

Mismanaging a Pandemic: Failures in the COVID-19 Narrative

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

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A careful review of thousands of scientific studies and interviews with leading medical professionals and physicians allows us to construct a more honest perspective about our federal health agencies’ and the World Health Organization’s successes and failures in dealing with the Covid-19 pandemic.

In less than a month after the mRNA experimental vaccines were rolled out, medical professionals and clinical physicians started to voice their deep concerns and issue dire warnings. After serious vaccine associated injuries and deaths were reported in Norway and Germany, a number of skeptical doctors became fearful that mass vaccination campaigns would worsen the pandemic. Norwegian officials warned against vaccinating older patients with pre-existing illnesses. [Opinions](#) in the *Israel National News* stated that Pfizer used the nation as an experimental staging ground to roll out its Covid-19 vaccine; Israel was the first country to launch a nation-wide vaccination campaign. Consequently Israel was responsible for the most aggressive Covid-19 vaccination campaign, and medical experts were quick to observe that the risk of vaccine injury would be higher in people previously infected.

In the US, following the first month of vaccinating Americans en masse with Moderna’s and Pfizer’s experimental mRNA vaccines, over 29,000 adverse events requiring special medical assistance or hospitalization were reported. Many critics of vaccination eagerly pointed out that these Covid-19 vaccine injuries [had only been recorded](#) in the CDC’s Vaccine Adverse Events Reporting System (VAERS). However, for over fifteen years, VAERS has come under considerable scrutiny as a horribly inadequate and failed system to accurately monitor actual serious adverse vaccination events. The actual number of injuries and deaths is likely 900 percent higher.

The Covid Vaccines Do Not Prevent SARS-2 Infection

After Moderna’s and Pfizer’s first clinical trial reports were prematurely announced to the media, one of the most repeated talking points was that the vaccines were 95 percent effective. Since the length of the mRNA vaccine trials were interrupted long before their

scheduled completion in order to rush them through the FDA and other nations' regulatory agencies for emergency use approval, the length of vaccine-derived immunity was never properly evaluated. Nor was it possible to make any reliable determination about the injections long-term safety profile. The federal government's intended message was to persuade Americans that vaccination would protect one from SARS-2 infection. However it did not take long before government health departments started to report a rise in breakthrough cases. The vaccines were far less effective than people were led to believe. In Israel, tens of thousands of Israelis [had tested positive](#) within two weeks after receiving the first vaccine dose, and cases increased for those who received a second dose. Six months into the vaccination period there was still no certainty for how long immunity would last. Vaccinated persons were still required to wear masks and social distance. Ergo, what good were these vaccines?

The *British Medical Journal's* associate editor Peter Doshi [challenged](#) the trustworthiness of the 95 percent efficacy figure, which was based solely on confirmed PCR tests. The decision to rely upon PCR testing to diagnose positive Covid infections was dubious from the start. PCR was not developed either to confirm or diagnostically identify a live viral infection. What was not reported in Pfizer's original press releases were the "suspected" and "unconfirmed" Covid-19 cases in both the vaccinated and placebo groups. After these cases are included into the final calculation, the Pfizer vaccine's effectiveness nosedived to approximately 19 percent, far below the 50 percent threshold to authorize its emergency use, according to Doshi. Evidently, Pfizer seemingly ignored the 3,410 unconfirmed Covid-19 cases from its original press release. Another red flag in Pfizer's initial report was the exclusion of 371 trial participants from their efficacy analysis. Pfizer failed to explain the rationale for excluding these individuals.

Peter Doshi: Pfizer and Moderna's "95% effective" vaccines—we need more details and the raw data

January 4, 2021

On 5 February 2021 we published a clarification to this piece. [It is available here.](#)



Five weeks ago, when I [raised questions](#) about the results of Pfizer's and Moderna's covid-19 vaccine trials, all that was in the public domain were the [study protocols](#) and a [few press releases](#). Today, two [journal publications](#) and around 400 pages of summary data are available in the form of [multiple reports presented by and to the FDA](#) prior to the agency's emergency authorization of each company's mRNA vaccine. While some of the additional details are reassuring, some are not. Here I outline new concerns about the trustworthiness and meaningfulness of the reported efficacy results.

Screenshot from [The BMJ](#)

As the scientific evidence mounted against mRNA vaccines' efficacy, even Pfizer CEO Albert Bourla had to backtrack on his company's earlier claims. Since breakthrough cases with the Delta and Omicron variants among the fully vaccinated were escalating at an unprecedented rate, it became impossible to keep the lie alive without jeopardizing Pfizer's credibility. Speaking at a [healthcare conference](#) hosted by JP Morgan, Bourla admitted that "two doses of the vaccine offers very limited protection, if any. Three doses with a booster offer reasonable protection against hospitalizations and deaths." [Speaking on Fox News](#) on July 12, Anthony Fauci also admitted that the Covid-19 vaccines "don't protect overly well against infection."

The steady increase of studies indicates the vaccines do not provide any robust and long-term protection. Now that the speed of the virus' mutation rate has increased, giving rise to completely new SARS strains, government health ministries and independent researchers are observing that despite higher vaccination compliance, mortality rates continue to rise dramatically. Recently in the Netherlands, [Dutch research Dr. Andre Redert](#) found no mortality reduction from mass vaccination.

Depending upon the individual's health status and the strengths and weaknesses of his or her immune system, vaccine immunity can begin to wane rapidly after 3 months or earlier following vaccination. At best, immunity seems to last no longer than 5-6 months for the average person.

Nor did boosters improve matters. Nobody in the federal health agencies and drug industry cautioned at what point do repeated boosters create irreparable damage to the body's immune system. If we anticipate the emergence of new SARS-2 mutations in the future, when will constant booster shots for every new variant cease? Fourteen months into Israel's vaccination campaign, and being compelled to approve a fourth shot, medical experts advising the Israeli health ministry raised an alarm. [As reported](#) in the *New York Times*, the Israeli scientists noted "that too many shots might actually harm the body's ability to fight Covid... [and] might cause a sort of immune system fatigue." According to the scientists there is no evidence that more boosters can prevent Omicron infections.

Natural Immunity is Superior to Vaccine-Induced Immunity

In her article published in *Lancet's* October 2020 issue, CDC Director Rochelle Walensky wrote, "there is no evidence of lasting protective immunity to SRS-CoV-2 following natural infection." In May 2021, Dr Marty Makary at Johns Hopkins School of Medicine harshly criticized the poorly regulated vaccination roll out. The health agencies dismissed the fact that over a half of Americans had already developed some degree of natural immunity against coronavirus. In Makary's opinion, this constitutes "one of the biggest failures of our current medical leadership." "There is more data on natural immunity," Dr. Makary argued, "than there is on vaccinated immunity because natural immunity has been around longer."

The containment of the spread of new SARS-2 variants worsens when our government officials and medical experts stand by their erroneous statements in order to push a false narrative about sufficient vaccine-immunity. Dr. Paul Alexander, an epidemiologist and former Covid-19 pandemic advisor to the World Health Organization and the US Department of Health and Human Services, has collated over 150 studies showing that natural acquired immunity is more robust and superior to the Covid-19 injections.

Therefore, this is no longer a debatable argument between two opposing sides comparing their respective supporting evidence. There is no credible study to even suggest that the vaccines provide strong immunity. A [Cleveland clinic study](#) followed over 52,000 individuals for five months and concluded that unvaccinated persons who had been infected with the SARS-2 virus would likely not benefit from the vaccines. In December 2020, there was evidence that Covid infection was 99.9 percent effective in producing antibodies that might protect people from later infections. This was data Senator Rand Paul presented before Congressional hearing. Bloomberg, which otherwise walks in lockstep with the CDC, reported a study indicating that natural immunity was 13 times greater than vaccine-induced immunity. When the Delta variant was ravaging Israel, the Maccabi Healthcare

Services database, which enrolls 2.5 million Israelis, found that those previously infected with SARS-2 were much less likely than those who were vaccinated and never infected to contract the Delta variant, develop symptoms and be hospitalized with serious complications. A Washington University School of Medicine study suggests that natural immunity might last throughout one's life for a notable percent of the population. Persons with low levels of neutralizing antibodies may still be protected from SARS-2 if they have robust T-cell immunity. On the other hand, the vaccines at best seem to provide no more than 6 months immunity.

A very fascinating and interesting study, which was never reported by the mainstream media, came from Cardiff University and the University of London. The researchers discovered a new type of senescent killer immune cell that was self-renewing that may explain why natural immunity can last far beyond the timeframe previously thought. Vaccination is unable to stimulate these new types of senescent T-cells. As tens of billions of dollars continue to be spent on research, one lesson the pandemic has taught us is that the immunological and vaccine sciences know less about the body's immune system than previously believed. Discoveries such as the Cardiff/London research are challenging the entire vaccination paradigm. And now we are witnessing this directly as massive vaccination campaigns to vaccinate entire populations are proving to be far less promising to stop any pandemic. In retrospect, if all of the dollars spent to develop experimental and poorly tested vaccines had been spent to effectively treat SARS-2 infections, millions of lives would have been saved and we would not be faced with a global scourge of vaccine injuries and deaths

Myths of Contagion

Perhaps the biggest scandal during widespread PCR testing of populations was how it was interpreted and portrayed to the public through a compromised media. Putting aside the gross misuse of PCR testing, a myth was created that anyone exposed to a person suspected of infection posed a danger to others. This myth generated an irrational paranoia among those who blindly embraced the government's narrative. There was no public reporting about the growing evidence of viral transmission that distinguishes symptomatic from asymptomatic infections. In a [December 2020 study](#) published in the *Journal of the American Medical Association*, symptomatic people infected someone else in the house 18 percent of the time. We can compare that with asymptomatic and pre-symptomatic cases who only infected someone else 0.7 percent of the time. This supports a Chinese study that followed 455 individuals who were exposed to asymptomatic infected carriers. None of the 455 persons tested positive after five days.

There may be several reasons for this surprising anomaly. Perhaps the most likely explanation is that none of the assumed carriers were actually infected. This would conform with the growing consensus that PCR testing is completely unacceptable for diagnosing active viral infection.

Concealing the Risks of Covid-19 Vaccines

DEAD After Taking COVID-19 Vaccine



Source: Health Impact News

Worries over the short and long term risks of the Covid-19 vaccines continue to mount. The educational nonprofit organization Physicians for Informed Consent focuses on statistical analysis of the available scientific literature of medical interventions. In a report released in early 2022 noted there is a lack of proven benefits for prioritizing mass Covid-19 vaccination. Nor was there any consensus that the vaccines lessened mortality. Before the FDA approved Pfizer's mRNA gene therapy shots for children 6 months and older, the organization warned about serious safety risks. Their warnings went unheeded. Even the *New York Times* charged the CDC with withholding reams of data pertaining to the vaccines' safety.

There remains no rationale for vaccinating children under 18. After the CDC analyzed test results from sites across the United States, the agency determined that the vaccine was only 60 percent effective two to four weeks after 12-16 year olds received a second dose. By the second month, the vaccines were only 20 percent effective and hit bottom at zero effectiveness around the fifth month. As we stated above, the mRNA vaccines confer no benefit to those who were previously infected and have natural immunity. In the FDA's 66-page briefing document of Pfizer's data, according to the CDC, by February 2022, over 74 percent of children and adolescents had serologic evidence of previous infection.

In the wake of rising vaccine injuries and deaths, government health ministries are making efforts to conceal their policies' carnage. In Israel, [leaked documents](#) reveal that the Israeli government concealed crucial safety data from the public in order to approve childhood booster shots. A commissioned study of adverse events from Pfizer's vaccine found that children in the 5-11 age group had twice as many injurious events as children in the 12-17 age group.

Last year, the Public Health and Medical Professionals for Transparency (PHMPT) requested the FDA turn over all of the Pfizer documents submitted to the agency for emergency use approval of its mRNA vaccine. The FDA failed to comply and the PHMPT subsequently sued.

A court order forced the FDA to publish all confidential documents. Among the tens of thousands of pages of Pfizer trial data and documents the FDA is required to hand over during the remainder of the year, attorneys discovered an appendix listing 1,291 vaccine adverse effects. These include many life-threatening conditions based upon Pfizer's own clinical research. Consequently, the company was fully aware of their mRNA vaccine's

potential catastrophic consequences to public health.

As of July 16, 2022, the European Union's EudraVigilance database of suspected adverse drug reactions recorded over 46,600 deaths and 4.6 million injuries associated with the Covid-19 vaccines. Among the five vaccines approved in the EU, Pfizer's vaccine accounts for nearly half of all injuries and deaths (44.3 percent). We mention the EudraVigilance monitoring system because it is far more robust and transparent compared to the CDC's VAERS, which has been plagued for decades with a lack of independent oversight.

Gradually, a clearer picture of the mRNA Covid-19 vaccine risks and their causes is emerging.

A Chinese study published in the journal *Cell* noted that many vaccinated persons show symptoms that mimic SARS-2 infections. These include alterations in recipients' hemoglobin, coagulation profiles, electrolyte imbalances and renal functions.

In the UK, the British Health Security Agency has become so worried about on the ground facts that it has refused to publish further data on Covid cases, hospitalizations and deaths based upon a person's vaccination status. The Agency earlier reported that persons who were triple vaccinated developed Acquired Immunodeficiency Syndrome. The double vaccinated were suffering from Antibody Dependent Enhancement.

Official data from the Canadian government shows that on average, triple vaccinated Canadians were losing as much as 75 percent of their immune system capability compared to the natural immune system of the unvaccinated. Data reveals that the fully vaccinated account for 9 in every 10 covid-19 cases, and 7 in every 10 hospitalizations and deaths across Canada. Consequently, the vaccinated are unable to fight other viruses, bacteria, and cancer.

Similar to the Canadian statistics, the New Zealand government reported a 74 percent loss of immune strength among those triple vaccinated.

In the CDC's VAERS reporting system, among the vaccinated we find a 68,000 percent increase in strokes, 44,000 percent increase in heart attacks, 5,000 percent increase in life threatening injuries and a 6,800 percent increase in deaths.

While men have been shown to be at a higher risk of heart complications, women are being ravished with a rise in irregular menstrual conditions. A recent peer-reviewed study in the *International Journal of Gynecology & Obstetrics* shows alarmingly high rates of irregular bleeding and menstrual changes after receiving Pfizer's COVID-19 mRNA injection. The study included fully vaccinated women aged 18-50 with no history of gynecological comorbidities and abnormal menstruation. Following vaccination, twenty-three percent experienced irregular bleeding. [In Israel](#), Dr. Yaffa Shir-Raz at the University of Haifa discovered that 90 percent of vaccinated women reported that their interrupted menstrual cycles were long term and worried they may be permanent.

Last autumn in the US, among adults aged between 25 and 40 years, there was an 84 percent in excess mortality. In the March 25, 2022 issue of the journal *Pediatrics*, two-thirds of vaccinated adolescents diagnosed with myopericarditis had persistent heart abnormalities months later their initial diagnosis. Despite this deep concern, the CDC continues to claim that heart inflammation from the Pfizer and Moderna vaccines are "mild."

Finally it should be noted that reports of miscarriages and fetal deaths among vaccinated pregnant women are rising exponentially. According to America's Frontline Doctors (AFLDS), there has been nearly 2,000 percent increase in fetal deaths. In one round of documents the FDA has had to turn over, data shows that mRNA from Pfizer's injection accumulates in the ovaries over time. After analyzing Pfizer's own data, it became clear that 82% to 97% of the documented pregnancy outcomes resulted in fetal death. (The 15-point variation was dependent on the final outcome of those in the "outcome pending" category). Earlier in 2021, official UK data revealed that cases of ovarian cancer were at an all time high. The UK Medicine Regulator received over 40,000 reports relating to reproductive and menstrual disorders suspected as adverse reactions to the Covid-19 injections in 2021 alone.

Conclusion

A common pattern the nation has witnessed throughout the Covi-19 pandemic during the past two years has the government's recourse to emergency powers, executive orders and threats against those who criticize or refuse to be obedient. This is not only notable in the US, but among all the western nations most aligned to the US. Such measures for tackling national crises, in the absence of civil discourse and professional scientific debate is characteristic of authoritarian governments. Strong-arm dictates and draconian rules to destroy a population's speech and freedom has always been a devious ploy to conceal the wrongful intentions of leaders and their minions who execute their harsh policies.

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