

OPINION: COVID VACCINE NOT SAFE

By Russell Blaylock, MD (/taxonomy/term/1295), **38,836 Reads**

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THE VAERS program (Vaccine Adverse Events Reporting System) is a CDC-connected program designed to record injuries from vaccines. It is a self-reporting system, but every claim of injury is carefully checked by VAERS personnel for accuracy. Unfortunately, VAERS is a deceptive reporting system. I say deceptive because **three separate studies found massive under-reporting of complications to the VAERS system (99% of complications are never reported).**

Since the Covid-19 vaccines have been released under the emergency use authorization act (EUA) as an experimental, and mostly untested, set of vaccines, we have seen a dramatic rise in reported deaths and serious injuries caused by these “vaccines”. In fact, since VAERS data was first released, deaths caused by the vaccines have increased by almost 1,000 deaths per month. **The last figures, as of June 25th, 2021 recorded 9,049 Covid vaccine-related deaths, which is an increase of 2,000 deaths in just one week.** This indicates that there has been a dramatic acceleration in vaccine-related deaths. **Prior to these vaccines, deaths from all vaccines combined, per year were around 350 people.** Despite the mass, unprecedented number of vaccine-related deaths, the program continued unabated.

During this same period, 34,065 serious complications have also been reported secondary to these vaccines, up 2,825 cases within the previous week. VAERS reports that 5,852 of these people are permanently damaged. Over 54,551 people suffered such a significant reaction to the vaccines that they ended up in the emergency room. **Of the injuries 6,898 were considered life threatening.** If we even use a very low figure of underreporting of 10% (rather than the 99% true figure) that would mean we actually have 90,000 deaths and 340,000 serious injuries, 58,852 of whom are permanently injured. **Steve Kirsch, a researcher, stated in a position paper that his examination, confirmed by three studies, concluded that possibly 25,800 Americans have died as a result of the vaccines.** Because of poor record keeping, we just don't have an accurate

number yet.

Even more shocking is the data from vaccinated 12 to 17-year-olds. There were 12,674 adverse events, including 720 rated as serious. Thirteen of these teenagers died. Some 1,792 teenagers suffered a serious anaphylactoid reaction to the vaccines and could have died. There were 300 cases of myocarditis (heart inflammation) and 52 reports of blood clotting disorders. These young people having developed myocarditis, have an uncertain future, many will be physically limited in their activities, and some will, later in life, undergo cardiac decompensation and a life dealing with arrhythmias. When we look at the real science, individuals in this age group very rarely even develop significant symptoms from the covid-19 virus if infected, and they do not transmit the virus. So, one must ask—why are they being vaccinated? Political pressure and profits for the vaccine makers—to the tune of tens of billions of dollars, are the most obvious answers.

We were told, when the vaccines were being developed, that this was all to protect the most vulnerable, the elderly with at least two major chronic diseases. Now we learn that in fact the number one victim of the vaccines is indeed these very same people. The average age of death linked to the vaccines was 74.3 years. The frightening difference between the vaccine damage is that far more young people are being damaged and killed by the vaccine than the actual virus itself.



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To get a perspective on the enormity of this vaccine disaster, a comparison of the deaths from the flu vaccine demonstrates that a total of 750 people died from flu vaccine complications over a 30-year period. In just six months, since the release of these vaccines, 9,049 people have died from Covid-19 vaccine complications. It is also telling that a recent survey by the AAPS of 700 physicians found that almost 60% have not been fully vaccinated. Of those responding 80% said "I believed the risk of shots exceeds risk of the disease." This survey was well over twice as large as the AMA's which claimed that 96% of practicing physicians were fully vaccinated. Half of Fauci's own staff have not been fully vaccinated. Dr. Robert Malone, the person who invented the mRNA vaccine technology, now warns people not to take the vaccine because of its inherent dangers.

There is an even greater disaster in the making related to this vaccine and that is the vaccination of pregnant women and young women hoping to get pregnant. A recent study appearing in the New England Journal of Medicine conducted an evaluation of the safety of these vaccines in pregnant women. This article represents the incredible corruption of the medical elite. In the report they looked at the rate of spontaneous abortions (loss of the baby before 20 weeks of development) in the vaccinated women as compared to the normal rate of spontaneous abortion, and falsely reported it to be no more than normally seen in unvaccinated women. An astute physician recognized the deception and when the real numbers were recalculated the results were shocking to say the least.

According to the accurate data, the chances of a women losing her baby after being vaccinated sometime up to the 20th week of her pregnancy was an incredible 82 percent. Looking at this another way, if a woman is vaccinated before the 20th week of her pregnancy there is less than an 18% chance that

her baby will survive. Yet, the President of the American Academy of Obstetrics recommended that all pregnant women get vaccinated. No exceptions were discussed.

I reviewed the data in the New England Journal of Medicine article and confirmed that the data had been incorrectly stated. What was done was the authors added 700 cases of pregnant women vaccinated during their third trimester, not the first. This diluted the percentage drastically. I recalculated the numbers myself using the correct data, and the rate of miscarriages (spontaneous abortions) was indeed 82 percent. They also admit in the article that their data on miscarriages third trimester) was poor and could be much higher. Further, they confirmed that the VAERS reporting system significantly underreported complications from the Covid-19 vaccines. A biodistribution study done by Pfizer itself demonstrated that the highest concentration of the spike protein-producing nanolipid carriers was in the ovaries, which explains the high spontaneous abortion rate and the possibility that vaccinated young women may not be able to get pregnant in the future.

In my opinion, having studied extensively the scientific literature on the effects of immune stimulation during pregnancy, is that no pregnant woman should be vaccinated period. Ivermectin, which has a higher effectiveness than any of the vaccines, is safe to use in pregnant women. At least 18 studies have shown conclusively that ivermectin is highly effective against all cases of Covid-19 and can prevent the infection as well.



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