

Shockingly, CDC Now Lists Vaccinated Deaths as Unvaccinated

By [Dr. Joseph Mercola](#)

Global Research, September 15, 2021
[Mercola](#)

Region: [USA](#)

Theme: [Media Disinformation](#), [Science and Medicine](#)

All Global Research articles can be read in 51 languages by activating the “Translate Website” drop down menu on the top banner of our home page (Desktop version).

Visit and follow us on Instagram at [@crg_globalresearch](#).

According to the U.S. Centers for Disease Control and Prevention, you’re not counted as fully vaccinated until a full 14 days have passed since your second injection in the case of Pfizer or Moderna, or 14 days after your first dose of Janssen, despite the fact that over 80% of deaths after the vaccines occur in this window. How convenient

Anyone who dies within the first 14 days post-injection is counted as an unvaccinated death. Not only does this inaccurately inflate the unvaccinated death toll, but it also hides the real dangers of the COVID shots, as the vast majority of deaths from these shots occur within the first two weeks

The CDC also has two different sets of testing guidelines — one for vaccinated patients and another for the unvaccinated. If you’re unvaccinated, CDC guidance says to use a cycle threshold (CT) of 40, known to result in false positives. If you’re vaccinated, they recommend using a CT of 28 or less, which minimizes the risk of false positives

The CDC also hides vaccine failures and props up the “pandemic of the unvaccinated” narrative by only counting breakthrough cases that result in hospitalization or death

Hospitals are still also reporting non-COVID related illnesses as COVID-19

*

While public health officials and mainstream media claim the COVID-19 pandemic is now “a pandemic of the unvaccinated,”¹ we now know this claim is based on highly misleading statistics.

In a July 16, 2021, White House press briefing,² U.S. Centers for Disease Control and Prevention director **Dr. Rochelle Walensky** claimed that “over 97% of people who are entering the hospital right now are unvaccinated.” A few weeks later, in an August 5, 2021,

statement, she inadvertently revealed how that statistic actually came about.³

As it turns out, the CDC was looking at hospitalization and mortality data from January through June 2021 — a timeframe during which the vast majority of the U.S. population were still unvaccinated.⁴

But that's not the case at all now. The CDC is also playing with statistics in other ways to create the false and inaccurate impression that unvaccinated people make up the bulk of infections, hospitalizations and deaths. For example, we now find out the agency is counting anyone who died within the first 14 days post-injection as unvaccinated.

Not only does this inaccurately inflate the unvaccinated death toll, but it also hides the real dangers of the COVID shots, as the vast majority of deaths from these shots occur within the first two weeks.⁵ Now their deaths are counted as unvaccinated deaths rather than being counted as deaths due to vaccine injury or COVID-19 breakthrough infections!

How CDC Counts Breakthrough Cases

According to the CDC,⁶ you're not counted as fully vaccinated until a full 14 days have passed since your second injection in the case of Pfizer or Moderna, or 14 days after your first dose of Janssen. This is how the CDC defines a vaccine breakthrough case:

"... a vaccine breakthrough infection is defined as the detection of SARS-CoV-2 RNA or antigen in a respiratory specimen collected from a person ≥ 14 days after they have completed all recommended doses of a U.S. Food and Drug Administration (FDA)-authorized COVID-19 vaccine."

In other words, if you've received one dose of Pfizer or Moderna and develop symptomatic COVID-19, get admitted to the hospital and/or die from COVID, you're counted as an unvaccinated case. If you've received two doses and get ill within 14 days, you're still counted as an unvaccinated case.

The problem with this is that over 80% of hospitalizations and deaths appear to be occurring among those who have received the jabs, but this reality is hidden by the way cases are defined and counted. A really clever and common strategy of the CDC during the pandemic has been to change the definitions and goalposts so it supports their nefarious narrative.

For example, the CDC has quietly changed the definition of "vaccine," apparently in an attempt to validate calling the COVID mRNA gene therapies vaccines. In an August 26, 2021, archived version⁷ of vaccine, the CDC defines it as a "product that stimulates a person's immune system to produce immunity to a specific disease, protecting the person from that disease."

But a few days later, a new definition appeared on the CDC's website,⁸ which now says a vaccine is a "preparation that is used to stimulate the body's immune response against diseases." The differences in the definitions are subtle but distinct: The first one defined a vaccine as something that will "produce immunity."

But, since the COVID-19 vaccines are not designed to stop infection but, rather, to only

lessen the degree of infection, it becomes obvious that the new definition was created to cover the COVID vaccines.

Different Testing Guidelines for Vaxxed and Unvaxxed

It's not just the CDC's definition of a breakthrough case that skews the data. Even more egregious and illogical is the fact that the CDC even has two different sets of testing guidelines — one for vaccinated patients and another for the unvaccinated.

Since the beginning of the pandemic, the CDC has recommended a PCR test cycle threshold (CT) of 40.⁹ This flies in the face of scientific consensus, which has long been that a CT over 35 will produce 97% false positives,¹⁰ essentially rendering the test useless.^{11,12,13}

In mid-May 2021, the CDC finally lowered its recommended CT count, but only for patients who have received one or more COVID shots.¹⁴ So, if you have received a COVID injection, the CDC's guidelines call for your PCR test to be run at a CT of 28 or less. If you are unvaccinated, your PCR test is to be run at a CT of 40, which grossly overestimates the true prevalence of infection.

The end result is that unvaccinated individuals who get tested are FAR more prone to get false positives, while those who have received the jab are more likely to get an accurate diagnosis of infection.

Only Hospitalization and Death Count if You're COVID Jabbed

Even that's not all. The CDC also hides vaccine failures and props up the "pandemic of the unvaccinated" narrative by only counting breakthrough cases that result in hospitalization or death.

In other words, if you got your second COVID shot more than 14 days ago and you develop symptoms, you do not count as a breakthrough case unless you're admitted to the hospital and/or die from COVID-19 in the hospital, even if you test positive. So, to summarize, COVID breakthrough cases count only if all of the following apply:

- The patient received the second dose of the Pfizer or Moderna shot at least 14 days ago (or one dose in case of Johnson & Johnson's single-dose injection)
- The patient tests positive for SARS-CoV-2 using a CT of 28 or less, which avoids false positives
- The patient is admitted to the hospital for COVID-19 and/or dies in the hospital

Vaccinated Probably Make Up Bulk of Hospitalizations

If vaccinated and unvaccinated were not treated with such varying standards, we'd probably find that the vaccinated now make up the bulk of hospitalizations, making the COVID pandemic one of the vaccinated. An August 30, 2021, exposé by The Epoch Times reveals what's really happening on the front lines:¹⁵

"After a battery of testing, my friend was diagnosed with pancreatitis. But it was easier for the hospital bureaucracy to register the admission as a COVID case ... The mainstream media is reporting that severe COVID cases are mainly among

unvaccinated people ... Is that what's really going on?

It's certainly not the case in Israel, the first country to fully vaccinate a majority of its citizens against the virus. Now it has one of the highest daily infection rates and the majority of people catching the virus (77 percent to 83 percent, depending on age) are already vaccinated, according to data collected by the Israeli government ...

After admission, I spoke to the nurse on the COVID ward ... The nurse told me that she had gotten both vaccines but she was feeling worried: 'Two thirds of my patients are fully vaccinated,' she said. How can there be such a disconnect between what the COVID ward nurse told me and the mainstream media reports?"

The heart of the problem is that the U.S. is not even trying to achieve an accurate count. As noted by The Epoch Times, "the Centers for Disease Control and Prevention have publicly acknowledged that they do not have accurate data."

So, when you hear that cases are rising, and that most of them are unvaccinated, you need to ask: "Are these people who have had one vaccine and gotten sick, two vaccines and gotten sick, or no vaccines at all? Without more details, it is impossible to know what is really going on," The Epoch Times says.¹⁶

All we do know, according to one doctor who spoke with The Epoch Times, is "the vaccines are not as effective as public health officials told us they would be. 'This is a product that's not doing what it's supposed to do. It's supposed to stop transmission of this virus and it's not doing that.'"

Counting Non-COVID Illness as COVID Cases

On top of all of that, hospitals are still also reporting non-COVID related illnesses as COVID. As reported by The Epoch Times:¹⁷

"Health authorities around the world have been doing this since the beginning of the COVID crisis. For example, a young man in Orange County, Florida who died in a motorcycle crash last summer was originally considered a COVID death by state health officials ...

And a middle-aged construction worker fell off a ladder in Croatia and was also counted as a death from COVID ... To muddy the waters further, even people who test negative for COVID are sometimes counted as COVID deaths.

Consider the case of 26-year-old Matthew Irvin, a father of three from Yamhill County, Oregon. As reported by KGW8 News, Irvin went to the ER with stomach pain, nausea, and diarrhea on July 5, 2020. But instead of admitting him to the hospital, the doctors sent him home.

Five days later, on July 10, 2020, Irvin died. Though his COVID test came back negative two days after his death and his family told reporters and public health officials that no one Irvin had been around had any COVID symptoms, the medical examiner allegedly told the family that an autopsy was not necessary, listing his death as a coronavirus case. It took the Oregon Health Authority two and a half months to correct the mistake.

In an even more striking example of overcounting COVID deaths, a nursing home in New Jersey that only has 90 beds was wrongly reported as having 753 deaths from COVID. According to a spokesman, they had fewer than twenty deaths. In other words, the number of deaths was over-reported by 3,700 percent."

No Need to Fear the Delta Variant if You're Unvaccinated



[Watch the video here.](#)

In a June 29, 2021, interview,¹⁸ Fauci called the Delta variant “a game-changer” for unvaccinated people, warning it will devastate the unvaccinated population while vaccinated individuals are protected against it. Alas, in the real world, the converse is turning out to be true, as the Delta variant is running wild primarily among those who got the COVID jab.

The Delta variant contains three different mutations, all in the spike protein. This allows this variant to evade the immune responses in those who have received the COVID jabs, but not those who have natural immunity, which is much broader.

In a June 30, 2021, appearance on Fox News (video above), epidemiologist and cardiologist Dr. Peter McCullough pointed out that “It is very clear from the U.K. Technical Briefing¹⁹ that was published June 18 that the vaccine provides no protection against the Delta variant.”²⁰

The reason for this is because the Delta variant contains three different mutations, all in the spike protein. This allows this variant to evade the immune responses in those who have received the COVID jabs, but not those who have natural immunity, which is much broader.

Even so, the Delta variant is far milder than previous variants, according to the U.K.’s June 18, 2021, Technical Briefing.²¹ In it, they present data showing the Delta variant is more contagious but far less deadly and easier to treat. As McCullough told Fox News:

“Whether you get the vaccine or not, patients will get some very mild symptoms like a cold and they can be easily managed ... Patients who have severe symptoms or at high risk, we can use simple drug combinations at home and get them through the illness. So, there’s no reason now to push vaccinations.”

Contrast that with the following statement made by President Biden during a CNN town hall meeting in Cincinnati, Ohio, in late July 2021:²²

“We have a pandemic for those who haven’t gotten a vaccination. It’s that basic, that simple. If you’re vaccinated, you’re not going to be hospitalized, not going to the ICU unit, and not going to die. You’re not going to get COVID if you have these vaccinations.”

However, Dr. Leana Wen, an emergency doctor and visiting professor of health policy and management at George Washington University’s Milken School of Public Health in Washington, D.C., contradicted the president, saying he had led the American astray by telling them you don’t need a mask if you’re vaccinated, or that you can’t get it or transmit it. As reported by CNN Health:²³

“In particular, Wen took issue with Biden’s incorrect claims that you cannot contract Covid-19 or the Delta variant if you are vaccinated. ‘I was actually disappointed,’ Wen said. ‘I actually thought he was answering questions as if it were a month ago. He’s not really meeting the realities of what’s happening on the ground. I think he may have led people astray.’”

CNN added that Wen had told their political commentator Anderson Cooper that “many unknown answers remain related to Covid-19, and that it is still not known how well protected vaccinated individuals are from mild illness ... [or] if you’re vaccinated, could you still be contagious to other people.”

Vaccinated Patients Flood Hospitals Around the World

The U.K. data showing the Delta variant is far milder than previous SARS-CoV-2 viruses deflates the claim that avoiding severe illness is a sign that the shots are working. Since the Delta variant typically doesn’t cause severe illness in the first place, it doesn’t make sense to attribute milder illness to the shot.

But if Delta is the mildest coronavirus variant yet, why are so many “vaccinated” people ending up in the hospital? While we still do not have clear confirmation, this could be a sign that antibody dependent enhancement (ADE) is at work. Alternatively, it could be that vaccine injuries are being misreported as breakthrough cases.

Whatever the case may be, real-world data from areas with high COVID jab rates show a disturbing trend. For example, August 1, 2021, the director of Israel’s Public Health Services, Dr. Sharon Alroy-Preis, announced half of all COVID-19 infections were among the fully vaccinated.²⁴ Signs of more serious disease among fully vaccinated are also emerging, she said, particularly in those over the age of 60.

A few days later, August 5, 2021, Dr. Kobi Haviv, director of the Herzog Hospital in Jerusalem, appeared on Channel 13 News, reporting that 95% of severely ill COVID-19

patients are fully vaccinated, and that they make up 85% to 90% of COVID-related hospitalizations overall.²⁵

In Scotland, official data on hospitalizations and deaths show 87% of those who have died from COVID-19 in the third wave that began in early July were vaccinated.²⁶

In Gibraltar, which has a 99% COVID jab compliance rate, COVID cases have risen by 2,500% since June 1, 2021,²⁷ and in Iceland, where over 82% have received the shots, 77% of new COVID cases are among the fully vaccinated.²⁸

Data from the U.K. show a similar trend among those over the age of 50. In this age group, partially and fully “vaccinated” people account for 68% of hospitalizations and 70% of COVID deaths.²⁹

A CDC investigation of an outbreak in Barnstable County, Massachusetts, between July 6, 2021, through July 25, 2021, found 74% of those who received a diagnosis of COVID19, and 80% of hospitalizations, were among the fully vaccinated.^{30,31} Most, but not all, had the Delta variant.

The CDC also found that fully vaccinated individuals who contract the infection have as high a viral load in their nasal passages as unvaccinated individuals who get infected.³² The same was found in a British study, a preprint of which was posted mid-August 2021.^{33,34} This means the vaccinated are just as infectious as the unvaccinated.

Interestingly, a Lancet preprint study³⁵ that examined breakthrough infections in health care workers in Vietnam who received the AstraZeneca COVID shot found the “viral loads of breakthrough Delta variant infection cases were 251 times higher than those of cases infected with old strains detected between March-April 2020.”

What’s more, they found no correlation between vaccine-induced neutralizing antibody levels and viral loads or the development of symptoms. According to the authors:

“Breakthrough Delta variant infections are associated with high viral loads, prolonged PCR positivity, and low levels of vaccine-induced neutralizing antibodies, explaining the transmission between the vaccinated people.”

Not All Vaccinated Are Confirmed Vaccinated

As if all of that weren’t enough, there’s yet one more confounder. Just because you got the COVID shot does not mean you’ve been confirmed as having gotten the shot. You’re only confirmed “vaccinated” if your COVID injection is added to your medical record, and this sometimes doesn’t happen if you’re going to a temporary vaccination clinic, a drive-through or pharmacy, for example. As reported by CNN:³⁶

“If you are among the countless people who didn’t get the doses at a primary care doctor’s office, there may not be any record of the vaccination on file with your doctor.”

To actually count as a “confirmed vaccinated” individual, you must send your vaccination

card to your primary care physician's office and have them add it to your electronic medical record. If you got the shot at a pharmacy, you'll need to verify that they forwarded your proof of vaccination to your doctor. Primary care offices are then responsible for sharing their patients' immunization data with the state's immunization information system.

Patient-recorded proof of vaccination is only accepted for influenza and pneumococcal vaccines, not COVID-19 injections.³⁷ What this all means is that, say you got the shot several weeks ago at a drive-through vaccination clinic and get admitted to the hospital with COVID symptoms. Unless your COVID shot status has actually been added into the medical system, you will not count as "vaccinated."

This too can skew the statistics, because we know the CDC ascertains vaccination status by matching SARS-CoV-2 case surveillance and CAIR2 data using person-level identifiers and algorithms.³⁸

As noted by John Zurlo, division director of infectious disease at Thomas Jefferson University, "the lack of reliable vaccine records complicates efforts to precisely understand vaccine effectiveness and determine how many local hospitalizations and deaths are resulting from COVID-19 breakthrough infections."³⁹

We're in the Largest Clinical Trial in Medical History

In closing, it's worth remembering that the COVID injection campaign is part and parcel of a clinical trial. As noted Dr. Lidiya Angelova in a recent Genuine Prospect article:⁴⁰

"Many people are unaware that they are participating in the largest clinical trial test of our times. It is because World Health Organization, healthcare authorities, politicians, celebrities, and journalists promote the experimental medical treatments (wrongly called COVID-19 vaccines) as safe and efficient while in fact these treatments are in early clinical research stage.

It means that there is not enough data for such claims and that the people who participate are test subject."

As shown in a graph on Genuine Prospect, under normal circumstances, clinical research follows a strict protocol that begins with tests on cell cultures. After that comes tests on animals, then limited human testing in four phases. In Phase 1 of human testing, up to 100 people are included and followed anywhere from one week to several months.

Phase 2 typically includes several hundred participants and lasts up to two years. In Phase 3, several hundred to 3,000 participants are tested upon for one to four years. Phase 4 typically includes several thousand individuals who are followed for at least one year or longer. After each phase, the data is examined to assess effectiveness and adverse reactions.

The timelines for these stages and phases were not followed for the COVID "vaccines." Most Phase 3 trials concluded by the end of 2020, and everyone who got the shots since their rollout under emergency use authorization is part of a Phase 4 clinical trial, whether they realize it or not.⁴¹ And since the trials are not completed, you simply cannot make definitive

claims about safety, especially long-term safety. As noted by Angelova:⁴²

“When I worked at the National Institute of Allergy and Infectious Diseases (NIAID) ... I went to the course Ethical and Regulatory Aspects of Clinical Research ... The first rule we learnt was ‘Clinical research must be ethical’ ... All ethical aspects of clinical research are dismissed with the COVID-19 vaccines.

People should know that nobody can require such to participate in everyday activities like using public transportation, shopping, going to school and even hospital. People should know that they should not be punished for refusing to take the experimental medical treatments.

COVID-19 vaccines mass use and COVID-19 measures are an infringe[ment] of the Articles 2, 3, 5, 9, 11, 12, 13, 18, 20, 25, 27, 28 of The Universal Declaration of Human Rights (UDHR).”

*

Note to readers: Please click the share buttons above or below. Follow us on Instagram, @crg_globalresearch. Forward this article to your email lists. Crosspost on your blog site, internet forums. etc.

Notes

¹ [The New York Times July 16, 2021](#)

² [WH.gov Press Briefing July 16, 2021](#)

³ [Fox News](#)

⁴ [Mayo Clinic COVID Vaccine Tracker](#)

⁵ [Twitter DX Foundation September 2, 2021](#)

⁶ [CDC August 25, 2021](#)

⁷ [Web Archive August 26, 2021](#)

⁸ [CDC September 1, 2021](#)

⁹ [FDA.gov CDC 2019-nCoV Real-Time RT-PCR July 13, 2020 \(PDF\) Page 35](#)

¹⁰ [Clinical Infectious Diseases September 28, 2020; ciaa1491](#)

¹¹ [The Vaccine Reaction September 29, 2020](#)

¹² [Jon Rappoport’s Blog November 6, 2020](#)

- ¹³ [YouTube TWiV 641 July 16, 2020](#)
- ¹⁴ [CDC.gov COVID-19 Vaccine Breakthrough Case Investigation Guidelines \(PDF\)](#)
- ^{15, 16, 17, 28} [The Epoch Times August 30, 2021](#)
- ¹⁸ [PBS June 29, 2021](#)
- ^{19, 21} [Public Health England, SARS-CoV-2 Variants Technical Briefing 16, June 18, 2021 \(PDF\)](#)
- ²⁰ [Covidcalltohumanity.org July 5, 2021](#)
- ²² [CBS 8 News July 21, 2021](#)
- ²³ [CNN Health July 22, 2021](#)
- ²⁴ [Bloomberg August 1, 2021 \(Archived\)](#)
- ²⁵ [American Faith August 8, 2021](#)
- ²⁶ [The Daily Expose July 29, 2021](#)
- ²⁷ [Big League Politics August 4, 2021](#)
- ²⁹ [Evening Standard August 20, 2021](#)
- ³⁰ [CDC MMWR July 30, 2021; 70](#)
- ³¹ [CNBC July 30, 2021](#)
- ³² [NBC News August 7, 2021](#)
- ³³ [Impact of Delta on Viral Burden and Vaccine Effectiveness in the UK \(PDF\)](#)
- ³⁴ [CBS News August 19, 2021](#)
- ³⁵ [The Lancet Preprint August 10, 2021](#)
- ³⁶ [CNN April 26, 2021](#)
- ³⁷ [Immunize.org Documenting Vaccination](#)
- ³⁸ [MMWR August 27, 2021; 70\(34\): 1170-1176](#)
- ³⁹ [Philadelphia Enquirer August 31, 2021](#)

^{40, 42} [Genuine Prospect August 31, 2021](#)

⁴¹ [Red Voice Media June 22, 2021](#)

Featured image is from NOQ Report

The original source of this article is [Mercola](#)
Copyright © [Dr. Joseph Mercola](#), [Mercola](#), 2021

[Comment on Global Research Articles on our Facebook page](#)

[Become a Member of Global Research](#)

Articles by: **[Dr. Joseph Mercola](#)**

Disclaimer: The contents of this article are of sole responsibility of the author(s). The Centre for Research on Globalization will not be responsible for any inaccurate or incorrect statement in this article. The Centre of Research on Globalization grants permission to cross-post Global Research articles on community internet sites as long the source and copyright are acknowledged together with a hyperlink to the original Global Research article. For publication of Global Research articles in print or other forms including commercial internet sites, contact: publications@globalresearch.ca
www.globalresearch.ca contains copyrighted material the use of which has not always been specifically authorized by the copyright owner. We are making such material available to our readers under the provisions of "fair use" in an effort to advance a better understanding of political, economic and social issues. The material on this site is distributed without profit to those who have expressed a prior interest in receiving it for research and educational purposes. If you wish to use copyrighted material for purposes other than "fair use" you must request permission from the copyright owner.

For media inquiries: publications@globalresearch.ca