

# The covid vaccine

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## Protection

### A 95% protection?

The press was full of it. The vaccine gives us 95% relative protection. It sounds like you are 95% protected against covid with the vaccine. But what does 95% effective really mean?



**Pfizer vaccine is 95% effective and works in older people, new data shows** [yahoo/news](#)

### The relative risk reduction

In the trial there were two groups.(1). One group received the covid vaccine, the other a placebo (a neutral injection). In the first group with the vaccine, 8 people got covid. In the second placebo group, 162 people got covid. So  $8/162$  is 0.049,  $1-0.049 = 0.951$  or a **95% relative risk reduction**.

### The Pfizer Research

A total of 43,548 participants underwent randomization, of whom 43,448 received injections: 21,720 with BNT162b2 and 21,728 with placebo. There were 8 cases of Covid-19 with onset at least 7 days after the second dose in participants assigned to BNT162b2 and 162 cases in those assigned to placebo (1). In perspective, the 162 covid cases in the placebo were thus part of a group of 21728 people, and thus had an infection rate of 0.751%, and 0.036% in the vaccinated group (red in the graph).  $0.751-0.036 = 0.71\%$

**the actual risk reduction of the covid vaccine is less than 1%**

### The actual risk reduction

In reality, the Pfizer Vaccine from the study here lowers the risk of infection by less than 1% (0.71%). In reality, as an individual, you have a risk reduction that is less than 1%.

## Spread

### Spread in vaccinated

There's so much pressure to take the vaccine that gives us less than a 1% absolute risk reduction, is there any benefit in stopping the spread? Even if you are fully vaccinated, you can still spread covid in domestic settings, even spread to other fully vaccinated contacts. This was substantiated in a recent study, the vaccinated with breakthrough infections have a peak viral load that is comparable to the unvaccinated. The vaccine will not stop the spread of covid. (2)

**the covid vaccine does not stop the spread of covid**

### Spread and symptoms

If you're completely symptom-free, could you pose an infection risk to those around you? To be a good source of contagious virus, you must have a lot of virus in your respiratory tract. In the droplets there must be a viral load that is significant. There can be no transmission without significant viral load. This viral load is made by your body cells that have been destroyed, after which the virus comes out. The body will immediately recognize this and react to this, and that is called inflammation, you have pain. It is not possible to have a high viral load, attack your body and still have no symptoms.

**people without symptoms do not spread covid**

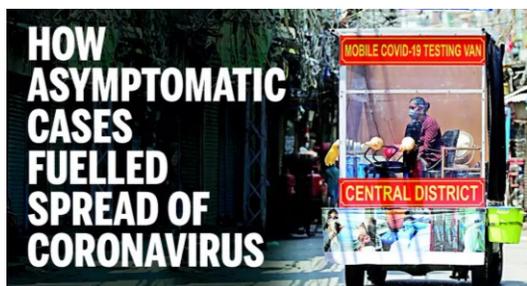
21566 placebo

21712 vaccine

162

8

0.7% 0.04%



There might be a brief period of a few hours when the virus is growing quickly, that is called presymptomatic, and it may be possible that a few people were infected that way, but the idea that transmission a major contribution to epidemic spreading occurred in a person that was full of virus and had no symptoms, is just incorrect. A scientific study of 10 million people has shown that people without symptoms do not spread Covid (3). Isn't this the basis for the masks and lockdowns?

## Immunity

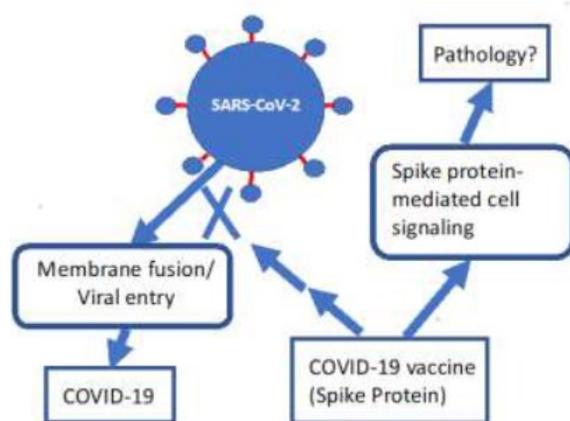
### mRNA – LNP Top Technology

The mRNA vaccines are cleverly designed to trick the body into thinking that this mRNA is made by a human cell ready to go to turn out lots and lots of protein. It codes for the spike protein in the virus (4). The injection of LNPs (synthetic cationic lipids) leads to rapid and robust inflammatory responses (5). All of this is good as they want to make immune cells come in to the muscles, take up the messenger, than carry them into the lymph system deliver them to the spleen, where it will make lots of anti-bodies (4). These vaccines are good in their ability to produce antibodies to the spike protein, which indeed does decrease the severity of the disease. So essentially they achieved their goal, but the question is, at what cost? (4)

**potential for neurodegenerative, autoimmune, oncological and vascular diseases**

### A high price

The vaccines are a new technology with many unknowns. This new technology has been under-tested and will potentially cause devastating neurodegenerative, autoimmune, oncological diseases as extensively demonstrated in(4). There was no evaluation of gene toxicity or reproductive toxicity in animals before the mRNA vaccines were approved for humans.



## Adverse Effects

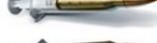
These adverse effects were no surprises. CDC already had a list of possible adverse effects before the vaccinations were started. On 30/10/20, a report states the work list of possible adverse effects of the covid vaccinations as:

Deaths, Pregnancy and birth outcomes, Other acute demyelinating diseases, Non-anaphylactic allergic reactions, Thrombocytopenia, Disseminated intravascular coagulation, Venous thromboembolism, Arthritis, arthralgia/joint pain, Kawasaki disease, Multisystem inflammatory syndrome in Children and Vaccine enhanced disease. Guillain Barré syndrome, Acute disseminated encephalomyelitis, Transverse myelitis, Encephalitis/ myelitis/ encephalomyelitis/ meningoencephalitis/ meningitis/ encephalopathy, Convulsions/ Seizures, Myocardial infarction, Narcolepsy and cataplexy, Anaphylaxis, Myocardial infarction acute myocardial disease (6)

Hence the vaccine does not protect, and does not prevent infection or transmission. The vaccine does make a lot of antibodies to the spike protein, which lowers the severity of the disease, but that comes at a cost of potentially serious side effects. Many (safe) therapeutic treatments can do that. Is there enough reason to give everyone risky treatment or do only sick people need treatment?

### Heavy life-changing damage

For those who get side effects, these are not the least (figures from the United States VAERS 17/12/21):

-  deaths 20622
-  hospitalization 108572
-  urgent care 107860
-  anaphylaxis 8590
-  bells palsy 12317
-  miscarriage 3365
-  heart attack 10429
-  myocarditis 20560
-  permanent handicap 34615
-  thrombocytopenia 4907
-  life threatening 23405
-  severe allergic reactions 35997
-  shingles 11292 (7)

### Long-term

These are the short term side effects by the way, nobody today has any idea what this will mean for us in the long term, or what the gene therapy will create. Why are these serious side effects not really covered in the media? Why are the reports on social platforms censored?



## the vaccine does not protect you, does not prevent infection or transmission and has potentially serious side effects

### Distribution in the side effects

Some people don't feel anything, other people are sick to seriously ill with life-changing damage. The results of the VAERS (a database of vaccine adverse effects in the US) have shown that the vaccine can have serious side effects. But not in all people, the VAERS data shows that the severe adverse effects come from only 5% of vaccine lot numbers. There is a big difference in the severe side effects (8) Does that mean some people are injected with a harmless substance or placebo, others are given a shot of 5, 10, 20 or 30 micrograms of mRNA?



### What is a vaccine

The definition of vaccine was "A product that stimulates a persons immune system to produce immunity to a specific disease, protecting the person from that disease" (9), was recently changed perhaps because the covid injection does none of that. The new definition since September 2021 is now "A preparation that is used to stimulate the body's immune response against diseases"(10). So on the old definition, the vaccine isn't really a vaccine, but I imagine "take your drug or gene therapy every 6 months" doesn't quite have the same ring to it.

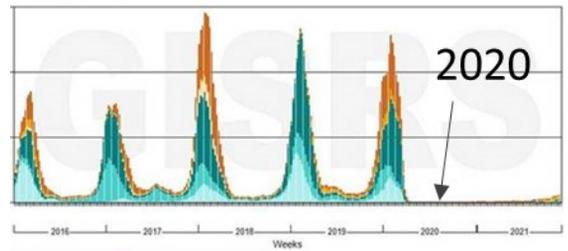
# The PCR Test

## So many people have covid

The lion's share of covid infections is based on a positive diagnosis via a PCR test. It is therefore important that we thoroughly examine its validity. PCR is not really a test but a production/replication technique. A select small amount of a specific genetic material (nucleotide sequence) is copied a large number of times (number of amplification cycles) via artificial (DNA) replication. In that small amount it would be hard to identify but artificially magnifying it makes it easier. It is already looking for a needle in a mountain of needles.



The more amplification you do, the more likely you are to find whatever you are looking for. Kary Mullis was awarded the Nobel Prize in 1993 for his contribution to the development of the PCR test. He says here in a debate that, if you keep doing it right, you can find everything in everyone. Hence, Kary says, it should not be used as a diagnosis (11). If the test is nevertheless used, the guideline is to keep the number of amplification cycles below 35 and preferably 25-30 cycles. If the PCR is used for virus detection with more than 35 cycles, then the signals do not correspond to infectious virus (12).



## New test request CDC

At the end of July, 2021, after 16 months of using the inaccurate PCR test, CDC is publishing a 'Lab Alert' that they will withdraw the use of the PCR by the end of December 2021. Furthermore, they are encouraging labs to use a test that can discriminate between covid and flu (14). By the way, where's the flu? WHO's chart with annual flu peaks end in 2020, FOX's figures are also surprising; has the flu disappeared? (15)



## Death rates

### Dying from or with covid

There are people dying from covid. Others die with covid. Just because people die with covid doesn't mean they die from covid. The US Centre for Disease Control, CDC, had the most impressive numbers of covid deaths. On closer examination it became clear that 94% of all covid patients had co-morbidities, or in other words had several other conditions when dying. If those numbers are so assigned, then only 6% have died from the infection? (16)

### Media

As an example, the Belgian newspaper De Tijd, April 16, 2020, stated that the government attributed 2026 deaths of the elderly to covid-19. The numbers put the country in lockdown. Closer examination showed that only 3% of covid deaths were tested, only 62 out of 2026. (17)

### Vaccination side effects

The CDC calls a person "vaccinated" only 14 days after the injection. If someone has a fatal vaccine reaction within 14 days of the injection, the CDC does not count this as a vaccine death but as an unvaccinated covid death. Why? (18) All these deaths were counted as covid deaths.

### Midazolam

The first wave of tens of thousands of deaths from Covid was mainly the elderly. There were new covid guidelines in palliative care with unprecedented increase in IV Midazolam (19), which has raised a lot of concern on the question of its relationship to the sudden death wave. All these deaths were counted as covid deaths.

## 50% of Remdesivir trials Ebola fatal

### Remdesivir

Remdesivir is the first covid treatment to be used in the US. A study of Remdesivir for Ebola showed that treatment with Remdesivir kills more than 50% of patients (20) Nevertheless, Remdesivir was proposed as the only authorized treatment (21). This leads to fatal acute kidney failure (22), A recent of more than 5,000 covid-19 patients confirm the renal failure and potential fatal adverse effects of Remdesivir(23). All these deaths were counted as covid deaths.

### Ventilator

More than 80% of coronavirus patients placed on ventilators in New York have died.(24) Did those ventilators do more damage than good? A nurse testified that in her hospital (25) even covid-negative patients were put on a respirator with fatal consequences. All these deaths were counted as covid deaths.

## no CPR in covid patients

### Resuscitation

And with covid patients it was ordered not to perform CPR in cardiac arrest. Why not?(26)



## Alternatives to the vaccine

### Vaccination as the sole intention

In 2020, the intention became clear: a vaccine. A treatment was not on the agenda, the campaign read: "get vaccinated". The whole situation is based on assumptions that we are in the midst of a pandemic of a deadly virus, that the PCR test is a correct tool for diagnosis, and that nothing can be done but vaccinate everyone. We were told that if we catch covid we will die. Nothing is less true. The vast majority, including the elderly and the sick, survive. It was recommended to wash our hands, not how to boost our underlying immunity.

### Emergency Use Authorization

On March 27, 2020, the Food and Drug Administration (FDA) issued an Emergency Use Authorization (EUA) of the vaccines. Before the FDA can issue an EUA, there must be no adequate, approved and available alternative to the product candidate to diagnose, prevent or treat the disease or condition.(27) There are alternative treatments.

### Other solutions

There are solutions other than the vaccine. Since the start of the pandemic, patents and scientific literature have described effective treatments.

Ivermectin is a prime example, it has been FDA approved for 20 years, has been used worldwide for over 40 years, and won the Nobel Prize in 2015. Ivermectin was already described in a patent dated February 7, 2020 (US202062971803P) as a treatment for covid- 19. In scientific literature it was already present in January 2020 (28). Since then, more than 63 studies in 18 countries showed how Ivermectin stops both covid and covid spread. A more recent study shows that an immediate global use of Ivermectin would halt the covid-19 pandemic (29).

## doctors worldwide have successful protocols to cure covid patients

Doctors worldwide have successful protocols to cure covid patients. An example doctor, Dr. Bryan Tyson has treated more than 6,000 patients with covid and early treatment, no one died between days 1 and 7, and of the patients who had covid for more than 7 days before entering treatment, only 4 died. All this on more than 6000 patients. (30)

### Protocols

The different protocols for covid treatment contain a selection and combination of Vitamin B, C, D, D3, Quercetin, Zinc, OTC drugs such as NAC, Melatonin, C60, Aspirin, Loratine, Cetirizine, Glutathione, and prescription drugs such as steroids, mast cell stabilizers, Ivermectin, Cochicine, Antihistamines, Hydroxychloroquine, Fluvoxamine, Doxyxline and Zitromax.

### The choice

A list of question marks arises around the consequences of this vaccine. It doesn't stop the spread, it doesn't stop the virus. Furthermore, the vaccine has a number of life-changing and even fatal consequences compared to Ivermectin which is generally well tolerated and stops covid and its spread.

	Ivermectin	covid vaccin
stops covid	✓	✗
stops spread	✓	✗
FDA approved	✓ > 20 years	✗ only under AEU
	adverse effects	
	Generally well tolerated Dizziness Pruritus GI effects (e.g., nausea, diarrhoea) Neurological AEs have been reported when IVM has been used to treat parasitic diseases, but it is not clear whether these AEs were caused by IVM or the underlying conditions (31)	deaths 20622, hospitalization 108572, urgent care 107860 anaphylaxis 8590 bells palsy 12317 miscarriage 3365 heart attack 10429 myocarditis 20560 permanent handicap 34615 thrombocytopenia 4907 life threatening 23405 severe allergic reactions 35997 shingles 11292 (7)

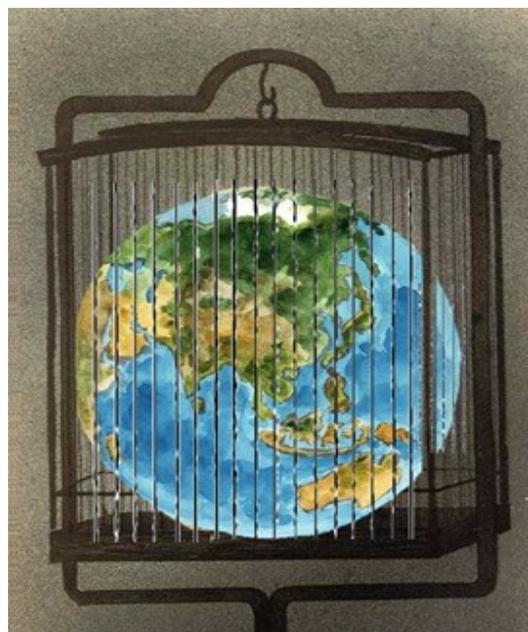
We are now administering the vaccines to children. Children are allowed to choose for themselves in the US from 12 years old! Healthy children have no risk of dying from covid with a 99,9973% survival rate. It's less dangerous than the flu for them. They are not going to spread covid asymptomatic. Children, therefore, only get potential harm from the injection of the covid vaccine with serious questions about long-term side effects. A recent study in Hong Kong now shows that 1 in 2700 adolescents develop Myocarditis/Pericarditis after the second dose of Comirnaty (Pfizer). (32)

## healthy children have zero risk of dying from covid

It feels like we are live in a controlled reality today with scripted narratives driving almost every aspect of our thoughts and reality thanks to oversaturated media and technology. Is objectivism now being surrounded by the same subjectivism? Does a fish know it's wet? Whether you are pro or against vaccines, allowing a government to exclude people to force a medicine on them is alarming to say the least. Never before has a government locked up healthy people. Are we witnessing a controlled demolition of our society, in which all our rights are slowly becoming privileges? It's hard to question government guidelines, although it happened in Iceland in 2009. If we don't face this now, we will give our children twice the struggle.

# Hope

With a desire for a better and healthy future, here is a list of 100 from countless doctors, who stand up for transparency. And this alongside scientists, psychologists, journalists and concerned citizens, despite many being ridiculed, censored, and fired. The list gives hope. Governments come and go, but our health is for the rest of our lives.



- |                                    |                                       |                                      |
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|                                    |                                       | Dr. Zac Cox (UK)                     |

## References

1. Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine [The New England Journal of Medicine](#)
2. Community transmission and viral load kinetics of the SARS-CoV-2 delta (B.1.617.2) variant in vaccinated and unvaccinated individuals in the UK: a prospective, longitudinal, cohort study [The Lancet Infectious Diseases](#)
3. Post-lockdown SARS-CoV-2 nucleic acid screening in nearly ten million residents of Wuhan, China [Nature](#)
4. Worse Than the Disease? Reviewing Some Possible Unintended Consequences of the mRNA Vaccines Against COVID-19 [Int. Journal of Vaccine TPR](#)
5. The mRNA-LNP platform's lipid nanoparticle component used in preclinical vaccine studies is highly inflammatory [Cell Press](#)
6. CBER plans for monitoring COVID-19 vaccine safety and effectiveness, [CDC.gov](#)
7. Open VAERS [Data](#) Dec 2021
8. Covid-19 Vaccine Deaths were caused by just 5% of the batches produced according to official Government data [The Expose](#)
9. 2020 site of CDC.gov [Waybackmachine.org](#)
10. Immunization: The Basics [CDC.gov](#)
11. Kary Mullis explains why his PCR test is not a diagnostic test [Video](#)
12. External peer review of the RTPCR test to detect SARS-CoV-2 reveals 10 major scientific flaws at the molecular and methodological level: consequences for false positive results. [Medic Debate](#)
13. Corrigendum to: Correlation Between 3790 Quantitative Polymerase Chain Reaction–Positives Samples and Positive Cell Cultures, Including 1941 Severe Acute Respiratory Syndrome Coronavirus 2 Isolates, [Oxford Academic](#)
14. Lab Alert: Changes to CDC RT-PCR for SARS-CoV-2 Testing [CDC.gov](#)
15. WHO Graph App [WHO.int](#)
16. Weekly Updates by Select Demographic and Geographic Characteristics [CDC.gov](#)
17. Nieuw gemor over Belgische rapportering coronadoden [De Tijd](#)
18. SARS-CoV-2 Infections and Hospitalizations Among Persons Aged ≥16 Years, by Vaccination Status — Los Angeles County, California, May 1–July 25, 2021 [CDC.gov](#)
19. End of Life Care for Patients with COVID-19 [NHS UK](#)
20. A Randomized, Controlled Trial of Ebola Virus Disease Therapeutics [The New England Journal of Medicine](#)
21. Information for Clinicians on Investigational Therapeutics for Patients with COVID-19 [CDC.gov](#)
22. Remdesivir and Acute Renal Failure: A Potential Safety Signal From Disproportionality Analysis of the WHO Safety Database [ASCPT](#)
23. Kidney disorders as serious adverse drug reactions of Remdesivir in coronavirus disease 2019: a retrospective case–noncase study [Kidney Int](#)
24. Some doctors moving away from ventilators for virus patients [APNews](#)
25. New York claims the city is 'murdering' COVID-19 patients by putting them on ventilators and causing trauma to the lungs [Daily Mail UK](#)
26. Covid-19: Doctors are told not to perform CPR on patients in cardiac arrest [BMJ](#)
27. Emergency Use Authorization of Medical Products and Related Authorities [FDA.gov](#)
28. Molecular Docking Reveals Ivermectin and Remdesivir as Potential Repurposed Drugs Against SARS-CoV-2 [Europe PMC](#).
29. Review of the Emerging Evidence Demonstrating the Efficacy of Ivermectin in the Prophylaxis and Treatment of COVID-19 [American Journal of Therapeutics](#)
30. Doctor Cites Early Treatment as Reason for Success with 6,000 Covid Patients [GCS](#)
31. NIH COVID-19 Treatment Guidelines [NIH](#)
32. Epidemiology of Acute Myocarditis/Pericarditis in Hong Kong Adolescents Following Comirnaty Vaccination [Oxford Academic CID](#)