

IMPORTANT INFORMATION ABOUT COVID-19 VACCINES

Covid-19 vaccines are going to be available in New Zealand in 2021. The purpose of this factsheet is to share with you some of the key facts about Covid-19 vaccines.

MINOR IMPACT: Vaccine manufacturers claim that Covid-19 vaccines are 95 percent “effective,” but the FDA is allowing companies to define effectiveness as “prevention of mild symptoms.” The studies are *not* designed to detect a reduction in serious outcomes such as severe illness, hospitalization or death.[1][2] For individuals who develop severe symptoms, the vaccine is not a remedy. Instead, nutritional and oxidative support can help keep the illness from going into “overdrive.” [3]

COVID-19 VACCINES ARE BEING RUSHED INTO MASS PRODUCTION *PRIOR* TO THE COMPLETION OF CLINICAL TRIALS: The clinical trials for many Covid-19 vaccines are not yet complete. For some of the vaccines ordered by the NZ and Australian governments, *the relevant clinical trials are not due for completion for months or even years **after*** the time that the vaccines are likely to be available for use in these countries. [4]

ADVERSE REACTIONS TO COVID-19 VACCINES MAY BE SERIOUS: Participants in every Covid-19 vaccine trial have reported adverse reactions including high fever, chills, muscle pains and headaches.[5][6][7] Some have even reported severe reactions that required hospitalization and invasive treatment. According to the FDA, potential long-term effects may include Guillain-Barré syndrome, brain swelling, muscle weakness and paralysis, convulsions and seizures, stroke, narcolepsy, shock, heart attack, autoimmune disease, arthritis and joint pain, multisystem inflammatory syndrome in children, and death.[8] Some UK health workers have experienced anaphylactic shock after receiving one dose of a Covid-19 vaccine. [9]

MAY NOT PREVENT COVID-19: An FDA Pfizer briefing paper published December 10, 2020 revealed 43 percent more suspected cases of Covid-19 in the vaccinated group than in the placebo group within seven days of vaccination.[10] NB: The NZ government has ordered 1.5 million doses of the Pfizer/BioNTech vaccine (enough for 750,000 people) and the vaccine is expected in NZ as early as the first quarter of 2021. [11]

COVID-19 VACCINES ARE BEING MANUFACTURED USING METHODS THAT HAVE NOT PREVIOUSLY BEEN USED TO MANUFACTURE VACCINES FOR MASS VACCINATION

CAMPAGNS: One of the Covid-19 vaccines ordered by the NZ and Australian governments is the Pfizer/BioNTech mRNA vaccine. (The term “mRNA” is an abbreviation for “messenger ribonucleic acid”.) An mRNA vaccine contains synthetic mRNA as well as lipid nanoparticles. (The Pfizer/BioNTech vaccine also contains polyethylene glycol – the major ingredient in

antifreeze.) When synthetic mRNA is injected into muscle, it is taken up into the protein-making machinery of the body's cells and causes this part of the cells to make the spike protein for SARS-CoV-2. Essentially, an mRNA vaccine turns the body's own cells into a vaccine antigen factory until the synthetic mRNA is no longer functional. Vaccines made using mRNA technology have not previously been used in mass vaccination programmes so could be considered experimental. [12]

Two of the Covid-19 vaccines ordered by the NZ and Australian governments are viral vector vaccines. These viral vector are manufactured by using cell lines derived from aborted human foetuses as a culture medium for genetically engineered viruses. The viruses are genetically engineered so that they contain sequences for the spike protein for SARS-CoV-2. (The Oxford/AstraZeneca viral vector vaccine uses a chimpanzee adenovirus that was originally sourced from chimpanzee faeces prior to being genetically engineered for the vaccine [13]. The Janssen/Johnson & Johnson viral vector vaccine uses a human adenovirus that is believed to have been originally sourced from the anus of a baby boy.) [14]

When a viral vector vaccine is injected into muscle, the genetically engineered viruses target the nucleus of the recipient's cells and use this part of the cells to make the spike protein for SARS-CoV-2. Essentially, a viral vector vaccine turns the body's own cells into a vaccine antigen factory until the genetically engineered viruses are no longer active. Viral vector vaccines based on any type of genetically engineered adenovirus have never before been used to mass produce vaccines for humans so could be considered experimental. [15]

One of the vaccines that has been ordered by the NZ and Australian government is the Novavax brand protein subunit vaccine that contains the spike protein from SARS-CoV-2. This vaccine is manufactured by using a cell line derived from ovarian tissue of the fall armyworm moth (*Spodoptera frugiperda*) as a culture medium for an insect virus (a baculovirus) that has been genetically engineered to produce the spike protein for SARS-CoV-2. In addition to a genetically engineered version of the spike protein from SARS-CoV-2 the Novavax Covid-19 protein subunit vaccine contains an adjuvant designed to increase the response of the immune system to the genetically engineered spike protein. If Novavax's Covid-19 protein subunit vaccine is approved for use this will be the first time that this company has succeeded in getting any vaccine into mass production. [16]

NO LIABILITY: Covid-19 vaccine manufacturers will be protected from liability - if you are injured, you will probably not be able to sue. [17] Manufacturers will have complete indemnity even though all previous attempts at creating coronavirus vaccines caused harm and never advanced to regulatory approval. [18]

MAY NOT END RESTRICTIVE MEASURES: Dr. Anthony Fauci of the U.S. National Institutes of Health acknowledges that the vaccines may prevent symptoms but will not block spread of the virus, so vaccine recipients will still need to wear masks, practice social distancing and avoid crowds. [19][20]

NOT NECESSARY: The United States Centers for Disease Control (CDC) has estimated that the "infection fatality rate" (IFR) for Covid-19 is less than 1 percent for people age 69 and younger, including a 0.003 percent IFR for children and adolescents. [21] (The infection

fatality rate (IFR) for an infection is the proportion of people who have died from illness caused by a specific microorganism compared to those who have been exposed to the microbe but survived. When calculating the IFR, cases in which people have been exposed to the microbe without becoming sick are included, not just those who became ill.) Up to 80% of infections with SARS-CoV-2 have been estimated to be asymptomatic. [22]

MAY MAKE YOU STERILE: The ex-head of Pfizer's respiratory research division and a medical doctor have warned the European Medicines Agency that if Covid-19 vaccines were to trigger the development of antibodies against a protein known as syncytin-1 (which is vital for the formation of the placenta in mammals) then infertility might result in women who have been vaccinated. [23]

Possible adverse effects of the vaccine on male fertility are not yet known as a study that is designed to determine whether or not the vaccine may adversely affect sperm concentration and motility (activity) only began recruiting participants in December 2020 and is not due for completion until mid-June 2021. [24] Banking sperm prior to Covid-19 vaccination has been suggested as a precaution. [25]

NOT COMPULSORY: As an adult you have the right to make informed decisions about your own medical care, including vaccination. Vaccination is NOT compulsory in New Zealand and if you do not want to have a Covid-19 vaccine you have the right to say no.

IMPORTANT NOTE: *The information on this factsheet is for educational purposes only and is not intended to substitute for the advice of a qualified health professional.*

INFORMATION ON COVID-19 TREATMENTS IS ALSO AVAILABLE:

A referenced factsheet on some of the different treatment options for Covid-19 may be found at this link: <https://therealnews.nz/wp-content/uploads/2020/12/Fact-Sheet-on-TREATMENT-OPTIONS-FOR-COVID-19-including-references-and-notes-1-1.pdf>

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Ed note: Some of the text of this factsheet has been duplicated unchanged from the document that you can access at the link below (and some of the text from the link below that is used in the factsheet has been edited). Information specific to NZ and/or Australia has been added to ensure that the factsheet is relevant to this part of the world.

<https://www.westonaprice.org/wp-content/uploads/CovidVaccineTalkingPoints.pdf>