

No, I haven't changed my mind about the vaccine. Here's why:

I don't wish to cause harm to anyone. I'm not making a political statement. I simply feel that the potential risks from getting an unproven vaccine made with a new technology outweigh the risk of dying from covid.

I have chosen to find my own information and data, to make an informed decision.

Everyone has a choice over their personal health decisions, and everyone can evaluate risks themselves. I respect everyone's decision over their own health – and I expect everyone to respect mine, also.

1 – Safety

There's still no long-term safety data.

- This is a new technology (mRNA) that programs the cells in the body to recognize the spike protein from the virus and program the immune system to fight it off. What's injected into the body is not the actual virus but instead something synthetic that was created in a lab.
- The mRNA technology has been studied for nearly two decades. It never got off the ground because it was a complete failure. After they tested it on animals, many animals became sick and died. I prefer to not be a part of the human experiment.
- My body was created to fight off viruses, bacteria, etc. through my immune system. I don't want to program my cells to do something different than what God created them to do.
- The FDA granted full approval of the vaccine after only 8 months of emergency use authorization. The quickest turnaround ever for full approval of a vaccine. I still don't want something that was made with "warp speed" entering my body. Rushing anything always results in the "end result" being substandard. If you wait to study for an exam until right before, you don't do as well. If you rush your workout at the gym and don't stretch properly – you get injured. Same concept.
- Most serious, long-term effects from medications aren't known until several years after they are widely used.

There have been significant amounts of serious injuries, disease, and deaths reported from the vaccines.

- Although the mainstream media consistently states they are "safe and effective", the VAERS data says otherwise.
- VAERS is a site that's been used for 30+ years for patients and doctors to report adverse events after being vaccinated. The purpose of VAERS is for vaccine manufacturers to view data and trends, to ensure vaccine safety for all vaccines (covid, flu, measles, etc.)
- When I look at the data, I'm not reassured that this vaccine is safe. Below is the U.S. data for the covid vaccine as of July 7, 2021. (It's increased since then – recorded deaths are now 17,000+). The U.K. data is similar, with over 12,000 deaths reported.

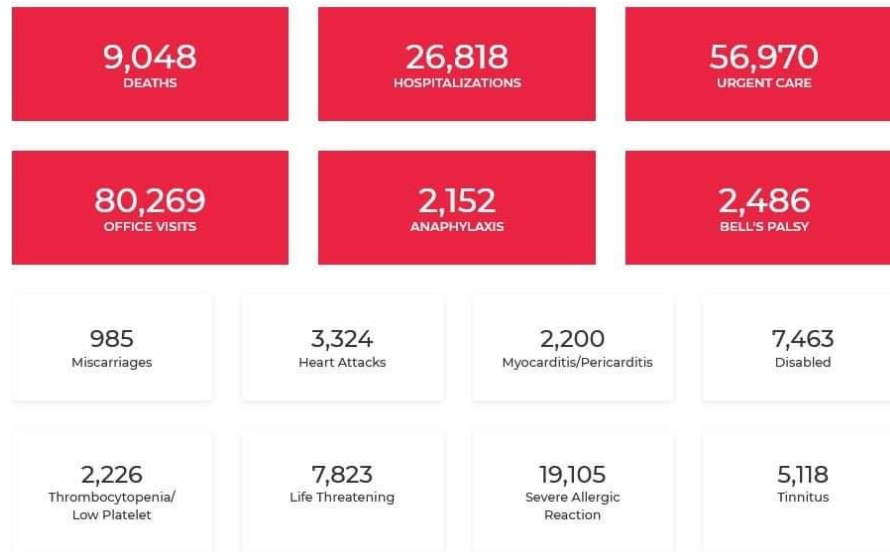
VAERS COVID Vaccine Data

(Vaccine Adverse Events Reporting System, USA)

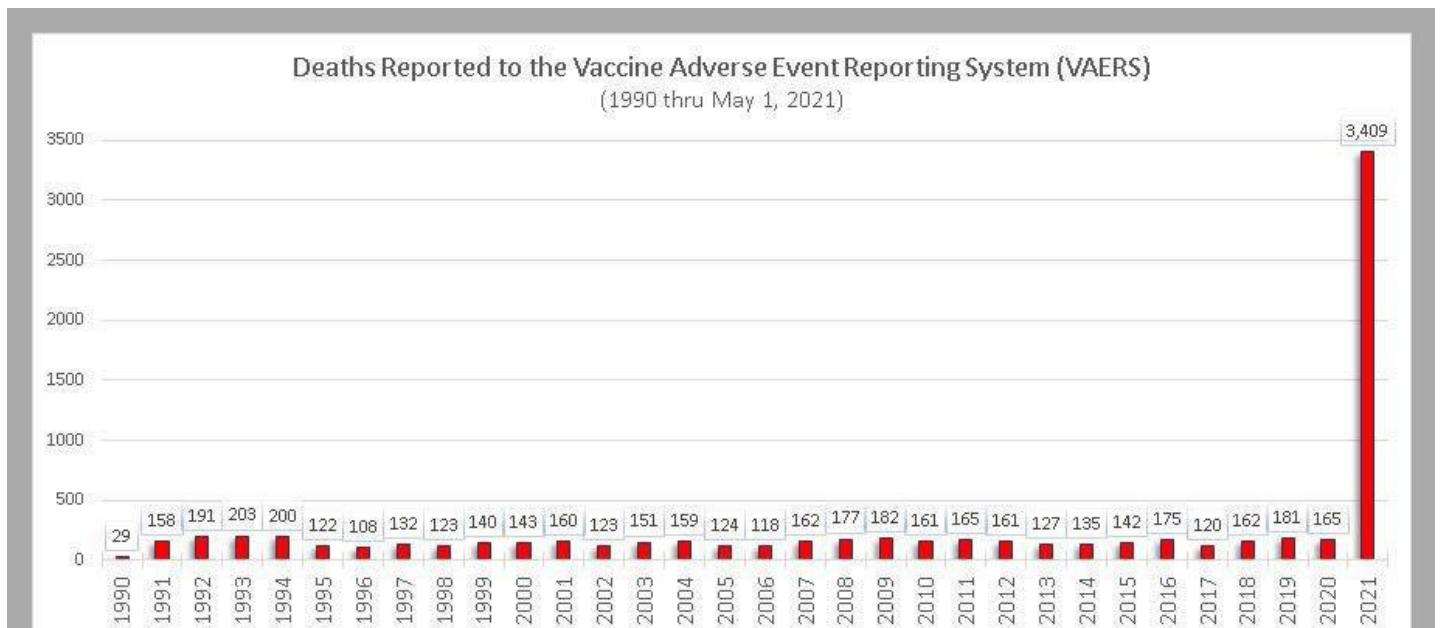
438,440 Reports
Through July 7, 2021

*

[jump to browse highlighted reports](#) ✓



- Despite all of the items above, according to Pfizer, only one death can be contributed to the vaccine. Also, I'm unclear as to why Pfizer is doing the research of causation on their own product. They could be biased? Why would this not be done by an independent reviewer?
- I've seen many articles and videos online where people that were perfectly healthy with zero issues before vaccination – have been injured themselves or have lost an injured/deceased loved one after they were vaccinated. When they ask for investigations into the injuries or deaths, or help from the vaccine companies in researching, they are completely ignored. Doctors can't tell them what caused their issue or the death, but they do say it can't be tied to the vaccine.
 - <https://www.ronjohnson.senate.gov/2021/6/sen-johnson-these-families-have-a-very-simple-request-they-want-to-be-seen-their-stories-heard-they-would-like-to-be-believed>
 - <https://nypost.com/2021/07/05/michigan-boy-dies-in-his-sleep-three-days-after-getting-vaccine/>
 - <https://nomoresilence.world/pfizer-biontech/ernesto-ramirez-jr-16-years-old-died-from-pfizer-vaccine/>
- According to many sources, typically only 1% of adverse events including death are reported to VAERS. So now do the math.
- There have been more reports of death after the COVID vaccine over the past 18 months – than there have been for all vaccines combined over the last 30 YEARS. Note: graph below is through May of this year.



2 – Low risk levels

Covid survival/fatality rates show low risks overall for most age groups.

- This is a bad respiratory virus – no denying it. But, it's not the plague, either. Here's the data from the CDC on fatality/infection rates. We have turned the world upside down for a virus that has a survival rate of 99+% for most people, instead of working hard on early treatment and protection for the high risk population.
- Ages 0 – 40 (as of September 2021) – there are 11,000 deaths total.



Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

Updated infection fatality - survival rates for COVID19:

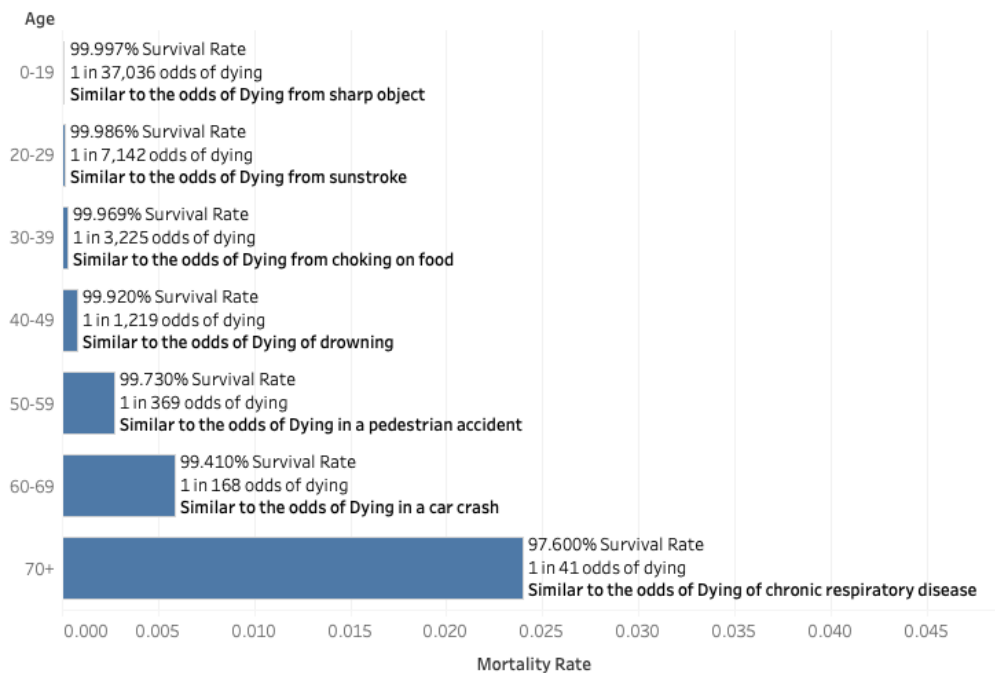
Parameter Values vary among the five COVID-19 Pandemic Planning Scenarios.

CDC SCENARIO 5: 'Current Best Estimate'

AGE GROUP:	INFECTION FATALITY RATE:	SURVIVAL RATE:
0 -19	0.00003%	99.997%
20 -49	0.0002%	99.98%
50 -69	0.005%	99.5%
70 +	0.054%	94.6%

Here's some additional perspective from a Stanford study:

Mortality Risk COVID-19 - Chances of dying of C19 by Age Group with Comparable Overall Odds to the Population (Stanford Study - Ioannidis & Axfors)



More on the numbers:

- Deaths: According to the CDC, there are approximately 600,000 COVID deaths since the start of the pandemic. However, this may be overstated. The Illinois Department of Health Director, Dr. Ezike, explained in April 2020 that anyone who passes away after testing positive for the virus, is counted as a covid death. A quote from her: *"If you were in hospice and had already been given a few weeks to live, and then you were also found to have covid, that would be counted as a covid death. It means technically even if you died of a clear alternate cause, but you had covid at the same time, it's still listed as a covid death. So, everyone who's listed as a covid death doesn't mean that was the cause of the death, but they had covid at the time of the death"*
- Hospitalizations: These are counted the same way. If you are hospitalized for another reason, not related to covid, but test positive for covid while you are there, you are now counted as a covid hospitalization. From Dr Aaron Kehenaty, MD, posted online Sept 8: *"Keep in mind, when you read about hospitalized with covid statistics, everyone gets tested on admission to a hospital. I recently treated a physically healthy young man with a positive covid screening test but zero covid symptoms. He was hospitalized for suicidality and self-harm".* So, this boy who had attempted suicide/self harm is now considered a "covid hospitalization". Update as of fall 2021: They are now asking for vaccination status upon admission. They don't test you if you are vaccinated. They only test you if you are unvaccinated. This inflates the numbers for unvaxxed patients, obviously.

Risk for kids:

- Their next step is to approve a vaccination for kids. I could write an entire book on this. The risks to kids is very minimal – less than the flu. For ages 0 – 17, the mortality rate is 0.2%, compared to 0.4% for the flu.
- Here's an interesting statistic to provide some perspective: More kids have been shot in Chicago this past year than have died with covid in the entire United States since covid arrived.
- The Telgraph in Britain recently reported: Teenage boys are six times more likely to suffer from heart problems (myocarditis) from the vaccine than be hospitalized from covid 19.
- Overall, the risks from the vaccines far outweigh the risks of getting covid for kids.

One more thing on the risk/numbers – covid tests:

- The PCR tests used to diagnose covid have been the subject of much controversy (and rightly so). Under normal circumstances, when testing for a virus or bacteria, they run the test at approximately 25 cycles. If you run the test for more cycles than this, dead virus, that is no longer active, can be easily detected, resulting in false positives. When using the test for covid, the test is always run at 40-45 cycles. Only for covid. Meaning, the chance of false positives is exponentially increased by doing it this way.
- The number of cases has been used to drive public policy, but this number has likely been very overstated.

3 – Complete distrust of anyone in public health, the government, and the vaccine companies.

- Reminder – the vaccine companies have NO LIABILITY. They can't get sued if something goes wrong with the vaccines. And they are the ones doing the research, providing the data, etc. I can sue virtually every other producer of goods and services if their product or service damages my health, but I can't do that for the vaccine makers.
- Early this year....Biden said *"you're not gonna get COVID if u have these vaccinations."* We now have breakthrough cases and a booster shot available.
- Fauci said the vaccine was *"almost 100%" effective at preventing severe disease."* This is also false. Fauci has lied about masks (they aren't effective/flipped to they are effective/then – we should wear two). Fauci stated when we reached herd immunity (70%) we would be over the virus. We now have 70% of people vaccinated and he's moved the goalposts again. Now we need more like 80%. When we reach 80%, he will likely say 90%, and so on.
- The CDC Director Rochelle Walensky said *"vaccinated people do not carry the virus" & "don't get sick"*. Now she says the opposite. On August 6 she stated that *"we now know that the vaccine doesn't stop transmission"*.
- The top two FDA scientists resigned recently since the president was announcing booster shots before they had a chance to look at the data to analyze. Since then, these FDA scientists are now recommending against a booster shot, after Biden announced that everyone would get a booster shot.
- When asked about the data we have to support a third booster, the CDC Director Rochelle Walensky replied *"we don't have data but we are hopeful."* Hopeful? Is that the best they can do before recommending another injection before FDA approval?

4 – Distrust that the vaccines are working.

We were promised that after getting two doeses, life would get back to normal.

The countries with the highest level of vaccinations correspond to the highest number of cases and deaths right now.

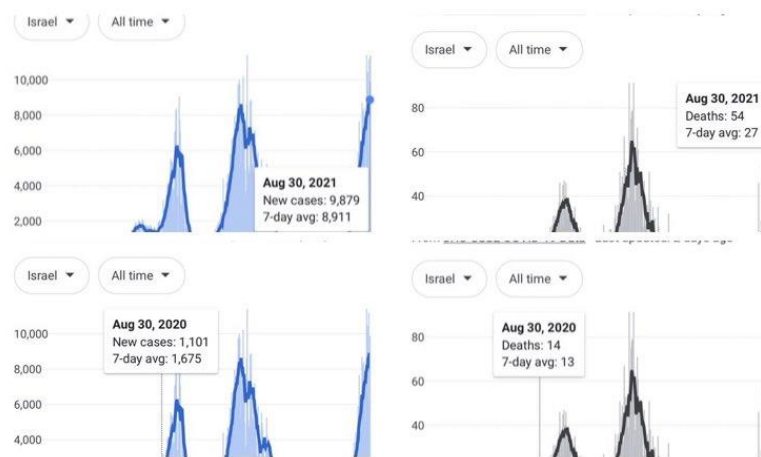
- Low vaccinated India has now 60% less covid cases than the same week last year.
- Mid-vaxxed U.S. has 39% more covid cases now - than the same week last year. (after vaccinating 200 million people).
- High vaccinated Canada and Isreal are up 100% and 200%.

They state they are "following the science". How could you look at the data below and say you are doing that? Israel is country with the highest vaccination rate in the world. You are no longer considered fully vaccinated with two shots. They have implemented a 3rd (booster), and there are already talks about a 4th (second booster). Why would we recommend a third booster shot here in the U.S. when we see what's going on there?

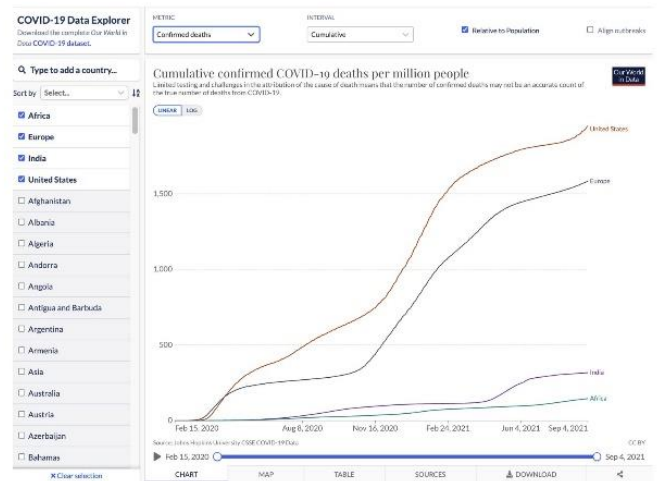
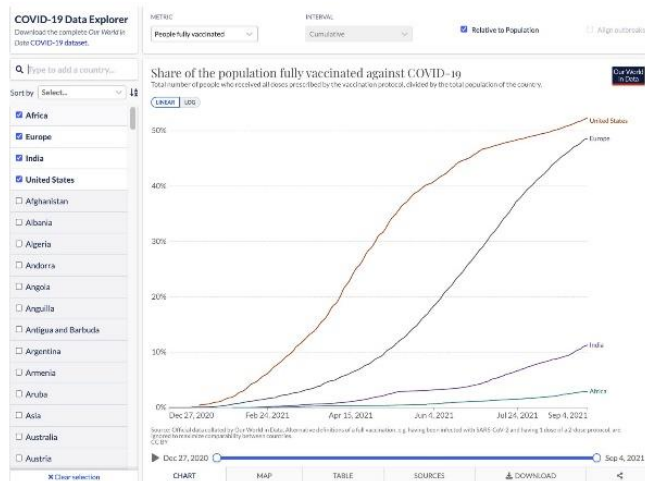
THIS AUGUST 30th IN ISRAEL (with majority double vaccinated & over a million with booster shot: 9,879 cases & 54 deaths

LAST AUGUST 30th IN ISRAEL WITH NO JAB: 1,101 cases & 14 deaths

If this is what success looks like, I'd hate to see failure.



Graph showing the highest vaccinated countries corresponding to the highest levels of cases and death (US, Europe) vs lowest amount of vaccinations corresponding to lowest levels of death (India, Africa):



The unvaccinated are not the only ones getting covid.

Nearly 60% of hospitalized COVID-19 patients in Israel fully vaccinated, data shows

Erica Carbajal - Thursday, August 19th, 2021 [Print](#) | [Email](#)

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Of 514 patients in Israel hospitalized with COVID-19 as of Aug. 15, 59 percent were fully vaccinated, according to an Aug. 16 article from *Science* that cited national data tracked by Israel's largest health management organization. The figures suggest breakthrough infections may be more common than the term implies, the report suggests.

Most of the vaccinated patients who were hospitalized, about 87 percent, were at least 60 years old.

"This is a very clear warning sign for the rest of the world," said Ran Balicer, CIO at Clalit Health Services, Israel's largest health maintenance organization. "If it can happen here, it can probably happen anywhere," he told *Science*.

The country has one of the world's highest COVID-19 vaccination levels, with about 78 percent of those ages 12 and older fully vaccinated, mostly with the Pfizer vaccine. At the same time, Israel now has one of the highest infection rates in the world, potentially a sign of waning vaccine immunity as the highly contagious delta variant spreads, *Science* reports.

In response, Israel began administering booster doses to people ages 60 and older July 20. The country has

The vaccines don't stop transmission:

- The CDC director, Rochell Walensky said on August 6 during an interview: “what they (Coronavirus vaccines) can't do anymore is prevent transmission.”
- Many studies suggest that a vaccinated person can actually transmit MORE than an unvaccinated person.
- Why do we have mandates for vaccines – if the vaccines can't even stop transmission? Isn't that the definition of a vaccine?
- Not anymore. The CDC just changed the definition of a vaccine on their website so that it could match what the covid vaccine does:

Vaccination (pre-2015): Injection of a killed or weakened infectious organism in order to prevent the disease.

Vaccination (2015-2021): The act of introducing a vaccine into the body to produce immunity to a specific disease.

Vaccination (Sept 2021): The act of introducing a vaccine into the body to produce protection from a specific disease.

5 – The insistence that EVERYONE get the vaccine – no matter what.

With chicken pox, for example, if you had it as a kid, you were immune. Multiple recent studies show that natural immunity from covid is more durable than the vaccine. So, why do people with natural immunity need a vaccine for covid – but they don't need this for any other disease or virus? This is not “following the science”.

There was a case recently at a college campus, where a student sued the school. She provided a test showing she had natural antibodies due to a prior covid infection. She won the case because there was no way to prove that a covid vaccine was necessary in her situation. But the public health officials ignore this and insist on vaccination for everyone. It's creepy.

In New York, they aren't even allowing medical and religious exemptions. What?

6 - Early treatment options exist.

How did we get “warp speed” approval for a vaccine – but no “warp speed” approval to use existing drugs that we have now, to treat covid?

There were many, many doctors last year that saw so much death – they were desperate. They tried alternate, existing drugs to treat covid, and they worked! An example is ivermectin (although there are many others with the same story). There are now 15+ peer reviewed studies showing evidence of ivermectin working in patients throughout the covid pandemic. Dr. Peirre Kory testified before Congress, telling about the success, and pleading for it to be approved for use in the U.S. to treat covid, late last year. He got shut down. The AMA in the U.S. discourages the use of this. However, it’s approved and being used in many other countries – that now have lower covid case rates and deaths than we do. Japan and India are examples. The media makes fun of it – calling it a “horse dewormer”. There is an animal version of the drug. There is also a human version of the drug. The human version won the Nobel Peace Prize in 2015. It’s actually used now – and required to give to immigrants that come into our country upon entry (it’s on the CDC website). So, the Afghan refugees that are coming into our country are receiving it as we speak. However, it’s not available for U.S. doctors to prescribe to their patients who are U.S. citizens.

In India, they sent out packets of vitamin D and ivermectin to their entire population earlier during the pandemic, and they saw immediate declines in cases and deaths.

Why wouldn’t they allow this? If there’s nothing else that’s working – and we want to just help people with early treatment/keep them out of the hospitals? We have early treatment for every other condition – why did it take so long to get early treatment for covid? The only answer I can think of is that the vaccine wouldn’t have been able to be authorized for emergency use – if there were another drug available to treat covid.

The monoclonal antibody treatment that Governor DeSantis has used recently in Florida was approved for emergency use in February 2021. There’s been no talk of it, or suggestion for it, until he implemented using it in Florida. No one in public health suggests, or mentions, any possible early treatment. Now they have jumped on the DeSantis bandwagon, after they’ve seen it being used successfully there, and are sending it to other states. But – would they have even done this – if DeSantis hadn’t started using it? I don’t think so, honestly.

There are many early options for treatment – but only some doctors will prescribe them. The ones that use the alternative drugs are treating people successfully, keeping them out of the hospitals, with generic drugs that don’t cost much. Also, many studies show that even using Vitamin D, Vitamin C, and zinc for prevention and/or early treatment can eliminate the need for hospitalization.

In conclusion:

- It’s still a free country. I am choosing to make my own health decisions based on my own research rather than based on whatever propaganda they choose to share on CBS or CNN.
- Insisting on my rights is not selfish. Demanding that I give them up because other people want me to is.