

Small Percent of Vaccine Batches Responsible for Large Number of Adverse Reactions, Analysts Claim

By Patrick Delaney

Region: <u>USA</u>
Theme: <u>Intelligence</u>, <u>Science and Medicine</u>

Global Research, May 12, 2022

LifeSiteNews 14 January 2022

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).

To receive Global Research's Daily Newsletter (selected articles), click here.

Visit and follow us on Instagram at @globalresearch_crg.

First published on January 20, 2022

'This is intentional, premeditated, mass murder. There's absolutely no doubt about it because nothing else makes any sense,' said attorney Reiner Fuellmich. 'We're going to get them.'

A recent analysis of public government data reveals very high percentages of adverse events reported as a result of COVID-19 experimental "vaccine" injections, including over 21,000 deaths, have occurred in a small minority of product batches released by pharmaceutical manufacturers.

Furthermore, according to analysts, the wide dispersement of these highly toxic batches (or "lots") to numerous U.S. states, along with their apparent sequential labeling according to levels of toxicity, is evidence of intentionality in adulterating the contents of the shots and is thus likely a serious violation of federal regulations that require such products to have consistency.

In mid-November, London-based researcher Craig Paardekooper produced a short <u>video</u> drawing data from the Vaccine Adverse Event Reporting System (<u>VAERS</u>) in the United States, where he discovered that "1 in 200 of the [COVID-19 vaccine] batches are highly toxic," while the vast majority of them are not, at least according to short-term outcomes.

"In fact," he continued, "70% of the batches for the vaccine-only produce one adverse reaction report in total," and "80% of the vaccine batches only produce one or two adverse reaction reports."

However, Paardekooper began to find anomalies that "produced thousands of times the number of adverse reactions" standing out from the vast majority of batches, including examples of 1,394, 1,012, and eventually to as many as 4,911 adverse reactions.

Additionally, these batches consistently produced these injuries across the many states where they were distributed, affirming the cause was the vaccine contents in the batches themselves rather than local circumstances, applications or demographics.

For example, for Pfizer, only 4% of their lots accounted for all the death reports associated with those injections and for Moderna the same was true with respect to only 5% of their batches.

In addition, unlike the more benign batches that were sent to fewer regional areas, the highly toxic injections were widely disseminated across multiple states.

As Paardekooper reported with regard to the Pfizer injections, only 2.9% of their lots were distributed to *more than* 12 states and these were associated with 96.5% of all the product's deaths, 95.5% of all hospitalizations and 94.7% of all adverse event reports.

In significant contrast, 97.1% of the Pfizer lots were distributed to *fewer than* 12 states and were associated with only 3.5% of all product death reports, 4.5% of all hospitalizations, and 5.3% of all adverse event reports.

Given that this data is public, Paardekooper made an accompanying <u>tutorial</u> <u>video</u> explaining how anyone can replicate his findings by downloading and properly organizing the relevant data from the VAERS platform. He also set up a website called <u>HowBadIsMyBatch.com</u>, which allows users to search the record of the adverse events of particular batches as is recorded in the VAERS data.

'Highly unusual pattern' indicates a 'significant crime' and 'must be investigated'

Independent of these efforts, however, retired pharmaceutical industry executive Alexandra Latypova made her own query into this question and later, after connecting with Paardekooper, assembled a team of researchers with experience in clinical trials, data analysis, statistics, pharmaceutical industry regulations, manufacturing, and research and development to further analyze these figures.

She produced a 20-minute <u>video</u> highlighting the contrast between the tremendous variability of COVID-19 gene-transfer vaccine lots as compared with seasonal flu vaccines and stressed the importance of Good Manufacturing Practice (GMP) laws that she told LifeSiteNews are "designed to ensure safety and consistency of pharmaceutical products which must be produced in large quantities to very exacting standards of purity, stability, consistency, etc."

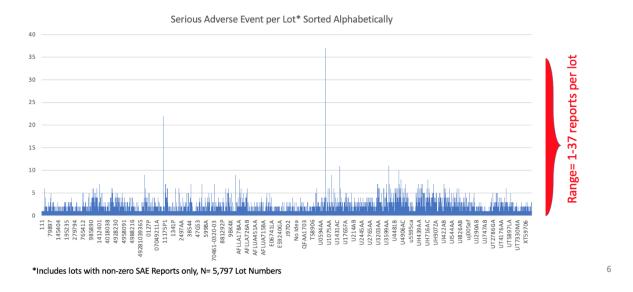
"Breaches of these practices have historically resulted in tragic cases of adulterated, tainted, or poisoned drug products which resulted in loss of life and severe injuries," she wrote in an email correspondence.

According to her presentation, GMP laws include expectations that every new lot/batch is "almost the same" as all previous lots, and that vaccines from different manufacturers "for a disease indication are 'the same' or interchangeable product."

Quoting the specific <u>regulation</u>, Latypova said, "'The failure to comply (with these practices) ... shall render such drug to be adulterated,' and that is a pretty significant crime to sell adulterated products."

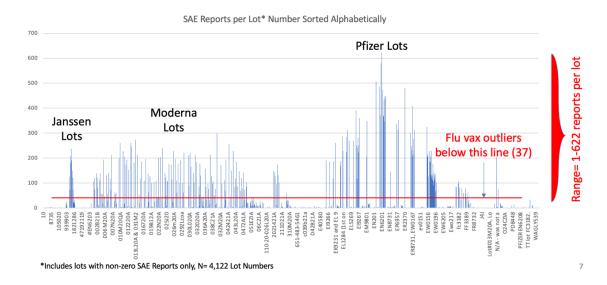
Establishing over 10 years of flu vaccine data as a control group in a visual graph (below), she demonstrated that in terms of the numbers of serious adverse events (SAEs), these products are very consistent, showing only two outliers with a maximum of 37 SAEs in one such lot.

Flu Vaccines: Consistent product across many manufacturers, lots, years, only 2 outliers



Graphing the data from COVID-19 vaccines in the same way, she observed that the range of the SAEs had to be much higher, from 1 to 700 instead of from 1 to 40 with the flu shots to accommodate the enormous numbers of injuries associated with these injections.

Covid Vaccines: Does this look like the same consistent product by manufacturer and by lot?



Second, she pointed out how the lots from the three different companies "look completely different from each other," and "lot to lot, they look extremely different as well" with many lots having very few SAEs and others having hundreds.

By comparison, she observed how "the flu vaccine outliers (the maximum number was 37) reside below the red line" and are clearly contrasted by the enormous spikes from the COVID vaccine "outlier" lots which are not just a few, but very numerous.

"This highly unusual pattern points to severe non-compliance in manufacturing and must be investigated," Latypova concluded in a follow-up video.

Batched labeled according to toxicity further indicating intentionality of variability

Another important observation Paardekooper <u>documents</u> includes what appears to be consistent patterns of labeling for ranges of toxicity in batches.

For example, he <u>shows</u> that Pfizer batches labeled with an alphanumeric code beginning in "EN6" are the most toxic with a range of 2,000 to 3,000 reported adverse reactions per batch, the "ER87 series" has between 1,500 and 2,500, the EW series has 1,000 to 2,000, and the "F series" is at 100 to 1,500 times base toxicity.

Paardekooper defines "base toxicity" to be one adverse reaction per batch, which is the case for 70% of all reported batches.

He explains the great concern here is this pattern of labeling "would be exactly what scientists would do if they were testing different dosages of drugs and monitoring their effects."

Moderna has the same pattern wherein, for example, their batches ending with 20A or 21A are associated with very high levels of injury, with those ending in 20A being the most toxic. In fact, all of the batches producing more than 1,719 adverse events all end with the

20A label.

Further, the level of toxicity seems to correlate in descending and ascending order as indicated by letters in the center of the batch numbers, with the higher toxicity rating containing the letters J, K, L, M, and the less A, B, C, D, E, and F.

As illustrated by one Telegram post on the topic, the unexpected and early death of one 48-year-old surgeon was <u>highlighted</u> in the *New York Post* last May with the deceased displaying a picture of his vaccine card showing two injections from "20A" Moderna shots received earlier in the year.

As the more toxic batches have been dispersed widely across the United States, one incident from California suggests one of them may not have been distributed broadly enough to escape notice. In January 2021, state health officials halted the distribution of "Moderna Lot 041L20A" due to "a higher-than-usual number of possible allergic reactions" at one vaccination site.

This pause was intended to allow investigation by the manufacturer, the FDA and CDC, yet it was <u>lifted</u> only a few days later when it was announced such bodies "found no scientific basis to continue the pause," granting providers permission to "immediately resume" the injections.

According to <u>data</u> from HowBadIsMyBatch.com, as of December 29, 2021, "Moderna Lot 041L20A" shots charted 2,679 VAERS reports of adverse reactions, including 32 deaths, 29 individuals with life threatening illnesses, and 26 with disabilities.

As should always be remembered, VAERS is a passive reporting system that has <u>historically</u> "under-reported adverse events by about two orders-of-magnitude" as is verified by a <u>Harvard Pilgrim study</u> that found "fewer than 1%" of adverse effects from vaccines are reported to VAERS. Even vaccine manufacturers have <u>calculated</u> a likely "fifty-fold underreporting of adverse events" in this system. Therefore, the actual injuries from these batches may be 10 to 100 times higher than reported.

'We are now absolutely certain it is not the same stuff in every vial' and 'criminal acts are being committed'

Presenting much of this material in a January 7 <u>comprehensive interview</u> with German international trial attorney <u>Reiner Fuellmich</u> and his associates of the German <u>Corona Investigative Committee</u>, **Dr. Michael Yeadon**, former Pfizer vice president and chief scientist for allergy & respiratory, offered commentary drawing from 32 years in the pharmaceutical industry leading new medicines research.

Addressing the enormous variability of the batches, he said, "We are now absolutely certain it is not the same stuff in every vial. And that means criminal acts are being committed."

"It's not just the extreme toxicity, but it's the variability," he said. "That means it's not the same products. ... it's not the same stuff. I am certain. It's not an assessment. It's not a 'maybe.' I'm absolutely certain [this is the case]."

Having worked with Latypova on this project, presenting the same graphs that can be viewed above, he said, "It cannot be the case that these middle Pfizer lots are the same

material as the ones immediately to the left and to the right."

"These drug companies are highly professional outfits. They know how to manufacture reproducibly, and we saw that with the flu vaccines over decades. They know how to do it, [and yet] they haven't done it.

"I'm afraid I've come to the conclusion that they're doing it on purpose because ... after a year they know this data," he said. "They can go into VAERS ... and see what's happening. They know. So, the fact that they haven't stopped this tells me that they are at least okay with it, and I fear that this is deliberate."

Commenting on the fact that the most toxic batches were distributed broadly across the nation to many states, while the less dangerous ones were sent to fewer localities, Yeadon observed, "If this was innocent, then you would expect that a batch (or a lot) would go on average to the same number of states each time."

"And we need to go and check this but certainly as of a couple of weeks ago our findings were the most toxic batches were going to the largest number of states. And if that's confirmed, again [this would be] evidence of premeditation. How would they know ahead of time to distribute, to dilute, the most toxic batches across the largest number of states?"

Dr. Wolfgang Wodarg, a former head of the health committee of the Parliamentary Assembly of the Council of Europe, and a panel member for this interview, concluded, "[this is] a big crime. And it's so obvious."

"We have to wake up the doctors and wake up the pharmacists and wake up the people that they are just victims of criminals," he said.

'This is intentional, premeditated, mass murder,' 'crimes against humanity'

Coming from a legal perspective, Fuellmich responded to the evidence stating, "At this point in time, I think this must be considered the missing link. This is the smoking gun."

According to the international attorney whose professional record <u>includes</u> litigating against fraudulent corporations, the evidence is "enough to show us that what has been happening is that within this gigantic experiment they are experimenting with lethal dosages."

"[And] for what purpose?" he asked. "It can only be [that] they want to reduce the population without us understanding this. That's why they're experimenting with lethal dosages because if they killed everyone at the first shot it would be very obvious," he said.

"[This evidence is] way more than enough for me," the attorney continued. "And [it] should be way more than enough for any prosecutor."

"I have no doubt, that if we talk to all of the experts that we have spoken to, the psychologists, the psychiatrists, the epidemiologists, the immunologists, the lawyers, the economists, they will all come to the same conclusion: This is intentional, premeditated, mass murder. There's absolutely no doubt about it because nothing else makes any sense," he said.

"These are crimes against humanity," Fuellmich concluded. "We're going to get them."

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.

Featured image is from Shutterstock

The original source of this article is <u>LifeSiteNews</u> Copyright © <u>Patrick Delaney</u>, <u>LifeSiteNews</u>, 2022

Comment on Global Research Articles on our Facebook page

Become a Member of Global Research

Articles by: Patrick Delaney

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