

2,809 Dead Babies in VAERS Following COVID Shots as New Documents Prove Pfizer, the FDA, and the CDC Knew the Shots Were Not Safe for Pregnant Women

By [Brian Shilhavy](#)

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The latest data dump into the U.S. Government’s Vaccine Adverse Events Reporting System (VAERS) happened yesterday (12/3/21) and covers data through 11/26/2021.

There are now [927,740 cases reported to VAERS](#) following COVID-19 shots for the past 11 months, out of the [total of 1,782,453 cases](#) in the entire VAERS database filed for the past 30+ years.

From the 11/26/2021 release of VAERS data:

Using all 1,782,453 cases in the database

Table		
Event Outcome	Count	Percent
Death	28,689	1.61%
Permanent Disability	51,984	2.92%
Office Visit	192,882	10.82%
Emergency Room	194,515	10.91%
Emergency Doctor/Room	119,408	6.7%
Hospitalized	177,489	9.96%
Hospitalized, Prolonged	3,542	0.2%
Recovered	631,059	35.4%
Birth Defect	860	0.05%
Life Threatening	35,912	2.01%
Not Serious	723,451	40.59%
TOTAL	† 2,159,791	† 121.17%

† Because some cases have multiple vaccinations and symptoms, a single case can account for multiple entries in this table. This is the reason why the Total Count is greater than 1782453 (the number of cases found), and the Total Percentage is greater than 100.

From the 11/26/2021 release of VAERS data:

Found 927,740 cases where Vaccine is COVID19

Table		
Event Outcome	Count	Percent
Death	19,532	2.11%
Permanent Disability	31,652	3.41%
Office Visit	145,285	15.66%
Emergency Room	59	0.01%
Emergency Doctor/Room	102,544	11.05%
Hospitalized	99,671	10.74%
Hospitalized, Prolonged	272	0.03%
Recovered	277,660	29.93%
Birth Defect	691	0.07%
Life Threatening	21,931	2.36%
Not Serious	402,221	43.35%
TOTAL	† 1,101,518	† 118.73%

† Because some cases have multiple vaccinations and symptoms, a single case can account for multiple entries in this table. This is the reason why the Total Count is greater than 927740 (the number of cases found), and the Total Percentage is greater than 100.

[Left image source](#), [Right image source](#).

That means that 52% off ALL vaccine adverse reaction cases in VAERS for the past 30+ years have been reported in the last 11 months following the COVID-19 shots.

In addition, 68% of all deaths following vaccines reported in VAERS for the past 30+ years have been reported in the last 11 months following the COVID-19 shots.

We are on pace to see **21,307 deaths** reported in the first year following the experimental COVID-19 shots, while the average yearly deaths reported after FDA-approved vaccines for the past 30+ years is **305 deaths**.

That is an astounding 86% increase in reported deaths following the COVID-19 shots, a 70X increase over the average reported deaths following vaccinations for the past 30+ years!

- FDA-approved vaccines: **305 deaths per year**
- COVID-19 EUA shots: **21,307 deaths per year**

And as [Dr. Jessica Rose has previously reported](#), the under-reporting factor in VAERS for the COVID-19 shots is 41X, as a conservative number, which means that at least **800,812 people have now died** following COVID-19 shots based on the VAERS data.

Most, if not all, of those deaths are being reported in the pharma-owned corporate media as “COVID” deaths, as there are now more recorded “COVID deaths” for the first 11 months of 2021 than there were for the entire year in 2020, when there were no COVID vaccines until December. ([Source.](#))



Record Number of Fetal Deaths Following COVID-19 Shots

As of this most recent update in VAERS, we have now found **2,809 fetal deaths** following COVID-19 shots injected into pregnant and child-bearing women for the past 11 months. ([Source.](#))

By way of contrast, using the exact same search parameters in VAERS, but excluding the COVID-19 shots, we found **2,168 fetal deaths** following all FDA-approved vaccines for the past 30+ years. ([Source.](#))

That’s an average of 72 fetal deaths per year following all FDA-approved vaccines for the

past 30+ years, compared to what is on pace to be 3064 fetal deaths in 1 year following COVID-19 shots.

- FDA-approved vaccines: **72 fetal deaths per year**
- COVID-19 EUA shots: **3064 fetal deaths per year**

That is an 80% increase in fetal deaths recorded in VAERS following the COVID-19 shots. And yet, the CDC and FDA continue to recommend these EUA shots for pregnant women and nursing mothers.

Not only do they recommend these shots for pregnant women, we now have ample evidence that they have known since earlier this year that these shots are dangerous to pregnant women, and causing fetal deaths.

In a March 4, 2021 Advisory Commission on Childhood Vaccines (ACCV) meeting, the [CDC submitted a report](#) that contained a section titled: **Maternal vaccination safety summary** (starting on p. 39).

They stated (emphasis mine - my comments in red):

- * **Pregnant women were not specifically included in pre-authorization clinical trials** of COVID-19 vaccines
 - Post-authorization safety monitoring and research are the primary ways to obtain safety data on COVID-19 vaccination during pregnancy
- * **Larger than expected numbers of self-reported pregnant women** have registered in v-safe
- * The reactogenicity profile and adverse events observed among pregnant women in v-safe did not indicate any safety problems (based on what criteria???)
- * Most reports to VAERS among pregnant women (73%) involved non-pregnancy specific adverse events (e.g., local and systemic reactions)
- * **Miscarriage was the most frequently reported pregnancy-specific adverse event to VAERS**; numbers are within the known background rates based on **presumed** COVID-19 vaccine doses administered to pregnant women (no supporting evidence to backup these claims)

It is important to note through all of this reporting by the CDC that these are based on **self-reporting data** from pregnant women.

We know that it is politically incorrect to blame any health issue on a COVID-19 “vaccine,” and that [doctors and nurses are pressured to NOT report these](#), so how many pregnant women had an adverse reaction, like a miscarriage, and never even thought to link it to their COVID-19 shot?

So back in March of this year (2021), there were already major concerns about the effects of the shots on pregnant women, as “larger than expected” pregnant women were reporting adverse reactions, and “the most frequently reported pregnancy-specific adverse event to VAERS” was “**miscarriage.**”

Then in August of this year (2021), the [CDC presented a “new study”](#) with “new data.”

Again, this “data” is dependent on pregnant women “self-reporting” adverse reactions, so

we know these reports will be well below what was actually happening in the population, as it is politically incorrect to report any adverse reactions related to the experimental COVID-19 shots. To do so is to be branded an “anti-vaxxer” and shame you for life.

The [August update](#) admitted that 13% of the pregnant women who had received a COVID-19 shot reported a miscarriage. The CDC brushed this aside by stating “miscarriage typically occurs in about 11-16% of pregnancies.”

But of course ALL miscarriages are reported somewhere in the medical files, which is why they can even come up with a number range like this. So this figure is based on 100% of the reported data, while the COVID-19 related miscarriages are only based on what was self-reported, and we have no idea how many women never reported their miscarriages because they never related it to their COVID-19 shot.

One the main studies the CDC allegedly relied upon to declare that COVID-19 shots were safe for pregnant women, was [a study published in the New England Journal of Medicine](#) on June 17, 2021.

But on October 14, 2021, they issued a statement stating that some of their data was wrong in the June 17th study. ([Source.](#)) It dealt specifically with pregnancies in their 20th week or earlier.

“No denominator was available to calculate a risk estimate for spontaneous abortions, because at the time of this report, follow-up through 20 weeks was not yet available for 905 of the 1224 participants vaccinated within 30 days before the first day of the last menstrual period or in the first trimester. Furthermore, any risk estimate would need to account for gestational week-specific risk of spontaneous abortion.” ([Source.](#))

In this video we produced in October, Dr. Byram Bridle in Canada and Dr. Martin Kulldorff of Harvard Medical School discuss the significance of this error made in this study which determined CDC policy on Fox News with Laura Ingraham. (It is in the second half of the video after the examples of adverse events on infants.)

Since then, researchers in New Zealand have conducted [a new study](#) on the original data, and concluded:

A re-analysis of these figures indicates a cumulative incidence of spontaneous abortion ranging from 82% (104/127) to 91% (104/114), 7-8 times higher than the original authors’ results. ([Source.](#))

And yet, the CDC and FDA still continue to recommend the shots for pregnant women, even though a correct analysis on the original data shows that 82% to 91% of pregnant women will suffer miscarriages if their unborn child is less than 20 weeks old. ([Source.](#))

We also have evidence that Pfizer knew about the risk of their COVID-19 shots to pregnant women.

In May of this year (2021), [we published a report](#) written by Bud Shaver of [Abortion Free New Mexico](#) based on a whistleblower who served on a COVID-19 task force and had found documents that Pfizer had submitted to the European Medicines Agency (EMA) to authorize the shots in Europe, which included animal trials that showed there were serious birth

defects occurring in rat specimens.

The Pfizer factsheets state that pregnant or breastfeeding women should discuss their options with their healthcare providers. Although the U.S. FDA has not released the full study details provided to them for approval of the emergency use authorization (EUA), the European Medicines Agency has.

The full study documents are available at www.ema.europa.eu.

According to the reproduction toxicity study on the Pfizer product, performed in pregnant rats: **“There was an increase (~2x) of pre-implantation (pregnancy) loss”and, “a very low incidence of gastroschisis, mouth/jaw malformations, right sided aortic arch, and cervical vertebrae abnormalities.”**

They claim that these pregnancy reductions are within normal histological ranges, however, they were consistently seen, and are likely statistically significant. Gastroschisis is where the intestines grow outside of the body.

Right-sided aortic arch means the heart has basically formed in the wrong direction (the aortic arch should be on the left side). ([Source.](#))

This would support what we have found in VAERS regarding “ectopic pregnancies” following COVID-19 shots, which have been reported at 50 X more than reported following ALL vaccines for the past 30+ years. See: [VAERS Data Reveals 50 X More Ectopic Pregnancies Following COVID Shots than Following ALL Vaccines for Past 30 Years](#)

Last month, November, 2021, we [published the report written by Attorney Aaron Siri](#), a Vaccine Injury attorney, who is suing the FDA on behalf of several physicians who are the plaintiffs and have chosen to put their careers on the line to dare to expose vaccine deaths and injuries caused by the experimental COVID-19 shots.

Attorney Siri wrote that Pfizer had requested to take 55 years to supply their trial data on the COVID-19 shots.

The FDA has [asked](#) a federal judge to make the public wait until the year 2076 to disclose all of the data and information it relied upon to license Pfizer’s COVID-19 vaccine. That is not a typo. It wants 55 years to produce this information to the public.

So, let’s get this straight. The federal government shields Pfizer from [liability](#). Gives it billions of [dollars](#). Makes Americans take its [product](#). But won’t let you see the data supporting its product’s safety and efficacy. Who does the government work for? ([Source.](#))

In a [follow up article](#) he published on November 19, 2021, he reported that the judge was forcing Pfizer to start releasing the data, and that they had released the first 91+ pages.

Two months and one day after it was [sued](#), and close to 3 months since it licensed Pfizer’s Covid-19 vaccine, the FDA released the first round of documents it reviewed before licensing this product. The production consisted of 91 pdf pages, one xpt file, and one txt file. You can download them [here](#).

While it is for the scientists to properly analyze, let me share one observation. One of the documents produced is a *Cumulative Analysis of Post-Authorization Adverse Event Reports of [the Vaccine] Received Through 28-Feb-2021*, which is a mere 2 ½ months after the vaccine received emergency use authorization (EUA). This document reflects adverse events following vaccination that have completed Pfizer’s “workflow cycle,” both in and outside the U.S., up to February 28, 2021.

Pfizer explains, on page 6, that “Due to the large numbers of spontaneous adverse event reports received for the product, [Pfizer] has prioritised the processing of serious cases...” and that Pfizer “has also taken a [sic] multiple actions to help alleviate the large increase of adverse event reports” including “increasing the number of data entry and case processing colleagues” and “has onboarded approximately [REDACTED] additional fulltime employees (FTEs).” Query why it is proprietary to share how many people Pfizer had to hire to track all of the adverse events being reported shortly after launching its product.

As for the volume of reports, in the 2 ½ months following EUA, Pfizer received a total of 42,086 reports containing 158,893 “events.” Most of these reports were from the U.S. and disproportionately involved women (29,914 vs. 9,182 provided by men) and those between 31 and 50 years old (13,886 vs 21,325 for all other age groups combined, with another 6,876 whose ages were unknown). Also, 25,957 of the events were classified as “Nervous system disorders.” ([Source](#).)

So by the end of February of this year (2021), as Pfizer was petitioning the FDA for full approval of their EUA COVID-19 shot, they already had data from 42,086 reports containing 158,893 “events,” disproportionately affecting women between the ages of 31 and 50.

In Pfizer’s “postmarketing” report, [found here](#), there is a Table, Table 6, labeled “Description of Missing Information” for “Use in Pregnancy and lactation,” which covers 274 cases and states:

Pregnancy cases: 274 cases including:

- 270 mother cases and 4 foetus/baby cases representing 270 unique pregnancies (the 4 foetus/baby cases were linked to 3 mother cases; 1 mother case involved twins).
- Pregnancy outcomes for the 270 pregnancies were reported as spontaneous abortion (23), outcome pending (5), premature birth with neonatal death, spontaneous abortion with intrauterine death (2 each), spontaneous abortion with neonatal death, and normal outcome (1 each). No outcome was provided for 238 pregnancies (note that 2 different outcomes were reported for each twin, and both were counted).
- 146 non-serious mother cases reported exposure to vaccine in utero without the occurrence of any clinical adverse event. The exposure PTs coded to the PTs Maternal exposure during pregnancy (111), Exposure during pregnancy (29) and maternal exposure timing unspecified (6). Trimester of exposure was reported in 21 of these cases: 1st trimester (15 cases), 2nd trimester (7), and 3rd trimester (2).
- 124 mother cases, 49 non-serious and 75 serious, reported clinical events, which occurred in the vaccinated mothers. Pregnancy related events reported in these cases coded to the PTs Abortion spontaneous (25), Uterine contraction during pregnancy, Premature rupture of membranes, Abortion, Abortion missed, and Foetal death (1 each).
- 4 serious foetus/baby cases reported the PTs Exposure during pregnancy, Foetal

growth restriction, Maternal exposure during pregnancy, Premature baby (2 each), and Death neonatal (1). Trimester of exposure was reported for 2 cases (twins) as occurring during the 1st trimester.

This was the data that the FDA used to approve the Pfizer COVID-19 shot.

They also provided data to the FDA for breastfeeding babies that clearly indicated the shots were affecting these babies.

Breast feeding baby cases: 133, of which:

- 116 cases reported exposure to vaccine during breastfeeding (PT Exposure via breast milk) without the occurrence of any clinical adverse events;
- 17 cases, 3 serious and 14 non-serious, reported the following clinical events that occurred in the infant/child exposed to vaccine via breastfeeding: Pyrexia (5), Rash (4), Infant irritability (3), Infantile vomiting, Diarrhoea, Insomnia, and Illness (2 each), Poor feeding infant, Lethargy, Abdominal discomfort, Vomiting, Allergy to vaccine, Increased appetite, Anxiety, Crying, Poor quality sleep, Eructation, Agitation, Pain and Urticaria (1 each).

Breast feeding mother cases (6):

- 1 serious case reported 3 clinical events that occurred in a mother during breast feeding (PT Maternal exposure during breast feeding); these events coded to the PTs Chills, Malaise, and Pyrexia
- 1 non-serious case reported with very limited information and without associated AEs. ([Source.](#))

And this was at the end of February. We can clearly see what the results have been on unborn children since then just based on the limited data reported to VAERS, where there has been an 80% increase in fetal deaths recorded in VAERS following the COVID-19 shots.

Now I'm just a reporter sitting behind a computer accessing this publicly available data so that I can report it to you.

You can be certain that the scientists and researchers working at Pfizer, the FDA, and the CDC have access to all of this data as well.

This article alone, with all the links to the publicly available data, has more than enough information to immediately issue arrest warrants for Rochelle Walensky, the director of the CDC, Janet Woodcock, the FDA director, and Albert Bourla, the CEO of Pfizer, for mass murder and crimes against humanity.

But is there an attorney anywhere in the United States who would issue these warrants?

We can pretty much rule out Biden's Attorney General for the U.S., Merrick Garland.

Are there any attorney generals in the 50 United States who would have the courage and the blessing of their Governor to issue arrest warrants like this?

Not likely, as not a single governor of any state, whether Red or Blue, has taken any actions to protect life and arrest the criminals behind these bioweapon shots.

But since these are federal agencies, the FDA and CDC, that affect every single citizen of the

United States, a county District Attorney could issue warrants and try to serve them. They would mostly likely need something like a militia group, perhaps comprising of Sheriff deputies and members of their State National Guard, to be able to attempt something like this.

But if nothing is done at all, these deaths will continue to climb, as they are now injecting children between the ages of 5 and 11, and are getting ready to inject babies soon between the ages of 6 months and 4-years-old, just after the first of the year.

Is this the United States you want to live in and be a part of? How long are we going to stand by and watch innocent people killed to fulfill the Globalists' eugenic plans to reduce our population?

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