tandem with human testing.

There is a potential for “pathogenic priming” by a vaccine. Also referred to as “immune enhancement” or “antibody-dependent enhancement,” this is where a vaccinated person, after later being exposed to the same virus, has the risk of exhibiting an extremely exaggerated and sometimes deadly immune reaction.

The PREP Act of 2005 prohibits one from suing vaccine makers or the government for vaccine injury.
The Nuremberg Code of 1947 is explicit in its guidelines, stating that even if an action is for the greater good of society, voluntary consent is absolutely essential.

Any mandatory, government-imposed measure operates on a presumption of safety. However, it is clear at this stage that a COVID vaccine may not be safe.

Any government-mandated action must provide legal remedy for harm or injury. However, the PREP act of 2005 prohibits a vaccine-injured individual from suing the vaccine makers (pharmaceutical companies).
THE IMMUNE SYSTEM IS COMPLEX AND REDUNDANT

**INNATE IMMUNITY**
- invariant (generalized)
- early, limited specificity
- The first line of defense

**ADAPTIVE IMMUNITY**
- variable (custom)
- later, highly specific
- “remembers” infection
HOW TO DEVELOP IMMUNE RESILIENCY

Optimal Vitamin D levels
(more than not deficient)

Generous Vitamin C
(excellent antiviral and antioxidant)

Zinc & Selenium
Omega 3 essential fatty acids
bioflavonoids like curcumin

Avoid pro-inflammatory foods,
especially sugar and processed foods

Spend time in nature

Stress management resiliency

Supportive relationships
Integrative Medicine Research Journal: Special COVID-19 Issue

September 9, 2020 by Ian Stewart

The Sept. 2020 special edition of the Integrative Medicine Research Journal is dedicated exclusively to COVID-19 research. For your ease of use, we’ve compiled all the articles here in a list. Please click through to each article, all are open access.

Editors Drs. Myeong SooLee, Eunhye Song write: "Given these diverse contributions, this special issue addresses and brings together the current and traditional knowledge and insights together. There is a growing international recognition and collective understanding of the integrative and complementary medicine for the treatment of COVID-19 as supported by the included articles in this special issue. We are in the middle of rapidly changing this special issue."

todayspractitioner.com/covid-19/integrative-medicine-research-journal-special-covid-19-issue/
SAFE VACCINES
What We Can Do
6 STEPS
The public demands a safe Covid-19 vaccine. And that’s just the first step.

What many really want is a safe vaccination program for everybody, for you and me, for children, for your grandchildren.

This desire is common to all of us, to both those who are pro-vaccine and to those who’ve voiced concerns about vaccines.

We can work together to make a safer vaccine program for everyone.

We at CHD have been looking at the vaccine safety issue for years, and there are legitimate scientific concerns that need to be addressed.

It is time for medicine and public health to address them.
1. **Vaccines should be subjected to a scientifically rigorous approval process** that addresses all the points of concern that were just raised.

2. **We need to remove conflicts of interests from those involved in the vaccine approval process.** There needs to be a separation between those making vaccine recommendations and those looking at the vaccine safety issue.

3. **We need acknowledgement from both medical and public health authorities that vaccine injury exists and that clear steps will be taken to investigate their causes.** The denial of vaccine injury by authorities in order to protect public health policy and the vaccine program is grossly unethical.
4. **We need systems that can actually measure the true extent of vaccine adverse events and vaccine injury in the public.** The existing system is inadequate to safeguard the public trust. The existing systems, **VAERS – Vaccine Adverse Event Reporting System and VSD – Vaccine Safety Datalink**, need to be automated.

5. **Government needs to support the fully-informed consent and individual right to refuse vaccination.** This is an inalienable right that neither government nor public health has the authority to take away. This is especially true given the known problems in vaccine safety assessment. **Coercive measures** for encouraging vaccination, such as restricting government benefits, access to public schools, and the right to travel also have no place in a free society.

6. **Government-granted immunity for vaccine makers must be rescinded.** If a vaccine manufacturer can’t offer a vaccine to the public without liability protection, then it has no right to offer one at all!
These concerns can and must be addressed.

We at CHD will organize a charge of like-minded organizations to push for these safety changes and for vaccine safety reform.
Please Remember...

There are outstanding safety concerns that need to be addressed.

There are tens of millions who think like you do about this issue.

Ultimately, **YOU HAVE THE RIGHT TO DECIDE** whether to take the COVID vaccine or not.
PLEASE JOIN THE VACCINE SAFETY MOVEMENT.

Visit us at the Children’s Health Defense website: 
childrenshealthdefense.org/safevaccines

if you’d like to watch this presentation and its links.