GlobalResearch
Center for Research on Globalization

# Scientists Blast 'Rash' Push for Boosters, Citing 'Weak Evidence' to Support Third Shot

By Megan Redshaw
Global Research, August 22, 2021
Children's Health Defense 20 August 2021

Region: USA
Theme: Science and Medicine



***

*Scientists opposed to offering booster shots to all Americans said data provided by federal health officials wasn't compelling enough to support the recommendation — some argued boosters could lead to more vaccine-resistant variants.*

Scientists criticized the Biden administration's push to distribute COVID vaccine booster shots in the U.S. next month, saying data provided by federal health officials this week wasn't compelling enough to recommend a third dose for most Americans.

According to Kaiser Health News, some scientists say the announcement is "rash and based on weak evidence" — and they worry it could undercut confidence in vaccines, with no clear benefit of controlling the pandemic.

Meanwhile, more information is needed on potential side effects or adverse effects from a booster shot, experts said.

The Biden administration Tuesday announced Americans should get a COVID vaccine booster dose eight months after they received their second shot, despite consensus among U.S. health experts last month there wasn't enough data to recommend boosters for the general population.

> Yep! Pharmaceutical companies + their CEOs have made billions from COVID vaccines, massive compensation packages + questionable stock sales while reassuring investors that plans were underway for boosters and annual shots.https://t.co/ydmME541qp
>
> — Robert F. Kennedy Jr (@RobertKennedyJr) August 17, 2021

Officials announced Wednesday U.S. health leaders were preparing to offer booster shots to all eligible Americans in a plan outlined by Centers for Disease Control and Prevention (CDC) Director **Dr. Rochelle Walensky**, U.S. Food and Drug Administration (FDA) acting Commissioner **Dr. Janet Woodcock** and **Dr. Anthony Fauci,** White House chief medical

advisor.

The plan is still subject to approval from the FDA and the CDC's vaccine advisory committee, but officials say they are prepared to begin the rollout of booster shots starting the week of Sept. 20.

However, the CDC has pushed back by one week a meeting by a group of outside advisers who were set to review COVID booster shots as debate heats up over the need for a third dose, according to Bloomberg.

The CDC's Advisory Committee for Immunization Practices, was scheduled to meet and possibly make a recommendation about the need for boosters on Aug. 24, but is now set to convene over two days starting Aug. 30.

Officials cited data from Israel, a Mayo study not yet peer-reviewed and three new studies released by the CDC showing the vaccines' protection against COVID diminished over several months, and was less effective against the Delta variant.

But scientists and health experts said the data cited wasn't compelling — characterizing the administration's push for boosters as premature, CNBC reported.

Dr. Anna Durbin, a vaccine researcher at Johns Hopkins University, said people are still highly protected against severe disease, and vaccines are doing what they're supposed to do.

"If we start seeing significant upticks of more severe disease and hospitalizations in vaccinated people, that would be a signal to consider boosters," Durbin said. "While the presence of antibodies induced by the vaccine may decline, resulting in a rise in breakthrough infections, the body has other mechanisms, like T cells, that may protect someone from getting seriously sick," she added.

There are some groups in the U.S. who would benefit from a third dose right now, according to Dr. Archana Chatterjee, member of the FDA's Vaccines and Related Biological Products Advisory Committee.

Chatterjee said data do support the need for booster doses primarily among those who are moderately to severely immunocompromised. But "breakthrough infections in the general public tend to be asymptomatic or mild," she said.

Dr. Priya Sampathkumar, an epidemiologist at the Mayo Clinic, said a booster could be needed for the general public in the future, but "there isn't enough data to support a third booster for all at this point."

Dr. Hooman Noorchasm, cardiothoracic surgeon and patient safety advocate — who has been outspoken on the potential harms that may ensue from vaccinating people who have natural immunity to the infection, said:

> "The FDA and CDC have been ignoring the reality that indiscriminate vaccination of recently or asymptomatically COVID-19 infected persons has caused totally avoidable harm to a non-negligible number of Americans.

> "Now, CDC has announced a policy of blanket 'booster shots' in a subset of vaccine-compliant Americans. Using this inadequately calibrated, 'one-size-fit-all' approach again, CDC is almost certain to magnify harm to a subset of Americans in whom booster vaccination may be unnecessary or dangerous."

Jennifer Nuzzo, epidemiologist and associate professor at the Johns Hopkins Bloomberg School of Public Health, said, "It would be nice to understand what side effects people have after their third dose."

Serious side effects have been reported following mRNA vaccines, including cases of myocarditis, or heart inflammation.

Lawrence Gostin, director of the World Health Organization's Collaborating Center on National and Global Health Law, said federal health officials should put their focus elsewhere: on the unvaccinated, both in the U.S. and around the world.

The announcement about pending booster shots fueled deeper confusion about what Americans need to do to protect themselves from COVID.

> "I think we've scared people," said Dr. Paul Offit, director of the Vaccine Education Center at Children's Hospital of Philadelphia and adviser to the National Institutes of Health and the FDA.
>
> "We sent a terrible message," Offit said. "We just sent a message out there that people who consider themselves fully vaccinated were not fully vaccinated. And that's the wrong message, because you are protected against serious illness."

Walensky said staying ahead of the virus was the biggest driver of the eight-month booster recommendation. And vaccines have proved to be their best tool.

**Vaccines can create endless variants that evade protection**

According to an article in the BMJ, there have been eight notable variants of SARS-CoV-2 identified since September 2020, including Alpha, Beta, Gamma, Delta, Eta, Iota, Kappa and Lambda.

A new study — yet to be peer-reviewed — published on the preprint server bioRxiv, showed the Lambda variant has acquired immune evasion capabilities above the wildtype that involves shortening of the epitopes on the viral spike protein, as well as acquiring additional sites that can be N-glycosylated.

The authors of another recent preprint study arrived at a similar conclusion. Researchers observed a seven-residue deletion at the N-terminal domain of the Lambda variant, which they said could make the Lambda variant resistant to antiviral immunity.

In April 2021, authorities in Peru said 81% of the country's COVID cases were associated with the Lambda variant.

Researchers noted in the second bioRxiv study that the "vaccination rate in Chile is relatively high; the percentage of the people who received at least one dose of COVID-19 vaccine was [about] 60%."

But, the authors warned, "nevertheless, a big COVID-19 surge has occurred in Chile in Spring 2021, suggesting that the Lambda variant is proficient in escaping from the antiviral immunity elicited by vaccination."

Brian Hooker, Ph.D., P.E., Children's Health Defense chief scientific officer and professor of biology at Simpson University, said: "What we're seeing is virus evolution 101."

Hooker said the more the variant deviates from the original sequence used for the vaccine, the less effective the vaccine will be on that variant. This could explain why fully vaccinated people are getting infected with the Delta variant, Hooker said. But this isn't the case for natural immunity, he explained.

Hooker said:

> "The vaccine focuses on the spike protein, whereas natural immunity focuses on the entire virus. Natural immunity — with a more diverse array of antibodies and T-cell receptors — will provide better protection overall as it has more targets in which to attack the virus, whereas vaccine-derived immunity only focuses on one portion of the virus, in this case, the spike protein. Once that portion of the virus has mutated sufficiently, the vaccine no longer is effective."

According to research published July 30 in Scientific Reports, vaccinated people may play a key role in helping SARS-CoV-2 variants evolve into those that evade existing COVID vaccines.

The researchers who analyzed risk factors that favor emergence and establishment of a vaccine-resistant strain found the highest risk for establishing a resistant strain occurred when a large fraction of the population had already been vaccinated, but the transmission was not controlled.

The team of scientists who published the data in Scientific Reports said their findings follow what's known as selective pressure — the force that drives any organism to evolve.

> "Generally, the more people are infected, the more the chances for vaccine resistance to emerge," said Fyodor Kondrashov of the Institute of Science and Techt mutant actually gains a selective advantage."

As The Defender reported March 26, a combination of lockdowns and extreme selection pressure on the virus induced by the intense global mass vaccination program might diminish the number of cases, hospitalizations and deaths in the short-term, but ultimately, would induce the creation of more mutants of concern.

This is the result of what vaccinologist Geert Vanden Bossche calls "immune escape" (i.e., incomplete sterilization of the virus by the human immune system, even following vaccine administration).

This will trigger vaccine companies to further refine vaccines that will add to — not reduce — the selection pressure, producing ever more transmissible and potentially deadly variants.

Selection pressure causes greater convergence in mutations that affect the critical spike protein of the virus responsible for breaking through the mucosal surfaces of our airways —

the route used by the virus to enter the human body, Vanden Bossche argued.

The virus will effectively outsmart the highly specific antigen-based vaccines that are being used and tweaked, depending on the circulating variants and this could lead to a hockey stick-like increase in serious and potentially lethal cases — in effect, an out-of-control pandemic.

*

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*



---