

Breaking: AI-powered DoD Data Analysis Program Named “Project Salus” Shatters Official Vaccine Narrative, Shows A.D.E. Accelerating in the Fully Vaccinated with Each Passing Week

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Global Research, October 11, 2021

[NaturalNews.com](#) 1 October 2021

Region: [USA](#)

Theme: [Science and Medicine](#)

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An AI-powered Dept. of Defense program named “[Project Salus](#),” run in cooperation with the JAIC ([Joint Artificial Intelligence Center](#)), has analyzed data on 5.6 million Medicare beneficiaries aged 65 or older. Data were aggregated from [Humetrix](#), a real-time data and analytics platform that tracks health care outcomes. Legal analysis from Thomas Renz of [Renz-Law.com](#) is included in a breaking video interview, below.

The alarming findings show that the vast majority of covid hospitalizations are occurring among fully-vaccinated individuals and that **outcomes among the fully vaccinated are growing worse with each passing week**. This appears to fit the pattern of so-called Antibody Dependent Enhancement, where the treatment intervention (mRNA vaccines) is worsening health outcomes and leading to excess hospitalizations and deaths.

These data, presented here, shatter the official Biden / Fauci narrative that falsely claims America is experiencing, “a pandemic of the unvaccinated.” The data show that the pandemic actually appears to be *accelerated* by covid-19 vaccines, while unvaccinated individuals are having far better outcomes than the vaccinated.

Furthermore, according to these data (shown below), the single best strategy for avoid post-vaccine infections and hospitalizations is **natural immunity** derived from a previous covid infection.

Effectiveness of mRNA COVID-19 Vaccines Against the Delta Variant Among 5.6M Medicare Beneficiaries 65 Years and Older

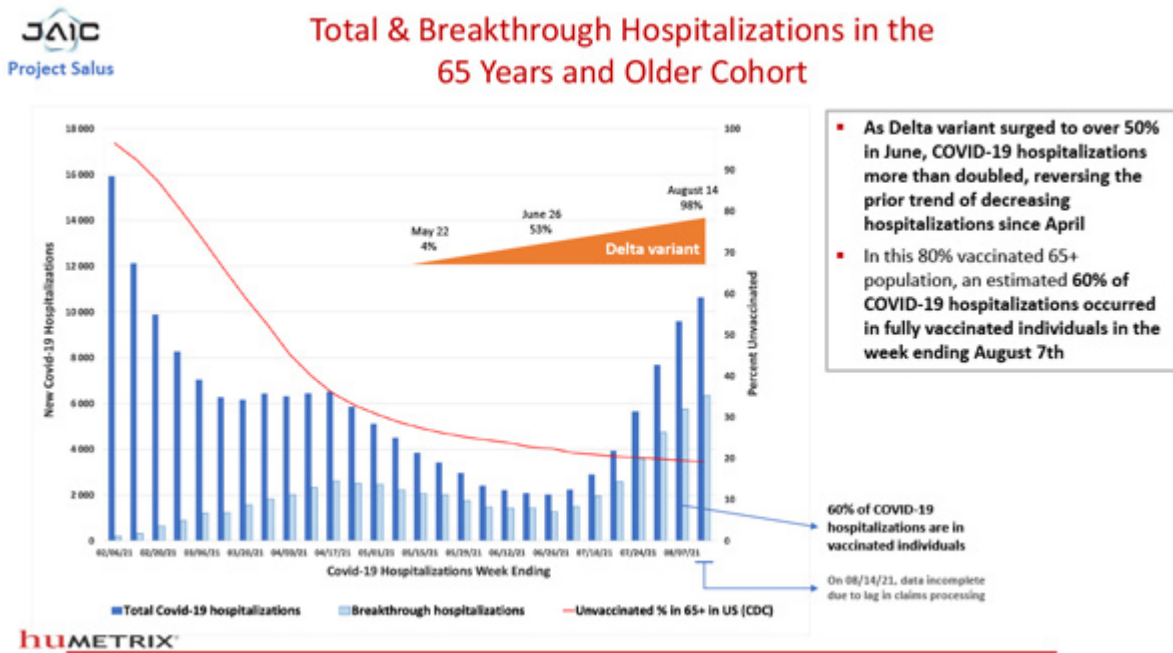
Weekly update of September 28, 2021



The full analysis is entitled, “Effectiveness of mRNA COVID-19 vaccines against the Delta variant among 5.6M Medicare beneficiaries 65 years and older” and is dated Sep. 28, 2021. The presentation of these data consists of 17 slides, which are available [at the Humetric website in slide form](#), also posted on Natural News servers [in this PDF version](#) which is more convenient for viewing and printing.

From the JAIC Project Salus document:

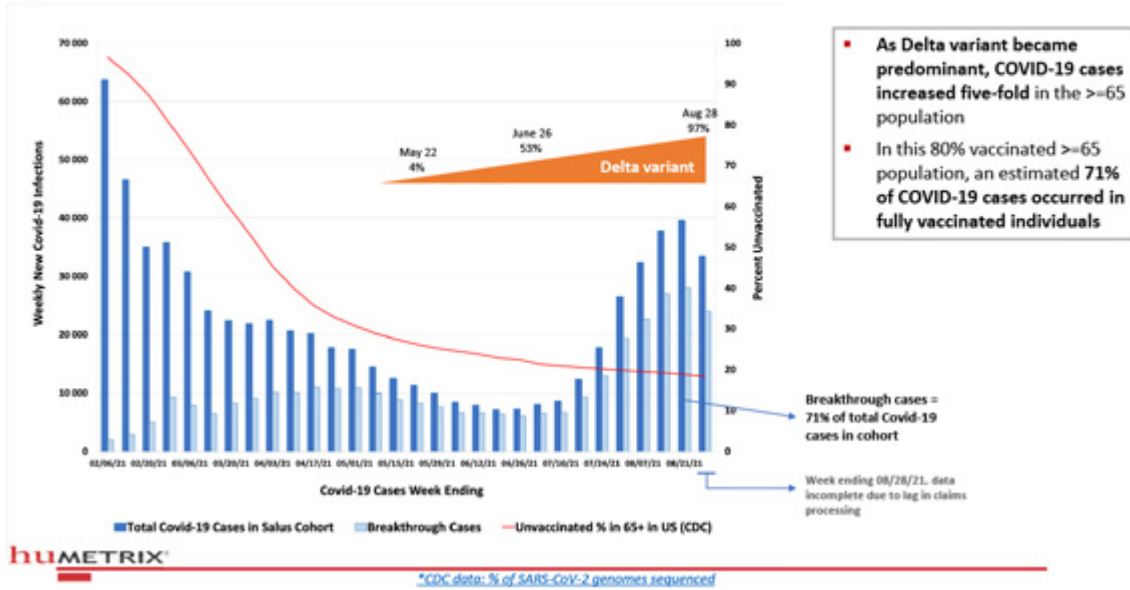
In this 80% vaccinated 65+ population, an estimated 60% of COVID-19 hospitalizations occurred in fully vaccinated individuals in the week ending August 7th.



By August 21st, 71% of covid-19 “cases” were occurring among fully vaccinated individuals:

In this 80% vaccinated 65+ population, an estimated 71% of COVID-19 cases occurred in fully vaccinated individuals.

Total & Breakthrough Cases in the 65 Years and Older Salus Cohort



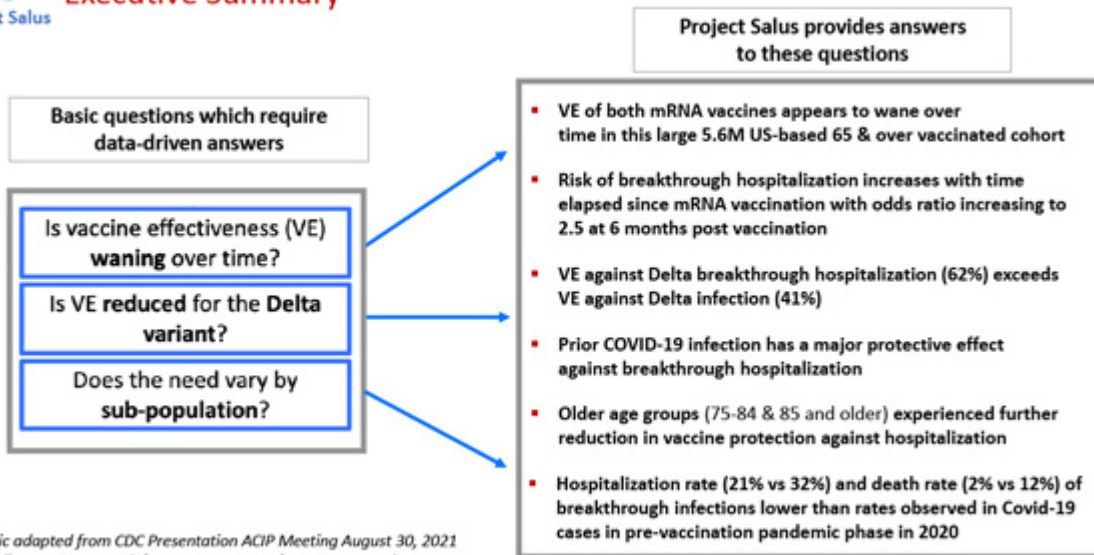
These data reveal that as the Delta variant approached a 97% infection rate, “cases” and hospitalizations among fully vaccinated individuals showed striking increases with each passing week.

Key findings of the DoD / JAIC / Project Salus / Humetrix analysis

Throughout the slides, “VE” refers to vaccine effectiveness. “Breakthrough” means a failed vaccine, where a fully vaccinated person is diagnosed with covid. Many of those people require hospitalization and ICU treatments (see the slides below).

Some of the key findings of the Project Salus analysis include:

- The effectiveness of mRNA vaccines is confirmed to wane over time.
- With each passing week, those vaccinated with mRNA vaccines show an *increased risk* of vaccine failure / covid infections requiring hospitalization. From the analysis: “Odds ratio increasing to 2.5 at 6 months post vaccination.”
- Natural immunity works: A prior covid infection greatly reduces the odds of a vaccinated person needing hospitalization from a subsequent infection.



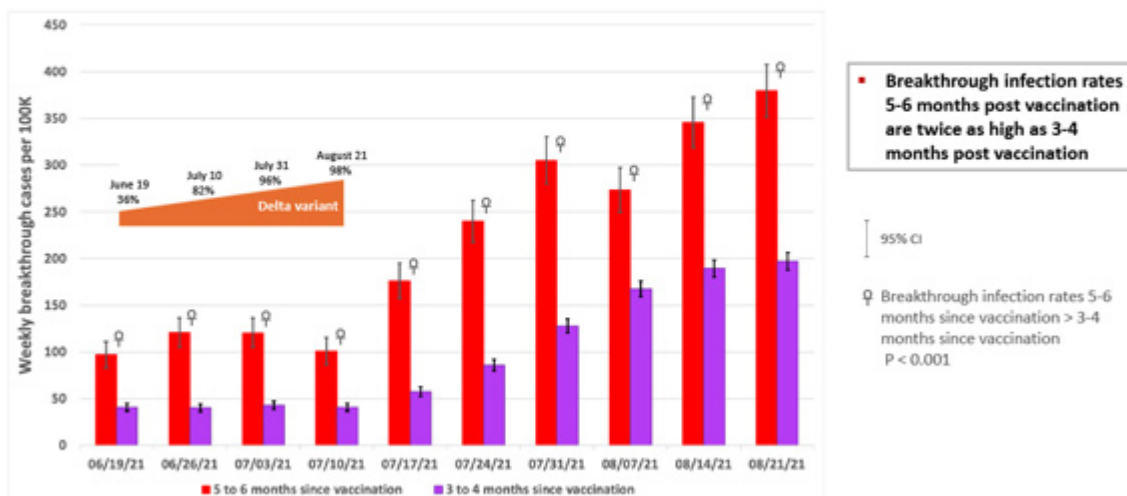
Graphic adapted from CDC Presentation ACIP Meeting August 30, 2021
Oliver, S. Framework for Booster Doses of COVID-19 Vaccines

Vaccine failure dramatically worsens within 5-6 months after being vaccinated

One slide from the analysis reveals that so-called “breakthrough” infections — vaccine failures — increase with time, showing a near doubling of breakthrough infections among those vaccinated 5-6 months ago vs. those vaccinated only 3-4 months ago.

These data end at August 21st, 2021 but the trend does not appear to be flattening. As more data are added to this analysis each week, it seems almost certain that breakthrough infections rates will continue to rise over time in vaccinated individuals. We do not yet know what will happen in 9 months after vaccination, but these data show cause for serious concern.

Is mRNA Vaccine Effectiveness Against Delta Breakthrough Infection Waning Over Time in 65 Years and Older Salus Cohort?

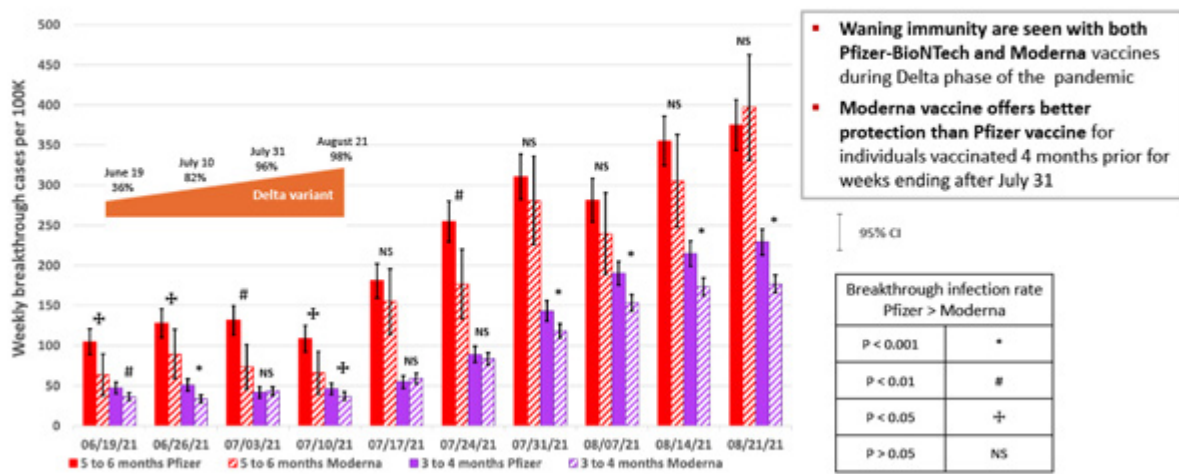


The following chart reveals that both Pfizer and Moderna vaccines are showing the same pattern of worsening “breakthrough” infection rates over time. Notice the upward trend of all the bars in this chart, meaning both mRNA vaccines are producing the same increase in

infections among the fully vaccinated:



Are There Differences in Waning Effectiveness Between Pfizer-BioNTech and Moderna Vaccines in the 65 Years and Older Cohort ?



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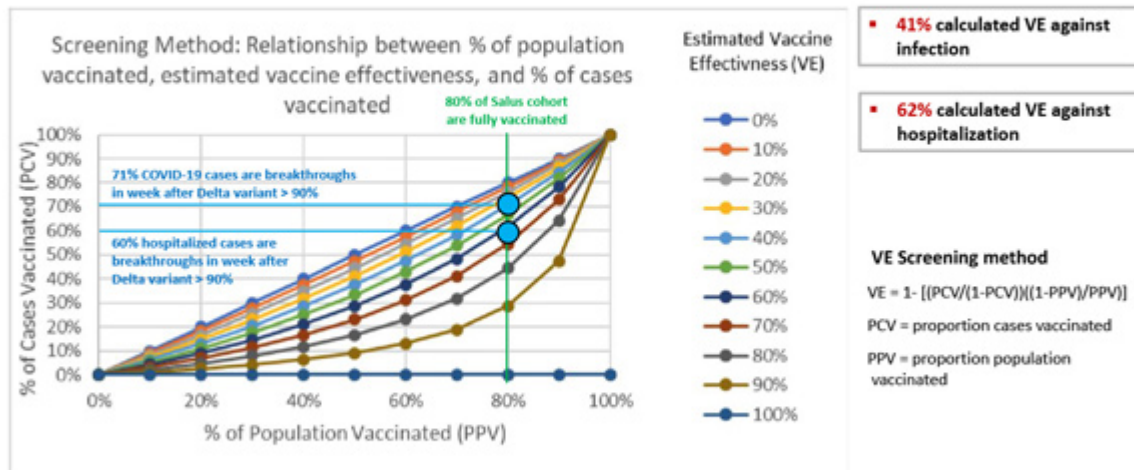
Once the Delta variant took hold, 71% of COVID-19 “breakthrough” cases occurred among the fully vaccinated

As the following chart shows, 71% of COVID-19 “cases” were breakthrough cases (vaccine failures) once the Delta variant reached 90% spread across those infected.

Understand that the authors of this document state that **those who are jabbed are not considered “vaccinated” until two weeks after they received the injections**, which means that infections, hospitalizations and deaths which occurred from 0 - 14 days are ignored in this data set.

In reality, that means the percentage of “fully vaccinated” people responsible for breakthrough infections, hospitalizations and deaths is substantially *higher* than what is shown in these data. If they are claiming a 71% rate, it may in reality be more like 80% or even 90%, but we don’t know for sure because they are hiding all negative health outcomes for the first two weeks after the vaccines are administered (by claiming those people are “unvaccinated,” which is a deliberate deception being used to try to hide the harmful effects of vaccines).

What is the Vaccine Effectiveness Against the Delta Variant in the Salus Cohort? – Using the CDC Screening Approach



Graphic adapted from CDC Presentation July 30, 2021
improving communication around vaccine breakthrough and vaccine effectiveness

Ethnic groups hit hardest: Native Americans, Hispanics and Blacks

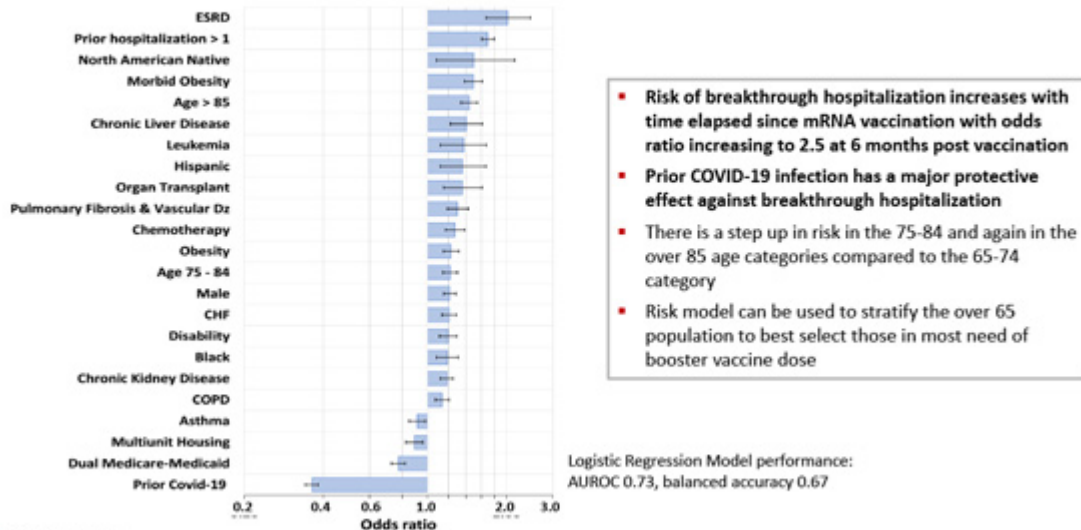
Finally, a horrifying slide in the data set reveals that one of the highest risk factors for being hospitalized after being vaccinated is simply being of Native American descent. According to the data in this slide, Native Americans face around 50% higher odds of being hospitalized after being vaccinated, compared to other ethnic groups such as Whites.

Hispanics face a slightly lower risk which appears to be around 40% higher odds. Blacks face around 25% higher odds.

Why is this the case? The gain-of-function properties which were engineered into the SARS-CoV-2 biological weapon — via Fauci, Daszak and the NIH — target ACE2 receptors which exist in higher densities in targeted organ systems of many minority groups such as Native Americans, Hispanics and Blacks. This has led many observers to conclude that the covid spike protein — which is generated in the bodies of those who take mRNA vaccines — is a race-specific bioweapon designed to achieve depopulation of minority groups. Louis Farrakhan, leader of the Nation of Islam, has engaged in many efforts to bring this to the attention of his followers, for example. These data provided by the DoD / JAIC / Project Salus document shown here **appear to support the plausibility of such theories.**

Other factors that greatly increase a person's odds of being hospitalized after receiving vaccinations include kidney failure (ESRD), morbid obesity, chronic liver disease or receiving chemotherapy.

Risk Model for Breakthrough Hospitalization



Natural immunity offers documented protect against future hospitalization

Finally, the data presented in this document shows that natural immunity — listed as “prior covid-19” substantially *decreases* the risk of hospitalization after receiving covid-19 vaccines. (See slide above.)

What this means is that the best way to ensure the safest outcome of a covid vaccine is to **experience a covid infection before getting vaccinated**. This dramatically reduces your risk of negative health outcomes.

Then again, if someone has already had covid, why would they need a vaccine in the first place? If anything, these data show that anyone choosing to receive covid-19 vaccines is making the *wrong* choice if they desire to avoid infections, hospitalizations or deaths.

Natural immunity, once again, is revealed as the most effective status that reduces negative outcomes.

Conclusion

In conclusion, these data from the DoD / JAIC absolutely shatter the false narrative of Biden, Fauci, Walensky and other “authorities” who are still attempting to gaslight the American people into thinking that hospitals are filled with unvaccinated people. In reality, the vast majority of hospitalizations and deaths are occurring among those who were fully vaccinated, according to the 5.6 million people studied in this particular data set (Medicare).

Importantly, **post-vaccine health outcomes are worsening over time**, meaning that the vaccines appear to be gradually damaging the immune system over subsequent months, making vaccinated individuals far more vulnerable to subsequent infections.

This is the very definition of ADE (Antibody Dependent Enhancement), about which many analysts such as Dr. Sherri Tenpenny have warned. Now, it appears that ADE is no longer merely a theory but rather **a confirmed phenomenon reflected in official Medicare data**.

Attorney Thomas Renz told Natural News today that these data should immediately result in not just the FDA's revocation of mRNA vaccine EUA and approval status, but that the FDA, Fauci and Big Pharma's top executives should be **sued under RICO Act violations for racketeering and organized crime.**

The full interview with Thomas Renz is available here:

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