



How the Media Hides the Record of Vaccine Deaths. Deceives Americans

Description

USA: The Vaccine Adverse Event Reporting System ([VAERS](#)) is a database managed by the [CDC](#) that collects reports of health problems experienced after taking a vaccine.

It aims to identify potential side effects that premarket safety testing may have missed. According to the CDC, VAERS is supposed to be “the nation’s frontline system for monitoring vaccine safety.” This is especially critical for the COVID-19 shots, since they were the first to go on the market without the long-term safety testing required for FDA approval. [See Part 1 of this series.](#)

You would hope that if a new vaccine wound up getting more death reports in five months than all the others combined over the entire previous 28 years, that might warrant some attention.

Think again.

An army of journalists and self-proclaimed fact-checkers stand ready to besiege anyone who dares to report on this astonishing data. Not only is there nothing to see, suggesting otherwise makes you a [conspiracy theorist](#) or a far-right extremist, according to our betters in the fake news media.

But empty vilification hasn’t been the only scurrilous technique employed by the powers-that-be.

Real Number of Deaths Unknown

VAERS relies entirely on voluntary reporting, but hardly anyone knows it exists, so it is bound to capture a mere fraction of actual side effects.

When Tucker Carlson drew attention to the reports piling up in VAERS, the Washington Post, Forbes, and most other disparagers failed to mention his explicit reference to a group of Harvard researchers who conclusively demonstrated that the VAERS detection rate is abysmal. [Again, see Part 1 of this series.](#)

Carlson's conclusion that nobody actually knows the true number of people who've died after Covid vaccination was flippantly assailed by the odious propagandists at Media Matters. They made an irrelevant rebuttal which involved a blatant lie:

But, that data does exist. While the Centers for Disease Control and Prevention oversees VAERS, it also runs the CDC's Vaccine Safety Datalink ([VSD](#)). [\[Media Matters\]](#)

But of course the data exists somewhere. Carlson's point was that no one has collected and analyzed it to determine the true number of post-COVID-vaccine deaths.

Moreover, it doesn't exist at VSD, which contains information from only nine healthcare facilities scattered across the US — not the entire country. And its purpose is to “conduct studies based on questions or concerns already raised by the medical literature and reports to VAERS,” not to be a frontline detection system in its own right.

So, someone would have to actively sift through the VSD data to know the number of post-vaccination deaths experienced at just those nine facilities. And there's zero indication anyone has done even that.

Not only does nobody know the real number of Americans who've died after taking a Covid vaccine, no one in charge seems to even care.

The media outlets providing our vaccine overlords cover have also kept despicably silent about how few reports were coming in prior to the COVID-19 vaccines. The media excoriated people for mentioning a “mere” 4,000 death reports in five months, without mentioning that before the Covid vaccines came along, VAERS had only exceeded 200 death reports in an entire year once in its three-decade history.

Again, the VAERS tally shows 1,000 more deaths than the number of people who perished on 9/11.

But the point is that, from beginning to end, Carlson made it clear his main point wasn't even about VAERS.

His subject was the bullying and censorship that's getting heaped on “anyone who dares to question vaccines,” and he spent more time chronicling disturbing cases than he did on VAERS.

Nothing could have proven Carlson's point better than the dishonest responses twisting both his words and the facts.

As Carlson noted, the data piling up in VAERS doesn't necessarily tell us anything about the Covid vaccines. Maybe, the relentless publicity has massively increased the likelihood that potential side effects will get reported.

But without looking into the matter, it's just as likely that reporting has been suppressed by the vilification of anyone who so much as raises the possibility that getting jabbed is anything less than perfectly harmless.

Who knows? The fact is we won't until someone looks.

Whatever the case may be, the volume of death reports flooding VAERS is extraordinary. The effort to destroy anyone saying otherwise makes a full investigation much less likely and could portend something very dark indeed.

We've barely plumbed the depths of the VAERS cover-up.

Preposterous lies

The narrative gatekeepers are also hiding a significant source of undercounting that's likely occurring precisely because of the unprecedented volume of reports coming in.

Moreover, they've frequently done so by saying something both false and preposterous.

Jack Brewster of Forbes, for example, both revealed and justified the utter contempt he has for his readers' intelligence with this risible nonsense:

VAERS is designed to allow anyone to report an event, meaning the data is unverified... [\[Forbes\]](#)

But, in case you're as dopey as the people who read Forbes evidently are, the fact that anyone can submit a report obviously doesn't mean that they're being entered into the database without any verification.

The Washington Post's Aaron Blake showed a little less disdain for his audience by at least taking the trouble to provide a bogus source for his claim that the "data in the VAERS system is unverified." He linked to another attempt to squash discussion from his fellow charlatans at PolitiFact which, though it does indeed assert that VAERS reports "are not verified before they're entered into the database," gives no indication where they're getting the idea from.

The regime's vast army of internet trolls would be having a field day if PolitiFact's unverified claim were true. The CDC's "frontline system for monitoring vaccine safety" — apart from massively undercounting potential side effects due to a lack of awareness of VAERS among medical personnel ([See part 1](#)) — would also be stuffed with reports of people dying of unrelated causes.

You know, like the COVID-19 fatality count.

We've known from the beginning that the virus's official death toll deliberately conflates dying *with* Covid and dying *from* Covid. In fact, a number of factors guarantee an unknown but enormous number of bogus entries in the official death toll. The media is suggesting without evidence that the same holds for the post-Covid vaccine fatality reports flooding VAERS, thus proving the old adage that "there are three kinds of lies: lies, damned lies, and statistics."

An AP effort to nip any public discussion in the bud contained this flagrantly deceptive remark by Dr. Sean O'Leary, "vice-chair of the committee on infectious diseases for the American Academy of Pediatrics and professor of pediatrics at the University of Colorado":

For example, if you get a vaccine and then you get struck by lightning, you can report that to VAERS.

Indeed, you can. But Dr. O'Leary's implied suggestion that not only are such reports routinely entered, but that the reports of post-COVID-jab fatalities include so many they can safely be ignored, is such a low-down piece of deception that he ought to be stripped of his medical license.

The regime media use this damning claim not to discredit the CDC, whose word they nonetheless insist we take as gospel, but to malign and bully those who assume that a publicly accessible database isn't going to be full of garbage data.

If the CDC really isn't lifting a finger to weed out pranksters and saboteurs, then they've got to be deliberately fomenting the supposed irrational "anti-vaccine" sentiment we're supposed to think is so dangerous.

But, on at least this occasion, the agency appears to be innocent of anything sleazy since they explicitly advise anyone submitting a report that:

You will be contacted by VAERS if follow-up information (i.e., medical records or other medical documentation) is needed. [\[Dept. of Health and Human Services\]](#)

That sentence would clearly seem to indicate that there's some kind of verification.

But it's also the 11th response on a page listing 17 questions, each of which has to be clicked to view its answer. And the question itself doesn't mention verification.

Moreover, after spending a couple hours trying to find out about verification, that one not-easy-to-find nor terribly informative sentence is the only thing that turned up.

So it appears that those in charge at the CDC must be so irredeemably corrupt as to actually want a reporting system in place that barely counts a fraction of potential vaccine side effects. It also looks like they're not too keen on anyone knowing what happens to VAERS reports between submission and publication. Nor does the CDC appear to provide any information on the related question of lag time, leading most people to assume that what they're seeing at any given time represents all there currently is.

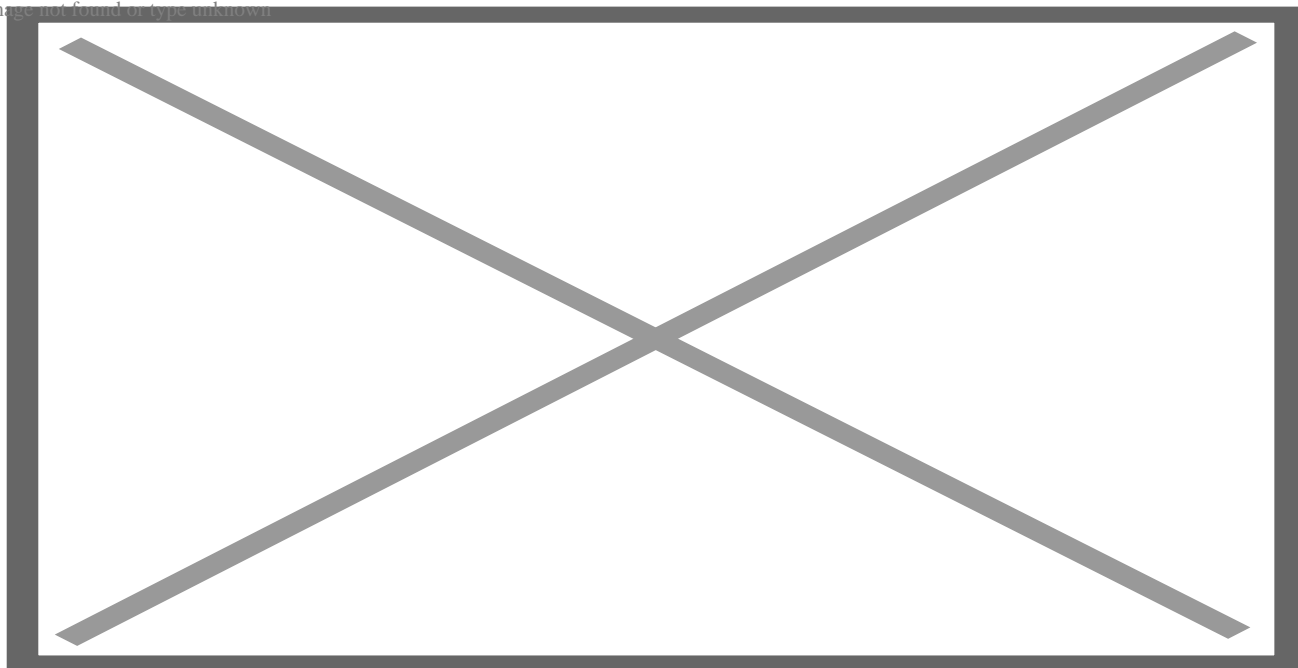
But you know what they say about assuming.

How many additional reports haven't been logged in?

There are a lot of reasons to think that side effects are at least so far wildly underreported.

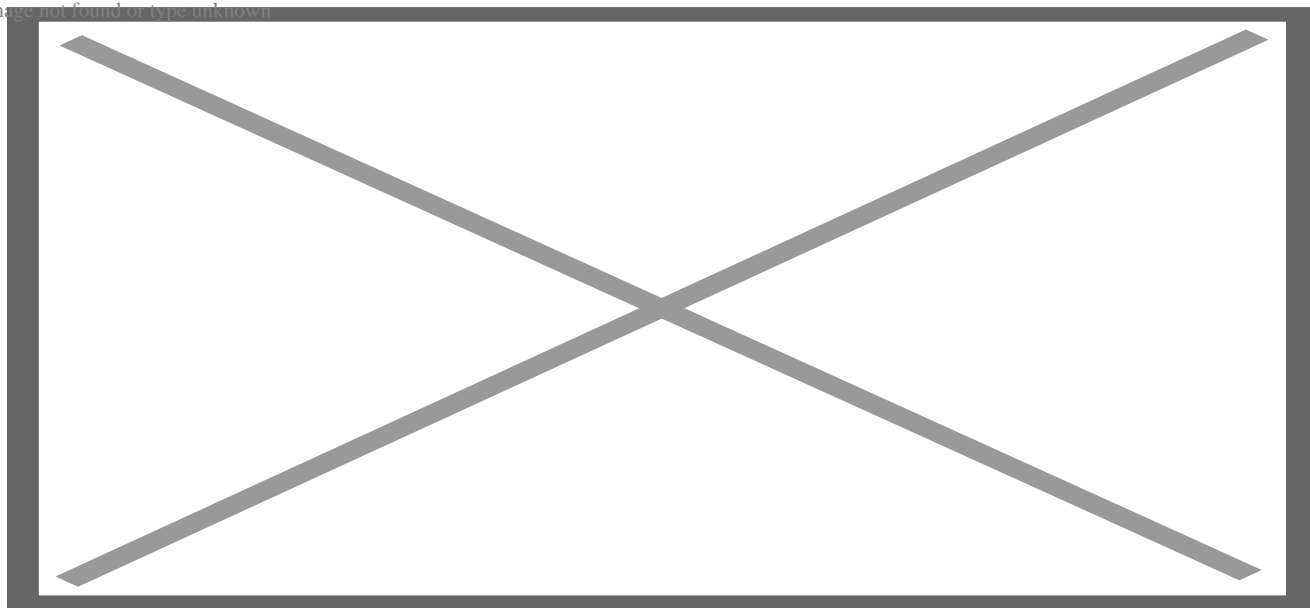
For example, there are as many reports of life-threatening illnesses as there are deaths.

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In fact, the COVID-19 vaccines have caused an unprecedented number of reports of any kind.

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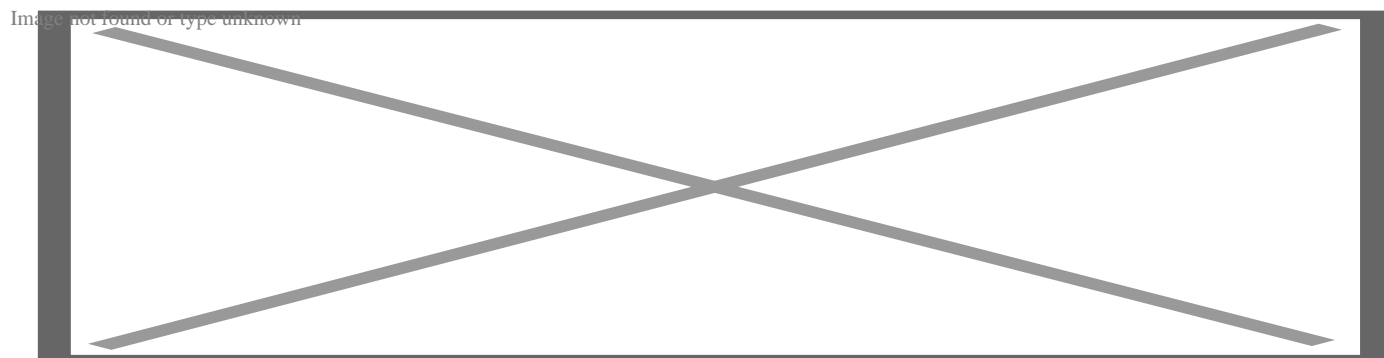
And, as Alex Berenson noted, it's likely that any system that's suddenly showing more reports in a single week than it used to record in an entire year is being overwhelmed enough to have a sizeable backlog.

Berenson also reported on one woman who submitted a VAERS report in January but only received a

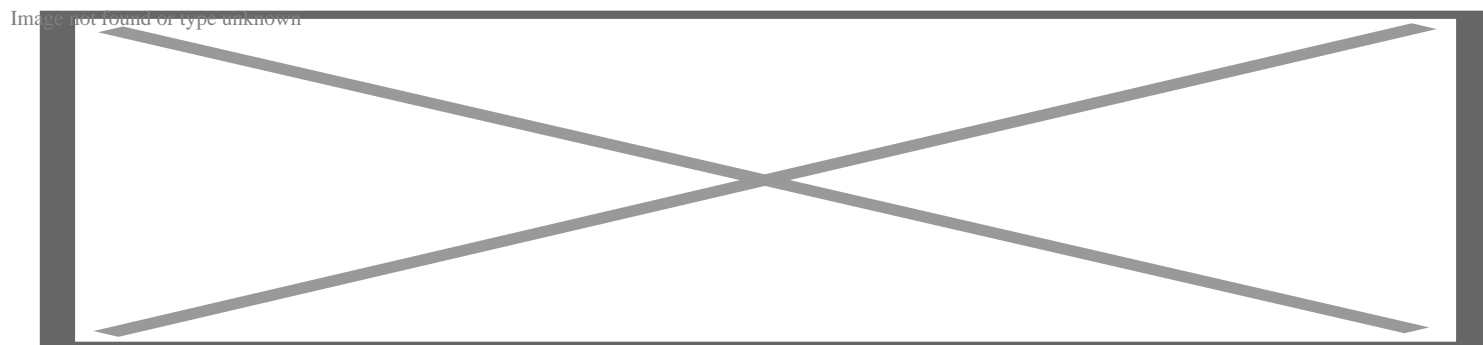
request for more information in late April. In the interim, a jaw-dropping quarter million reports were added, suggesting that the backlog might be enormous.

But there are also other reasons to think that the CDC must be in possession of an extraordinarily large volume of reports that they're not telling us about.

Here's a screenshot from May 12 of the number of COVID-vaccine reports recorded in VAERS, sorted by month of vaccination.

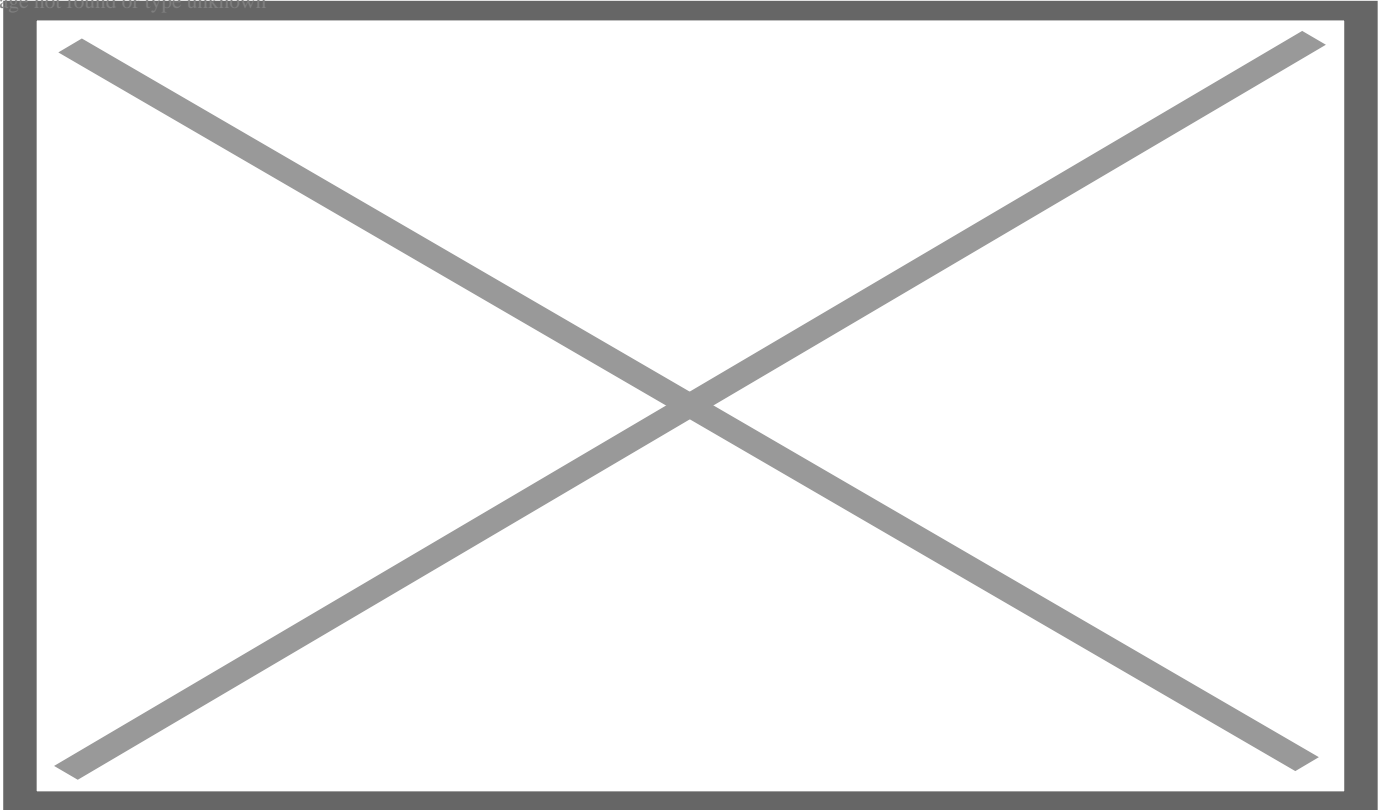


Here's the same data request on May 28.



As you can see, over 16 days in May, the reports continued to climb for people vaccinated in every month since December. Here's that May-increase for each vaccination month.

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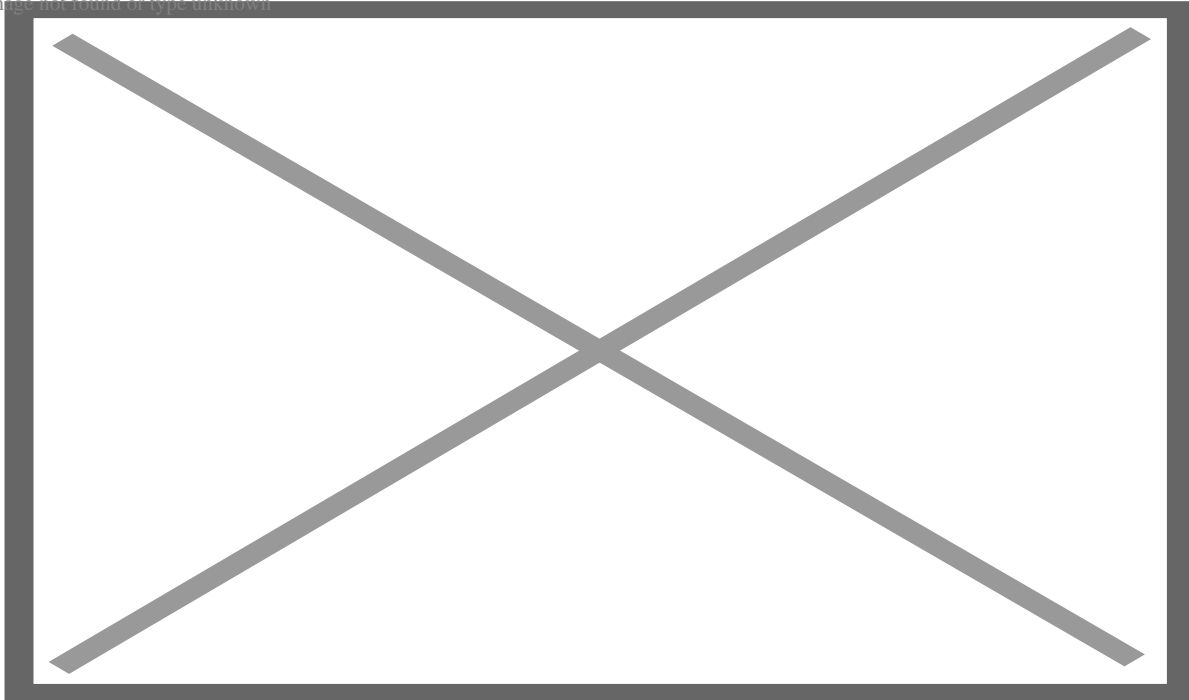
As of May 28, 88% of adverse symptoms reported after Covid vaccination occurred within 15 days and 91% within 30. So, unless a lot of people are waiting several months to file a report, the CDC must have a significant backlog of reports that are getting entered months after they were received.

But also notice that on May 12, the most adverse events were reported for people who'd been vaccinated in January. Adverse event reports then steadily declined for those jabbed in February through April.

And though the May 28 data also shows the most reports for January vaccinations, the reports that were added make the decline less significant and interrupt it, creating second peak for those vaccinated in March.

That makes perfect sense if there's a backlog getting retroactively filled in since, as you can see below, the total number of doses administered peaked in April and the number of first doses in March.

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Absent a backlog, that would mean adverse events were dropping off considerably even as the number of people getting jabbed kept increasing.

Again, not impossible. But a substantial backlog perfectly explains both the early peak in adverse event reports relative to doses administered in the May 12 VAERS data, and why that peak became less pronounced when more adverse events were entered into the system, making the May 28 data better align with the dosage charts.

The upshot of all of this is that, though the CDC is allowing everyone to think that the VAERS data is up-to-date without actually saying so, there's a lot of interconnecting evidence that a lot more reports must have come in than those we're currently being allowed to see.

All of this would be bad enough by itself. But when placed in the larger context of the other deliberate deceptions about COVID-19, it becomes orders of magnitude worse.

When you step back to look at the whole picture, the obfuscation and contempt for evidence surrounding VAERS fits into the same pattern of deliberate deception that has been the norm since Covid first emerged a year and a half ago.

By Dr. Michael Thau

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