



Monkeypox vaccine shortage is a scam, says Dr. Meryl Nass

Description



When the biodefense ‘experts’ at Johns Hopkins warn you off the ACAM-2000 vaccine for monkeypox, you know it is a really bad vaccine. But they still don’t tell you the whole story, Dr. Meryl Nass wrote yesterday.

On 9 August, *STAT News* reported that the US health secretary recently declared monkeypox as a public health emergency, paving the way for emergency use authorisations of additional vaccines or vaccine regimens to fight the disease.

The same day, Food and Drug Administration (“FDA”) Commissioner Robert Califf said that the US government is seriously considering stretching the very limited supply of Bavarian Nordic’s Jynneos vaccine – the only vaccine licensed against monkeypox in the US – by changing the way it is given. Instead of giving a full dose subcutaneously (into the fat layer under the skin), a lower dose of the vaccine could be given intradermally (injecting the vaccine within the skin). The FDA may soon issue an emergency authorisation for Jynneos to be administered in this way.

[Will low-dose vaccination stretch the monkeypox vaccine supply, or backfire?](#) *STAT*, 9 August 2022

But this strategy could also backfire, *STAT News* noted: “If there is a risk to effectiveness, it may be better to focus the available full doses of vaccine on individuals at highest risk – men who have sex with multiple male partners.”

Two days later, on 11 August, [STAT reported](#) that as the US grapples with monkeypox one of the key strategies that will be used to control its spread is vaccinating high-risk individuals.

Demand for monkeypox vaccine far exceeds the supply ... the shortfall has increased external pressure on the Biden administration to turn to another vaccine, ACAM2000, to

close the gap.

[*FDA needs to fully review ACAM2000 before allowing its widespread use as a monkeypox vaccine*](#), STAT, 11 August 2022

The supposed shortage is a scam, wrote Dr. Nass: “It now appears the scam is intended not only to turn a licensed vaccine (Jynneos) into a diluted EUA product but also to push out some of the ACAM-2000 vaccine, which in my opinion is fit for only one thing: incineration and license revocation.”

The second STAT News article, published on 11 August, was authored by two representatives from the Johns Hopkins Centre for Health Security: Caitlin Rivers and Tom Inglesby.

Caitlin Rivers is a senior scholar and epidemiologist at the Johns Hopkins Centre for Health Security and served as the founding associate director of the Centre for Forecasting and Outbreak Analytics at the Centres for Disease Control and Prevention. Tom Inglesby is an infectious disease physician, director of the Johns Hopkins Centre for Health Security, and a former senior adviser to the Biden administration's White House Covid-19 Response Team.

[*FDA needs to fully review ACAM2000 before allowing its widespread use as a monkeypox vaccine*](#) (Footnote), STAT, 11 August 2022

By Dr. Meryl Nass

When the Johns Hopkins Centre for Health Security, which lives off the fear of pandemics and biowarfare, publishes an Op-Ed calling a TIME-OUT for the use of ACAM-2000 for monkeypox, you know this is a very bad, terrible vaccine. **They are scared it will be the *coup de grâce* that ends the vaccine enterprise as we know it.** And they are scared it could end their cosy sinecure as biodefense experts as well, after the Covid and its vaccine disaster brought about by “experts.”

All the facts are not correct in the [John Hopkins University “JHU”] article [by Rivers and Inglesby], though I cannot imagine why these biowarfare experts would make such obvious mistakes. Maybe because the CDC [Centres for Disease Control and Prevention] has also been very cagey about how much of these vaccines we have, one author used to work at CDC, and CDC butters JHU's bread.

The USG [US government] bought 300 million doses of ACAM2000 after 9/11, and more since. The Washing Post did an investigation in 2020 and revealed that once the anthrax vaccine manufacturer, Emergent BioSolutions bought the vaccine from Sanofi, the Assistant Secretary of Health and Human Services for Preparedness and Emergency Response, Robert Kadlec, ordered double the number of doses, and more than doubled the per-dose price. Knowing it caused myocarditis. And Kadlec got an MD once upon a time. Now the USG is looking for an excuse to offload some of this dangerous product.

Emergent only bought the vaccine after Kadlec got nominated for the job. Emergent specialises in buying terrible drugs and vaccines and then selling them to the US government at enormous markups. This has been its business model since the company was formed 24 years ago. It also specialises in capitalising on misery. It bought *Narcan* a few years ago. Right before the states were incentivised to

buy huge stocks of it and give it away for free. My governor brags about carrying it in the trunk of her car to homeless shelters.

After Robert Kadlec was confirmed as President Trump's top official for public health preparedness in 2017, he began pressing to increase government stocks of a smallpox vaccine. His office ultimately made a deal to buy **up to \$2.8 billion of the vaccine from a company that once paid Kadlec as a consultant, a connection he did not disclose on a Senate questionnaire when he was nominated.**

Under the agreement struck last year with Emergent BioSolutions, Kadlec's office at the Department of Health and Human Services is paying more than double the price per dose it had previously paid for the drug. Because Emergent is the only licensed maker of the vaccine, Kadlec's office arrived at the price through negotiations with the company rather than through bidding.

[Before pandemic, Trump's stockpile chief put focus on biodefense. An old client benefited](#)
[, Washington Post, 4 May 2020](#)

The Johns Hopkins authors are cagey about the supposed shortage of the *Jynneos* vaccine, the only smallpox vaccine that is also licensed for monkeypox. As I have previously explained, the US government owns 16 million doses, sitting frozen in bulk storage in Denmark, purchased for a potential smallpox epidemic. Many more doses than this (20 million more?) were purchased since 2003 and have expired...but the USG has used expired vaccines before in an emergency. If this monkeypox outbreak was a smallpox outbreak, how long do you think it would take before those doses got defrosted and bottled?

The USG also expects delivery in 2022 and 2023 of 7 million more doses.

The supposed shortage is a scam. And it now appears the scam is intended not only to turn a licensed vaccine – *Jynneos* – into a diluted EUA [emergency use authorisation] product, but also to push out some of the ACAM-2000 vaccine, which in my opinion is fit for only one thing: incineration and license revocation.

Here is the JHU article: FDA needs to fully review ACAM2000 before allowing its widespread use as a monkeypox vaccine, by Rivers and Inglesby, STAT, 11 August 2022

by Rhoda Wilson

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