

Video: The UK Parliament Speech About mRNA COVID-19 Vaccines. Andrew Bridgen, M.P.

By <u>Paul Anthony Taylor</u> Global Research, March 25, 2023 Region: <u>Europe</u> Theme: <u>Media Disinformation</u>, <u>Science and</u> <u>Medicine</u>

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These days it isn't difficult to be cynical about politicians. This is especially the case given the draconian public health policies that most of them supported during the COVID-19 pandemic.

After enduring repeated lockdowns and being coerced into accepting experimental genebased vaccines, it's no wonder that many people have lost faith in their lawmakers.

While only rarely do we see politicians who are brave enough to speak out about the dangers of mRNA COVID-19 injections, there are a few who refuse to be silenced. Take **Andrew Bridgen**, for example, a Member of Parliament from the UK who, a few days ago, stood up to give a <u>speech</u> in a debate on mRNA COVID-19 booster vaccinations. Speaking to an almost deserted UK House of Commons (the <u>video</u> shows fellow parliamentarians quickly leaving the chamber as he began to speak), Bridgen openly described the deaths and serious harms caused by the shots.

Recently suspended from the UK's ruling Conservative Party after he had tweeted an article questioning the safety of COVID-19 vaccines and labeled them "the biggest crime against humanity since the Holocaust," Bridgen currently sits as an independent MP in the UK parliament. Predictably, since he began speaking out about the dangers of these vaccines, there have been crude attempts to censor him. After the video of his House of Commons speech was posted on YouTube, for example, it was rapidly taken down and only reinstated by the social media platform after a public outcry. Meantime, the speech has essentially been ignored in the mainstream media.

Video

The risk of serious adverse events

One of the most powerful aspects of this speech is that, far from resorting to conjecture or hearsay, Bridgen specifically refers to the UK government's own data. Citing the <u>Yellow Card</u> scheme, for example, the system for reporting and monitoring adverse reactions to drugs and vaccines in the UK, he describes how the reported number of adverse events for COVID-19 vaccines is now far higher than those for all conventional vaccines administered over the past 50 years.

Bridgen also outlines how, in order to examine the frequency of serious adverse events following vaccination with the Pfizer and Moderna mRNA COVID-19 vaccines, data held by the US Government's National Library of Medicine was used for a <u>research study</u> led by Dr. Joseph Fraiman. This revealed that there are 10.1 serious adverse events for every 10,000 Pfizer vaccinations administered, meaning that one in every 990 people vaccinated with the Pfizer booster will suffer a serious adverse event.

Dr. Fraiman further discovered that the risk from the Moderna mRNA vaccine was even greater than that of the Pfizer one, with an average of 15.1 serious adverse events for every 10,000 shots given. This means that one in 662 people vaccinated with the Moderna booster will suffer a serious adverse event. Combining the data for the Pfizer and Moderna mRNA vaccines or boosters gives an average of 1,250 serious adverse events for every 1 million vaccine boosters administered – in other words, a one in 800 chance of a serious adverse event occurring.

The true cost of using mRNA vaccines to prevent hospitalization

Bridgen describes how the UK government's own data shows that, in order to prevent just one healthy adult aged between 50 and 59 from being hospitalized due to COVID-19, 43,600 people have to be given a booster shot. Based on a serious adverse event rate of one in 800, this means that in the healthy 50 to 59-year-old group, as a result of being given mRNA boosters, 55 people would die or be hospitalized simply to prevent one COVID-19 patient being hospitalized.

The same data also shows that in the healthy 40 to 49 age group, 92,500 booster jabs were required just to prevent one person being hospitalized due to COVID-19. This would have put 116 people at risk of death or having a serious adverse reaction. In the healthy 30 to 39 age group, a total of 210,400 booster jabs would be required to prevent one person being hospitalized. This suggests that 263 UK citizens in this age group will have been hospitalized or even died just to keep one single COVID-19 case out of hospital.

As Bridgen points out, however, hospitalization does not necessarily mean a serious medical intervention such as intubation or oxygen. To prevent severe hospitalization from COVID-19, the numbers needed to be boosted with the vaccines become astronomical. Here, the UK government's own data shows that, in healthy adults aged 50 to 59, it was necessary to give 256,400 booster jabs to prevent just one severe hospitalization. This would put 321 people into hospital with a serious side-effect, including risk of death.

For healthy 40 to 49-year-olds, the number needing to be boosted to keep just one COVID-19 patient out of an intensive care unit increases to 932,500. This potentially puts 1,165 people into hospital with serious harms, disability, or death.

For the most vulnerable group – the over-70s with comorbidities – UK government data suggest it would be necessary to administer 800 vaccine boosters to prevent one hospitalization. This means that, by being boosted, all this group are essentially doing is swapping the risk of being hospitalized with COVID-19 for the risk of being hospitalized from the vaccine.

Examining the financial cost of the COVID-19 vaccination program in the UK, Bridgen says the government's own data suggest that it cost over £1.9 million (\$2.34 million) to prevent a single hospitalization among healthy 50 to 59-year-olds, and over £11 million (\$13.54 million) to prevent one serious hospitalization in this group. The cost of preventing the hospitalization of one healthy 40 to 49-year-old was over £4 million (\$4.93 million). For healthy 30 to 39-year-olds, preventing one hospitalization cost over £9 million (\$11.08 million).

State-sponsored self-harm

Summing up, Bridgen says that the data are clear: for all healthy people and all those considered at risk under 70, the probability of being seriously harmed by COVID-19 is seriously outweighed by the risks associated with the experimental mRNA vaccines and boosters. Even for the most vulnerable group – the over-70s with health problems – he says the two risks are essentially identical. Describing the use of mRNA vaccines as "absolute madness," he argues that if the UK were to continue employing them it would be engaging in "expensive state-sponsored self-harm on a national level."

Nor does Bridgen shy away from identifying the biggest beneficiaries from the UK's COVID-19 vaccine program. Pointing out that mRNA vaccines have made the pharma industry billions, he describes how the UK's <u>Medicines and Healthcare products Regulatory</u> <u>Agency</u> (MHRA) is 86 percent funded by drug companies. He additionally alleges that members of the UK's <u>Joint Committee on Vaccination and Immunization</u> (JCVI), the body that advises UK health departments on immunization, have between them declared interests of more than £1 billion (\$1.23 billion) in the pharma industry. Clearly, this hardly qualifies their advice as independent.

Accusing pharma companies of putting profits before people, Bridgen says governments across the globe have been their willing marketing agents in all this. He concludes by calling on the UK government to immediately stop the mRNA vaccine booster program and initiate a full public inquiry into not only the vaccine harms, but also how every UK agency and institution set up to protect the public interest has failed so abysmally in its duties.

Bridgen's speech should be required viewing for politicians across the globe.

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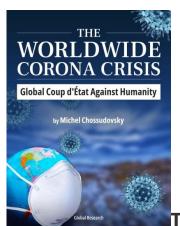
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Executive Director of the Dr. Rath Health Foundation and one of the coauthors of our explosive book, "The Nazi Roots of the 'Brussels EU'", **Paul** is also our expert on the Codex Alimentarius Commission and has had eye-witness experience, as an official observer

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