

# Pregnant Women Reject COVID-19 Vaccination

## Post-Partum Hemorrhage Among Many Reasons to Decline Experimental Injection

By [Dr. Peter McCullough](#)

Theme: [Science and Medicine](#)

Global Research, January 18, 2023

[Courageous Discourse](#)

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*Early in 2021 the American College of Obstetrics and Gynecology accepted an undisclosed amount of money from the US government (HHS WH) as part of the COVID-19 Community Corps Program. From that point forward, ACOG broke with traditional practice on experimental and novel therapies being contraindicated, and with federal dollars in hand, moved to a wholesale endorsement of COVID-19 vaccination with no assurances on short or long-term safety. Throughout the campaign, enthusiasm for vaccination was tepid among gravid women with <20% at any time having accepted a vaccine. However, the sharpest decline in rates of uptake occurred in the gravid and by summer of 2022, fewer than 2% were getting vaccinated.*

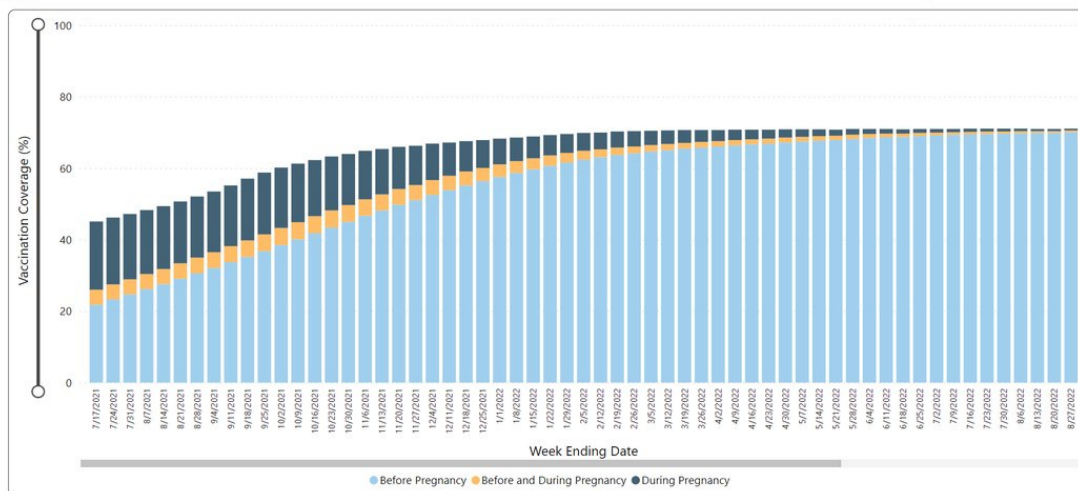
# COVID-19 vaccination among pregnant people aged 18-49 years overall, by race and ethnicity, and date reported to CDC - Vaccine Safety Datalink,\* United States

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**Figure 1: Percent of Pregnant People Ages 18–49 Years Who Completed the Primary Series of COVID-19 Vaccine Before and During Pregnancy, by Timing of Vaccination and Week Ending Date — Vaccine Safety Datalink,\* United States December 14, 2020 – January 7, 2023**



Figure 1
Figure 2
Figure 3
Week Ending Date



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There were no large scale randomized, placebo-controlled double blind clinical trials demonstrating safety in pregnant women. The non-randomized literature was prone to financial conflict-of-interest bias since the doctors and editors were likely affiliated with ACOG, and influenced by the government money and aspiration to promote mass vaccination. Thus, as a clinical scientist, my concern is only the neutral papers on safety were being written and published. A paper by Dick et al, caught my attention by reporting a nearly fourfold post-partum hemorrhage rate among those triple compared to double vaccinated. One could imagine how large the magnitude would have been compared to unvaccinated where hemostasis is not impaired.

## Safety of third SARS-CoV-2 vaccine (booster dose) during pregnancy

Aharon Dick, MD; Joshua I. Rosenbloom, MD, MPH; Gilad Karavani, MD; Einat Gutman-Ido, MD; Naama Lessans, MD; Henry H. Chill, MD

**TABLE 1**  
Baseline characteristics and outcomes of women who received 3 vaccine doses vs unvaccinated patients

Characteristics	Triple vaccinated n=294	Unvaccinated n=3368	P value
Maternal age (y)	32 (28–38)	30 (26–34)	<.001
Body mass index (kg/m <sup>2</sup> )	27.6 (19.5–27.6)	25.7 (22.2–29.4)	.43
Parity	1 (1–3)	2 (0–3)	.36
Nulliparous	68 (23.1)	850 (25.4)	.42



**TABLE 3**  
Adjusted odds ratios and 95% confidence intervals for outcomes among the triple-vaccinated and unvaccinated patients

Outcome	Triple vaccinated	Unvaccinated
Preterm birth	0.67 (0.37–1.23)	Ref
Small for gestational age	1.10 (0.68–1.82)	Ref
Cesarean delivery	1.04 (0.75–1.46)	Ref
Postpartum hemorrhage (>500 mL)	3.88 (2.41–6.25)	Ref
5 min Apgar <7	0.27 (0.04–1.98)	Ref
Umbilical pH <7.1	0.92 (0.22–3.92)	Ref

Odds ratios adjusted for nulliparity, maternal age, body mass index, gestational diabetes mellitus, and maternal smoking.

Ref, reference interval.

Dick. Booster dose of SARS-CoV-2 vaccination safety during pregnancy. *Am J Obstet Gynecol MFM* 2022.

Dick A, Rosenbloom JI, Karavani G, Gutman-Ido E, Lessans N, Chill HH. Safety of third SARS-CoV-2 vaccine (booster dose) during pregnancy. *Am J Obstet Gynecol MFM*. 2022 Jul;4(4):100637. doi: 10.1016/j.ajogmf.2022.100637. Epub 2022 Apr 7. PMID: 35398583; PMCID: PMC8988438.

In 2021, McCullough and Stricker published that because of the known dangerous mechanism of action of COVID-19 vaccination and the lack of any assurances on maternal-fetal safety, that all of the products are considered pregnancy category X which means they should not be used. This message got out to the community and rates of vaccination have progressively winnowed. As we sit here today, we should understand that ACOG and the OB/GYN community is compromised and thereby putting the maternal-fetal health of women at risk by promoting COVID-19 vaccination. Under no circumstances should a woman of childbearing potential or gravid should receive a COVID-19 vaccine. It is absolutely contraindicated.

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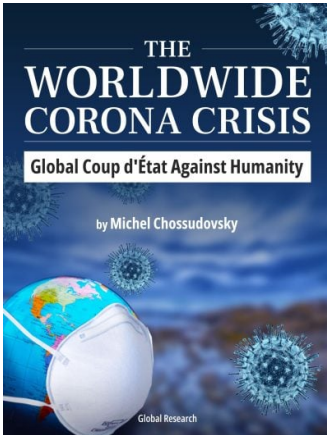
### Sources

[Dick A, Rosenbloom JI, Karavani G, Gutman-Ido E, Lessans N, Chill HH. Safety of third SARS-CoV-2 vaccine \(booster dose\) during pregnancy. \*Am J Obstet Gynecol MFM\*. 2022](#)

[Jul;4\(4\):100637. doi: 10.1016/j.ajogmf.2022.100637. Epub 2022 Apr 7. PMID: 35398583; PMCID: PMC8988438.](#)

[McCullough PA Lack of Compelling Safety data for mRNA COVID Vaccines in Pregnant Women, 2021](#)

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