

Government of Canada data suggests the Triple Vaccinated are suffering Antibody Dependent Enhancement; and Pfizer & the FDA knew it would happen

Description

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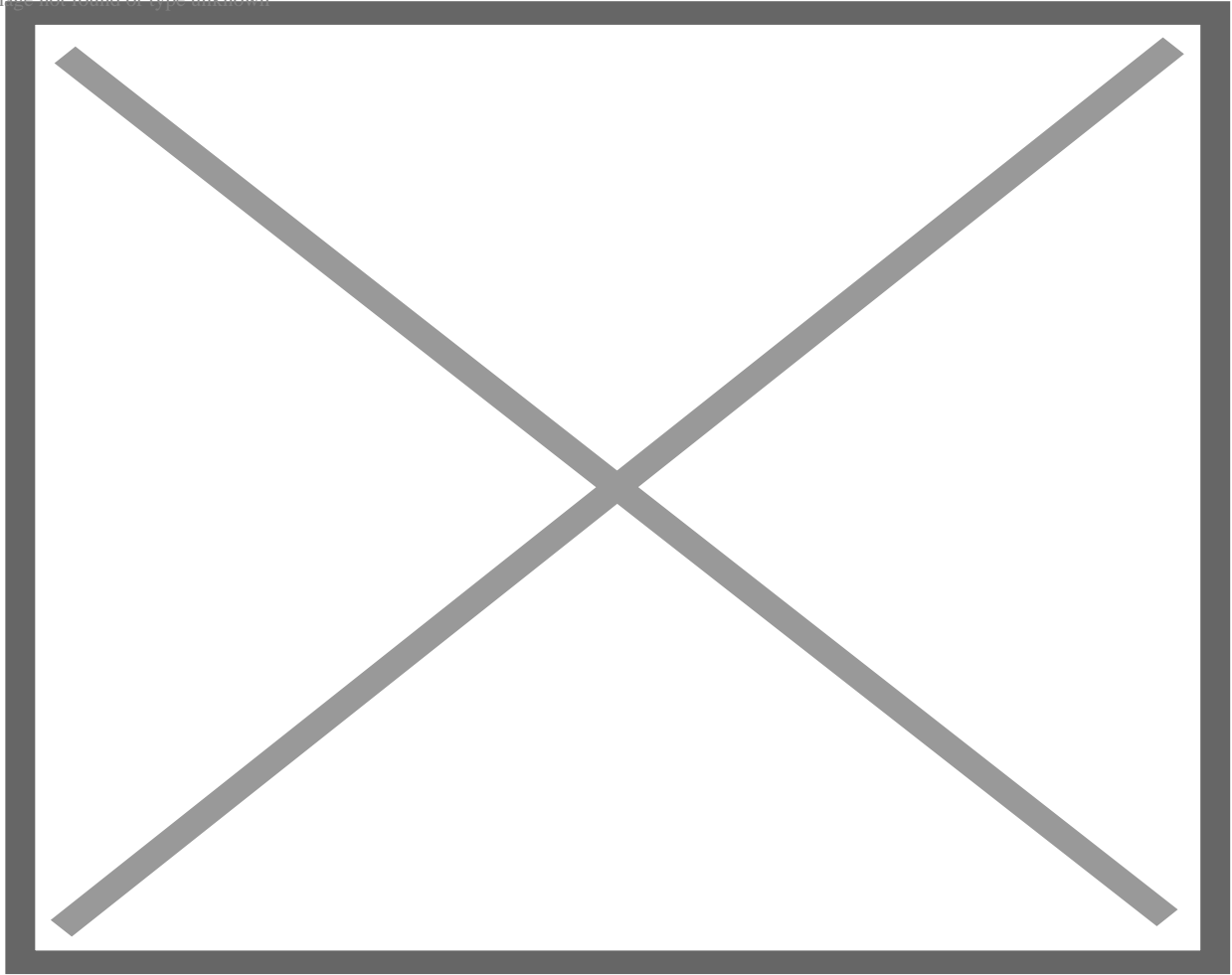
Official Government data coming out of Canada shows that fully vaccinated individuals are now statistically over four times more likely to be infected with Covid-19, 1.5 times more likely to be hospitalised with Covid-19, and twice as likely to die of Covid-19 than not-vaccinated individuals.

The horrifying thing about these stats is that they do not take into account age or the length of time since a person was vaccinated, but still equate to an average that shows the Covid-19 injections are not just ineffective but actually seem to worsen the effects of Covid-19 infection.

These are the sort of figures you would expect to see if a vaccine was causing Vaccine-Associated Enhanced Disease and antibody-dependent enhancement, and it turns out the latest round of confidential Pfizer documents confirm that both Pfizer and the US Food & Drug Administration knew it was a possibility upon emergency approval of the mRNA jab.

Then they received evidence of it occurring, including several deaths, but decided to ignore it and claim “no new safety issues have been raised”.

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Intensive research conducted by health experts throughout the years has brought to light increasing concerns about “Antibody-Dependent Enhancement” (ADE), a phenomenon where vaccines make the disease far worse by priming the immune system for a potentially deadly overreaction.

ADE can arise in several different ways but the best-known is dubbed the ‘Trojan Horse Pathway’. This occurs when non-neutralizing antibodies generated by past infection or vaccination fail to shut down the pathogen upon re-exposure.

Instead, they act as a gateway by allowing the virus to gain entry and replicate in cells that are usually off limits (typically immune cells, like macrophages). That, in turn, can lead to wider dissemination of illness, and over-reactive immune responses that cause more severe illness.

Even Dr Anthony Fauci, the Chief Medical Adviser to the President of the United States, admitted when discussing the Covid-19 vaccine, that this would not be the first time a vaccine that initially looked good, actually made people worse.

In 2016, a dengue virus vaccine was designed to protect against all four serotypes of the virus. The

hope was that by inducing immune responses to all four serotypes at once, the vaccine could circumvent the issues related to ADE following disease with dengue virus. [The vaccine was given to children](#) in the Philippines. However, fourteen vaccinated children died after encountering dengue virus in the community as they had developed antibody responses that were not capable of neutralizing the natural virus circulating in the community.

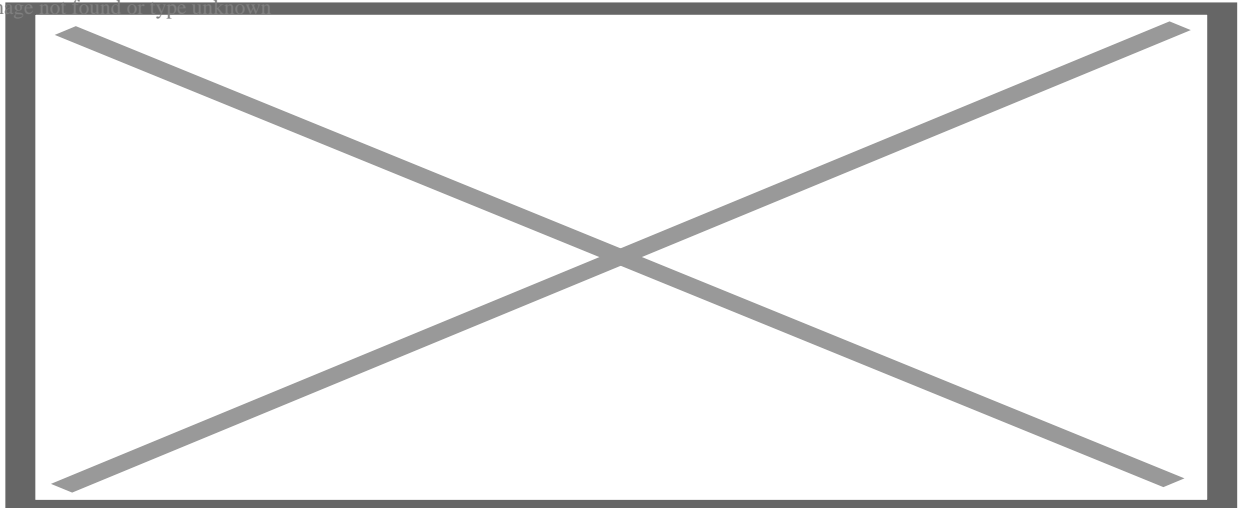
In previous clinical trials of vaccine candidates to combat SARS and MERS, the studies each failed during the animal phase due to ADE also known as pathogenic priming or a cytokine storm.

Phase three clinical trials are designed to uncover frequent or severe side effects before a vaccine is approved for use, including ADE.

But here in lies the problem, none of the Covid-19 vaccines have completed phase three clinical trials.

The [Pfizer phase three trial](#) is not due to complete until February 8th 2024, after previously being estimated to complete in April 2023.

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[Source](#)

However, of the information collated by Pfizer so far in the ongoing study they have conducted, it is clear to see that they were fully aware in February 2021 that antibody-dependent enhancement was a possible consequence of their Covid-19 injection, and it appears they also knew by April 2021 that the phenomenon was killing people.

Confidential Pfizer Documents

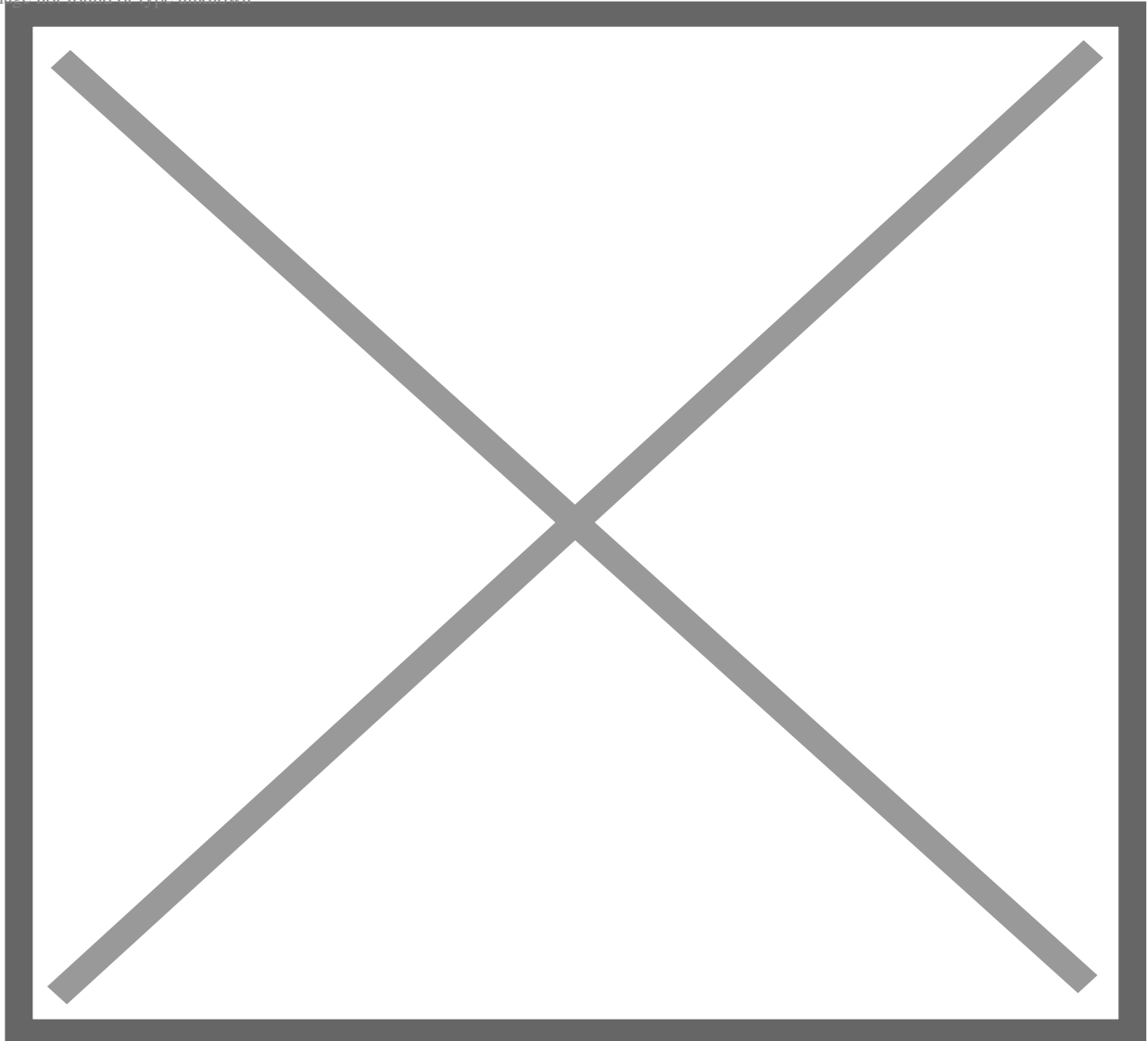
The US Food and Drug Administration (FDA) has been forced by court order to publish all confidential documents sent to them by Pfizer in regard to emergency use approval of the Pfizer Covid-19 injection.

The latest round of documents were published 1st April 22, and one of those documents is [‘reissue_5.3.6 postmarketing experience.pdf’](#).

Table 5, found on page 11 of [the document](#) shows an ‘Important Potential Risk’, and that risk is listed

as 'Vaccine-Associated Enhanced Disease (VAED), including Vaccine-Associated Enhanced Reporatory Disease (VAERD)'.

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[Source – Page 11](#)

Vaccine-associated enhanced diseases (VAED) are modified presentations of clinical infections affecting individuals exposed to a wild-type pathogen after having received a prior vaccination for the same pathogen. Whereas, Vaccine-associated enhanced respiratory (VAERD) disease refers to disease with predominant involvement of the lower respiratory tract.

Enhanced responses are triggered by failed attempts to control the infecting virus, and VAED typically presents with symptoms related to the target organ of the infection pathogen. [According to scientists](#) VAED occurs as two different immunopathologies, antibody-dependent enhancement (ADE) and vaccine-associated hypersensitivity (VAH).

Pfizer claim in their confidential document stamped in April 2021, that up to 28th Feb 2021, they had received 138 cases reporting 317 potentially relevant events indicative of Vaccine-Associated

Enhanced Disease. Of these 71 were medically significant resulting in 8 disabilities, 13 were life-threatening events, and 38 of the 138 people died.

Of the 317 relevant events reported by 138 people, 135 were labelled as 'drug ineffective', 53 were labelled as dyspnoea (struggling to breathe), 23 were labelled as Covid-19 pneumonia, 8 were labelled as respiratory failure, and 7 were labelled as seizure.

Pfizer also admitted that 75 of the 101 subjects with confirmed Covid-19 following vaccination, had severe disease resulting in hospitalisation, disability, life-threatening consequences of death.

But Pfizer still definitively concluded, for the purposes of their submitted safety data to the Food and Drug Administration, the very data that was needed to gain emergency use authorisation and make them billions and billions of dollars, that 'None of the 75 cases could be definitively considered as VAED'.

But Pfizer then went on to confirm that based on the current evidence, VAED remains a theoretical risk.

At the time of this confidential report being written in early 2021, Pfizer claimed that their Covid-19 injection was 95% effective at preventing infection. So how on earth did they not definitively conclude that VAED was to blame when 75% of the confirmed "break-through" cases reported to them were severe disease resulting in hospitalisation, disability, life-threatening consequences of death?

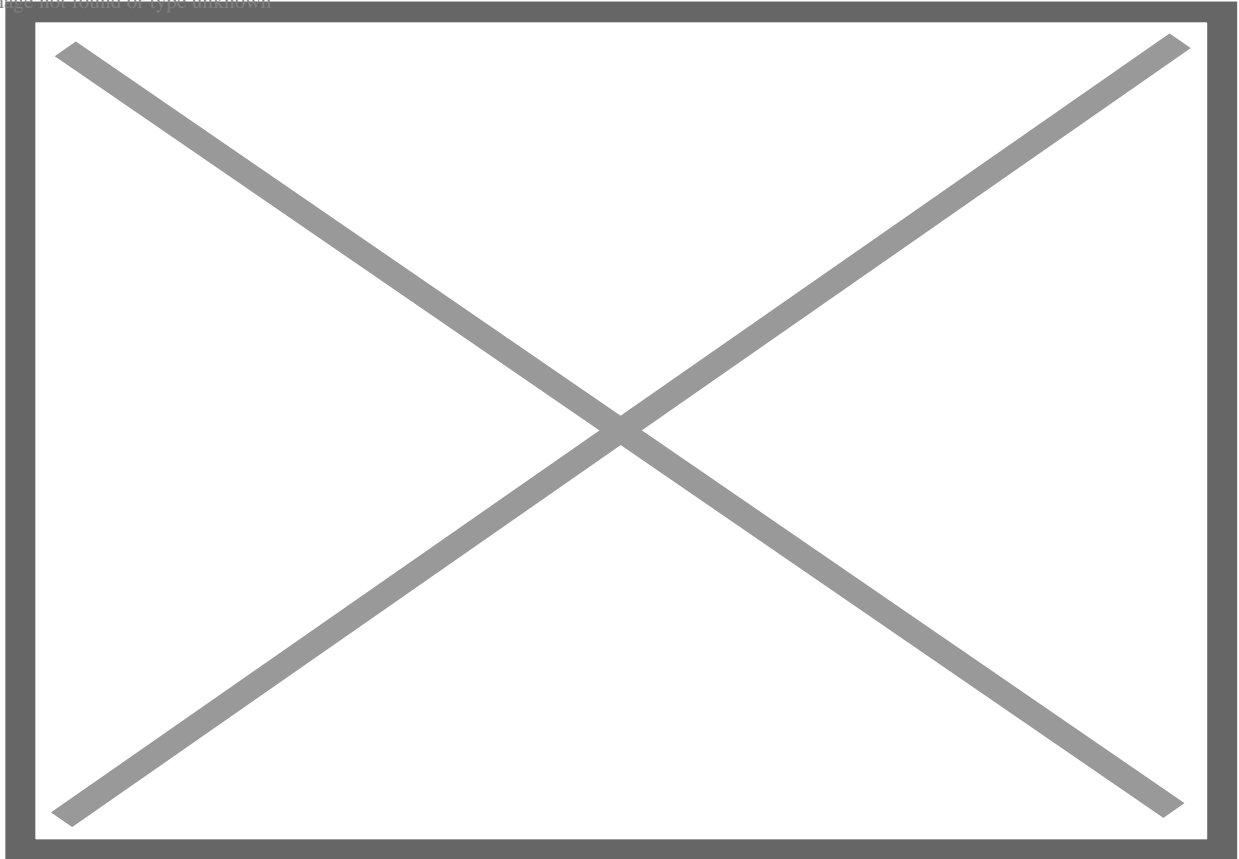
These early warning signs were ignored by Pfizer to ensure they could make their billions, and dismissed by the FDA which simply took Pfizer's claims at face value. If corruption wasn't so rife in the pharmaceutical industry then perhaps we would not be seeing such devastating figures as the ones being published by the Government of Canada.

Evidence of VAED & ADE

The Government of Canada produces a daily Covid-19 Epidemiology update, in which they sporadically provide new data on Covid-19 cases, hospitalisations and deaths as and when they feel like it.

The following table is taken from their latest update, found [here](#), and shows the number of cases, hospitalisations and deaths by vaccination status up to 20th March 22 –

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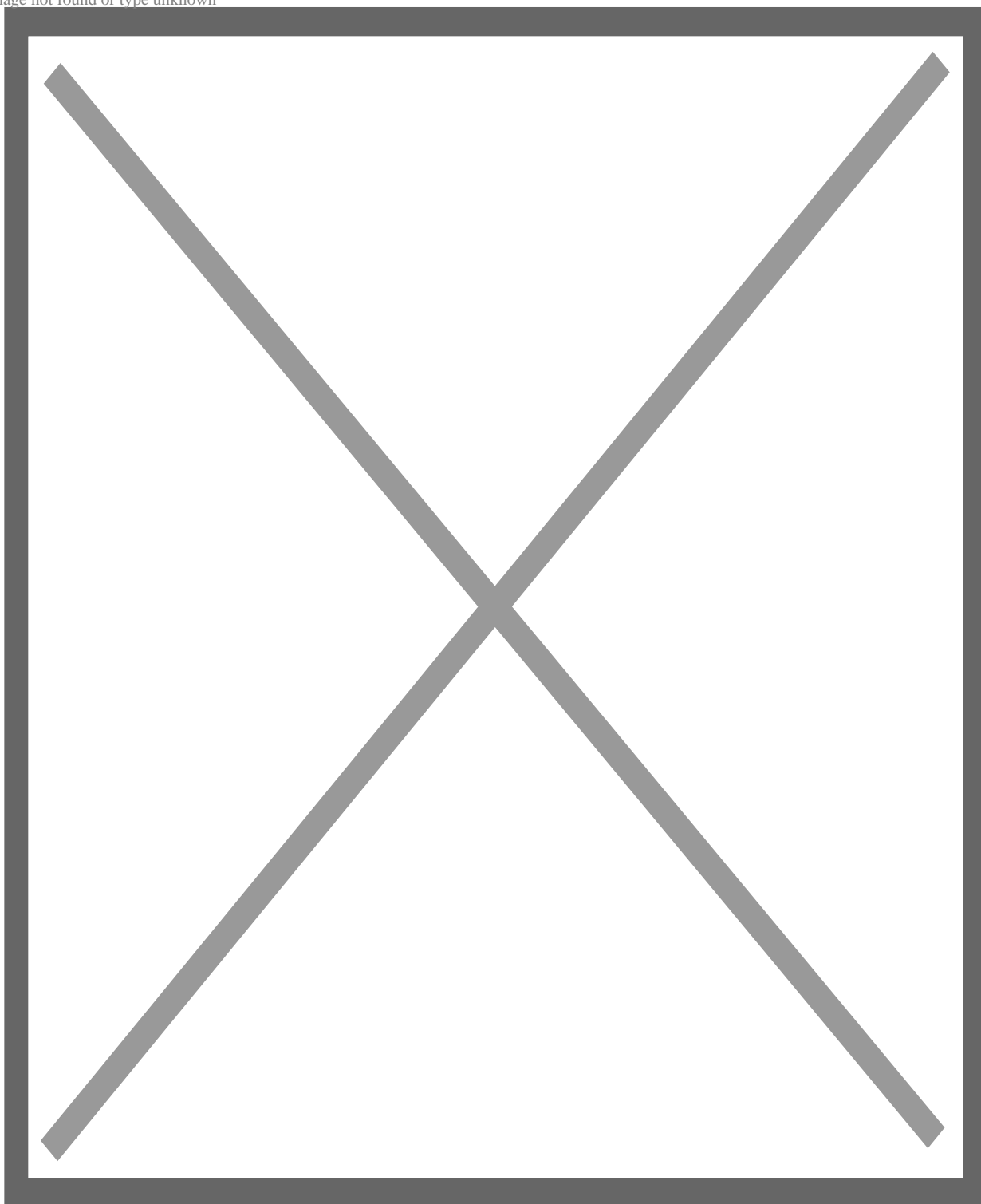
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At first glance that looks pretty bad for the unvaccinated and pretty good for the fully vaccinated doesn't it? But looks can be extremely deceiving.

Because the data shown above stretches all the way back to 14th December 2020, under the justification that this is the date the first Covid-19 injection was administered.

But guess what happened just after that first injection was administered? Canada experienced it's largest wave of Covid-19 deaths to date, and just 0.3% of the entire population of Canada were considered fully vaccinated by the end of it.

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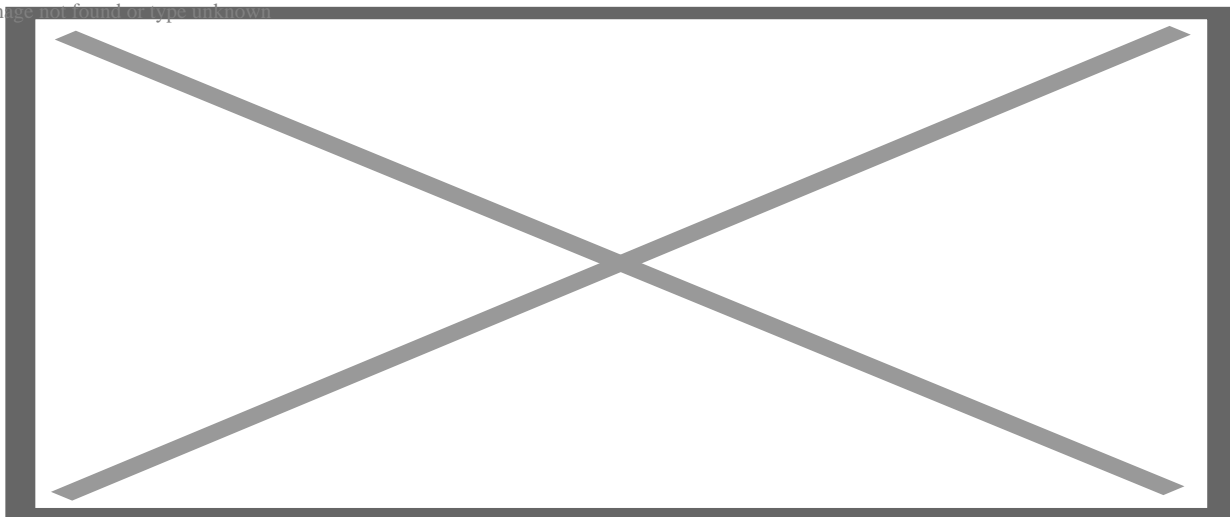
So naturally, the Government of Canada is able to include a humongous amount of deaths that occurred among the unvaccinated when 99.7% of Canada was in fact unvaccinated.

But thanks to the gift of the ['WayBackMachine'](#), we can look at previous Government of Canada Covid-19 Daily Epidemiology Update' reports to deduce who is actually accounting for the majority of these

deaths, hospitalisations and cases in the present day.

The following table is taken from a [report published early March 2022](#), and it shows the number of cases, hospitalisations and deaths by vaccination status between 14th Dec 2020 and 13th February 2022.

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[Source](#)

Now all we have to do is carry out simple subtraction to deduce who is accounting for the most recent wave of Covid-19 cases, hospitalisations, and deaths in Canada, and these are the results...

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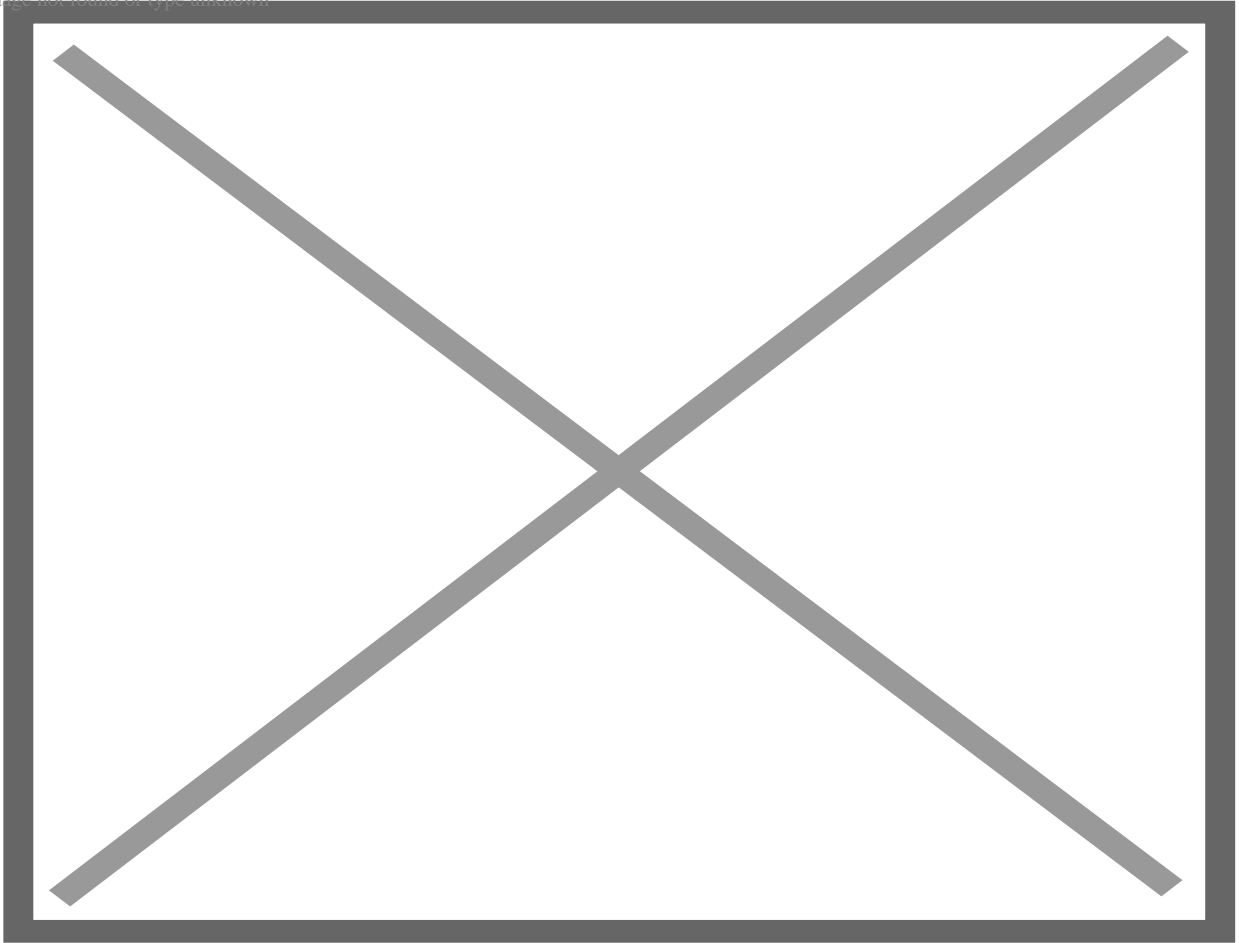


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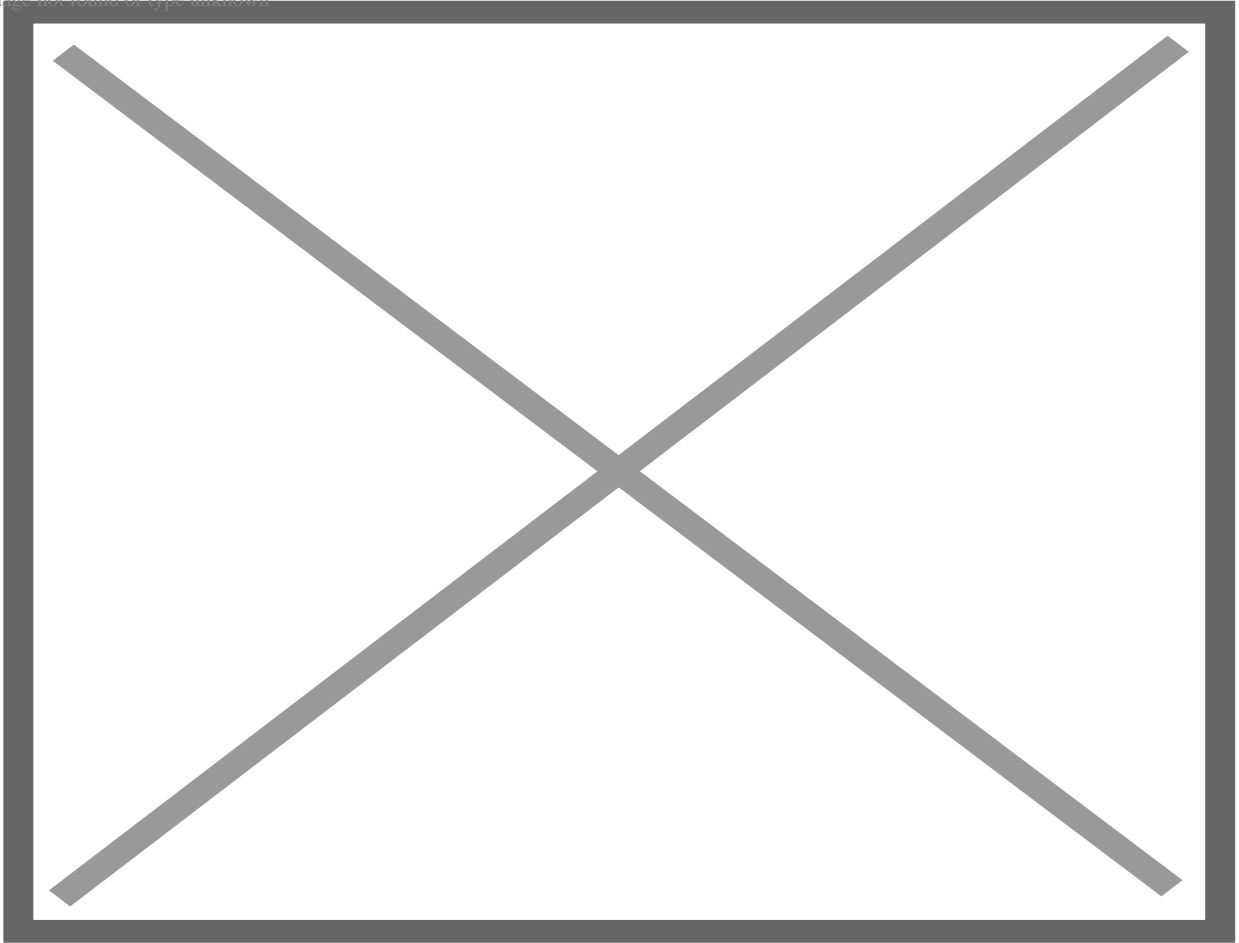
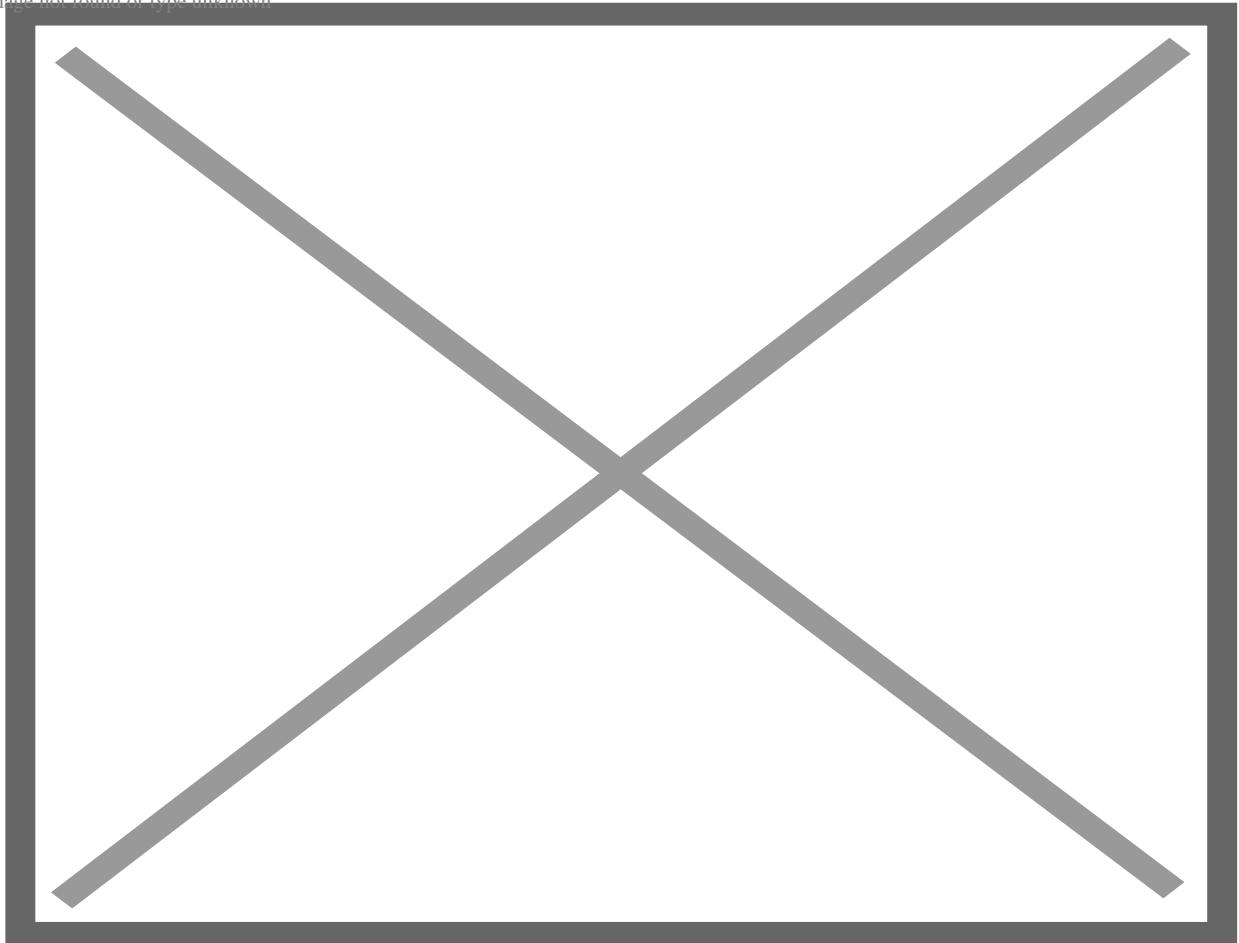


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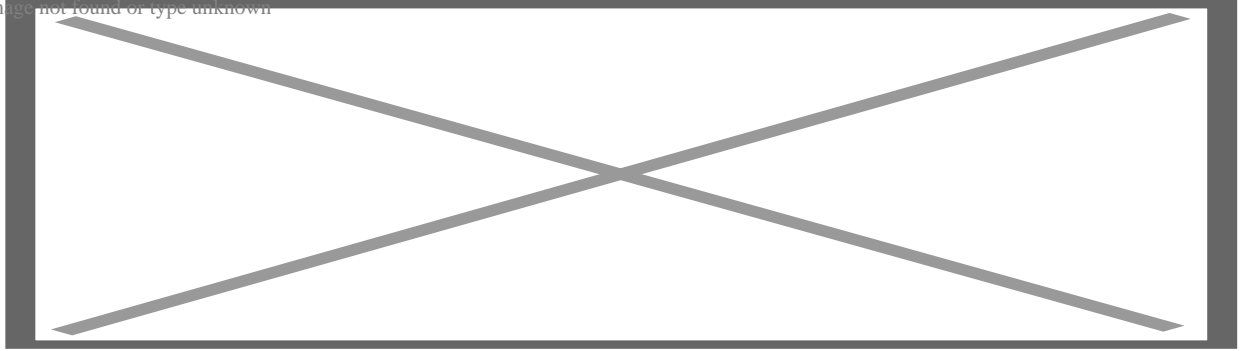


According to the Government of Canada, 87% of cases, 71% of hospitalisations and 75% of deaths were recorded among the fully vaccinated population between 14th Feb and 20th March 22 across Canada.

But how does this weigh up in respect of the case, hospitalisation and death-rates per 100,000 population? Well, again the Government of Canada doesn't make it easy to find out, but they do give enough information for us to be able to calculate them ourselves.

Firstly, they give us the total number of people across Canada who have been vaccinated, and tell us how many doses they have had.

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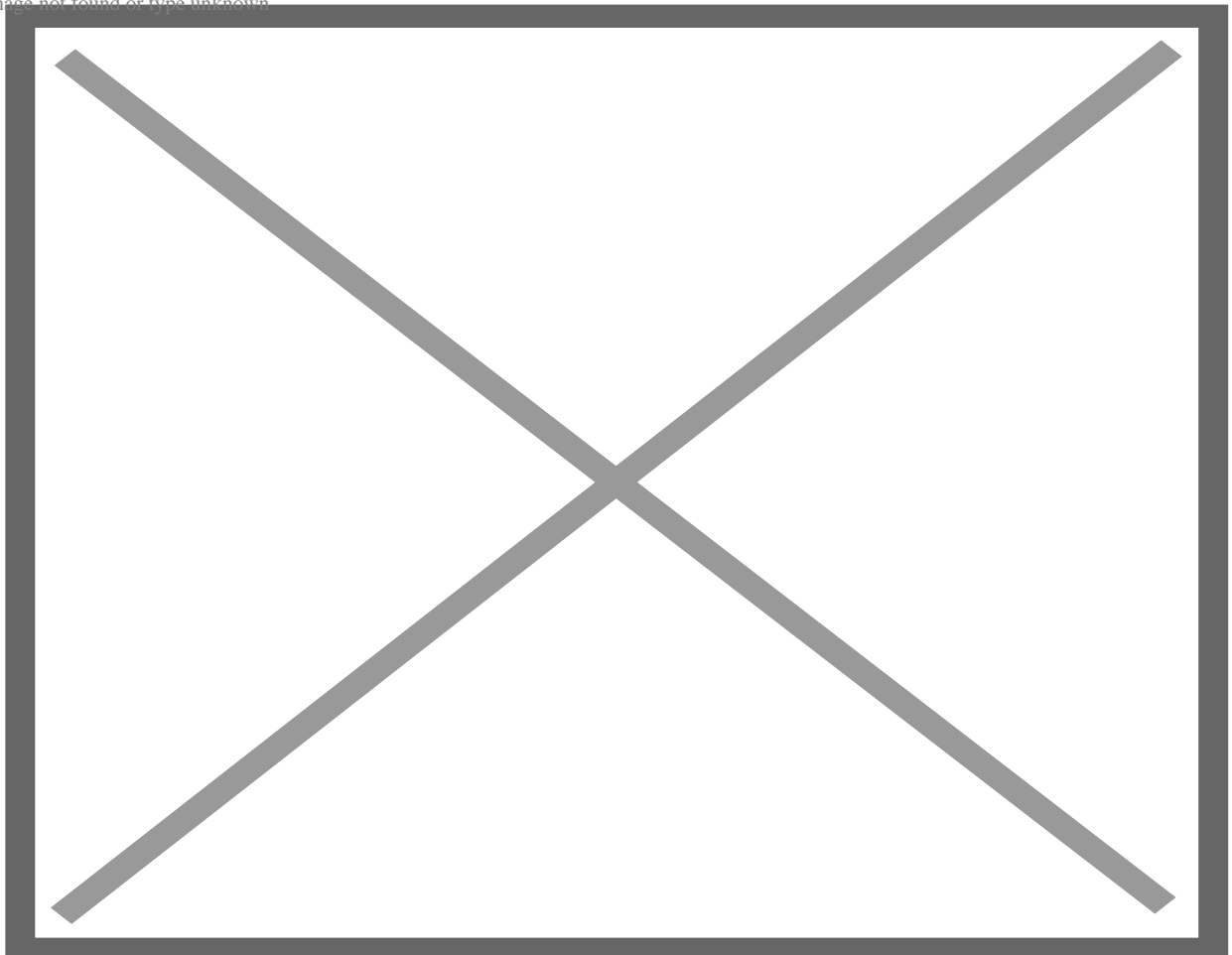


[Source](#)

The population of Canada is 38.01 million, therefore with 25 million people having received at least one dose across Canada this leaves 13.01 million unvaccinated Canadians.

The following chart shows the population size of each vaccine group as of 20th March 22 –

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Now that we know that all we need to do is divide the population size of each vaccine group by 100,000 and then divide the number of cases, hospitalisations and deaths in each vaccine group by the answer to that equation to work out the case, hospitalisation and death rates per 100,000

individuals.

e.g. – $13.01 \text{ million} / 100,000 = 130.1$
 $15,521 \text{ Unvaccinated Cases} / 130.1 = 119.3$
 $\text{Case-rate} = 119.3 \text{ per } 100,000$

The following two charts show the case, hospitalisation and death-rates per 100,000 by vaccination status across Canada between 14th Feb and 20th March 22 –

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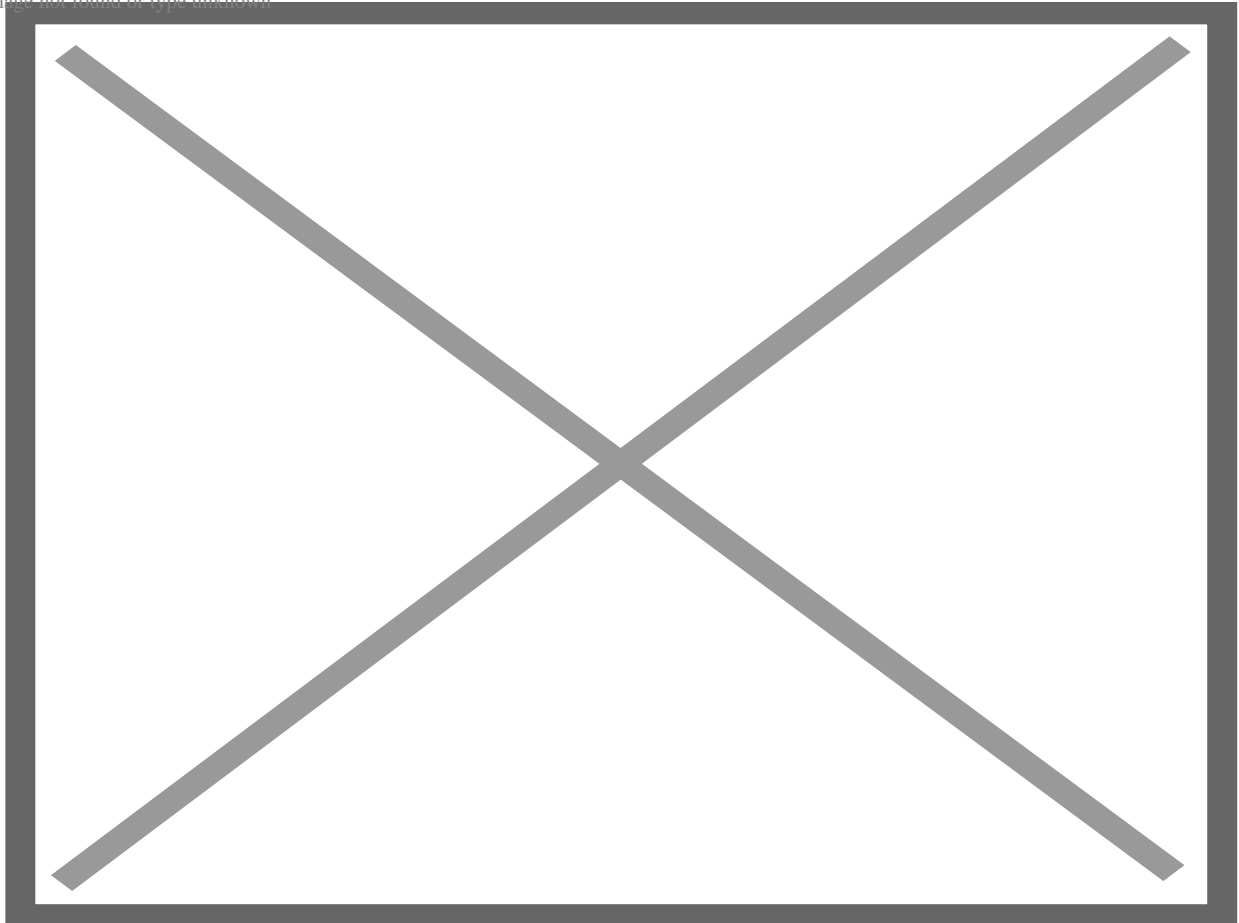
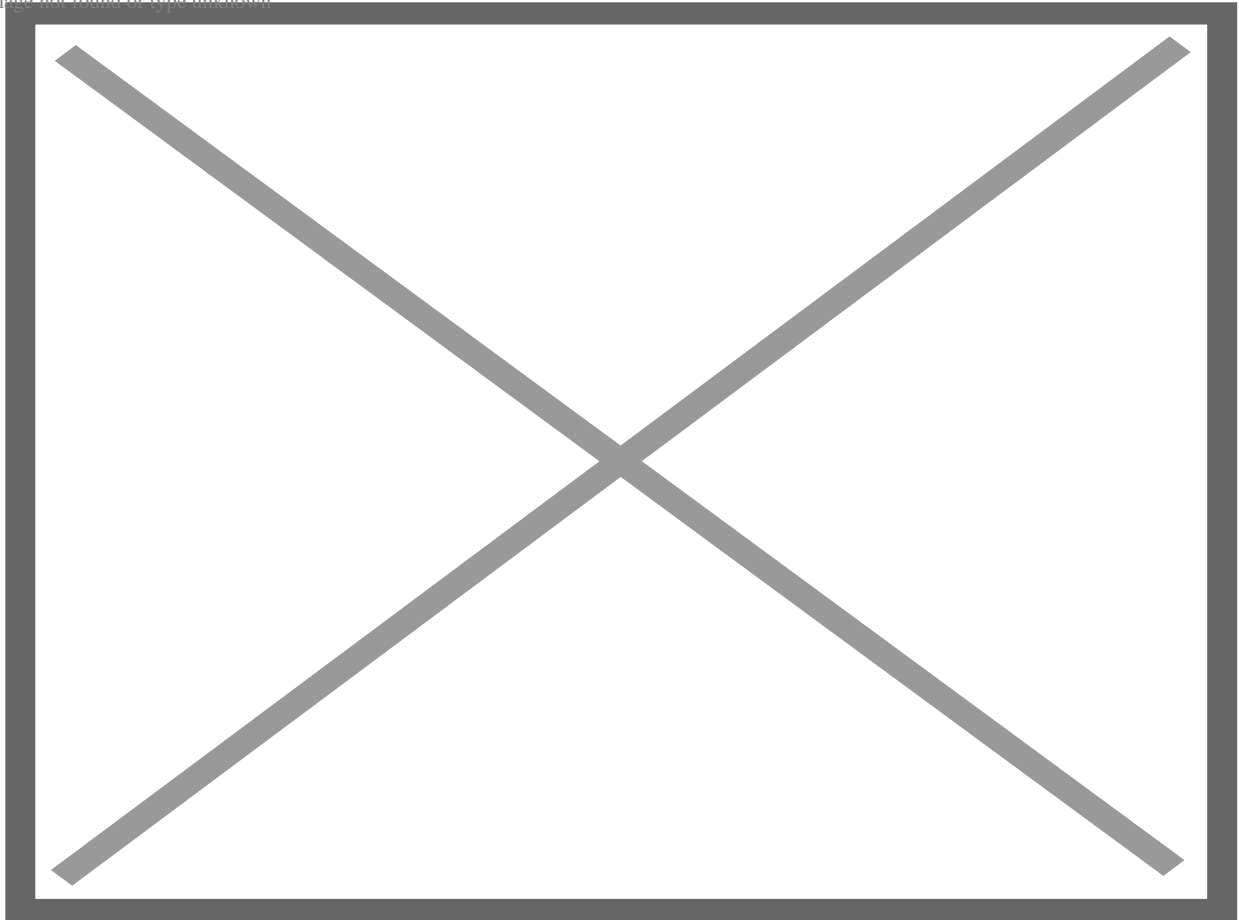


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The data shows that on average, triple vaccinated people are 3 times more likely to be infected with Covid-19, 1.2 times more likely to be hospitalised with Covid-19, and 1.5 times more likely to die of Covid-19 than the unvaccinated.

But at the moment things seem worse for the double vaccinated, who are on average 4.3 times more likely to be infected with Covid-19, 1.4 times more likely to be hospitalised with Covid-19, and 1.7 times more likely to die of Covid-19 than the unvaccinated.

However, things may actually be much worse for the triple vaccinated than they appear for two reasons –

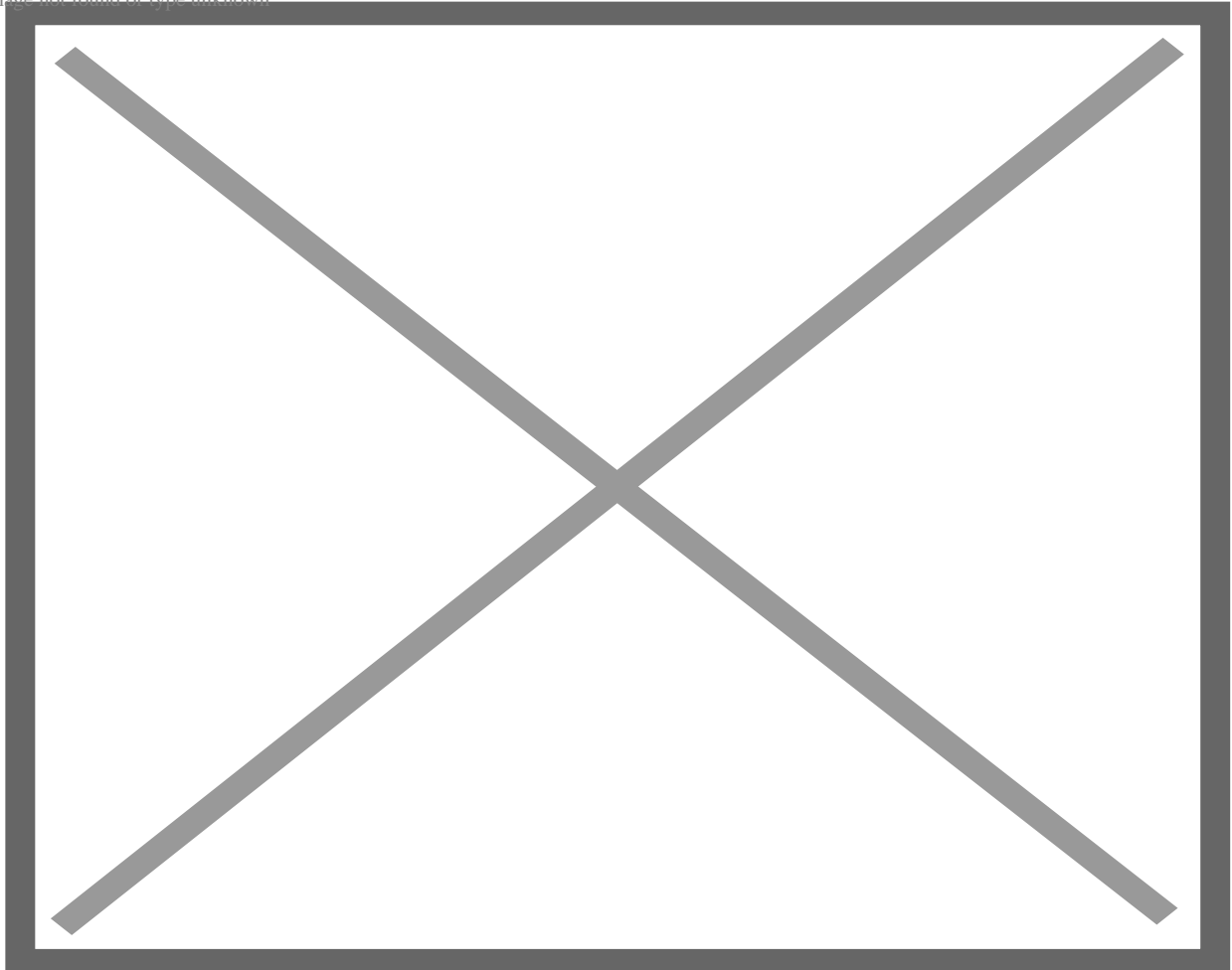
1. Many Canadian's are getting the third dose of the vaccine every day.
2. Triple Vaccinated Canadian's are not considered as triple vaccinated for at least two weeks after they receive the third dose.

If the rates per 100,000 are higher among the vaccinated, which they are, then this means the Covid-19 injections are proving to have a negative effectiveness in the real-world. And by using Pfizer's vaccine effectiveness formula we can accurately decipher what the real world effectiveness among each age group actually is.

Pfizer's vaccine formula: Unvaccinated Rate per 100k – Vaccinated Rate per 100k / Unvaccinated Rate per 100k x 100 = Vaccine Effectiveness

The following chart shows the real world Covid-19 vaccine effectiveness against infection among the double vaccinated and triple vaccinated population in Canada, based on the rates provided above –

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Don't forget, when Pfizer "definitively" concluded, for the purposes of their submitted safety data to the Food and Drug Administration, that 'None of the 75 cases could be definitively considered as VAED', they also made the claim that the Covid-19 mRNA injection was 95% effective.

So why does official Government of Canada data show that the Covid-19 injection has negative effectiveness as low as minus-328% against infection, minus-41.3% against hospitalisation, and minus-74.4% against death?

Pfizer cannot be trusted.

The company was hit with the largest healthcare fraud settlement and criminal fine to date in 2009. The \$2.3 billion fine against Pfizer was [sparked by whistleblower](#) John Kopchinski, who said Pfizer was

promoting its drugs “for problems far wider than approved uses. He contended that this put patients at risk of heart attacks, strokes and blood clots. ‘At Pfizer I was expected to increase profits at all costs, even when sales meant endangering lives. I couldn’t do that.’”

Pfizer has been repeatedly sued for illegally promoting their drugs, putting patient’s lives at risk. During one court case for Neurontin in 2009, [Pfizer sent an ex-CIA agent to the home of a whistleblower](#), Dr. David Franklin, who was due to testify in court the following day.

Franklin had testified in another Neurontin case in 2004; [Pfizer pled guilty](#) and paid a \$430 million settlement.

In 2009, the day before he was to testify again, the [Pfizer investigator called](#) Franklin’s wife repeatedly and then came to their home, blocked the driveway, looked through the windows shouting at his wife, “and [would not leave until](#) his wife called the police,” [terrifying the family](#), including an eight-year-old child.

The year before Dr. Franklin was visited by Pfizer’s private investigator, *The New York Times* published extensive [evidence](#) that Pfizer “manipulated the publication of scientific studies to bolster the use of its epilepsy drug Neurontin for other disorders, while suppressing research that did not support those uses.

Pfizer’s tactics included delaying the publication of studies that had found no evidence the drug worked, ‘spinning’ negative data to place it in a more positive light, and bundling negative findings with positive studies to neutralize the results.”

In another recent case, [the US Justice Department announced](#) Pfizer agreed to pay \$23.85 Million for paying kickbacks and saddling Medicare with extra costs. As part of the 2018 settlement, Pfizer signed a [corporate integrity agreement](#) which is in effect until 2023. It’s [the fourth corporate integrity agreement](#) Pfizer signed with the US federal government in a 16 year period. The previous ones were in 2002, 2004 and 2009.

So why on earth should we believe Pfizer when they claim “None of the 75 cases could be definitively considered as VAED” and “No new safety issues have been raised”?

The real-world data does not lie.

The Covid-19 injection makes recipients more likely to be infected with Covid-19, more likely to be hospitalised with Covid-19, and more likely to die of Covid-19.

Therefore, the Covid-19 injection causes Vaccine-Associated Enhanced Disease and Antibody-Dependent Enhancement.

Both Pfizer and the FDA knew this was a possibility when the injection was given emergency use authorisation, and they knew just two months later that it was happening and that people had died, but they swept it under the carpet, and now real people are having to suffer the consequences.

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