

FDA Adds Heart Inflammation Warning to Pfizer, Moderna COVID Vaccines as Some Experts Call for Full Approval

By [Megan Redshaw](#)

Global Research, June 29, 2021

[Children's Health Defense](#) 28 June 2021

Region: [USA](#)

Theme: [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](#).

The U.S. Food and Drug Administration added a warning to fact sheets — as advised by the CDC’s Advisory Committee on Immunization Practices — for Pfizer and Moderna COVID vaccines indicating an increased risk of myocarditis and pericarditis following vaccination.

The U.S. Food and Drug Administration (FDA) on June 25 [added a warning to patient and provider fact sheets](#) for [Pfizer](#) and [Moderna](#) COVID vaccines indicating an increased risk of myocarditis and pericarditis following vaccination.

The [warning notes](#) reports of adverse events suggest increased risks of myocarditis and pericarditis, particularly following the second dose and with onset of symptoms within a few days after vaccination.

[Myocarditis](#) is inflammation of the heart muscle that can lead to cardiac arrhythmia and death. [According to researchers](#) at the National Organization for Rare Disorders, myocarditis can result from infections, but “more commonly the myocarditis is a result of the body’s immune reaction to the initial heart damage.”

[Pericarditis](#) is [often used interchangeably](#) with myocarditis and refers to inflammation of the pericardium, the thin sac surrounding the heart.

The FDA’s update followed a review of information and discussion by the Centers for Disease Control and Prevention’s (CDC) Advisory Committee on Immunization Practices (ACIP) [meeting on June 23](#) where the committee acknowledged 1,200 cases of heart inflammation in 16- to 24-year-olds and said mRNA COVID vaccines should carry a warning statement.

“The data presented at this meeting reinforced the FDA’s decision to revise the fact sheets and further informed the specific revisions,” the FDA [said in a statement](#).

[Health officials said](#) the benefits of receiving a COVID vaccine still outweigh any risks.

Physicians and other public commenters [accused the CDC](#) during the meeting of exaggerating the risk to young people of COVID, and minimizing the risk of the vaccines.

[Dr. Meryl Nass](#), an internal medicine physician, pointed out several flaws in the data used during the ACIP's presentation:

"As of now, two major ways the rate of myocarditis were minimized [during the presentation] was to lump people from age 39 and down — even though the highest rates [of myocarditis] are in the youngest kids. This waters down the rate. The other method was to only include a very narrow window of time after vaccinations started in the 12-15 age group, thus omitting the vast majority of second doses, which is when about 75% or more of the myocarditis cases occur. Also, the genders were sometimes mixed. And rates in girls are much lower than boys."

During the CDC's [presentation](#), Dr. Megan Wallace stated the overall efficacy of [Pfizer's COVID vaccine](#) in the 12 to 15 age group is 100% and Moderna's was comparable. Wallace then did a risk/benefit analysis comparing myocarditis cases versus hospitalization rates for COVID in people between the ages of 12 and 29.

"The problem with her analysis is that now the myocarditis rate used is too low. But the risk from [COVID](#) is magnified," Nass said.

[Elizabeth Mumper](#), MD, FAAP, IFMCP and president and CEO of The RIMLAND Center, said:

"The chance of a child less than 17 years of age dying from COVID-19 is 0.0005% according to the CDC's own numbers. Most pediatric patients have robust innate immune systems, meaning that they have strong defenses to a variety of viruses. Infections with beta coronaviruses, which kids are likely to have, induce strong and long-lasting immunity to the nucleocapsid protein that is likely to protect children from serious problems from COVID 19."

Mumper explained:

"Healthy [teen athletes](#) have had the trajectory of their lives changed by having serious reactions to these vaccines — myocarditis, clots in the brain, postural hypotension and extreme fatigue to name but a few. I have seen alarming vaccine reactions in my practice in the short time that a small fraction of my patient population has received a novel vaccine."

Another horrifying story! OSU student, elite athlete + member of ROTC developed severe heart complications following his second dose of Pfizer's COVID vaccine.

SUBSCRIBE to [#TheDefender](#): <https://t.co/zL66Edfiw5><https://t.co/oXQRGDoXNK>

— Robert F. Kennedy Jr (@RobertKennedyJr) [June 21, 2021](#)

Both the FDA and CDC are [monitoring reports](#) of heart inflammation and will follow up to assess long-term outcomes.

According to the [latest data](#) from the CDC's Vaccine Adverse Events Reporting System (VAERS), there have been [1,342 cases](#) of myocarditis and pericarditis in all age groups reported in the U.S. following COVID vaccination between Dec.14, 2020 and June 18, 2021. Of the 1,342 cases reported, [835 cases](#) were attributed to Pfizer, [458 cases](#) to Moderna and [45 cases](#) to Johnson & Johnson's COVID vaccine.

There have been 237 reports of myocarditis and pericarditis in 12- to 17-year-olds with [234 cases](#) attributed to Pfizer's COVID vaccine.

Calls rise for FDA to fully approve COVID vaccines

According to The Hill, calls are [rising from some experts](#) for the FDA to fully approve COVID vaccines, as some unvaccinated people view current [Emergency Use Authorizations](#) for vaccines as an indicator they are experimental and not fully tested.

Pfizer submitted data for full approval May 7, but it is unclear when the FDA will act, leading to calls to [pick up the pace](#). Moderna applied for full approval of its vaccine on June 1.

[Gigi Gronvall](#), senior scholar at the Johns Hopkins Center for Health Security, said that while there should not be "political pressure" on the FDA, she would be interested in knowing what the holdup is.

"It could have a big impact on people getting [vaccinated] if it is FDA approved," [Gronvall said](#). "I think it's worth asking why it hasn't happened yet."

[Ashish Jha](#), dean of Brown University School of Public Health, said "Pfizer initiated request on May 7. It's 6 weeks later. Data is in. Vaccines are safe and effective. It's time for full approval."

Other experts said the FDA could [undermine public confidence](#) if they cut corners.

"If they hurry it up and don't complete their review very carefully, that will actually have the opposite effect," said [Jesse Goodman](#), former FDA chief scientist. "I think that would really undermine confidence."

[Nancy Allen LaPointe](#), faculty fellow at the Duke-Margolis Center for Health Policy, said it is important for confidence in vaccines that there not be "any perception or actuality of cutting a corner" in the FDA review for full approval.

Full approval of COVID vaccines will likely lead to more [employee mandates](#). [Boston Herald](#), a major hospital in Boston, announced June 24 it would require more than 80,000 Mass General Brigham employees be vaccinated against COVID once one of the three vaccines gain approval from the FDA.

According to the [Los Angeles Times](#), the city of San Francisco announced last week it would require its 35,000 employees to get vaccinated against COVID or risk losing their jobs. Workers who refuse or fail to provide a religious or medical exemption could be terminated. The mandatory vaccination requirement goes into effect once COVID vaccines have been formally approved by the FDA, and extends to all city government employees, including police, firefighters, custodians and city hall clerks.

*

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.

Megan Redshaw is a freelance reporter for *The Defender*. She has a background in political science, a law degree and extensive training in natural health.

Featured image is from CHD

The original source of this article is [Children's Health Defense](#)
Copyright © [Megan Redshaw](#), [Children's Health Defense](#), 2021

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

[Become a Member of Global Research](#)

Articles by: [Megan Redshaw](#)

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