



Urgent warning from Israel as jab death toll rises

Description

Intro by The Masked Writer

The following article makes harrowing reading.

The Israeli government “led the world” with the roll out of its Pfizer vaccine to “protect them” from a bug that is not life threatening to the vast majority.

It should now alert the world as to the consequences because it presently leads the world in the resultant slaughter of its own citizens.

No vax in history comes close to the scale of deaths and adverse reactions associated with the experimental Covid jabs and many in the past have been pulled for *far* less.

This should at least prompt caution and a suspension of the program until the matter is fully, impartially and responsibly investigated. There is plenty that can be done to protect the small percentage of (in the main, very old) people truly at risk.

One must suspect then that in light of the fact that the vax push continues regardless, whilst every effort is made to keep the public uniformed as to the harm being done to them and their fellow citizens, the effects these vaxes are having are *desired*.

In the case of the Israeli government, the slaughter of Israeli Jews is intentional or at the very least acceptable to the architects of this attack on liberty. If this were not the case, they would immediately cease and desist injecting people who are at little or no risk from the alleged virus in the first place.

Indeed, the Israeli government has already killed far more Israelis in 2021 through vaccines than have been killed by Hamas rockets (the latter just 10, according to Google).

We have apparently reached the point, predicted by many, where vaccines are also killing more people than the COVID bug. As the true number of Covid deaths may be far lower than governments make out in their effort to market their killer vaxes, the discrepancy may be even larger than it appears.

Considering the alleged virus has not one but several known remedies (all suppressed to create an illusory “urgent need” for the vaxes) and, even according to government’s inflated stats, is no more deadly than flu (and a lot *less* deadly for the young) we really do need to start questioning the real reasons for that vax obsession and the obsessive drive to inject every citizen with experimental biochemicals.

Meanwhile, the Israeli government continues to sponsor and push the slaughter of its own citizens whilst those citizens are conveniently distracted by the slaughter of Palestinians in Gaza.

The following article can be found [here](#). We have taken the liberty of **adding some emphases**.

Orders of Magnitude Higher Deaths in the Vaccinated:

Israel’s Vaccine Data Reveals a Frightening Picture

"We conclude that the **Pfizer vaccines**, for the elderly, killed during the 5-week vaccination period about **40 times more people than the disease** itself would have killed, and about **260 times more people than the disease** among the younger age class. We stress that this is in order to produce a **green passport** valid at most 6 months, and promote **Pfizer sales**."

~ Haim Yativ and Dr Seligmann,
Israeli researchers

Republished from Nakim.org

In the article republished from Nakim.org, research is presented indicating orders of magnitude increases in death rates during the 5-week long vaccination process analyzed in Israel, as compared to the unvaccinated and those after completing the vaccination process.

On February 11 2021 Ynet (the most known Israeli News website) published a confused and confusing article entitled "Vaccination efficiency data in Israel, and its rapid effects on the young".

Our re-analyses of these data explain why during the massive vaccination project initiated mid-December 2020 during a confinement, daily new confirmed COVID-19 cases failed to decrease as they do during confinements, and, more importantly, **why numbers of serious, critical and death cases increased** during that period that covered at least one month. From mid-December to mid-February (two months), 2337 among all Israeli 5351 official COVID-deaths occurred. Our analyses indicate orders of magnitude increases in deaths rates during the 5-week long vaccination process, as compared to the unvaccinated and those after completing the vaccination process. Presumably, asymptomatic cases before vaccination, and those infected shortly after the 1st dose, **tend to develop graver symptoms than those unvaccinated**.

The Ynet article is organised in an exciting way and uses data provided in an erroneous way by the Ministry of Health. It is unclear whether this was intentional to prove the vaccine's efficiency or if this

was done erroneously because the provided data were misunderstood. Note that in Israel, all vaccines are from Pfizer.

We bring a very important example from the article, in relation to the table provided by the Ministry of Health. As per the text “However, 546 among the dead were such that were not at all vaccinated or got the first vaccination dose within two weeks before their death” differs from the table. This is clearly unfounded because all data presented in the table and provided below describe only COVID-19 patients that got at least the first vaccination dose. This is clear from examining the table. The grand total is 43781 COVID patients who got the first or the second vaccine dose. Among the total of 660

	Community	Low	Mean	Serious	Critical	Died	Total
> 60 years	13075	323	314	865	183	636	15396
1st dose	10724	259	277	742	152	546	12700
0-13d	6235	147	166	465	81	344	7438
>13d	4489	112	111	277	71	202	5262
2nd dose	2351	64	37	123	31	90	2696
0-6d	1043	24	11	57	13	51	1199
7-14d	1037	32	25	56	17	35	1202
>14d	271	8	1	10	1	4	295
< 60 years	28018	138	92	166	37	24	28475
1st dose	25926	125	87	153	34	22	26347
0-13d	19461	96	66	124	29	17	19793
>13d	6463	29	21	29	5	5	6552
Other	2						2
2nd dose	2092	13	5	13	3	2	2128
0-6d	1167	8		4	1	2	1182
7-14d	761	4	4	8	2		779
>14d	164	1	1	1			167
All ages	41093	461	406	1031	220	660	43871

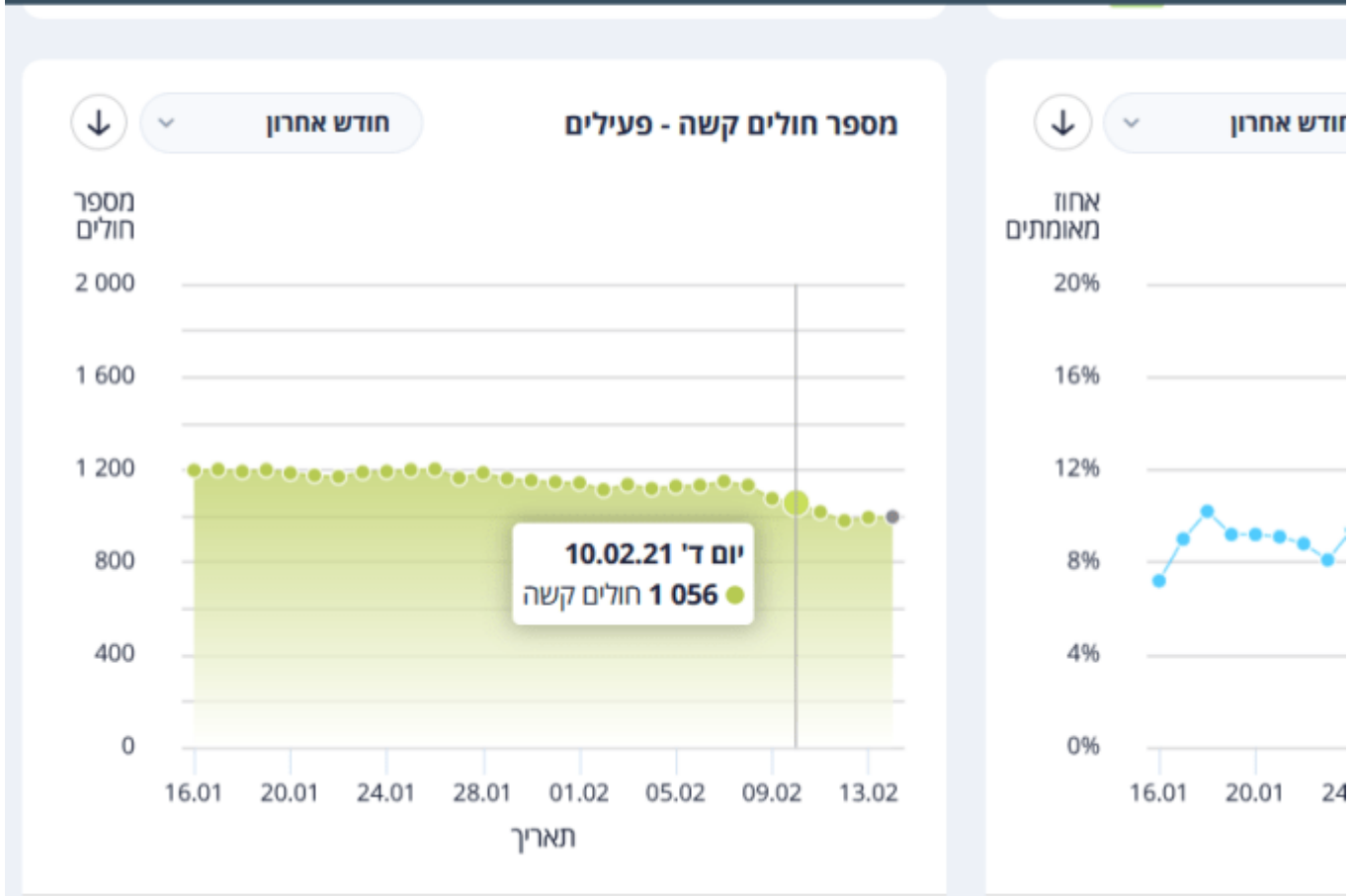
adverse

For that

purpose we need first to understand that the provided table describes the state of COVID-19 patients that got the first or the second vaccine dose at given dates, as started in the article “...emerges from the data that among 856 patients above 60 years in serious state hospitalized at this time...” we assume that the article published February 11 reflects the situation in hospitals the previous day, hence February 10 2021, or February 11 2021.

On February 10, the number of serious active cases was 1056 according to the control panel of the Ministry of Health, see photo below.

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This surprisingly shows that **most serious hospitalized cases on February 10 or at a near date were in fact vaccinated** with the first dose or up to two weeks after the second dose. See the table of the vaccinated patients showing 1031 serious and 220 critical cases at the time the table was done. This matches the article in Hebrew from February 1st 2021 "Can one show that the vaccine from Pfizer is today's major cause for high death rates in Israel and the world?".

However, this is not the last surprise we get from examining the data from the Ministry of Health. We can subtract the number of people with the first vaccine dose on January 19 2021 from that on February 10 2021. During these 21 days, 1331881 Israeli citizens got the first dose. The table shows that 568 among these died, hence 0.042% and that 39047 among them became a COVID-19 case, hence 2.9 %. For the 2nd dose we focus on data specific to two weeks after the 2nd vaccination according to the table.

From January 26 to February 10 2021 909102 Israeli citizens got the 2nd vaccine dose. Among these according to the table, 92 died, 0.01%. Hence, during the 5 weeks since the first dose at least 0.05% of first dose recipients died. This death rate relates mainly to a relatively young population whose vaccination started on January 19, a period during which most vaccinated were below 65. In order to estimate the death rate of those above 65 which were mostly vaccinated before that period we used data reported by the USA-based VAERS,

There we found that the ratio of deaths by those above 65 vs those below 65 is about 4.42 (155/35). Hence the death rate of those above 65 between the first and the second vaccination dose should be until January 19 0.042 (the death rate of those below 65) multiplied by 4.42, resulting in 0.186%, which is close to the 0.2% reported by the Ministry of Health on January 21 2021. This value of 0.2 % death has been mysteriously modified later on by the Ministry of Health and was switched to 0.005 without any explanation, [see article in Hebrew](#). Above considerations show that the death rate data provided first were correct, the updated death rate data might have been intended to suggest lower death rates among the elderly.

The exposures do not end here.

The **number of COVID-19 deaths among the vaccinated** since the start of the vaccination action seems to explain the increased death rates from COVID-19 observed since December 2020. For that purpose, we calculate the products of the number of vaccinated people above age 65 by 0.2 and the number of vaccinated people below 65 by 0.04. This shows that **most COVID-19 deaths in that period are for vaccinated people**, as shows the table provided by the Ministry of Health at the beginning of February.

During the vaccination action from mid-December until mid-February, 2337 among all 5351 COVID-19 deaths reported for Israel occurred, 43.7%. Among these, since January 19, 1271 COVID-19 deaths were reported for Israel. The table provided by the Ministry of Health on February 10 states 660 COVID-19 deaths among the vaccinated, 51.9% of the deaths for that period. Only 1.3 million Israeli, among 8 million (about 1 in 8, 12.5%), were vaccinated during that period. Accordingly, vaccination promotes deaths because **51.9% of deaths during that period are for the 12.5% vaccinated in that period**. In addition the serious and critical cases during that period is more than the reported serious cases, the **adverse effect of the vaccination process is most likely worse** than what appears from the data at hand.

The horror continues.

The deaths among those vaccinated should be added to the numerous AVC and cardiac events reported just after vaccination that are not included among COVID-19 deaths which about double the deaths among those vaccinated, whose numbers remain unknown and which we will try to find in the coming days.

At this point we state that **vaccinations caused more deaths than the coronavirus would have during the same period**. Among those vaccinated and above 65, 0.2% of those vaccinated died during the 3-week period between doses, hence about 200 among 100000 vaccinated. This is to be compared to the 4.91 dead among 100000 dying from COVID-19 without vaccination, see below. This should not be confused with the COVID-19 0.279 deaths among 100000 reported for those who

completed the vaccination process, meaning 2 weeks after the second dose, see below table from the Ynet article.

נפטרים מקורונה

גיל	לא מחוסנים (שיעור ל-100 אלף איש)	מחוסנים לחלוטין (שיעור ל-100 אלף איש)	יעילות
15-44	0.01	אין	-
45-65	0.19	0.0196	89.7%
65+	4.91	0.279	94.3%

Age	Unvaccinated per 100000	Vaccination complete per 100000	Efficiency
15-44	0.01	None	-
45-65	0.19	0.0196	89.7%
65+	4.91	0.279	94.3%

This scary picture also extends to those below 65, among which, for the 5 weeks during the complete vaccination process 0.05%, meaning 50 among 100000, died. This is to be compared to the 0.19 per 100000 dying from COVID-19 and that are not vaccinated in that age group, as per the above table. **Hence the death rate of this age group increased by 260 during this 5-week period of the vaccination process, as compared to their natural COVID-19 death rate.**

A simple way to pass these points across relate to the monthly COVID-19 deaths rates since the start of the pandemic and until mid-December, 3014 deaths, hence $3014/9 = 334.9$ deaths per month. Monthly death rates since mid-December are $2337/2 = 1168.5$ deaths per month, hence 3.5 times greater.

We conclude that **the Pfizer vaccines, for the elderly, killed during the 5-week vaccination period about 40 times more people than the disease itself** would have killed, and **about 260 times more people than the disease among the younger age class**. We stress that this is in order to produce a green passport valid at most 6 months, and promote Pfizer sales.

These estimated numbers of deaths from the vaccine are probably much lower than actual numbers as it accounts only for those defined as COVID-19 deaths for that short time period and **does not include AVC and cardiac (and other) events resulting from the inflammatory reactions in tens of reports documented on the NAKIM site**

, which themselves are only the iceberg's tip.

This does not account for long-term complications described in a criminal complaint filed in December 2020 in France and which was translated to English.

Looking back, **this explains why the serious COVID-19 cases increased as vaccination started**, and why cases started to decline when vaccination was opened to the young and continue to decline as the vaccination national campaign is losing its momentum.

We hope that this massacre will not include **those below 13, as these have an increased adverse reaction rate, including death, to vaccines** as shown by multi-decennial data from the VAERS reports in the USA.

We summarise that the pandemic may be predicted for the coming weeks. The decrease in vaccinations and in vaccination age will cause a decrease in serious cases, mainly not because of the protection by the vaccine, but because fewer people will die from the vaccine and other adverse vaccine reactions.

This will be temporary as in a few months we expect to face mid- and long-term adverse effects of the vaccination as ADE (Antibody-dependent Enhancement) and the vaccination-resistant mutants selected by the vaccines. But this should occur after the soon coming elections and the (survivor) voters won't have another opportunity to express their disappointment at the voting poll.

Thanks to Dr Hervé Seligmann for his huge support on data analysis.

by Haim Yativ

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