Is it safe? What the record-level data says

Steve Kirsch stevekirsch.substack.com

Nov 30, 2023 MIT

About me

MIT '78 SB/SM EECS

Former high-tech serial entrepreneur

Featured on <u>60 Minutes</u>

Written over 1,500 articles on vaccines

Today: Misinformation superspreader (#1 search result on Google)





funder to misinformation superspreader

Oct 5, 2021 — One Silicon Valley entrepreneur thought he could beat the odds. Medium banned him for misinformation. "Medium revoked my account for life. My ...



Benefits of calling for **data transparency**

Lifetime ban: LinkedIn, Medium, Twitter (2x), Wikipedia Stripped of National Caring Award (Wikipedia) Friends abandon you Country club won't take you Corporate Board tells you to shut up or leave Your Scientific Advisory Board guits en masse You are censored on all platforms YouTube removes your videos YouTube cancels anyone who has you on their show People call you a wack job behind your back MIT won't let you speak in your own auditorium



We have an old saying in Delta: Don't get mad. Get even.

National Lampoon's Animal House (1978)

"Revenge of the Nerd"

THE FOLLOWING PRESENTATION HAS BEEN APPROVED FOR

NO AUDIENCES

BY THE CENTERS FOR DISEASE CONTROL (CDC) & THE FOOD & DRUG ADMINISTRATION (FDA)

THE TALK ADVERTISED HAS BEEN RATED



www.cdc.gov

www.fda.gov

6.123 Vaccine safety 101 Lecture #1 The basics (in 7 slides) 12 units

Professor Kirsch

All-cause Deaths per day after a specific dose of a safe vaccine given at a random time to a fixed size cohort

Deaths per day (Dpd) since injection Slope downward rate depends on age of cohort injected. All ages is ~ 0.8% drop/yr. Medicare is 5% drop/yr from baseline (t_0). Y-axis intercept is lower for younger cohorts, higher for older cohorts. If vax is not given evenly over time, can be ripples in the line (above and below) based on background events (see red)

Days after injection

Dpd

Cheat sheet

For a safe vaccine, the all-cause mortality (ACM) line always slopes downwards. Always. Death in a fixed size cohort is a Poisson distribution where the mean goes down monotonically. This is because the overall death rate per year always exceed the increase in death rate over 1 year.

Days after injection

A "safe and effective" vaccine

- 1. Reduces ACM fluctuations caused by that specific virus
- 2. Reduces the y-intercept increase during pandemics (brings it closer to the normal baseline)



Temporal healthy vaccinee effect (HVE) (gone after ~21 days)

Deaths per day (Dpd) NB: HVE is non-existent if most of the cohort is not in hospital/hospice (e.g., <60 yr old)

Days

"Running out of time to die"



"50% of people leaving for Dose 3"





Mortality rate (Deaths per 100K person-years)



Any questions?

MIT Institute Professor Robert Langer did NOT want to see the data I'm going to show you tonight.



Your vaccine is killing people. Do you want to see the data?



Steve Kirsch To Robert Langer (rlanger@mit.edu)

) This message was sent with High importance.

I'd love to show it to you before my talk.

I'll be showing it to the MIT community on Thursday at 6pm in the Kirsch Auditorium.

You can reach me at

-steve

Do you know why?

If he sees the data, he has a duty as a Board member of Moderna to immediately stop the shots

Otherwise, he could be held criminally liable if they don't stop the shots (gross negligence manslaughter, corporate manslaughter, ...)

The PREP only protects from civil liability, not criminal liability

As soon as any of these companies are shown that these are "kill shots," they have to act.

That's why both Moderna and Pfizer refused to look when a member of the medical news media offered to show it to them

Does anyone want to take their place today and defend the COVID vaccine?



US Medicare Gold standard data Never before been made public



Same time period, same population, different vaccine.

This is a typical unsafe vaccine (unsafe due to day 0 kill

rate)

Deaths per day

ACM 46.5% @365 from baseline



Pneumococcal vaccine

This is a very unsafe vaccine. Slope goes UP monotonically for 365 days straight! **Unprecedented.**

ACM @365 days is 25% from baseline @ 21 days



COVID vaccine

Nobody can debunk that slide. NOBODY.

They all ignore it.

It's a third-rail. If you touch it, you lose the debate.

It didn't save anyone

It killed people.

No doubt about it.

None whatsoever.

Should be **GRAU**

"Generally regarded as unsafe"



COVID vaccine

Curves for other doses of COVID vaccine also slope UP over first 300 days.

WTF?!?! It is supposed to slope down.



I showed the world this in Feb 2023. Nobody cared.



Steve Kirsch's ...

Dashboard 🗸



GAME OVER: Medicare data shows the COVID vaccines increase your risk of dying

This is why the CDC has NEVER used the Medicare data to prove the vaccines are safe. And this is why NOBODY in mainstream medicine wants you to see this data. EVER. They ALL want it hidden. FOREVER.



STEVE KIRSCH

FEB 25, 2023




Do you know why they never spotted any safety signals?

They were looking for this:



Time since shot



Time since shot

Including me!

The most damaging curve I saw. Know why? This is people who got exactly 2 shots



800

We can estimate Baseline1 using Baseline2!



We also have anecdotes.

In a world where information is being withheld or distorted, anecdotes are often the best source of truth.

Here's an example...

Jay Bonnar, 57 year old high tech sales exec

15 friends died "unexpectedly" post-vax. All dead were vaxxed. Prior to the vax rollout, 1 "unexpected" death in 30+ years

4 died within 24 hours of vaccine 3 of the 4 were < 30 years old

poisson.sf(14, .1) --> 7.0e-28

 \rightarrow the vaccine KILLED his friends. GUARANTEED.



Jay Bonnar, 57 year old high tech sales exec

15 friends died from the vaccine0 friends died from COVID

Let that sink in...

>>> poisson.cdf(0,15) 3.0590232050182594e-07



 \rightarrow The cure was far worse than the disease

Poisson distributions never lie. Trust 6.041.

"But we're never going to learn about how safe this vaccine is unless we start giving it. That's just the way it goes."

– Dr. Eric Rubin

Editor-in-Chief New England Journal of Medicine

Adjunct professor of immunology and infectious diseases Harvard University FreeThinkerFitness @FreeThinkerFit · Apr 20

Reminder FDA Approval Process: "We're never going to learn about how safe this vaccine is unless we start giving it." And now billions of humans have had these dangerous experimental "vaccines" injected into their bodies.



Well, we now have the safety data.

Just one small problem...

Nobody in public health has ever has ever looked at it seriously

Nobody ever has ever publicly released the record-level data for any vaccine

So we couldn't look at it either



So nobody would be able to know the ground truth about any vaccine or pharmaceutical

But that changed for me on Nov 9,

Thanks to a whistleblower @ New Zealand Ministry of Health

Ministry of Health - Manatū Hauora 7,727 posts



Ministry of Health - Manatū Hauora 🕸

@minhealthnz

Kia ora. The Ministry of Health - Manatū Hauora works across the health sector to deliver better health outcomes for New Zealanders. IN AN EMERGENCY, CALL 111

287 Following 49.5K Followers



M.O.A.R (Mother Of All Revelations) The irrefutable data on New Zealand's excess deaths from the C_v_d j_bs.https://nzloyal.org.nzhttps://freenz.subs tack.com

www.youtube.com

YT - <u>https://www.youtube.com/watch?</u> <u>v=IO-ywRHhrIc</u>

Do you want to see the video?

Me too! But Community Guidelines are way more important than saving lives. YouTube removed it < 5 min after posting.



Watch on Rumble



We now have the data.

That nobody was ever supposed to see

And I just now made it available for anyone in the world to download



Along with free data analysis tools you need

It is record-level data. Official government data. Gold standard data. Ground zero data.

It does not get any better than this.

For professional misinformation spreaders such as myself, this data was the Rosetta Stone.

It can statistically PROVE whether a vaccine is safe or not.

The results are objective and easy to interpret.

Have you ever wondered why it is always kept hidden?

Today, for the first time in history, I will show you why.

I'm going to show you what the NZ record-level data says about the COVID vaccine

It's not pretty

Over 13 million people were killed worldwide.

For no benefit.
Whatsoever.

With one exception...



The shots made it more likely that you'd die if you were elderly... the very population the shots were

designed to protect.

A safe vaccine should have a flat deaths/day profile (FLU)



77

A safe vaccine should have a flat deaths/day profile (PCV)



COVID vaccine All ages, all doses

Death rate (deaths per 100K person years)

MR vs week from shot given



Weeks since day of shot

Could anything be happening in the background to explain this?

NFW

You can vary **all 4 independent variables** and you see the same thing



Mortality rate doubles for the elderly, but flat for the young over the exact same 2.5 yr calendar period

MR vs. month since 5/1/2021 1,400 1,200 1,000



80 to 90 year olds

<60 year olds

Note: there are artifacts at the start and end of the plots. Those were expected and were explained at the start of the presentation.

The start is due to the fact we only have vaccinated records, so we have to build up over time. The end is running out of time to die.



"The NZ data confirms what we saw in the most recent ONS data.

There is now no doubt the vaccine is increasing the mortality rate in older people."

Norman Fenton

Professor of Risk Information Management Queen Mary University of London



"I think that you've made a very strong case that the Covid genetic vaccines are associated with appreciably increased mortality rates for 6-12 months after each dose. This is particularly compelling in people over age 65. I am not aware of actual evidence that the increased post-vaccine mortality that you've shown has a different cause."

Harvey Risch, MD, PhD

Professor Emeritus and Senior Research Scientist in Epidemiology (Chronic Diseases); Yale Institute for Global Health

h-index: **110**

By how much??

Avg over 5 doses, all ages is ~100 excess deaths per dose per **100K person-years**.

 \rightarrow ~1 excess death per 1,000 doses on average.

	dose start	1			
	dose end	5			
	age start	0			1,0
	age end	140			
	date start	1/1/2021			1,4
	date end	12/1/2023			1,:
	week start	0			
	week end	200			1,0
	date = observa	tion date			
	week = weeks	since most recen	t shot given		
	MR = mortality	rate in deaths pe	er 100K pers	son years	
	If the number is in red, it means you can				1
	modify it to aff	ect what is show	n in the		
	tables and the	chart below.			
1 .1 . 6	10				
	st 12 months after sl			30195	
	years in first 12 mor			956	
	ge mortality rate (pe	er 100K person ye	ears)	1,153	90
	th rate estimate			1,026	80
Average exce	ess death rate cause	ed by a dose		127	70
Note: doses	are not equally dang	gerous. This is th	e average		60 50
elevation in	death rate for a dos	e.			40
					30
					20
					10
-					
1					







So now we know why there was an unprecedented increase right after the vaccines rolled out in 2021.

It was the vaccine causing the excess deaths.



Mary Talley Bowden MD liked Ben 📀

@USMortality

There's definitely a signal in the NZ death/CMR data:



Subscribe

Here are the official number of deaths each year in New Zealand and a calculation of the excess deaths

А	В	С	D	E	F	G	
Year	Deaths in N	NZ (thousa	nds)				
2017	33.34						
2018	33.225						
2019	34.26						
2020	32.612						
2021	34.932						
2022	38.574						
2023	37.569		(12 months ending September)				
	111.075		Years 2021	-23			
	100.82		Years 2017	-2019			
	10.25		excess dear	ths in NZ sir	nce vax prog	gram began	

Killed estimate

13M people worldwide

675K Americans

Conservative estimate



Killed estimate

13M people worldwide

675K Americans

Conservative estimate



People who have "Truth" in their name 🤣 🤣 🤣



Ben ♀ @USMortality · 10h There have 850k excess deaths in the US, since vaxx start, so it's possible. I'm not saying that it's the case. I'm only talking about possibilities.



92

The same thing is happening in other countries

Denis Rancourt estimated 17M killed worldwide by the COVID vaccines

We are in the same ballpark.

UK ONS data ACM significantly higher in the vaccinated for 20 consecutive months.

Nearly double in some months!

Source: UK ONS (Table 2)

		Vaxxed		Unvaxxed			
Year	Month	Person- years	ASMR 2 doses	Person- years	ASMR Unvax	Delta	
2021	April	73,434	4145.4	5,236	13568.8	9423.4	
2021	May	165,856	5036.9	5,087	9770.5	4733.6	
2021	June	172,013	5659.2	4,723	8818.5	3159.3	
2021	July	179,637	6374.4	4,735	10128.4	3754.0	
2021	August	180,407	6434.4	4,632	10057.5	3623.1	
2021	September	171,143	7015.9	4,419	10076.3	3060.4	
2021	October	93,479	11902.9	4,505	9633.8	-2269.1	
2021	November	28,792	23821.4	4,296	11249.7	-12571.7	
2021	December	11,065	36091.2	4,366	13096.9	-22994.3	
2022	January	6,149	35733.6	4,295	11804.6	-23929.0	
2022	February	4,786	24097.8	2,850	9418.8	-14679.0	
2022	March	4,974	20502.7	4,239	9516.9	-10985.8	
2022	April	4,439	17446.8	4,082	8876.8	-8570.0	
2022	May	4,172	14802.2	4,205	6732.9	-8069.3	
	June	3,804	12606.0	4,066	5882.0	-6724.0	
2022	July	3,805	12040.2	4,200	8171.6	-4777.6	
2022	August	3,754		4,194	6633.7	-4778.7	
	September		11531.6	4,061	5990.8	-5540.8	
2022	October	3,729	11693.8	4,199	7807.5	-3886.3	
2022	November	3,606	10761.8	4,060	7506.9	-3254.9	
2022	December		16338.3	4,188	9686.9	-6651.4	
	January	3,693	14401.2	4,174	9123.5	-5277.7	
	February	3,332	12663.2	3,770	7710.4	-4952.8	
	March	3,685	10484.9	4,173	7363.4	-3121.5	
2023		3,566	10104.6	4,043	7019.0	-3085.6	
2023		3,686	10256.2	4,184	5377.3	-4878.9	
				t least 21 da	ays ago 80	10 89	
			All-cause m	nortality			

95







Steve Kirsch 🤣 @stkirsch · 2s

This is UK official ONS data posted on their website for all-cause mortality for 80-89 year olds (Table 2). **Explain how this is consistent with a SAFE vaccine.** Go ahead. I'll wait.



And look what happened in the Philippines!

Philippines Vax deaths were

5X COVID deaths

4. Did Covid-19 Cause the Excess Deaths?

- In 2020 there were NO excess deaths, despite ~ 11,785 Covid-19 deaths.
- In 2021, provisional PSA data shows 265,493 excess deaths, compared to ~46,410 Covid-19 attributed deaths.
- In 2022, provisional PSA data shows 62,265 excess Deaths (vs. 2020) compared to ~7,056 deaths attributed to Covid-19.
- Covid-19 cannot explain the numbers of excess deaths.



[🗌] Labels 🗌 Maximize 🗹 95% PI 🗌 Percentage 🗌 Cumulative 🗌 Total 🔗 Copy 💾 Save



A direct survey of over 10,000 Americans showed the vaccine killed > 3.5x COVID.

Nobody wanted to contact the responders or replicate the results.

Steve Kirsch's newsletter

"Vaccine" killed 3.5X more Americans than COVID virus

The data is clear and consistent. I challenge any qualified scientist to challenge this data in an open public debate.



STEVE KIRSCH OCT 26, 2023



D 492 (D 78)



Executive summary

Sound too hard to believe? Don't take my word for it. Collect your own data (This X survey found a 3.86X ratio)



Steve Kirsch 🤣 @stkirsch



Since March 2020, if you lost a family member(s) to COVID or to the vaccine (or both), please let me know which one:

4,076 votes · Final results	
No deaths in my family	65%
Both	3.4%
Vaccine	25.1%
COVID	6.5%

United States (Medicare)



Maldives record-level data shows 60% increase @ 180 days post shot



105

Israel baseline calculation



Israel baseline calculation

28.4 * .83 = 23.5 deaths per day

Due to lower vax rate of elderly (it is the elderly who de) As of October 4, 2023, 88.9% of the eligible population in Israel has received at least two doses of a COVID-19 vaccine. This means that over 88% of the people over the age of 12 in Israel have been fully vaccinated.

Here is a breakdown of the vaccination rates in Israel by age group:

- Ages 12-15: 96.0%
- Ages 16-17: 94.3%
- Ages 18-29: 90.2%
- Ages 30-49: 88.1%
- Ages 50-64: 89.9%
- Ages 65+: 83.7%

The high vaccination rates in Israel have helped to significantly reduce the number of COVID-19 cases, hospitalizations, and deaths. However, the country is still seeing a small number of new cases, and officials are urging people to get booster shots to further protect themselves and the community.

Israel t

28.4 * .8 23.5 dea day

Due to lo rate of e is the elo de)



25.5K posts

4

Prof Jeffrey S Morris 🤣

@jsm2334 Follows you

George S. Pepper Professor of Public Health & Preventive Medicine; Biostats, Stats & Data Science, UPenn; lifelong learner & truth seeker; Views my own

М

Follow

⊘ Philadelphia, PA ⊘ scholar.google.com/citations?user...
i Joined December 2014

2,279 Following 10.8K Followers



Followed by Retsef Levi, Dr. Adrian Wong, and 19 others you follow

east two doses of a COVID-19 3 been fully vaccinated.

er of COVID-19 cases, of new cases, and officials are unity.
Israeli MoH

$\mathbf{2.5x}$ increase in death counts from baseline of 23.5 to 60



Israel: In first 7 months after dose 2, deaths peak **3.8X** from baseline. NOBODY NOTICES.



Chart 3: Distribution of deaths according to the number of days from the day of vaccination to 200

That chart has been in public view since Mar 7, 2023.

Nobody cares how many people the vaccine kills or injures.

The medical community does whatever they are told.

They are incapable of independent thought.

They do not want to lose their job.

Or their board certifications.

So most remain silent while the killing happens



Dr. Peter McCullough, one of the top cardiologists in the world, just had his board certification revoked for saying that the COVID vaccines were killing people.





510 Walnut Street Suite 1700 Philadelphia, PA 19106-3099 800.441.2246 www.abim.org request@abim.org

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ABIM ID: 136084

Peter McCullough, M.D. 5231 Richard Avenue Dallas, TX 75206

Personal and Confidential Sent by Certified Mail

Re: Notice of Recommended Disciplinary Sanction

Dear Dr. McCullough:

The American Board of Internal Medicine (ABIM) provided you notice by letter dated May 26, 2022 (the "Notice") that ABIM's Credentials and Certification Committee (CCC) would consider whether to recommend a disciplinary sanction against you in light of public statements you made about the purported dangers of, or la

The CCC met to consider this matte McDonald, M.D., M.P.H., Senior V the CCC; Richard Battaglia, M.D., I President, Medical Education Resea Director, Academic Affairs; Ruth H Ph.D., Research Associate; and Lau Paul Lantieri III and Emilia McKee



510 Walnut Street Suite 1700 Philadelphia, PA 19106-3699 800.441.2246 www.abim.org request@abim.org



Nothing in your declaration submitted in response to the Notice, or in the materials submitted to ABIM on your behalf, compels a different conclusion.

For these reasons, the CCC found that you have provided false or inaccurate medical information to the public. By casting doubt on the efficacy of COVID-19 vaccines with such seemingly authoritative statements, made in various official forums and widely reported in various media, your statements pose serious concerns for patient safety. Moreover, they are inimical to the ethics and professionalism standards for board certification.

In light of all the evidence and circumstances, the CCC determined to recommend that your board certifications be revoked.





Promised

Actual

Vs.



Q

4

17 17

Ben 🙆 @USMortality · 5h

What an actual successful vaccine rollout could have looked like! (bottom) But instead they lied, and made it much worse!



Month of Year

C 43 116

The debate is over

Vote now You can change your vote at any time during the presentation.

Limited to pre-registered attendees



pollev.com/stevekirsch655

The opposition doesn't want to talk about it

Even \$10M is insufficient to get them to show up

Steve Kirsch's newsletter

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If I lose, I will donate \$1M to MIT.

If he loses, he will donate \$1M to VSRF.



I just offered MIT Institute Professor Robert Langer \$10M to debate me about COVID...

I think the mRNA shots are deadly. The evidence is in plain sight. I'm so confident that the data supports this that I'm willing to donate \$10M to MIT...

NOV 10 • STEVE KIRSCH

Langer could have named a team of people to appear in his place



He didn't even give me the courtesy of a response.

Moderna... same offer



Steve Kirsch 🤣 @stkirsch · Nov 12

I just offered **Moderna** up to \$10M to **challenge me on vaccine safety**. **The venue, the Kirsc**h Auditorium at MIT, is almost literally across the street from **Moderna** HQ. Nov 30 at **6pm. They can bring up to 12 people**. **I'll be there a**lone.



124







\$100K reward

and still nobody wanted to challenge me live

Steve Kirsch 🤣 @stkirsch · 2h

Promote

Now offering \$100,000 to any qualified scientist to debate me at MIT on Nov 30 at 6pm in the Kirsch Auditorium. If you think the COVID vaccines are safe, this is your opportunity. People like @MartinKulldorff should be jumping on this. Details here:



None of the anti-anti-vaxxers wanted to challenge me either



Steve Kirsch 🤣 @stkirsch

I'm officially opening this up to **any of the PROMINENT anti-antivaxxers to apply**. You know who you are. The list includes Professor Jeffrey Morris (@jsm2334), Susan Oliver @DrSusanOliver1 and her dog Cindy, David Gorski aka Orac (@gorskon), Michael Simpson(@skepticalraptor), Dorit Reiss (@Doritmi), DebunkTheFunk (@Debunk_the_Funk), and even "The real truther" (@thereal_truther) and the mutton guy (@SwaledaleMutton). You have to appear in person. If you lose, no payment will be made. If you break any of the rules (like no interrupting the other person, not exceeding your allocated time, or throwing ad hominem attacks), you get disqualified. This is a respectful debate.

10:59 AM · Nov 25, 2023 · 2,588 Views

...

Pierre Kory



just retweeted

:)

It's so expensive to find someone to debate you now nowadays, isn't it?

Pierre Kory

agreed

Message



If the CDC was honest...

COVID-19 vaccines can kill you

COVID-19 vaccines increase risk for infection, serious illness, and death

We made a mistake. We shouldn't have recommended that people get the shots. Sorry about that.

All vaccines are unsafe. Andrew Wakefield was right.



Data from December 2020 to July 2021

bit.ly/MMWR7043e2



LET'S DIVE INTO THE DATA

(that nobody wants to see)

It's from a whistleblower deep inside the New Zealand Ministry of Health.

4M records

~ 33% of all vaccine records in NZ

Vaccinated people only

Dead and alive

I've personally authenticated the data and the leaker.

And even the most vocal supporters of the vaccine concede that the New Zealand data is HIGHLY accurate.



New Zealand records biggest increase in registered deaths in 100 years



□ Save → Share

19 Feb, 2023 07:46 PM ③ 3 mins to read

By: Julia Gabel and Chris Knox

NOW PLAYING • Rebuild from Gabrielle underway, Hawke's Bay gang crime & Turkey moves from rescue to recovery | Focus Morning Bulletin: 20 February, 2023





Home > Adverse Effects

Alarming Acceleration in New Zealand Excess Deaths, Latest Official Figures Up 70% on Last Year



By Guy Hatchard | November 13, 2023 | 📀 2520 | 🗩 0











All ages: FAIL



NZ official stats show same as the NZ data; it takes off for those >60



Compare this to the official CMR by 5y age groups in NZ, especially the last one!



9:59 AM · Dec 5, 2023 · 23.9K Views

 \mathbf{k} 6

11

♡ 30

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••••

Subscribe

The curves **should be flat**.

Did those curves look flat to you?
Sanity check...

The upper plot is the MR (Mortality Rate in deaths per 100K person years) vs. calendar time (in months for <60 yr olds. It's a flat line!!!

This indicates 4 things:

- 1. No "mass extinction" event happened in the background
- 2. The vaccine isn't killing younger people as significantly as older people
- 3. Our data is good
- 4. Our analysis tools are good (no bugs)



Was it caused by the vaccine?

No other viable alternative.

Meets all 5 Bradford Hill criteria for causality.

What else could induce such a huge change in mortality in only the vaccinated population and is correlated with the time of the shot?

Bradford Hill criteria for vaccines

Consistency. The association of a purported adverse event with the administration of a vaccine should be consistent, i.e. the findings should be replicable in different localities, by different investigators not unduly influencing one another, and by different methods of investigation, all leading to the same conclusion(s).

Strength of the association. The association should be strong in the magnitude of the association (in an epidemiological sense), and in the dose-response relationship of the vaccine with the adverse effect. **Specificity.** The association should be distinctive, the adverse event should be linked uniquely or specifically with the vaccine concerned, rather than its occurring frequently, spontaneously or commonly in association with other external stimuli or conditions.

Temporal relation. There should be a clear temporal relationship between the vaccine and the adverse event, in that receipt of the vaccine should precede the earliest manifestation of the event or a clear exacerbation of an ongoing condition. For example, an anaphylactic reaction seconds or minutes following immunization would be strongly suggestive of causality; such a reaction several weeks after vaccination would be less plausible evidence of a causal relation.

 Biological plausibility. The association should be coherent; that is, plausible and explicable biologically according to known facts in the natural history and biology of the disease.

Big picture

Massive increase in all-cause mortality

Who is Robert Malone

Not 14M Lives Saved, But Over 17M Dead from the mRNA COVID vax

Lancet Infectious Diseases must retract this fundamentally wrong "peer reviewed" manuscript. But what happens when a Nobel Prize is granted based on bad data?



ROBERT W MALONE MD, MS NOV 23, 2023

LANC	°FT						
tious D							
		This journal	Journals	Publish	Clinical	Global health	Multim
						_	
ARTIC	LES VOLUME 22, IS	SUE 9, P1293-1302, SEPTEMB	3ER 2022	는 Download	l Full Issue]	
] vaccinatio	n. a
Glo	obal impa	ct of the first	∟ t year c	of COVI] /accinatio	on: a
Glo ma	obal impa athematic		∟ t year o g study	of COVI	D-19 \		



These researchers, in their own words:

"...have found no evidence in [their] extensive research on ACM [Alldeaths Cause Mortality] that Covid vaccines had any beneficial effect. If vaccines prevented transmission, infection or serious illness, then there should have been decreases in mortality following vaccine rollouts, not increases which were observed in every elderly group subject to rapid booster rollouts. And, mortality would not have increased solely when vaccines were rolled out, where no excess mortality occurred prior to vaccine rollouts, as we have documented in 9 countries across 3 continents.'

spectator.com.au/2023/11/excess...

9:20 AM · Nov 23, 2023 · 3,856 Views











Turbo cancers



5:32 AM · Nov 23, 2023 · 1,894 Views

Turbo cancers (4.5M views)



Post

Robin Monotti 🤣 @robinmonotti

Angus Dalgleish: Professor of Oncology at St George's Hospital Medical School, London: "At the end of last year I reported that I was seeing melanoma patients who had been stable for years relapse after their first booster (their third injection). I was told it was merely a coincidence and to keep quiet about it, but it became impossible to do so. The number of my patients affected has been rising ever since. I saw two more cases of cancer relapse post booster vaccination in my patients just this last week.

Other oncologists have contacted me from all over the world including from Australia and the US. The consensus is that it is no longer confined to melanoma but that increased incidence of lymphomas, leukaemias and kidney cancers is being seen after booster injections. Additionally my colorectal cancer colleagues report an epidemic of explosive cancers (those presenting with multiple metastatic spread in the liver and elsewhere). All these cancers are occurring (with very few exceptions) in patients who have been forced to have a Covid booster whether they were keen or not, for many so they could travel.

So why are these cancers occurring? T cell suppression was my first likely explanation given that immunotherapy is so effective in these cancers. However we must also now consider DNA plasmid and SV40 integration in promoting cancer development, a feature made even more concerning by reports that mRNA spike protein binds p53 and other cancer suppressor genes. It is very clear and very frightening that these vaccines have several elements to cause a perfect storm in cancer development in those patients lucky enough to have avoided heart attacks, clots, strokes, autoimmune diseases and other common adverse reactions to the Covid vaccines.

To advise booster vaccines, as is the current case, is no more and no less than medical incompetence; to continue to do so with the above information is medical negligence which can carry a custodial sentence. No ifs or buts any longer. All mRNA vaccines must be halted and banned now."

Subscribe



Normal is now totally upside down

"I was talking with embalmer Richard Hirschman from the "Died Suddenly" movie last week on the phone. Richard said that he has embalmed 63 bodies over the last 2 to 3 months, and he has seen the "white fibrous clots" in 32 of them (i.e., just over 50%). And of the 50% of bodies that do not have the white fibrous clots, Richard is seeing traditional "currant jelly" clots and the newer "coffee grounds" (i.e., micro-clotting) in the vast majority of those bodies. In fact, Richard said that of the last 63 bodies that he has embalmed, only 6 (i.e., less than 10%) of those bodies had no clotting of any kind (i.e., normal looking blood). Pre-Covid, Richard used to see the traditional "currant jelly" clots and "chicken fat" clots in only about 15% of his corpses (i.e., 85% of his corpses had normal looking blood)."

- Thomas Haviland, USAF Major, Retired

CDC and FDA will say there is "no evidence" of harm

They refuse to investigate or view any adverse event data submitted from outside their organizations.

4 facts

you need to know about the COVID vaccines

COVID vaccines: all risk, no benefit

Risk/benefit	Impact
Risk of infection	
Risk of hospitalization from COVID	\longleftrightarrow
Risk of death from COVID	
Risk of death (ACM)	

Red = Bad Green=Good Yellow = Neutral

Who should be getting these shots?

NOBODY

How come we aren't being told that?

Systemic defect

CDC Don't have the record-level data \rightarrow "the vaccine is safe."

The States

Have the data, but trust the CDC so they NEVER look at the data they have.

Nobody has analyzed the data to find a safety signal

Infection

Cleveland Clinic study: More doses→ more infections



164

Hospitalization

JAMA paper

AMA Network			
JAMA°	Search All	•	Enter Search Term
This Issue Views 117,559 Citat	ions 11 Altmetric 2806		
🔁 Download PDF	$(\mathbf{F}) $ More $ \nabla $	(Cite This	© Permissions
Research Letter			
April 6, 2023			
Risk of Death in I	Patients Hospita	lized for CO	OVID-19 vs
Seasonal Influen	-		
Yan Xie, PhD ¹ ; Taeyoung Choi, MPH ¹ ; Ziya	d Al-Aly, MD ¹		

» Author Affiliations | Article Information

JAMA. 2023;329(19):1697-1699. doi:10.1001/jama.2023.5348

Table. Baseline Characteristics in Seasonal Influenza and COVID-19 Group Before and After Propensity Score Weighting

	Before propensity sco	Before propensity score weighting		After propensity score weighting ^a		
	Seasonal influenza (n = 2403)	COVID-19 (n = 8996)	SMD ^b	Seasonal influenza (n = 2403)	COVID-19 (n = 8996)	SMD ^b
Age						
Mean (SD), y	70.52 (11.68)	73.42 (12.25)	0.24	73.81 (12.22)	73.42 (12.25)	0.03
≤65 y, No. (%)	665 (27.67)	1787 (19.86)	0.18	481 (20.03)	1787 (19.86)	0.004
>65 y, No. (%)	1738 (72.33)	7209 (80.14)	0.18	1922 (79.98)	7209 (80.14)	0.004
Race, No. (%) ^c						
Black	607 (25.26)	2066 (22.97)	0.05	562 (23.40)	2066 (22.97)	0.01
White	1694 (70.50)	6421 (71.38)	0.02	1713 (71.29)	6421 (71.38)	0.003
Other	102 (4.24)	509 (5.66)	0.07	128 (5.34)	509 (5.66)	0.01
Sex, No. (%)						
Male	2245 (93.42)	8580 (95.38)	0.09	2295 (95.51)	8580 (95.38)	0.007
Female	158 (6.58)	416 (4.62)	0.09	108 (4.49)	416 (4.62)	0.007
COVID-19 vaccination status, No. (%)					
Not vaccinated	454 (18.89)	1865 (20.73)	0.05	429 (17.84)	1865 (20.73)	0.07
1 dose	114 (4.74)	384 (4.27)	0.02	112 (4.68)	384 (4.27)	0.02
2 doses	517 (21.51)	1841 (20.46)	0.03	530 (22.06)	1841 (20.47)	0.04
Boosted	1318 (54.85)	4906 (54.54)	0.01	1332 (55.43)	4906 (54.54)	0.02
Influenza vaccine, No. (%)	1487 (61.88)	5743 (63.84)	0.04	1524 (63.43)	5743 (63.84)	0.008

SAME STATS!! There is supposed to be a difference. **So neither vaccine provides ANY protection!**

If the flu and COVID vaccines protected against hospitalization, this is what you *should* see

Vaccine status	Hospitalized for Flu	Hospitalized for COVID
COVID booster	50%	5%
Flu	5%	50%

So that paper **inadvertently showed** that:

- 1. Flu vaccine doesn't protect against infection or hospitalization
- 2. Ditto for COVID vaccine

In practice, protection against death is < the net protection from hospitalization.

In other words, neither vaccine works at all.

NO BENEFIT WHATSOEVER.

This is VA fully reported data. Nobody can explain this, including the author.

I asked the author of the paper why he didn't write a paper pointing out that he just proved that the COVID and flu vaccines don't work.

He said he didn't have time.

(You can't make this stuff up. You really can't.)

Death

Death from COVID

US Nursing home data

Shots made you more likely to die from COVID

US nursing home data shows clearly that the COVID vaccines made the elderly MORE likely to die from COVID. Whoops!

CMS publishes record-level nursing home data by week. When you analyze this data different ways, the conclusion is always the same: the vaccines were a disaster, increasing the death rate from COVID.



COVID cases vs. COVID deaths

Source: https://data.cms.gov/covid-19/covid-19-nursing-home-data

	Pre-OmicronPost-Omicron500IFR avg = .15IFR avg = .02400
	The vax rollout Omicron had an instant impact on
	detectable impact
	on the IFR!
5/31/2020 6/30/2020 7/31/2020 8/31/2020 9/30/2020 0/31/2020	<pre>1/31/2021 2/28/2021 3/31/2021 5/31/2021 5/31/2021 6/30/2021 6/30/2021 1/31/2021 1/31/2022 5/31/2022 5/31/2022 5/31/2022 6/30/2022 5/31/2022 5/31/2022 5/31/2022 6/30/2022 1/31/2022 5/31/2022 1/31/2022 5/31/2022 5/31/2022 6/30/2023 6/30/2022 6/30/2023 6/30/202 6/30/2023 6/</pre>

US Nursing Home data from CMS

Odds ratio relative to odds on 12-27-20 (effective start of mass rollout to nursing homes) Odds = COVID death:COVID survive



Apple Valley Village Health Care Center saw >7X higher COVID death rates after COVID vax rollout. Wasn't it supposed to decrease rates?

It's in the official Medicare reports! And an employee revealed that 30% of the residents died directly after the shots. Bottom line: the CDC lied and people died.



STEVE KIRSCH AUG 14, 2023



No one currently working at Apple Valley Village returned my calls This is explained by the vax as we saw in the nursing home data.

Nothing else could make you 7X more likely to die from COVID.

Canada is highly vaccinated.

Omicron is much less deadly so it wasn't the variant. You can see that from the nursing home data.



ICYMI: "The report shows the rate of **COVID-19 deaths** in Atlantic Canada was **more than 7X higher last year compared with the year before**."

Promote

Anyone @jsm2334 want to explain this one? If it wasn't the shot, ...



Same is thing is happening in Australia... people are more likely to die from COVID now even though variant is less deadly! Look at number of thumbs up!


If the vaccine is so beneficial, why are 95% of the clinics refusing to offer it?





```
November 16, 2023 🖆 18 🖵
```

Western Australian Media Not Pleased That Only 1-20 GP Clinics Offering the Latest COVID-19 Jab

All-cause mortality

Gold standard

Time-series cohort analysis of record level data

Time series cohort analysis

Person	Week 1	 Week 4	 Week 28	Week 30
steve	Shot 1	Shot 2	Shot 3	die

Bucket (dose)	Man weeks	Number of deaths
0	1	
1	3	
2	24	
3	2	1

Four independent variables

- t_o= observation time window
- t_d⁼ time since dose
- D = dose number
- A = Age

Dependent variable

MR = Mortality rate in deaths/(100K person-years)

To analyze, you look at the impact of each independent variable on the MR.

Four plots tell the story.

(This isn't rocket science)

Independent variable (IV)	Meaning	Expected result for MR as fcn of IV
t _o	Observation time window	
t _d	Time since dose	
D	Dose #	
A	Age	

What is **record level data**?

Why is it important?

What does it tell us about the COVID vaccines?

What is record level data?

One (or more) records for each person who was alive on Jan 1, 2020:

- Year of birth
- Date of death, if dead
- Vaccination history (date, type, dose #, lot #), if any

This is record level data:

	A	В	С	D	E	F	G	Н	1	J	K	L	M
1	mrn	batch_id	dose_nun	date_time_c	date_of_death	vaccine_name	year_of_birth		My notes				
2	0	1	1	7/22/2021		Pfizer BioNTec	1939		first dose	date, <mark>still</mark> a	alive, coul	d have ot	her doses
3	1						1951		unvaccinated, alive				
4	2	1	2	7/22/2021		Pfizer BioNTec	1963		second dose date, still alive				
5	3	1	2	7/22/2021		Pfizer BioNTec	1952						
6	4	1	2	5/19/2021		Pfizer BioNTec	2004						
7	5						1965						
8	6	1	2	6/10/2021		Pfizer BioNTec	1970						
9	7	1	2	5/26/2021		Pfizer BioNTec	1989						
10	8	1	1	5/5/2021	10/29/2021	Pfizer BioNTec	1917		dead; this is date of the first dose. May be other doses.				
11	9	1	2	5/28/2021		Pfizer BioNTec	1988						
12	10						1979						
13	11				3/1/2022		1958		unvaccinat	ted, dead			

Record-level data is key

\rightarrow we will know instantly if a vaccine is safe or not.

Other countries

Same deal

Could the data be confounded in every country we checked?

No. We can slide the observation window in every country and the results don't slide.

Which means that the ONLY explanation is that the vaccines caused the excess deaths.

Occam's razor doesn't even apply.

There is only one option left.

At this point, we are rearranging deck chairs on the Titanic.

But wait! There's more!

Was there a **benefit?**

NOPE.

There wasn't even a benefit!

None zero zilch NADA.

The IFR post vax increased!

That is why record level data is never disclosed and why nobody calls for it.

They do not want to know the truth themselves. And they don't want you to know the truth either.

Because if the truth was ever exposed, the public would be very upset.

Only one **person in the world is** regularly pushing for data transparency of public health **record-level data**?

Can you guess who it is?

misinformation superspreader

(n.) person who shares accurate, but inconvenient truths that conflict with the approved narrative. In most that conflict with the title are prove that within a few months or sometimes years by rew file within a few months or sometimes years by rew for within a few months or sometimes (i.e. the corpute government and it's watchmen (i.e. the corpute press)

The Blass Steve Kirsch, Conspirocy Theorist, Anti-Vaxxer, Science Devic

The world's #1 "Misinformation superspreader"

I offered it first to the:

FDA CDC Pfizer Moderna California Dept of Public Health officials

even advertised to see if any qualified person wanted to see the data. No takers.

(420K followers)



Steve Kirsch 🤣 @stkirsch · 2s

I have official record-level data from a State that PROVES the COVID vaccines are killing people.

Is there a **pro-vax epidemiologist or prominent infectious disease doctor** who would like to see the data before I release it publicly?

I don't want to spread misinformation.



205

I wanted to give them an opportunity to explain how I got it wrong before I went public.

I don't want to spread misinformation.

I really don't.

But nobody will take the time to explain to me (and my colleagues) how we all got it wrong.

They all refused my offer

They said "the vaccines are safe" and didn't want to see the record-level data that they've never seen before.

"We are the Federales! You know...Health New Zealand. Data?!? We ain't got no data! We don't need no data! I don't have to show you any stinkin' data!"



You don't have to trust me

Do your own research

The record level data is now, finally, publicly available

Think I got it wrong?

Can we see your analysis and your data?

How do you explain the data?

I'm willing to defend my analysis in a **recorded public forum**. How about you?

Downloading the data

This article has instructions for how to download the data (and for viewing the video of my MIT presentation).

Steve Kirsch's newsletter

Data from the New Zealand Ministry of Health shows that the COVID vaccines have killed over 10 million worldwide

It's finally here: record-level data showing vaccine timing and death date. There is no confusion any longer: the vaccines are unsafe and have killed, on average, around 1 person per 1,000 doses.



STEVE KIRSCH NOV 30, 2023



...
Confirming authenticity of the records

The data has an **audit record** in it which proves its bona fide - its a financial system first and foremost so it is designed to be validated every step of the way by a very complex rules engine which means it has to be reconciled and can be audited.

Every single record has to pass validation.

This is the Oracle policy adviser/rules engine. It means it's passed all quality and financial checks and is a valid record it cannot ever ever be denied. Each and every one of them contains a record like this.

Also, if it was fraudulent data, the NZMH would have said so. And if Barry Young didn't work at NZMH, they would have said so too. Nobody is denying any of this.

"Rules version: 20210720-01 Processed at: 22/07/2021 23:05 NZST Date/time of message: 22/07/2021 18:13 NZST Sending Site: AHC End datetime of service: 22/07/2021 17:05 NZST Delivery period start: 22/07/2021 16:50 NZST Delivery period end: 22/07/2021 17:35 NZST Region for public holidays: Public holiday: No Payment: \$36.05 Business hours: Yes Business hours contract price: \$36.05 After hours: No After-hours contract price: \$48.72 Vaccine: Pfizer BioNTech COVID-19 Vaccine code: 208 Vaccine dose: 1 Valid dose: Yes Perorg Id: 611714 Perorg Id Active: Yes Contract Active: Yes Contract has valid PPD: Yes Valid vaccination date: Yes Live Person: Yes (3/02/1964 -) Valid NHI: Yes Error count: 0" 9:46 PM 🕚

this is the oracle policy adviser/rules engine. It means its passed all quality and financial checks and is a valid record $_{9:46 \text{ PM}}$

it cannot ever ever be denied 9:47 PM ④

each and every one of them contains a record like this $_{9:47\ \text{PM}}$

Overcoming objections

"You can't prove the vaccine caused this! You didn't control for confounders."

There are no confounders or combination of confounders that could explain these observations happening consistently worldwide. The effect sizes are too large and too consistent and temporally linked to the injection. The vaccine is the only explanation that is even remotely viable.

Q: "Where did they hide the bodies?"

A: "In plain sight"

Home / New Zealand

New Zealand records biggest increase in registered deaths in 100 years

By: Julia Gabel and <u>Chris Knox</u> 19 Feb, 2023 07:46 PM © 3 mins to read

□ Save A Share



NOW PLAYING - Rebuild from Gabrielle underway, Hawke's Bay gang crime & Turkey moves from rescue to recovery | Focus Morning Bulletin: 20 February, 2023



NEWS

Home Israel-Gaza war | War in Ukraine | Climate | Video | World | US & Ca



Excess deaths in 2022 among worst in 50 years

() 10 January



Coronavirus







Home > Adverse Effects

Alarming Acceleration in New Zealand Excess Deaths, Latest Official Figures Up 70% on Last Year



By Guy Hatchard | November 13, 2023 | @ 2520 | @ 0



US had 600K excess deaths in 2021 alone (3.4M vs. 2.8M normal deaths).

It's a good bet that over half of these were vaccine deaths.

John Beaudoin analyzed the Massachusetts death records and found 4,000 deaths caused by the vaccine

He should have found fewer than 15 if the vaccine was safe. He found 266X higher than "safe" expectations!



20 Most Vaccinated countries

"The results are daunting! No country has improved, all have deteriorated! Significantly!"

				BA	SELINE (Average)			Excess			
#	iso_code	location	people_vaccinated_per_hundre	From	То	Туре	2020	2021	2022	Improved w/ vaccine?	No excess w/ vaccine?
1	ARE	United Arab Emirates	106	2018	2019	cmr	14.9%	31.1%		FALSE	FALSE
2	QAT	Qatar	106	2017	2019	cmr	14.3%	23.9%	20.0%	FALSE	FALSE
3	PRT	Portugal	95.3	2017	2019	asmr	7.2%	4.4%	2.3%	TRUE	FALSE
4	HKG	Hong Kong	92.4	2017	2019	cmr	5.8%	7.2%	29.3%	FALSE	FALSE
5	CHL	Chile	92.3	2017	2019	asmr	10.2%	17.5%	13.8%	FALSE	FALSE
6	SGP	Singapore	91.6	2017	2019	cmr	2.3%	11.9%	22.9%	FALSE	FALSE
7	ARG	Argentina	91.2	2017	2019	cmr	9.4%	25.7%		FALSE	FALSE
8	CAN	Canada	90.4	2017	2019	asmr	3.2%	2.3%	7.3%	FALSE	FALSE
9	CRI	Costa Rica	89.6	2017	2019	cmr	8.5%	27.7%	17.9%	FALSE	FALSE
10	URY	Uruguay	88	2017	2019	cmr	-4.2%	20.8%	15.3%	FALSE	FALSE
11	ESP	Spain	87	2017	2019	asmr	14.5%	3.6%	6.1%	TRUE	FALSE
12	MUS	Mauritius	86.5	2017	2019	cmr	3.2%	23.7%	20.5%	FALSE	FALSE
13	KOR	South Korea	86.4	2017	2019	asmr	-4.4%	-4.8%	6.7%	FALSE	FALSE
14	ITA	Italy	86.3	2017	2019	asmr	11.6%	5.2%	4.8%	TRUE	FALSE
15	AUS	Australia	84.9	2017	2019	asmr	-5.6%	-3.6%	3.7%	FALSE	FALSE
16	JPN	Japan	84.5	2017	2019	cmr	2.3%	7.8%	17.9%	FALSE	FALSE
17	BHR	Bahrain	84.3	2017	2019	asmr	11.3%	23.1%		FALSE	FALSE
18	8 NZL	New Zealand	83	2017	2019	asmr	-7.90%	-4.60%	2.3%	FALSE	FALSE
19	MYS	Malaysia	82.9	2017	2019	cmr	-5.2%	26.3%	11.2%	FALSE	FALSE
20	IRL	Ireland	81.8	2017	2019	cmr	-0.6%	5.8%	8.1%	FALSE	FALSE

How many countries saw an improvement of relative excess mortality with mass vaccination?

nprovement	3
eterioration	17

How many countries achieved normal mortality levels with vaccination?
Improvement
0
Deterioration
20



~~

MORTALITY

Crude Excess Mortality



Crude Excess Mortality

<∻

MORTALITY WATCH





Baseline: Average 2017-2019 | 95% Prediction Interval





Crude Excess Mortality

Baseline: Average 2017-2019 | 95% Prediction Interval



100k

Excess Deaths per

Crude Excess Mortality





Crude Excess Mortality

<∕∕∙

MORTALITY WATCH

Baseline: Average 2017-2019 | 95% Prediction Interval







Age-Standardized Excess Mortality



Baseline: Average 2017-2019 | 95% Prediction Interval | Standard Population: PRT 2020



Age-Standardized Excess Mortality





Baseline: Average 2017-2019 | 95% Prediction Interval | Standard Population: CHL 2020



Age-Standardized Excess Mortality



Baseline: Average 2017-2019 | 95% Prediction Interval | Standard Population: ESP 2020

See a problem?

All US Deaths Reported to VAERS by Year-US Only



Source: OpenVAERS

See a problem? Western Australia



Figure 1: Number of AEFI reports by vaccination month and year overlayed with reporting rate per 100,000 doses administered by vaccination month and year (2018-2022).

Medical examiners: willful blindness



Systematic Review of Autopsy Findings in Deaths after COVID-19 Vaccination

Abstract Presented at University of Michigan while Science Feedback Anonymously **Discredits Work**



PETER MCCULLOUGH, MD NOV 20 2023

♡ 344	Q 32 Q 33	Share
3:	ARTICLE VOICEOVER	-3:50

1 manigo in Dear

and then independently adjudicated each death from extracted data. Our conclusion aduated was 73.9% of deaths after vaccination are either direct due or significantly contributed Nicolas to by known mechanisms (myocarditis, blood clots, etc.) resulting from COVID-19 project n" with

myself as the senior mentor.

~10,000 "died suddenly" events in full public view. Virtually all are in the vaccinated. Unprecedented.

News from Underground by Mark Crispin Miller

Haven't people ALWAYS just "died suddenly" like this, some readers ask me (anxiously)?

The answer s, most definitely, NO—as many other readers know full well



MARK CRISPIN MILLER APR 6, 2022



Share

Since I started posting weekly compilations of reports of "sudden deaths" in the US and worldwide, I've often noted that this horrid spike is quite unprecedented, bolstering that point with links to pieces demonstrating, indisputably, that all-

Only 1 in 500 unvaccinated

(Ed Dowd's book)



Dumont Boy, 14, Collapses, Dies Playing Basketball

Treviso, Carlo Alberto died: the 12-year-old athlete suffering from cardiac arrest during a race

Clayton middle school student dies following youth football practice

The Alercury News









"CAUSE UNKNOWN" THE EPIDEMIC OF SUDDEN DEATHS IN 2021 AND 2022

Student-athlete Cameran Wheatley collapses during basketball game, dies at hospital

n g Tragedy! – Young Hungarian footballer dies on the field Camilla Canepa, 18, London UK, Died After First Vaccine Dose

NATIONAL REVIEW

And the second s

Or births never happened



Steve Kirsch 🤣 @stkirsch · 9h

From my DMs. Anyone had a similar experience?

May 21, 2023, 9:54 AM

I do not know one person who has had a clear and normal pregnancy since they took the Covid vaccines. Either a miscarriage, stillbirth, or early birth

Q 257 tl 363 ♡ 1.5K II,I 128K 🛛 🕇

This tweet **really** resonated with people.

Promote

...

US infant mortality rate rise

"Clearly baffling"

- Ed Dowd



3:09 PM · Nov 8, 2023 · 71.6K Views

People are seeing the evidence for themselves



Promote) ····

People are waking up. The "vaccine" is the best "convincer" we have that we are right. Unfortunately, people have to be injured before they will listen to us.

Oct 16, 2023, 7:00 PM

I'm a regretfully double vax and vax injured person who works with a very vax loving group of employees (creatives/left/liberal). Most of us are now being forced to return to the office since September. I can tell you that this highly vaxed group of people (including me) are sick. Everybody is sick. We have RSV, flu, Covid, colds, sinus infections, etc. I have never heard about so many working adults sick in my life. This could definitely be the suppressed immune system and the immune printing issue in action. Yesterday, 10:42 AM O 97 17 757 O 2.2K 1.1 59K £

Q: "If this is really true, why aren't any of my MIT professors speaking out?"

Pinned

Retsef Levi 🤣 @RetsefL · Jan 29

...

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!



Some are.

MIT Professor Retsef Levi is "red-pilled."

Others choose to remain silent.



Steve Kirsch 🤣 @stkirsch · Nov 11

I have a **\$10M offer** out to debate **MIT Institute Professor Robert Langer** about the **safety of** the COVID vac**cines**. He's the billionaire co-founder of Moderna. No word from **Langer**. Are you **surprised**?



Is that how science is supposed to work?

Is that the new role model?

"Duck and run for cover" when challenged with credible data?



Do you want to see a real debate on the data?

Or shall we censor one side for you?



They want the debate to happen in the scientific literature → > 20 years to resolve simple yes/no questions like "Do vaccines cause autism?"

It's been >20 years; no one will debate **their** side!



We want it to happen now, in a real time dialog.

Q: "If this is really true, why don't I know anyone who died from the vaccine?"

A: "You probably do and just didn't realize it."

"Highly likely"



Paul Lagacé, professor of aeronautics and astronautics, dies at 63

Lagacé, an expert on composite materials and structures, was passionate about MIT and the Boston Red Sox.

Sara Cody | Department of Aeronautics and Astronautics July 20, 2021



MIT News

Peter Baddoo, Department of Mathematics instructor, dies at 29

Baddoo was a respected and admired scholar, teacher, mentor, and colleague.

MIT Human Resources March 15, 2023



Do you know someone personally who died from side effects of the COVID-19 vaccine?



Data transparency is the key to reform

All we need is **ONE place**... a state or a country.

Or we elect a courageous new leader who believes in data transparency and will fix the corruption in the FDA and CDC


We instantly will dramatically reduce:

SIDS Autism Autoimmune diseases Heart disease Food allergies **Doctor visits**

Did you know...

Cases of "overnight autism"

0 vs 44

(2 weeks before scheduled vax vs. 2 weeks after scheduled vax)

Source: Pediatrician Doug Hulstedt

SIDS ...

50% within 48 hours of vax

Omaha PD ghosted me after I filed a FOIA request.

Former major city police detective reveals 50% of SIDS cases happened within 48 hours post vaccine

My 16-minute interview of Jennifer, a former police detective in a major US city who handled over 250 SIDS investigations over 7 years implicates the childhood vaccines as the major cause of SIDS.







Share

WHAT IS SUDDEN INFANT DEATH SYNDROME & HOW TO PREVENT IT

In 2009, Congress decided it was better if the NIH did NOT do a study comparing the two cohorts.

Members of Congress tried to get a bill to force the NIH to do just **ONE** study. The bill was immediately killed in committee.

The bill, <u>H.R.3069 — 111th Congress (2009-2010)</u>, was <u>introduced on June 26, 2009 with</u> <u>9 co-sponsors including Ron Paul</u>. It never made it out of committee.

Here's the summary:

Requires the Secretary of Health and Human Services (HHS), acting through the Director of the National Institutes of Health (NIH), to conduct a comprehensive study to: (1) compare total health outcomes, including the risk of autism, between vaccinated and unvaccinated U.S. populations; and (2) determine whether vaccines or vaccine components play a role in the development of autism spectrum or other neurological conditions.

The bill would have forced the NIH to do just ONE study.

HR 3069 (2009) was killed in committee!

They don't want to know.

They don't want you to know either.

They are corrupt. QED.



Every fully vax vs unvaxxed comparison ever published in the peer-reviewed literature shows the unvaxxed are healthier. NO exceptions.

Vax-Unvax Let the science speak

Robert F. Kennedy Jr. *New York Times* bestselling author

Brian Hooker, PhD



Large pediatric practices in US

>25 years: 0 autism, ADHD, ... Kids never get sick Secret: Avoid all vaccines, Tylenol, ...



They have to be hidden or they will lose their license to practice medicine for going against the consensus

Heart disease doesn't affect the FULLY unvaccinated

Your cardiologist simply forgot to tell you. 2020 Pilot Survey Data Comparison
VACCINATED - VS- UNVACCINATED



"The cure cannot be worse than the problem itself." - President Donald J. Trump, October 22, 2020, Presidential Debate

THE CONTROL GROUP

 U.S. National data for approximately 99%+ Vaccinated Population (AHA, Cardiovascular diseases affect nearly half of American adults, statistics show. https://www.heart.org/en/news/2019/01/31/cardiovascular-diseases-affect-nearlyhalf-of-american-adults-statistics-show)

Pilot survey data for 100% Unvaccinated Control Group

BOTTOM LINE

Refuse all vaccines until there is data transparency

How will they respond to this?

"We don't respond to external analyses"

OR

JAMA Network		
JAMA Network Open	JAMA Network Open	Search Term
	New Online	Past Issues
JAMA Network Statement o	n Potentially Offensive Content	

2020s	2023	January 5 (1)
2010s	2022	February 5 (2)
	2021	March 5 (3)
	2020	April 5 (4)

"It isn't published in a peer-reviewed journal. We don't have to respond to it. You can't make us look."

"... and if it gets published, we'll get the paper retracted. Guaranteed. That's how "science" works."

OR

"The vaccines are safe. We've given billions of doses and nobody has died. You can trust us... even though we never did proper autopsies on all the unexpected deaths and we never did the time-series cohort analysis ourselves on the record level data so we don't actually really know if it is safe or not, to be honest."

FINAL THOUGHTS

Hiding public health data worse health outcomes

So why are we doing it?

STOP HIDING THE DATA

SET THE DATA FREE

NOW

SLIDE DECK is posted on my Substack right now.

Please share.



Thank you to my paid subscribers on Substack; you enable me to be able do this research.

Contact me



If you need to contact me about anything (interview request, fact check request, ask a question, let me know about something, want to debate me, found an error, etc), here's how to contact me:

Steve Kirsch

Truth-teller, critic Vaccine Safety Re environmentalist

Dedical & Heal Open Decemb

373 Following 4



X @stkirsch

Steve Kirsch's newsletter



I'll be speaking at MIT on Nov 30 on what the record level data shows about the COVID..

My offer of \$100K to challenge me on the record level data had no takers of sufficient prominence to make it interesting for the audience. This post has...

NOV 23 • STEVE KIRSCH

♡379 ₽ 202 ₽ ₫ …

Steve Kirsch's newsletter

Top Community

I'll be speaking at MIT on Nov 30 on what the record level data shows about the COVID vaccines



I write about COVID mitigation policies, vaccines, neurological diseases and conditions, corruption, censorship, and early treatments. The data shows that

kirschsubstack.com₂₇₈

APPENDIX

How will this end

Market pressure on vaccine makers by financial markets

Public will stop buying their products

More courageous doctors will speak out

Honest epidemiologists will very gradually have to admit they were wrong

Congress will make the record level data public

Questions

Who will be the first to point the finger?

How quickly will this collapse?

When will the mainstream media cover the story?

How many more people will have to die before the authorities put a stop to the insanity?

How much Moderna and Pfizer stock can I afford to sell short?

Summary

The most trustable data is, in general, **the data that is not voluntarily being disclosed to the public**. Anecdotes are now often much more reliable than what is published in the peer-reviewed literature.

No government anywhere in the world has ever voluntarily disclosed the record-level data on the safety of any vaccine needed to assess safety.

No FOIA request ever made has ever returned a document showing that the necessary safety assessments for a vaccine was ever done (UK ONS comes the closest). They don't want to know.

All FOIA requests to obtain record level data always fail. They claim the databases aren't linked. So you can never compel their production.

COVID vaccines: all risk, no benefit.

This data is the most extensive dataset ever released on COVID.

COVID vaccines are killing over **1 person per 1,000 doses** on average (all-cause mortality).

They make the elderly more like to die from COVID.

What do you think?

Warm up exercise

What do we mean by "safe"?



Ben 🤣 @USMortality · 2h 🚨 DATA DOES NOT LIE 🚨

How is it possible that these experimental gene therapy products are still advertised as "safe & effective" when the data is as clear as it gets?

DRUG ADVERSE EVENT COMPARISON



...

Mortality rate (deaths per 100K person years) of test group 100 weeks prior to injection



One of these vaccines isn't safe Can you spot the unsafe vaccine?





B