

# COVID-Period Mass Vaccination Campaign and Public Health Disaster in the USA

From age/state-resolved all-cause mortality by time, age-resolved vaccine delivery by time, and socio-geo-economic data

By [Prof Denis Rancourt](#), [Dr. Marine Baudin](#), and [Dr. Jérémie Mercier](#)

Region: [USA](#)

Theme: [Science and Medicine](#)

Global Research, August 03, 2022

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).

To receive Global Research’s Daily Newsletter (selected articles), [click here](#).

Follow us on [Instagram](#) and [Twitter](#) and subscribe to our [Telegram Channel](#). Feel free to repost and share widely Global Research articles.

\*\*\*

## Abstract

*All-cause mortality by time is the most reliable data for detecting and epidemiologically characterizing events causing death, and for gauging the population-level impact of any surge or collapse in deaths from any cause.*

*Such data is not susceptible to reporting bias or to any bias in attributing causes of death. We compare USA all-cause mortality by time (month, week), by age group and by state to number of vaccinated individuals by time (week), by injection sequence, by age group and by state, using consolidated data up to week-5 of 2022 (week ending on February 5, 2022), in order to detect temporal associations, which would imply beneficial or deleterious effects from the vaccination campaign.*

*We also quantify total excess all-cause mortality (relative to historic trends) for the entire covid period (WHO 11 March 2020 announcement of a pandemic through week-5 of 2022, corresponding to a total of 100 weeks), for the covid period prior to the bulk of vaccine delivery (first 50 weeks of the defined 100-week covid period), and for the covid period when the bulk of vaccine delivery is accomplished (last 50 weeks of the defined 100-week covid period); by age group and by state.*

We find that the COVID-19 vaccination campaign did not reduce all-cause mortality during the covid period.

No deaths, within the resolution of all cause mortality, can be said to have been averted due to vaccination in the USA.

**The mass vaccination campaign was not justified in terms of reducing excess all-**

**cause mortality.**

**The large excess mortality of the covid period, far above the historic trend, was maintained throughout the entire covid period irrespective of the unprecedented vaccination campaign,** and is very strongly correlated ( $r = +0.86$ ) to poverty, by state; in fact, proportional to poverty. It is also correlated to several other socio-economic and health factors, by state, but not correlated to population fractions (65+, 75+, 85+ years) of elderly state residents.

The excess all-cause mortality by age group (also expressed as percentage of pre-covid-period all-cause mortality for the age group) for the whole USA for the entire covid period through week-5 of 2022 is:

<b>all ages</b>	<b>1.27M</b>	<b>23%</b>
0-24	13K	12%
25-44	109K	41%
45-64	274K	27%
65-74	319K	30%
75-84	316K	24%
85+	240K	14%

The corresponding fatality risk ratios are relatively uniform with age (non-exponential and non-near-exponential with age; and even skewed towards young adults), which holds essentially for all states, and for all examined periods within the covid period. This fundamental result implies that a dominant cause of excess mortality could not have been assigned COVID 19, which consistently has been measured to have a strong near-exponential infection fatality ratio with age. The implication is further corroborated by the absence of correlation between all-age-group-integrated excess mortality and age, by state. **COVID-19 was not a dominant cause of excess mortality during the covid period in the USA.**

All of our observations can be coherently understood if we interpret that the covid-period socio-economic, regulatory and institutional conditions induced chronic stress and social isolation among members of large vulnerable groups (individuals afflicted and co-afflicted by poverty, obesity, diabetes, high susceptibility to bacterial respiratory infection [inferred from pre-covid-period antibiotic prescription rates], old age, societal exclusion, unemployment, drug and substance abuse, and mental disability or serious mental illness), which in turn caused many of these individuals to be more and fatally immunocompromised, allowing them to succumb to bacterial pneumonia, at a time when a documented national pneumonia epidemic raged and antibiotic prescriptions were systemically reduced; in addition to possible comorbidity from COVID-19 vaccine challenge against individuals thus made immunocompromised, under broad and hastily implemented “vaccine equity” programs.

[Click here to read the full report.](#)

\*

Note to readers: Please click the share buttons above or below. Follow us on Instagram and Twitter and subscribe to our Telegram Channel. Feel free to repost and share widely Global Research articles.

*Featured image is from Children's Health Defense*

The original source of this article is Global Research  
Copyright © [Prof Denis Rancourt](#), [Dr. Marine Baudin](#), and [Dr. Jérémie Mercier](#), Global Research, 2022

---

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

[Become a Member of Global Research](#)

Articles by: [Prof Denis Rancourt](#), [Dr. Marine Baudin](#), and [Dr. Jérémie Mercier](#)

**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](mailto:publications@globalresearch.ca)  
[www.globalresearch.ca](http://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](mailto:publications@globalresearch.ca)