

# **Signs of COVID Injection Failure Mount**

By <u>Dr. Joseph Mercola</u> Global Research, July 27, 2021

<u>Mercola</u>

Theme: Media Disinformation, 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 <a>ocrg\_globalresearch</a>.

\*\*\*

In the U.K., symptomatic COVID-19 cases among "vaccinated" individuals have risen 40% in one week, reaching an average rate of 15,537 new infections a day being detected. Meanwhile, symptomatic COVID-19 cases among the unvaccinated has declined by 22% and is now at a current daily average of 17,588

This suggests the wave among unvaccinated has peaked and that natural herd immunity has set in, while "vaccinated" individuals are actually becoming more prone to infection

Data show countries with the highest COVID injection rates are also experiencing the greatest upsurges in cases, while countries with the lowest injection rates have the lowest caseloads

100 fully injected crew members had tested positive onboard the British Defense aircraft carrier HMS Queen Elizabeth. The Navy ship has a case rate of 1 in 16 — the highest case rate recorded. This suggests vaccine-induced herd immunity is impossible, as these injections apparently cannot prevent COVID-19 even if 100% of a given population gets them

It is mathematically impossible for COVID shots to eliminate SARS-CoV-2 infection. The four available COVID shots in the U.S. provide an absolute risk reduction between just 0.7% and 1.3%. Meanwhile, the noninstitutionalized infection fatality ratio across age groups is a mere 0.26%. Since the absolute risk that needs to be overcome is lower than the absolute risk reduction these injections can provide, mass vaccination simply cannot have a favorable impact

\*

In recent weeks, a number of signs have emerged indicating the COVID-19 injections cannot put an end to COVID-19 outbreaks. In the July 15, 2021, video report above, Dr. John Campbell reviews data coming out of the U.K. On a side note, I do not agree with everything Campbell says in this video, such as promoting mask wearing, for example. It's his data review that is of interest here.

As noted in the video, as of July 15, 87.5% of the adult population in the U.K. had received one dose of COVID-19 "vaccine" and 67.1% had received two. Yet symptomatic cases among partially and fully "vaccinated" are now suddenly on the rise, with an average of 15,537 new infections a day being detected, a 40% increase from the week before.

Meanwhile, the daily average of new symptomatic cases among unvaccinated is 17,588, down 22% from the week before. This suggests the wave among unvaccinated has peaked and that natural herd immunity has set in, while "vaccinated" individuals are becoming more prone to infection.

U.K. hospitals are confirming double-injected patients are part of the patient population being treated for active COVID infection, and two cities have issued public warnings to their residents, letting them know they may end up in the hospital even if they've been double-injected against COVID-19.

"There are currently 15 patients in hospital with COVID across the Trust; last month there were none," The Yorkshire Post reported July 9, 2021. An undisclosed number of them had received two doses of COVID "vaccine."

"The message I would like to share with you all is that some of their patients are double vaccinated," Heather McNair, chief nurse at York and Scarborough Teaching Hospitals, told the Post.<sup>2</sup>

"This is a disease that can still affect you and still make you poorly when you are double vaccinated. We have got a ward at the moment full of COVID patients in our hospital and that is not going away anytime soon."

While the number of hospitalized COVID patients doubled in a single week, the total number was still well below the number reported in January 2021 — a statistic Amanda Bloor, accountable officer for the NHS North Yorkshire Clinical Commissioning Group, takes as proof that the injection program is "having the anticipated impact around reducing the risk of death and reducing serious illness."

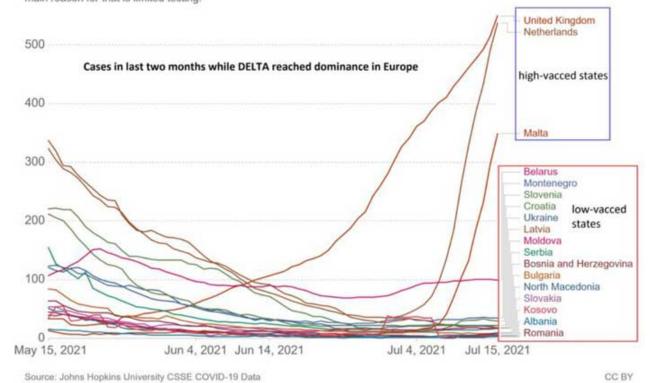
COVID Surges in Countries with Highest Injection Rates

I wouldn't be so quick to assume lower hospitalization rates in the middle of summer are a sign that the injections are having a positive impact. We also have data<sup>3</sup> showing that countries with the highest COVID injection rates are also experiencing the greatest upsurges in cases, while countries with the lowest injection rates have the lowest caseloads. This trend "is worrying me quite a bit," <u>Dr. Robert Malone</u>, inventor of the mRNA vaccine technology, said in a July 16, 2021, Tweet.<sup>4</sup>

## Daily new confirmed COVID-19 cases per million people



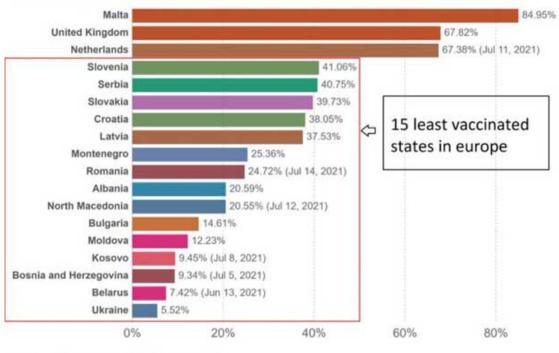
Shown is the rolling 7-day average. The number of confirmed cases is lower than the number of actual cases; the main reason for that is limited testing.



## Share of people who received at least one dose of COVID-19 vaccine



Share of the total population that received at least one vaccine dose. This may not equal the share that are fully vaccinated if the vaccine requires two doses. This data is only available for countries which report the breakdown of doses administered by first and second doses.

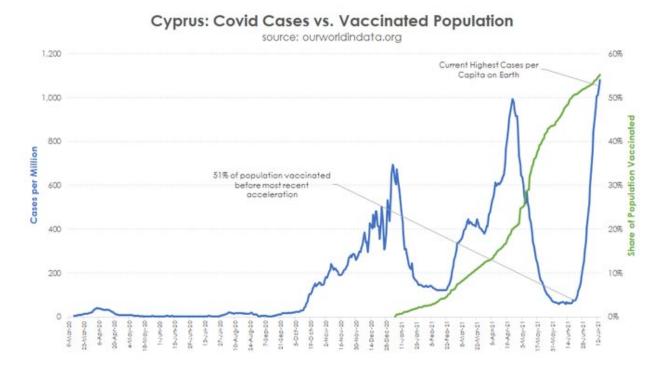


Source: Official data collated by Our World in Data

CC BY

You can view more data in this thread, posted by Corona Realism.<sup>5</sup> Cyprus, where more than 51% of residents have received the jab, now has the highest case count in the world. Interestingly, the outbreak on the British Navy ships — which I'll cover further below —

occurred shortly after a stopover in Cyprus.<sup>6</sup>



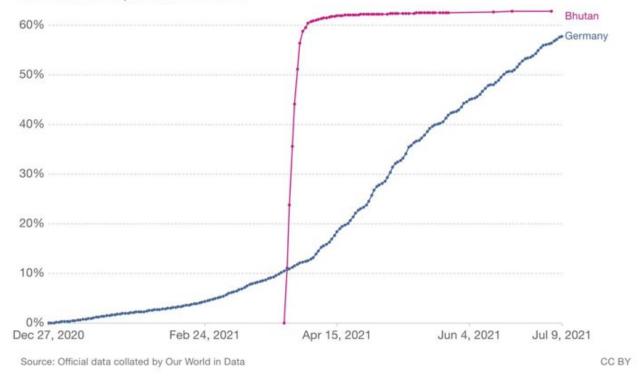
Bhutan offers an interesting glimpse into the effects of <u>mass COVID "vaccination"</u>. They managed to get 64% of residents injected in just one week, starting March 27, 2021, and almost immediately, there was a rapid uptick in cases.

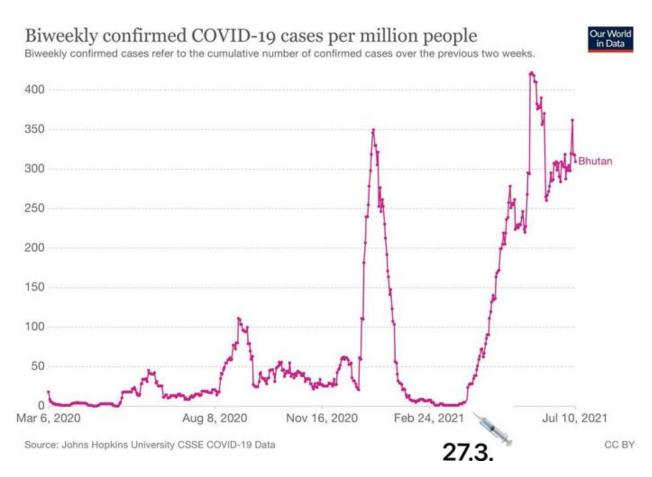
In the first graph below, you see the extraordinarily rapid injection rate in Bhutan, going from zero to 64% in a matter of days. In the second graph, you can see the effect on cases in the weeks that followed. They went from near-zero cases at the outset of the injection campaign, to a high of more than 400 cases per million in the weeks following.

## Share of people who received at least one dose of COVID-19 vaccine



Share of the total population that received at least one vaccine dose. This may not equal the share that are fully vaccinated if the vaccine requires two doses. This data is only available for countries which report the breakdown of doses administered by first and second doses.

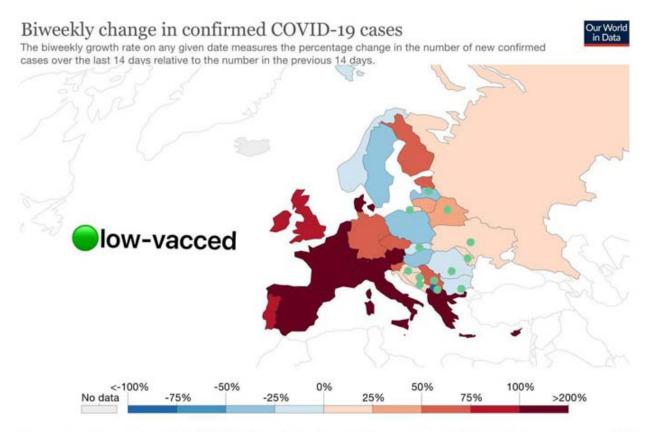




#### Case Counts Lowest in Low-'Vaxxed' Nations

On the flipside, we see the lowest number of positive COVID tests congregated in nations that also have the lowest rates of COVID "vaccine" uptake. While it's not a 100% clear-cut

correlation, it is a trend, and we also have to remember that the <u>PCR tests</u> have issues that complicate any attempt at data analysis.



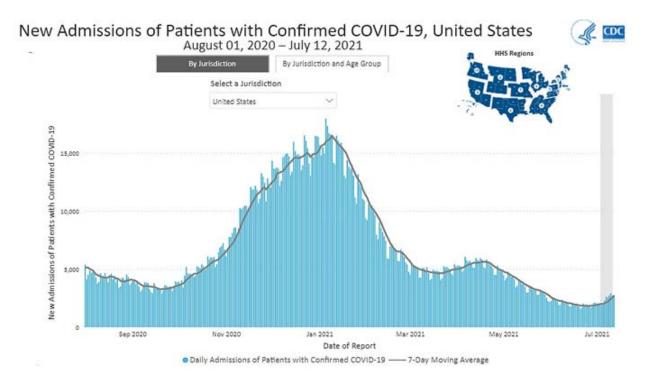
Source: Johns Hopkins University CSSE COVID-19 Data - Last updated 18 July, 09:02 (London tir@ejrWorldInData.org/coronavirus • CC BY

The main problem is that if you run the PCR test at too-high a cycle threshold (CT), you end up with an inordinate number of false positives.<sup>7,8,9</sup> The CT refers to the point in the test where a positive result is obtained. A CT of 35 or higher will give you a 97% false positive rate.<sup>10</sup>

For maximum accuracy, you'd have to use a CT of 17.<sup>11</sup> It's unclear what all these countries are using, but it's unlikely they're using a CT below 20 as a matter of routine. This means most <u>case counts around the world will be falsely elevated</u>.

This is particularly true for unvaccinated individuals in the U.S., as their tests are recommended to be run at a CT of 40, whereas patients that have received a COVID injection will have their COVID tests run at a CT below 28. This makes it appear as though the case rate is higher among the unvaccinated, when in reality it's just an artifact from highly biased testing and few of these falsely positive "cases" are actually sick.

Looking at the hospitalization rate for confirmed COVID-19 in the U.S.,<sup>12</sup> we see that the number of people sick enough to require medical attention is nowhere near what it was during the winter months of 2021, and since only 5.9% of American adults had been injected with two doses as of February 21, 2021,<sup>13</sup> we can conclude that the injections did not cause this rapid decline in hospitalizations.



The best explanation for the decline in both cases and hospitalizations after the rollout of COVID shots is the emergence of natural herd immunity from previous infections.

In a July 12, 2021, STAT News article, <sup>14</sup> Robert M. Kaplan, Professor Emeritus at the UCLA Fielding School of Public Health, calculated that by April 2021, the natural immunity rate was above 55% in 10 U.S. states, and in most of those same states, new infections were in rapid decline as early as the end of 2020, at a time when only a tiny fraction of the population had received their shots.

#### CDC Doesn't Track All Breakthrough Cases

We must also remember that the U.S. Centers for Disease Control and Prevention are artificially driving down case rates, hospitalization rates and death rates for "vaccinated" Americans by <u>selectively tracking breakthrough cases</u>. They only track and report breakthrough cases where the patient is hospitalized or dies.<sup>15</sup> They do not count mild cases, even if they have a positive test result.

A number of media outlets have expressed concerns about this biased tracking and reporting. As noted in Harvard Health, <sup>16</sup> the CDC's strategy prevents us from ascertaining whether one injection is more or less effective than another. It can also hide manufacturing problems and prevent us from determining whether timing of the second dose might have a bearing on effectiveness, as well as a number of other things.

Business Insider<sup>17</sup> pointed out that not tracking all breakthrough cases makes it more difficult to determine how dangerous the Delta variant really is. NPR expresses a similar view, stating that "Critics argue the strategy could miss important information that could leave the U.S. vulnerable, including early signs of new variants that are better at outsmarting the vaccines."<sup>18</sup>

Even Complete 'Vaccine' Coverage Won't Stop Infections

July 14, 2021, BBC News reported<sup>19</sup> 100 fully injected crewmembers had tested positive onboard the British Defense aircraft carrier HMS Queen Elizabeth. It's unclear whether any of them actually have symptoms. According to British defense secretary Ben Wallace, mitigation efforts include mask wearing, social distancing and a track and trace system. He made no mention of actual treatment for acute infection.

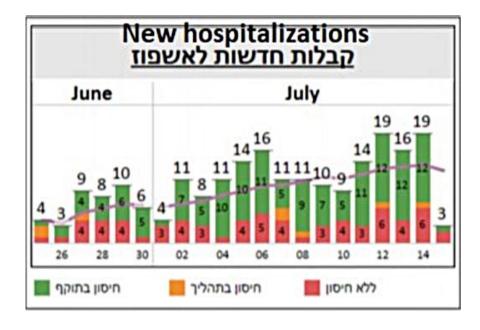
Other warships are also reporting onboard outbreaks, although Wallace did not offer any details about them. The fleet is currently in the Indian Ocean and plans to continue the 28-week deployment, with Japan as their destination. BBC News said the queen and prime minister had been onboard the flagship shortly before it sailed.

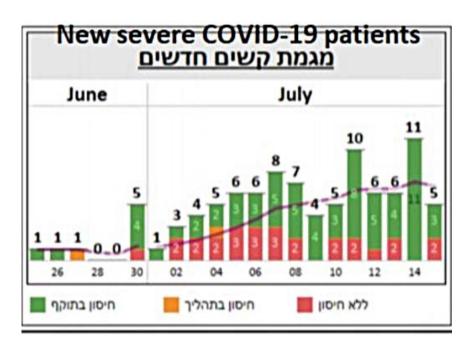
This case offers a sobering view into the effectiveness of these gene modifying shots, as the HMS Queen Elizabeth now has a case rate of 1 in  $16^{20}$  — the highest case rate recorded so far, that I know of. Yet 100% of the crew has been double-injected. This tells you that the vaccine-induced herd immunity narrative is a fairytale. These injections apparently cannot prevent COVID-19 even if 100% of a given population gets them!

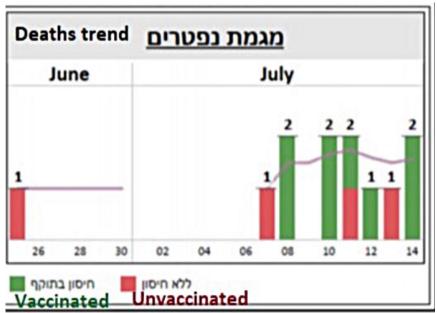
Israeli Data Indicate Pfizer 'Vaccine' Failure

Data from Israel also offer a dismal view of COVID-19 injections. Israel used <u>Pfizer's mRNA injection</u> exclusively, so this gives us a good idea of its effectiveness. Overall, it looks like an abysmal failure, as a majority of serious cases and deaths are now occurring among those injected with two doses. The following is a screenshot of graphs posted on Twitter.<sup>21</sup>

The red is unvaccinated, yellow refers to partially "vaccinated" and green fully "vaccinated" with two doses. The charts speak for themselves.







Overall, it doesn't appear as though COVID-19 gene modification injections have the ability to effectively eliminate COVID-19 outbreaks, and this makes sense, seeing how it's mathematically impossible for them to do so.

The four available COVID shots in the U.S. provide an absolute risk reduction between just 0.7% and 1.3%. <sup>22,23</sup> (Efficacy rates of 67% to 95% all refer to the relative risk reduction.) Meanwhile, the noninstitutionalized infection fatality ratio across age groups is a mere 0.26%. <sup>24</sup> Since the absolute risk that needs to be overcome is lower than the absolute risk reduction these injections can provide, mass vaccination simply cannot have a favorable impact.

### CDC Tries to Hide COVID Jab Death Toll

They can, however, cause unnecessary deaths among otherwise healthy individuals. Tragically, the CDC is doing everything it can to hide just how great that death toll is. In what appears to be a deliberate attempt at deception, the CDC "rolled back" its July 19, 2021, adverse events report to statistics from the previous week. I'll explain. Take note of

the specific dates and death totals in each of the following excerpts. The July 13 report reads as follows:<sup>25</sup>

"Reports of death after COVID-19 vaccination are rare. More than 334 million doses of COVID-19 vaccines were administered in the United States from December 14, 2020, through July 12, 2021. During this time, VAERS received 6,079 reports of death (0.0018%) among people who received a COVID-19 vaccine."

The original July 19 report (saved on Wayback) initially read as follows: 26

"Reports of death after COVID-19 vaccination are rare. More than 338 million doses of COVID-19 vaccines were administered in the United States from December 14, 2020, through July 19, 2021. During this time, VAERS received 12,313 reports of death (0.0036%) among people who received a COVID-19 vaccine."

Please note, the death toll more than doubled in a single week. That original July 19 report was then changed to this. The date on the report is still July 19:<sup>27</sup>

"Reports of death after COVID-19 vaccination are rare. More than 334 million doses of COVID-19 vaccines were administered in the United States from December 14, 2020, through July 13, 2021. During this time, VAERS received 6,079 reports of death (0.0018%) among people who received a COVID-19 vaccine."

At a time when accuracy and transparency is of such critical importance for informed consent, it's beyond shocking to see the CDC engage in this kind of deception. Yet here we are. We're now living in a world where crucial public health data is being manipulated at every turn. For this reason, looking at larger trends such as those reviewed above may offer a more dependable picture of what the real-world consequences of these shots are.

The National Vaccine Information Center (NVIC) recently posted more than 50 video presentations from the pay-for-view Fifth International Public Conference on Vaccination held online October 16 to 18, 2020, and made them available to everyone for free.

The conference's theme was "Protecting Health and Autonomy in the 21st Century" and it featured physicians, scientists and other health professionals, human rights activists, faith community leaders, constitutional and civil rights attorneys, authors and parents of vaccine injured children talking about vaccine science, policy, law and ethics and infectious diseases, including coronavirus and COVID-19 vaccines.

In December 2020, a U.K. company published false and misleading information about NVIC and its conference, which prompted NVIC to open up the whole conference for free viewing. The conference has everything you need to educate yourself and protect your personal freedoms and liberties with respect to your health.

Don't miss out on this incredible opportunity. I was a speaker at this empowering conference and urge you to watch these video presentations before they're censored and taken away by the technocratic elite.

\*

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.

#### Notes

- <sup>1, 2</sup> The Yorkshire Post July 9, 2021
- <sup>3</sup> PBS Our World in Data, Daily confirmed cases
- <sup>4</sup> Twitter Robert Malone July 16, 2021
- <sup>5, 20</sup> Twitter Thread Reader July 16, 2021
- <sup>6</sup> MSN July 14, 2021
- <sup>7</sup> The Vaccine Reaction September 29, 2020
- <sup>8</sup> Jon Rappoport's Blog November 6, 2020
- <sup>9</sup> YouTube TWiV 641 July 16, 2020
- <sup>10</sup> Clinical Infectious Diseases September 28, 2020; ciaa1491
- <sup>11</sup> European Journal of Clinical Microbiology & Infectious Diseases April 27, 2020; 39: 1059-1061
- <sup>12</sup> CDC.gov, Interpretive Summary for July 16, 2021, Hospitalizations
- <sup>13, 14</sup> STAT News July 12, 2021
- <sup>15</sup> CDC COVID-19 Breakthrough Case Investigations and Reporting
- <sup>16</sup> Harvard Health June 3, 2021
- <sup>17</sup> Business Insider July 3, 2021
- <sup>18</sup> NPR June 2, 2021
- <sup>19</sup> BBC News July 14, 2021
- <sup>21</sup> Twitter Alex Berenson July 18, 2021
- <sup>22</sup> Medicina 2021; 57: 199
- <sup>23</sup> The Lancet Microbe July 1, 2021; 2(7): E279-E280
- <sup>24</sup> Annals of Internal Medicine September 2, 2020 DOI: 10.7326/M20-5352

Featured image is from Chemical Violence

The original source of this article is Mercola Copyright © Dr. Joseph Mercola, Mercola, 2021

## **Comment on Global Research Articles on our Facebook page**

#### **Become a Member of Global Research**

Articles by: Dr. Joseph

**Mercola** 

**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: <a href="mailto:publications@globalresearch.ca">publications@globalresearch.ca</a>

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:  $\underline{publications@globalresearch.ca}$ 

<sup>&</sup>lt;sup>25</sup> Wayback CDC Reported Adverse Events July 13, 2021

<sup>&</sup>lt;sup>26</sup> Wayback CDC Reported Adverse Events July 19, 2021

<sup>&</sup>lt;sup>27</sup> CDC Reported Adverse Events July 19, 2021, Now altered