

More Evidence for the Report ‘Scientific Expert Report on the COVID-19 Epidemic Response in Ireland’

September 2021

The following provides supporting evidence and supplementary evidence for the ‘Scientific Expert Report on the COVID-19 Epidemic Response in Ireland’

by Jay Bhattacharya, MD, PhD and Professor of Medicine in Stanford University, USA.

Approximately 33% of this Report.

Dr. Dolores Cahill, Professor of Science and Immunology, UCD. Immunologist.

Dr. Anne McCloskey, medical doctor

Dr. Patrick Morrissey, medical doctor

Mr. Edward Shanahan, Barrister in Ireland and author of Section U of this paper with assistance from D.E. MSc

Further Corroboration of our Report and Book of Evidence given to the Gardai on May 7th 2021

Covid19 has a very high survival rate. The high survival rate can be increased further to almost 100% if the effective medicines mentioned below are used. This survival rate is comparable to a flu season and there has never been national lockdowns for flu seasons or mandatory vaccines or coercion to take them in workplaces or vaccine passports to enter bars and restaurants and public events.

COVID19 SURVIVAL RATES	
00-14 YEARS	99.9998%
15-44 YEARS	99.9931%
45-64 YEARS	99.9294%
65-85 YEARS	99.6297%
> 85 YEARS	98.2499%

Jan, 2021

Sources: CDC in USA, January 27 2021.

https://www.cdc.gov/nchs/nvss/vsrr/covid_weekly/index.htm#SexAndAge

And <https://childrenshealthdefense.org/covid-vaccine-secrets/resources>

Safe and Effective Medicines - Ivermectin, Hydroxychloroquine, AZT, and Zinc, Budenoside, Dexamethasone, Plasma Antibody Treatment, and Vitamin D are 90% - 100% effective against covid19

Dr. Haruo Ozaki is Chairman of the Tokyo Medical Association, and he suggested that doctors be allowed to prescribe ivermectin and dexamethasone “off-label” at a press conference on 9 February 2021. He said, “*I would like the government to consider treatment at the level of the family doctor.*”

On 13 August 2021, he stated that “*It is necessary to thoroughly study the clinical trials, but it seems that we are at the stage where it is okay to have the patient give an informed consent, and get permission to use it.*”

Links - <https://www.nikkei.com/article/DGXZQOFB25AAL0V20C21A1000000/> and <https://www.tokyo-np.co.jp/article/123988> and <https://translate.google.com/translate?hl=en&sl=auto&tl=en&u=https://www.yomiuri.co.jp/choken/kijir/onko/cknews/20210818-OYT8T50030/amp/>

Why are these effective and safe medicines banned and blocked in Ireland and some other countries ?

is it to sell experimental and unsafe covid19 vaccines and make massive profits for Big Pharma companies and provide financial incentives to politicians and ministers and government “advisors” and also to academics who rely on funding from Big Pharma ?

- The latest epidemiological findings from Dr. John Ioannidis of Stanford University and one of the top epidemiologists in the world supports these findings above. His published scientific paper is below:

Infection fatality rate of COVID-19 in community-dwelling populations with emphasis on the elderly:
An overview.

Ioannidis and Axfors. July 2021

<https://www.medrxiv.org/content/10.1101/2021.07.08.21260210v1.full-text>

Median Infection Fatality Rate (IFR)

Age	Infection Fatality Rate
0-19	0.0027%
20-29	0.014%
30-39	0.031%
40-49	0.082%
50-59	0.27%
60-69	0.59%
70-100	2.4%

These new facts and evidence support the implementation of the Great Barrington Declaration and the use of the safe and effective medicines listed above and in our previous reports. These can be used as a preventative or prophylactic in the over 70’s and by those with pre-existing illnesses.

Legal Notice: It should be noted that the official figures for covid19 in the scientific research papers listed above and in most scientific research and in all of our documents includes over-inflated figures

for covid19 as the False Positive rate for Ireland and USA and some other countries was as high as 97% due to very high cycle counts (35 -45) in the PCR tests for covid19. The numbers of covid19 infections and deaths are much lower and the Infection Fatality rate may be 20 to 30 times lower.

The illegal and criminal banning and blocking of effective and safe medicines for covid19 since March 2020

The drug Ivermectin has been proven to be effective and safe against covid19 yet it is blocked and banned in Ireland and some other countries. Public officials in the USA and some other countries including Ireland claim there is no scientific evidence for the use of Ivermectin in covid19. This is false and misleading. Dr. Tony Fauci of the NIH is one such person and he has shares and financial interests in vaccine companies and he has obvious conflicts of interest. Yet nphet and tony holohan and ronan glynn have religiously followed and obeyed Dr. Tony Fauci.

This is an outrageous and criminal abuse of the Irish people and of people in other nations. The following page contains evidence of scientific trials of Ivermectin and the effectiveness of this medicine.

All 44 ivermectin COVID-19 peer reviewed trials

ivmmeta.com Sep 3, 2021

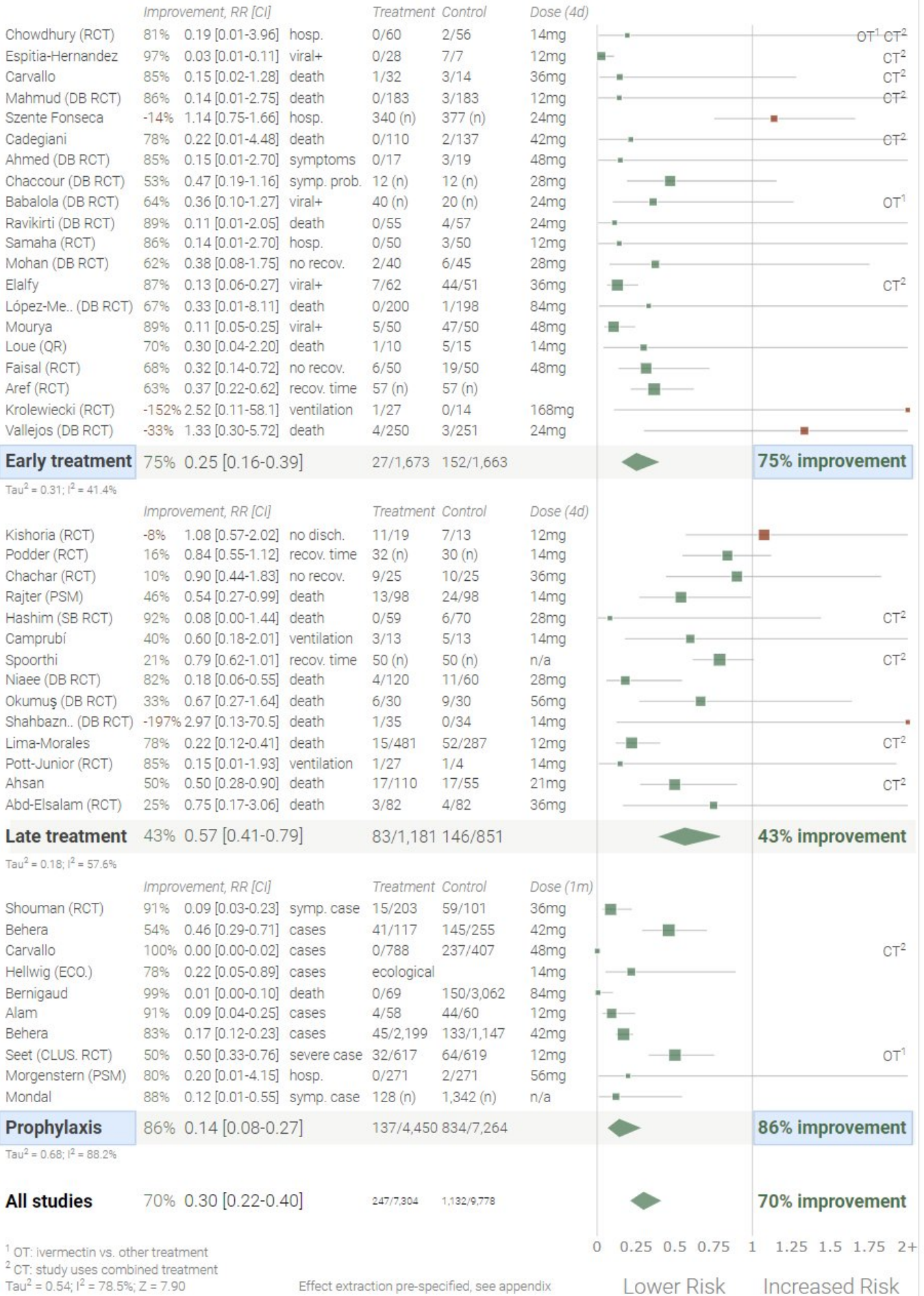


Figure 14. Random effects meta-analysis for peer reviewed trials only. Effect extraction is pre-specified, using the most serious outcome reported, see the appendix for details.

See attachment of Many Scientific Studies of the Successful Use of Ivermectin in Covid19

From web site at <https://ivmmeta.com>

India is bringing criminal charges against a senior WHO official for blocking Ivermectin in the treatment and prevention of covid19 in India

The Indian Bar Association (IBA) sued WHO Chief Scientist Dr. Soumya Swaminathan on May 25, accusing her in a 71-point brief of causing the deaths of Indian citizens by misleading them about Ivermectin. This crime has also occurred in Ireland and some other countries.

- The Herland Report. August 2021.

<https://hannenabintuherland.com/asia/india-charges-who-scientist-soumya-swaminathan-for-mass-murder-the-beginning-of-accountability/>

- The Desert Review. August 2021.

https://www.thedesertreview.com/opinion/columnists/indian-bar-association-sues-who-scientist-over-ivermectin/article_f90599f8-c7be-11eb-a8dc-0b3cbb3b4dfa.html

- International News reports in 2021

<https://yandex.com/search/?text=Soumya+Swaminathan+charges>

See attachments of these.

Irish Medical Doctors publicly speak out against covid19 vaccines and vaccine passports and apartheid and Lockdowns

On September 3rd 2021 several top medical doctors in Ireland spoke out against covid19 vaccines and vaccine passports and Lockdowns and the illegal blocking and banning of safe and effective medicines for covid19 since March 2020. And the threats and blackmail against medical doctors is also mentioned. These statements are very serious and damning and corroborate the evidence we have supplied to the Irish Police since May 7th 2021. The Irish Council for Human Rights hosted this event and it's viewable online at <https://www.bitchute.com/video/femLN8is07DR/> and on the attached DVD to be used as evidence in courts.

We subpoena all of these medical doctors into our criminal court case(s).

And top scientists and medical doctors support the statements and findings of Irish medical doctors above. See report below:

France's long-time vaccine policy chief: Covid policy is "completely stupid" and "unethical"

Professor Christian Perronne is Head of the Medical Department at Raymond Poincaré Hospital in Garches, the teaching hospital for the University of Versailles-St Quentin near Paris. He was the University's Head of Department for Infectious and Tropical Diseases and was involved in advising the French government about vaccines and medicines. He provides a scientific and medical analysis of the covid19 vaccines and covid19 variants and passports and lockdowns in the interview below. This has great relevance for Ireland and other countries.

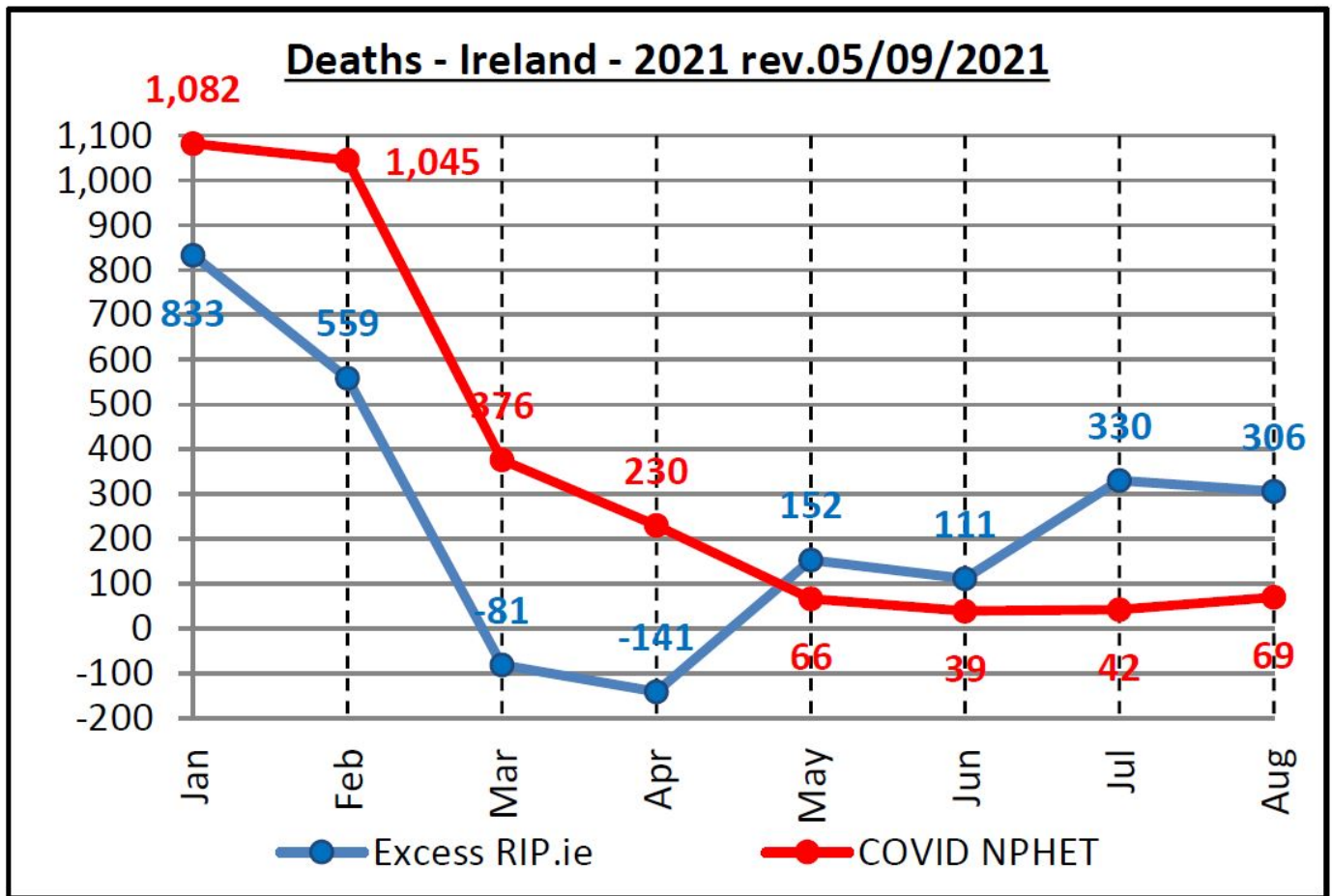
<https://www.ukcolumn.org/video/frances-long-time-vaccine-policy-chief-covid-policy-is-completely-stupid-and-unethical>

False Statistics from NPHET

Deaths in Ireland have risen significantly in 2021 after the covid19 vaccines were rolled out in January 2021. Deaths in the Summer months are unusually high in Summer 2021. Hospital data from around Ireland shows that there was a higher number of hospital admissions for Summer 2021 than previous Summers. This trend is highly unusual and suggests that well documented covid19 vaccine injuries and disabilities and deaths are leading to this rise. There are also concerns in the medical community that covid19 vaccine injuries and disabilities and deaths are being mislabelled as "covid19 variants". This would have the effect of covering up covid19 vaccine injuries and disabilities and deaths.

And there are growing concerns among top scientists and medical doctors that new covid19 variants are being created by the covid19 vaccines. And the vaccines are weakening human immune systems. Excess

mortality is very high for Summer and early Autumn 2021. The following statistical analysis chart produced by Kieran Morrissey show the facts and evidence relating to this.



900 excess deaths for Summer 2021. An average of 100 per week. NPHEt are falsely claiming an average of 10 per week.

Failures of Covid19 Vaccines to prevent covid19 Infections. And scientific and medical concerns that covid19 vaccine injuries and disabilities and deaths are being mislabeled as “covid19 variants”.

- During Summers Irish hospitals are usually quiet and empty and this has been the case for many decades. This is due to less flus and colds and viral infections and Winter illnesses in Summer. Strangely in Summer 2021 Irish hospitals are extremely busy and at capacity with covid19 vaccine injuries and disabilities some of which are called “covid19 variants” and infections and other illnesses and accidents. News report below.

St Vincent’s at capacity as ‘worried unwell’ add to the workload woes

Irish Independent newspaper. August 22 2021

<https://www.independent.ie/world-news/coronavirus/st-vincent-at-capacity-as-worried-unwell->

[add-to-the-workload-woes-40775399.html](https://www.independent.ie/world-news/coronavirus/nursing-home-goes-into-full-lockdown-after-number-of-residents-and-staff-test-positive-for-covid-19-40808815.html)

- Nursing homes where all staff and residents are vaccinated with covid19 vaccines are still getting covid19. The vaccines are obviously not working. Newspaper report below.
Nursing home goes into full lockdown after number of residents and staff test positive for Covid-19 - Irish Independent September 1 2021
<https://www.independent.ie/world-news/coronavirus/nursing-home-goes-into-full-lockdown-after-number-of-residents-and-staff-test-positive-for-covid-19-40808815.html>

- **Evidence from Israel**

Israel is the most covid19 vaccinated country in the world. Yet this has not prevented covid19 infections including new variants. The Chart below shows that Israel has now got a “Pandemic of the Vaccinated”. The covid19 vaccines are not working and are actually leading to a rise in covid19 cases including new variant cases.

ISRAEL CONFIRMED CASES, JULY 4 TO JULY 31

Age Group	Cases Fully Vaccinated	Cases Unvaccinated	Percent of Cases Fully Vaccinated	Percentage of Population Fully Vaccinated
20–29	2689	795	77.2%	71.9%
30–39	3176	881	78.3%	77.4%
40–49	3303	635	83.9%	80.9%
50–59	2200	359	86.0%	84.4%
60–69	2200	187	92.2%	86.9%
70–79	1384	100	93.3%	92.8%
80–89	540	61	89.9%	91.2%
90+	142	20	87.7%	89.7%
TOTAL	TOTAL	TOTAL	AVERAGE	AVERAGE
20–90+	15634	3038	86.0%	84.4%

Source 1: <https://data.gov.il/dataset/covid-19/resource/9b623a64-f7df-4d0c-9f57-09bd99a88880>

Source 2: <https://datadashboard.health.gov.il/COVID-19/general>

- **Israel**

In late August 2021 over 90% of hospital admissions in Israel are fully vaccinated people. These

hospitalizations include new covid19 cases and high numbers of covid19 vaccine injuries and disabilities and other illnesses and accidents. Israeli news report on

<https://www.bitchute.com/video/PPo10V48ty36/>

and also on DVD attached to evidence

and

Israel now has more covid infections per capita than any country in the world, even as “booster shots” are being widely administered there

‘ and Israel is now logging the world’s highest infection rates, with nearly 650 new cases daily per million people. At times, hospitalizations for the “fully vaccinated” have reached upwards of 95 percent. ‘

Natural News September 3 2021

<https://www.naturalnews.com/2021-09-02-israel-now-has-more-covid-infections-any-country.html#>

and

Israel is the most covid19 vaccinated country in the world. Yet this has not prevented covid19 infections including new variants. See news article below:

Israel says Pfizer Covid vaccine is just 39% effective as delta spreads, but still prevents severe illness
CNBC July 23 2021

<https://www.cNBC.com/2021/07/23/delta-variant-pfizer-covid-vaccine-39percent-effective-in-israel-prevents-severe-illness.html>

- **Boosters not working in Israel**

https://www.timesofisrael.com/liveblog_entry/report-14-israelis-have-caught-covid-19-despite-receiving-booster-shot/

- **Important study published in the Lancet**

“Viral loads of breakthrough Delta variant infection cases were 251 times higher than those of cases infected with old strains (of covid19) detected between March-April 2020.”

Transmission of SARS-CoV-2 Delta Variant Among Vaccinated Healthcare Workers, Vietnam

https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3897733

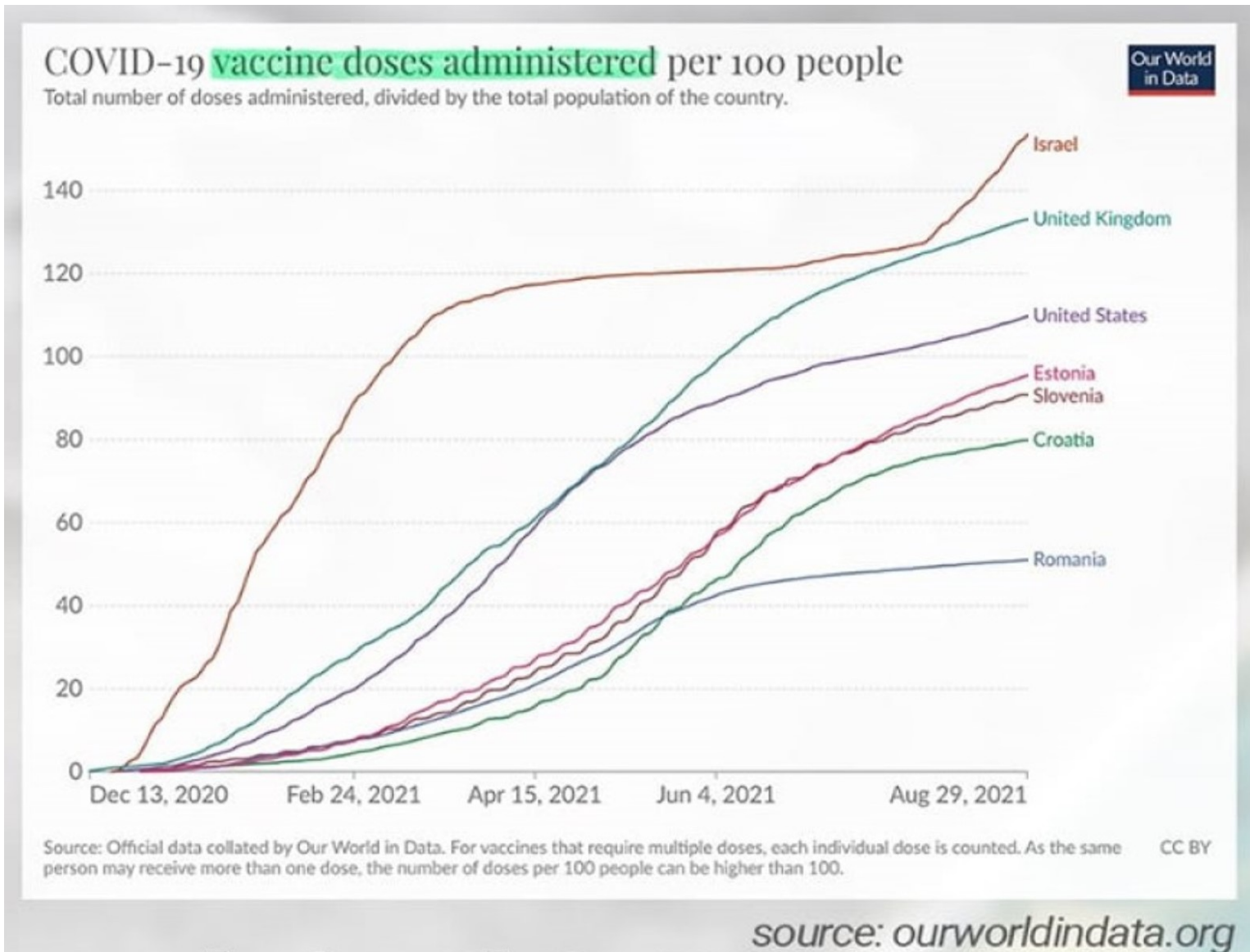
- **Bloomberg identified more than 100,000 vaccine breakthroughs in 35 US states**

<https://www.bloomberg.com/news/articles/2021-07-30/cdc-scaled-back-hunt-for-breakthrough-cases-just-as-the-delta-variant-grew>

- **Correlation between covid19 vaccines and a big rise in new covid19 cases and new variants and deaths from these and a rise in covid19 vaccine injuries and disabilities and deaths**

Covid19 cases are rising rapidly in highly vaccinated countries such as Israel and Britain and some other countries. The charts below outline this situation. The covid19 vaccines are not working and not effective against covid19 and its variants. The evidence is suggesting that the covid19 vaccines

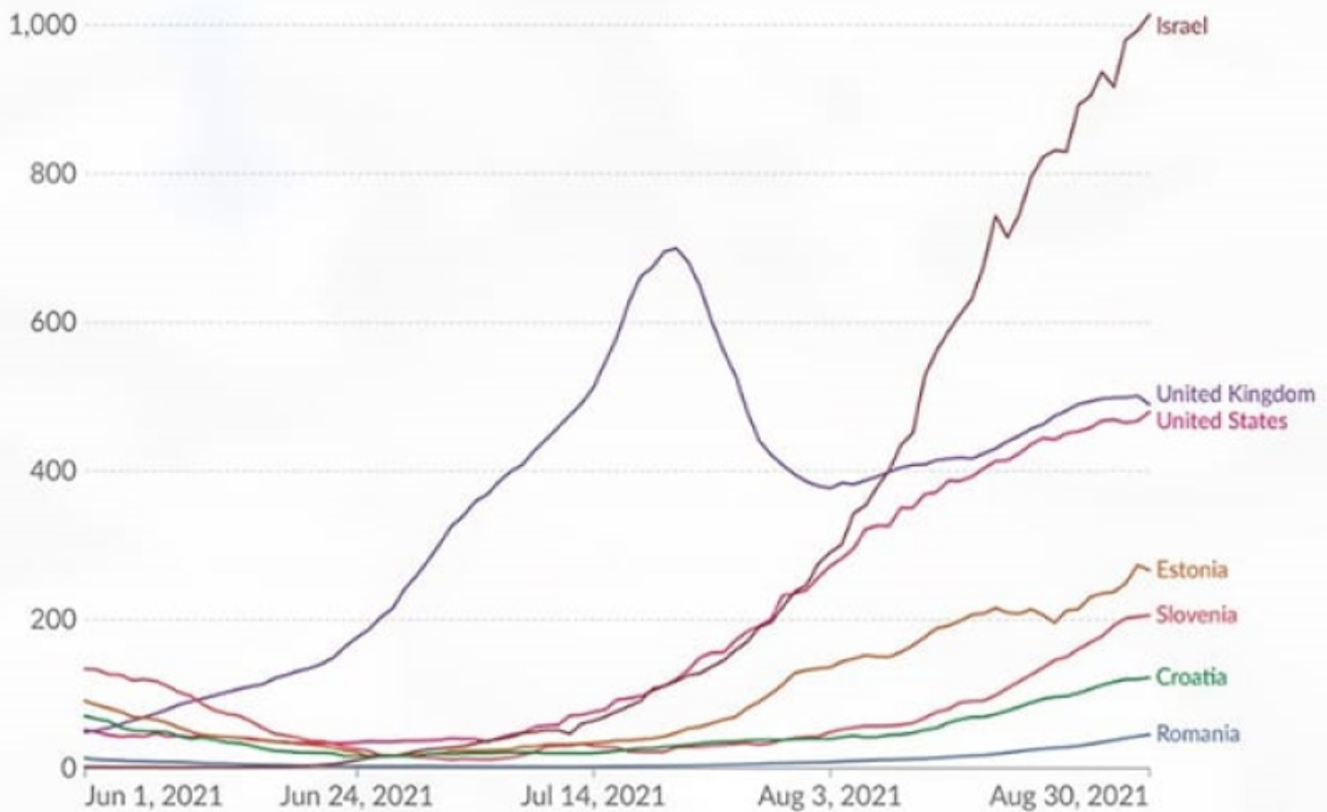
are creating new variants and / or weakening human immune systems. This corroborates our evidence in previous reports submitted to the Irish Police (Gardai).



Daily new confirmed COVID-19 cases per million people

Our World in Data

Shown is the rolling 7-day average. The number of confirmed cases is lower than the number of actual cases; the main reason for that is limited testing.



Source: Johns Hopkins University CSSE COVID-19 Data

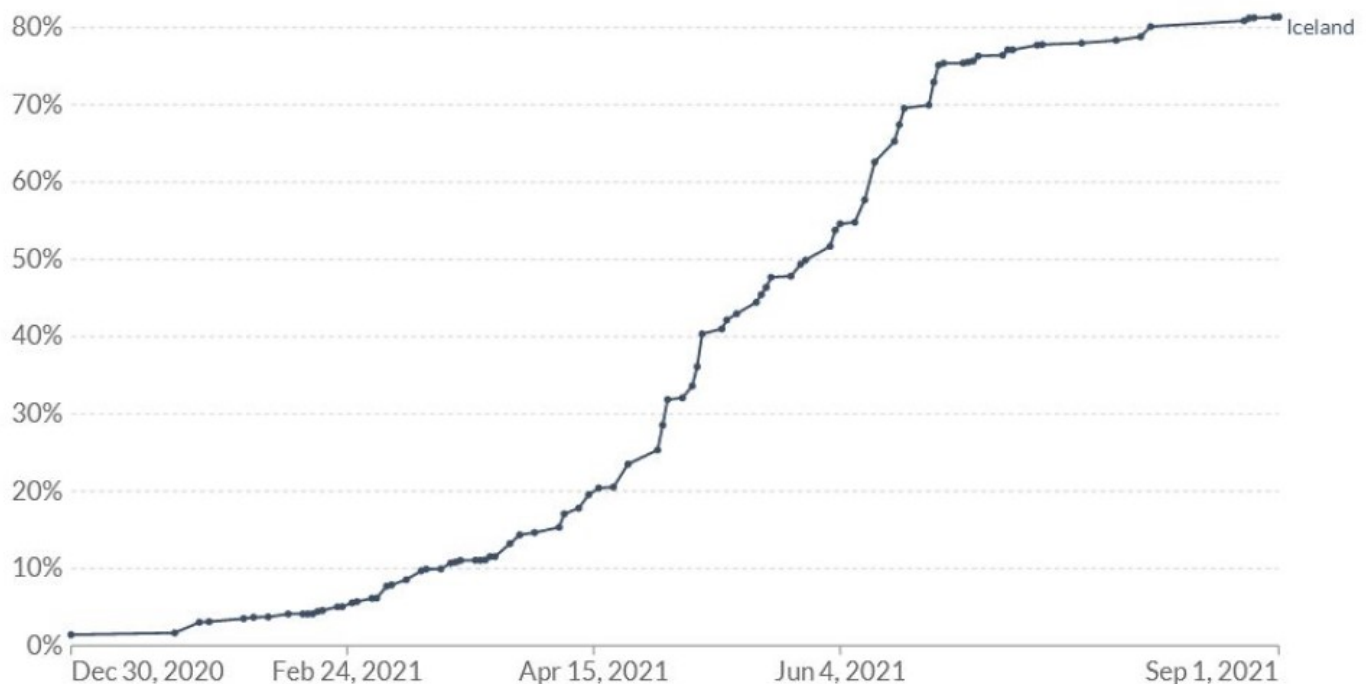
CC BY

Share of people who received at least one dose of COVID-19 vaccine

Our World in Data

Total number of people who received at least one vaccine dose, divided by the total population of the country.

[+ Add country](#)

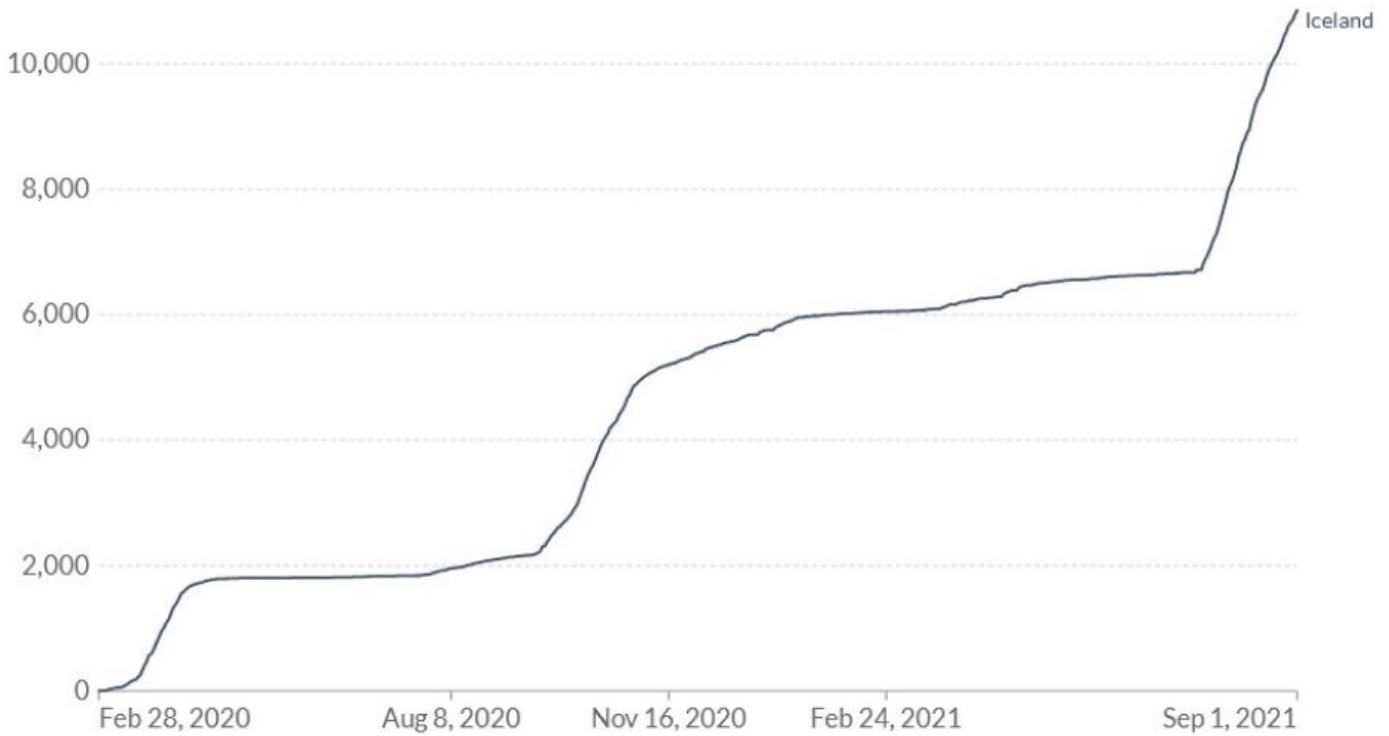


Cumulative confirmed COVID-19 cases

The number of confirmed cases is lower than the number of actual cases; the main reason for that is limited testing.

LINEAR LOG

+ Add country

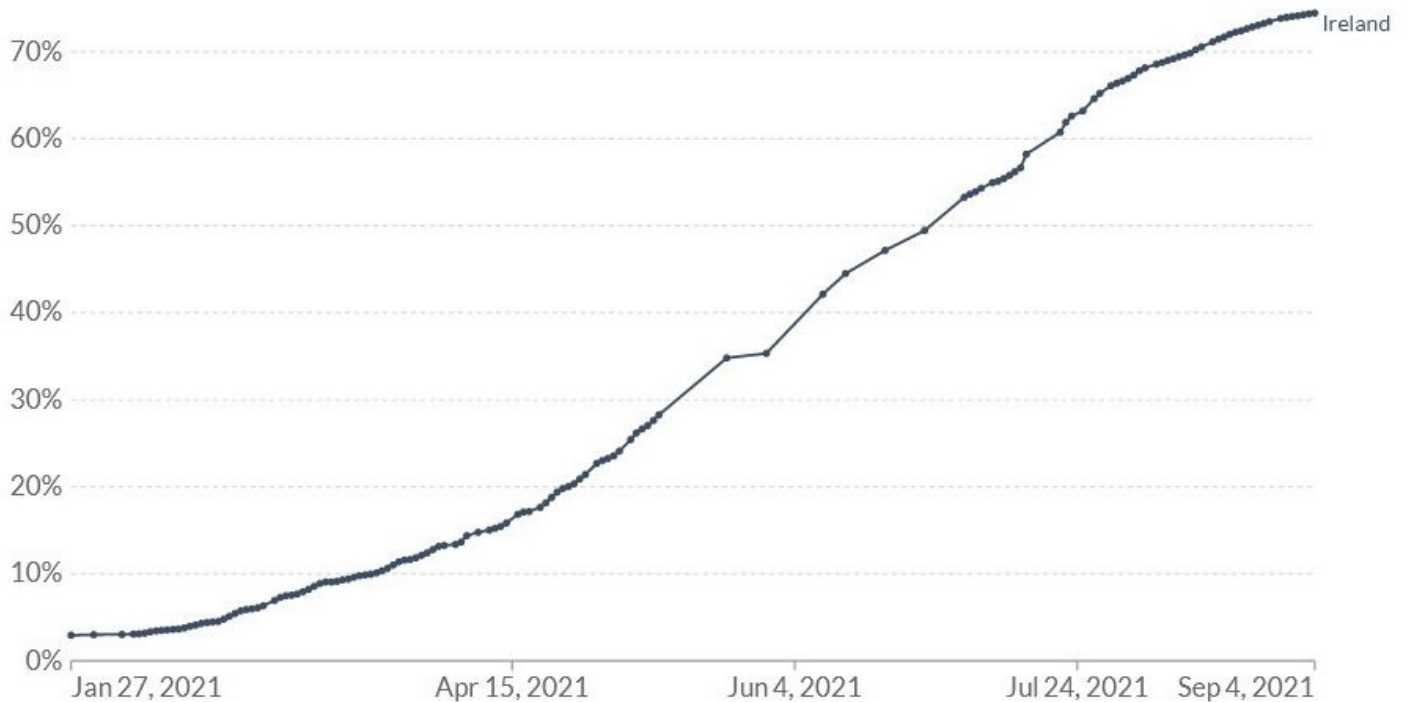


Share of people who received at least one dose of COVID-19 vaccine

Total number of people who received at least one vaccine dose, divided by the total population of the country.

+ Add country

Ireland



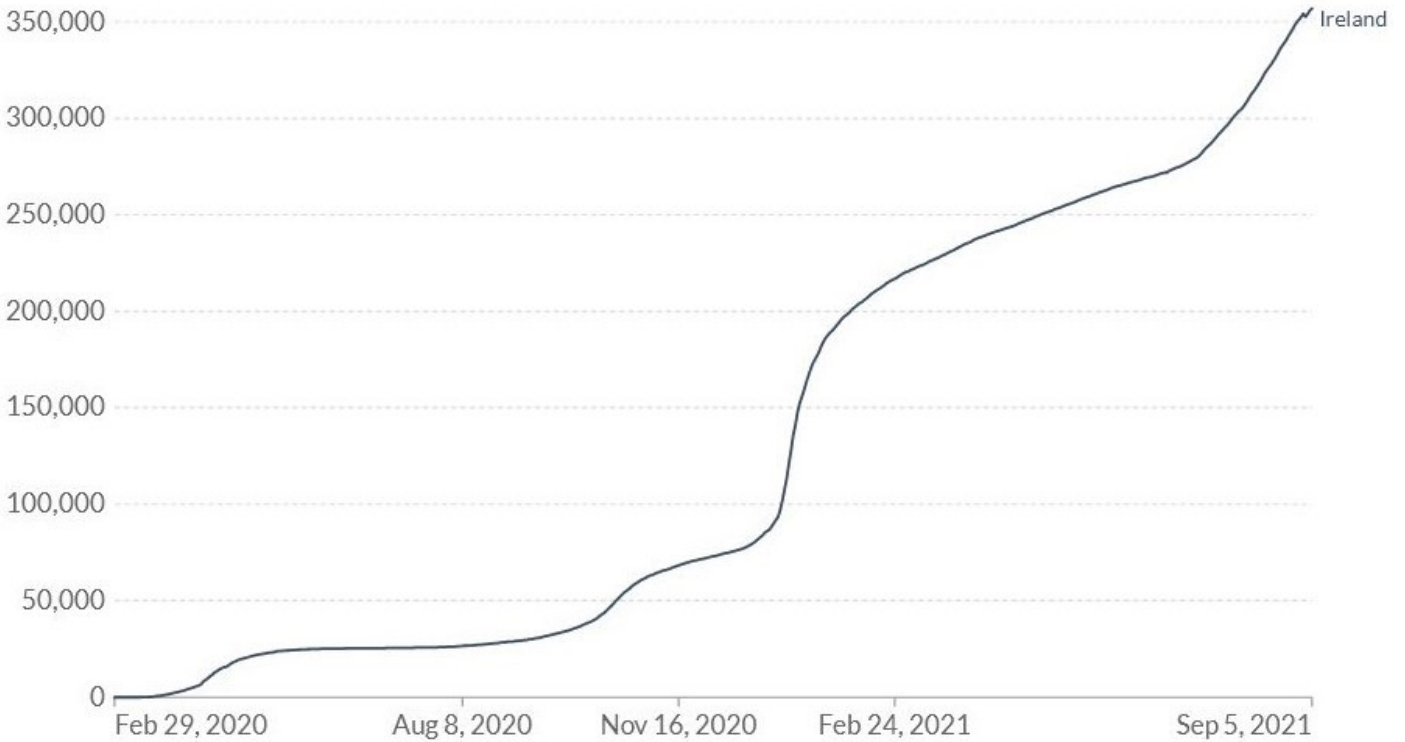
Cumulative confirmed COVID-19 cases

The number of confirmed cases is lower than the number of actual cases; the main reason for that is limited testing.

LINEAR LOG

+ Add country

Ireland



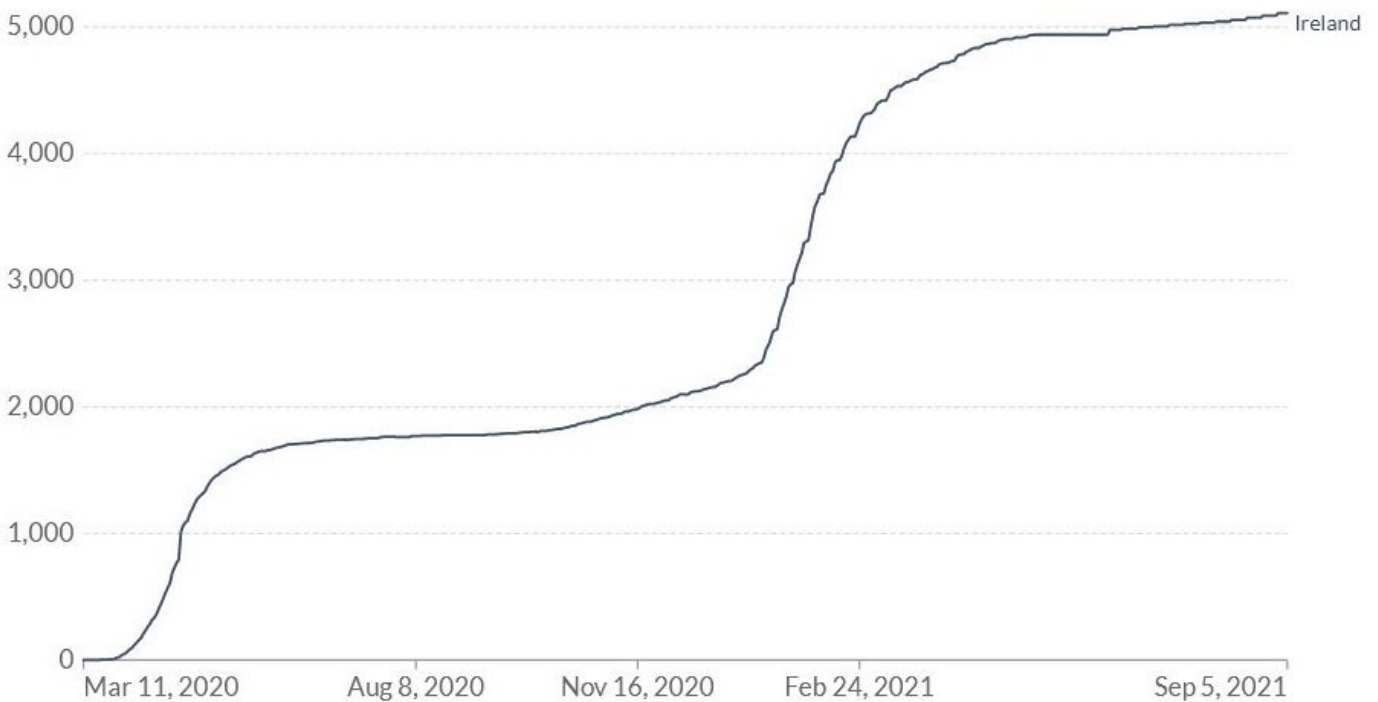
Cumulative confirmed COVID-19 deaths

Limited testing and challenges in the attribution of the cause of death means that the number of confirmed deaths may not be an accurate count of the true number of deaths from COVID-19.

LINEAR LOG

+ Add country

Ireland



Covid19 cases and deaths levelled off in the months prior to the introduction of covid19 vaccines in January 2021 in Ireland. Ireland experienced a big increase in covid19 deaths after covid19 vaccination from January 2021 onwards. Research from other highly covid vaccinated countries corroborate and confirm this. See charts above.

- **Ireland**

On September 2nd 2021 75% of the Irish population had received the covid19 vaccines (Source: <https://ourworldindata.org/covid-vaccinations?country=IRL>) which is one of the highest in the EU and on September 4th 2021 Ireland had the highest number of covid19 cases in the EU according to official reports and the press and media ; see news article below:

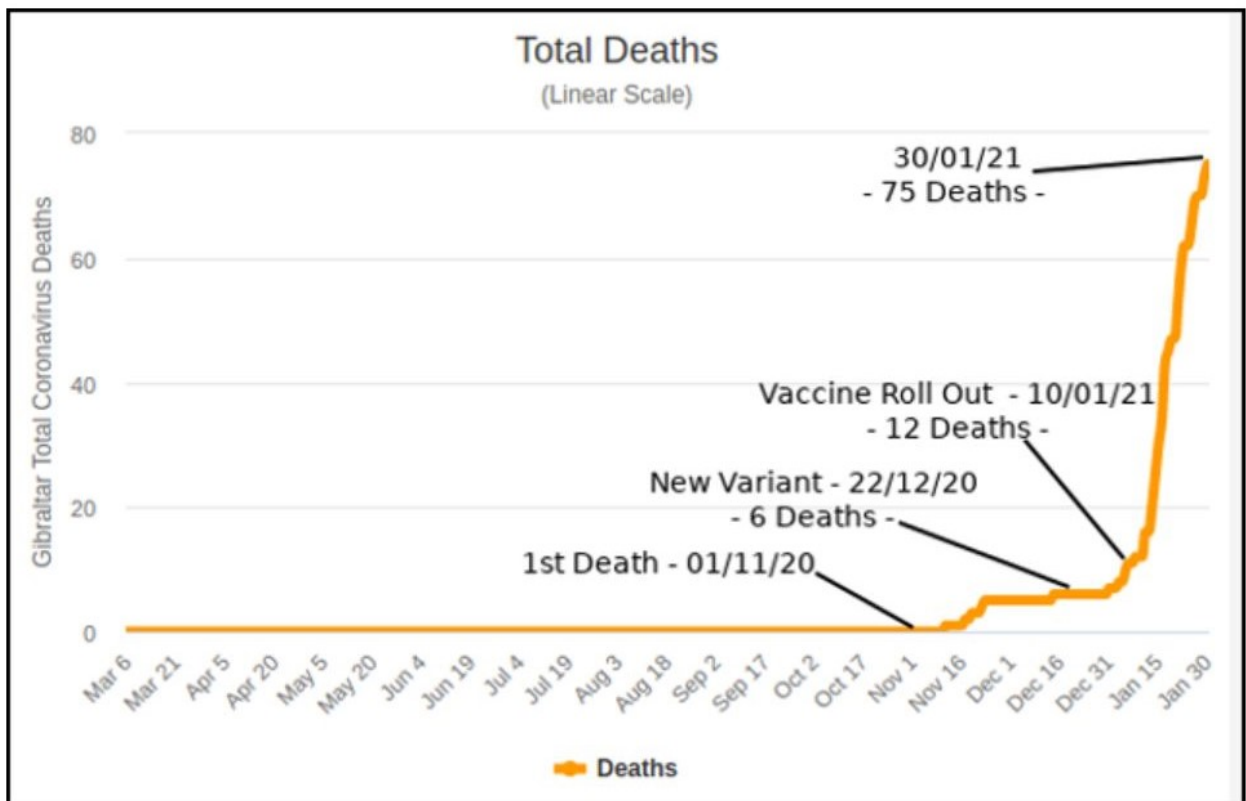
‘The highest incidence of Covid in EU puts Ireland in red zone’

Irish Independent September 4th 2021. <https://www.independent.ie/irish-news/the-highest-incidence-of-covid-in-eu-puts-ireland-in-red-zone-40816981.html>

The covid19 vaccines are not working and not effective.

- **Gibraltar**

Massive increase in covid19 deaths in Gibraltar immediately after covid vaccinations. See chart below.



Gibraltar Mortality Statistics from virusncov.com

- **Iceland**

Iceland one of the highly covid vaccinated countries in the world has been forced to stop their reliance on ineffective covid19 vaccines and rely on virus transmission similar to what happens in flu and cold seasons for hundreds of years. News report below:

Post-vaccination herd immunity in Iceland must be achieved by virus transmission –

Epidemiologist. Rio Times August 8 2021

<https://riotimesonline.com/brazil-news/covid-19/herd-immunity-must-be-achieved-by-transmission-of-the-virus-says-icelands-epidemiologist/>

and https://covidcalltohumanity.org/wp-content/uploads/2021/08/Visir_Herd-immunity-must-be-achieved-by-activating-the-virus.pdf

and <https://yandex.com/search/?text=herd+immunity++iceland>

- **Vietnam**

https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3897733

and <https://trialsitenews.com/transmission-of-sars-cov-2-delta-variant-among-vaccinated-healthcare-workers-vietnam/>

- **Gibraltar and Iceland and Singapore and Israel**

Gibraltar and Iceland and Israel are the most highly vaccinated countries in the world against covid19. Yet they are experiencing a massive increase in covid19 cases and variants.

See American news report below:

<https://www.infowars.com/posts/gibraltar-iceland-see-massive-covid-spike-after-over-90-of-population-vaccinated/>

- **New Study: Nursing Home Residents, Healthcare Workers Lose More Than 80% of Their COVID-19 Immunity Six Months After Pfizer Vaccine**

<https://www.newswise.com/coronavirus/new-study-nursing-home-residents-health-care-workers-lose-more-than-80-of-their-covid-19-immunity-six-months-after-pfizer-vaccine/>

- **Important new scientific study : Natural Immunity is far superior to the covid vaccines**

Covid Vaccinated people had a 13 fold increased risk of getting the delta variant according to this scientific paper :

Comparing SARS-CoV-2 natural immunity to vaccine-induced immunity: reinfections versus breakthrough infections. Gazit et al. August 2021

<https://www.medrxiv.org/content/10.1101/2021.08.24.21262415v1.full.pdf>

and news report at <https://www.bloomberg.com/news/articles/2021-08-27/previous-covid-prevents-delta-infection-better-than-pfizer-shot>

Covid: 54% of hospital patients with virus are fully vaccinated

Rising proportion of vaccinated people in hospital reflects greater numbers in population getting vaccines

about 8 hours ago

Paul Cullen Health Editor



About half of all Covid-19 patients in hospital and in intensive care are fully vaccinated against the disease

About half of all Covid-19 patients in hospital and in intensive care are fully vaccinated against the disease, new figures show.

One-sixth of deaths of people with the virus since April have been categorised as breakthrough infections of fully vaccinated patients, according to Health Service Executive data.

More than one-quarter of ICU admissions since July were also breakthrough infections of fully vaccinated people.



Covid-19: Lives Lost

The rich, full and cherished lives of the people behind the numbers



Coronavirus

Explore our guides to help you through the pandemic

Health & Family »



'There is so much bad behaviour everywhere': How to raise a good child in a terrible world



Punishable by fines and prison, suicide is still considered a crime in many countries



Respectful approach to sexual orientation and diversity vital



'When you're told you have cancer, it is like being hit over

Irish Times newspaper. September 9 2021

https://www.irishtimes.com/news/health/covid-54-of-hospital-patients-with-virus-are-fully-vaccinated-1.4670229?fbclid=IwAR0fJpgOQkTAghKgHdxq9jeSICQx5vREzMVmA9_jVkrNmX2CK3hp1kS6enM

See attachment of 9 pages titled

Covid-19 Vaccine Mandates Are Now Pointless:

Covid-19 vaccines do not keep people from catching the prevailing Delta variant and passing it to others

September 9, 2021

Nina Pierpont, MD, PhD

Available online at <https://theexpose.uk/wp-content/uploads/2021/09/Pierpont-Why-mandated-vaccines-are-pointless-final-1.pdf>

- Pfizer says immunity can drop to 83% within four months in people who got its COVID-19 shot, further bolstering the company case for a booster

Market Watch July 29 2021

<https://www.marketwatch.com/story/pfizer-says-immunity-drops-to-83-within-six-months-in-people-who-got-its-covid-19-shot-further-bolstering-the-company-case-for-a-booster-11627579817>

and

UK scientists back Covid boosters as study finds post-jab falls in antibodies

The Guardian newspaper 22 July 2021

<https://www.theguardian.com/world/2021/jul/22/uk-scientists-back-covid-boosters-as-study-finds-post-jab-falls-in-antibodies>

- **Britain**

The British PHE has reported that over 60% of the delta variant deaths in Britain were fully vaccinated people by August 2021.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1012644/Technical_Briefing_21.pdf

- **Britain**

Latest PHE Data Shows Vaccine Effectiveness Down to Just 15% in the Over-50s, 37% in the Under-50s.

The Daily Sceptic August 22 2021

<https://dailysceptic.org/2021/08/22/latest-phe-data-shows-vaccine-effectiveness-down-to-just-15-in-the-over-50s-37-in-the-under-50s-deaths-cut-by-80-in-over-50s-but-just-12-in-under-50s/>

Quotation from scientific studies

‘ Starting with the over-50s, for the period June 22nd to August 15th, PHE reports 29,282 Delta infections in the double vaccinated and 3,915 in the unvaccinated. PHE figures show that in this period the proportion of the over-50s double vaccinated was stable at 88% and the proportion unvaccinated was 10%. Calculating the vaccine effectiveness against Delta infection in the over-50s $(1 - (29,282/88%)/(3,915/10\%))$ gives a figure of just 15%, down from 17% using data from the briefing two weeks ago.’

- New Zealand is one of the most locked down and most covid19 vaccinated countries in the world but it could not stop the rise in covid19 variants. See news item below:

New Zealand Covid Response Minister Concedes Zero-Covid Policy No Longer Viable Following

Delta Outbreak. Daily Sceptic August 2021.

<https://dailysceptic.org/2021/08/22/new-zealand-covid-response-minister-concedes-zero-covid-policy-no-longer-viable-following-delta-outbreak/>

- **France's long-time vaccine policy chief: Covid policy is "completely stupid" and "unethical"**
Professor Christian Perronne is Head of the Medical Department at Raymond Poincaré Hospital in Garches, the teaching hospital for the University of Versailles-St Quentin near Paris. He was the University's Head of Department for Infectious and Tropical Diseases and was involved in advising the French government about vaccines and medicines. He provides a scientific and medical analysis of the covid19 vaccines and covid19 variants and passports and lockdowns in the interview below. This has great relevance for Ireland and other countries.
<https://www.ukcolumn.org/video/frances-long-time-vaccine-policy-chief-covid-policy-is-completely-stupid-and-unethical>
- WHO warns new mu coronavirus variant could be more vaccine resistant
<https://thehill.com/policy/healthcare/public-global-health/570353-who-warns-new-mu-variant-could-be-more-vaccine>
- The FDA and CDC in USA are divided over the booster shots and the ineffectiveness of the existing covid19 vaccines. September 2021.
<https://www.businessinsider.com/cdc-advisors-over-vaccination-concern-need-more-data-on-boosters-2021-9?r=US&IR=T>
- **New Booster Shots for covid19**
This is analysed and discussed in the next section

Experimental Covid19 vaccines killing people worldwide including in Ireland. Damage and Serious Illnesses and deaths caused by covid19 vaccines. And scientific and medical concerns that covid19 vaccine injuries and disabilities and deaths are being mislabeled as "covid19 variants".

- Germany halts use of AstraZeneca COVID-19 vaccine to those under 60.
UPI news. March 31 2021. https://www.upi.com/Top_News/World-News/2021/03/31/germany-Germany-halts-administering-AstraZeneca-coronavirus-vaccine-seniors/2401617176132/
and Irish Times - <https://www.irishtimes.com/news/world/europe/germany-halts-use-of-astrazeneca-vaccine-for-people-aged-under-60-1.4524020>

- Ireland removed AstraZeneca COVID-19 vaccine from the market on August 4th 2021 due to fears over its safety. Yet other covid19 vaccines with similar profiles and risks are still on the market in late August and September 2021.
- **COVID-19 RNA Based Vaccines and the Risk of Prion Disease**
(Prions implicated in neurological illnesses such as Parkinson’s disease and Mad Cow disease or Creutzfeldt-Jakob disease and Alzheimers and ALS and Motor Neuron Disease etc.)

ABSTRACT

Development of new vaccine technology has been plagued with problems in the past. The current RNA based SARS-CoV-2 vaccines were approved in the US using an emergency order without extensive long term safety testing. In this paper the Pfizer COVID-19 vaccine was evaluated for the potential to induce prion-based disease in vaccine recipients. The RNA sequence of the vaccine as well as the spike protein target interaction were analyzed for the potential to convert intracellular RNA binding proteins TAR DNA binding protein (TDP-43) and Fused in Sarcoma (FUS) into their pathologic prion conformations. The results indicate that the vaccine RNA has specific sequences that may induce TDP-43 and FUS to fold into their pathologic prion conformations. In the current analysis a total of sixteen UG tandem repeats ($\Psi G \Psi G$) were identified and additional UG (ΨG) rich sequences were identified. Two GG Ψ A sequences were found. Potential G Quadruplex sequences are possibly present but a more sophisticated computer program is needed to verify these. Furthermore, the spike protein, created by the translation of the vaccine RNA, binds angiotensin converting enzyme 2 (ACE2), a zinc containing enzyme. This interaction has the potential to increase intracellular zinc. Zinc ions have been shown to cause the transformation of TDP-43 to its pathologic prion configuration. The folding of TDP-43 and FUS into their pathologic prion conformations is known to cause ALS, front temporal lobar degeneration, Alzheimer’s disease and other neurological degenerative diseases. The enclosed finding as well as additional potential risks leads the author to believe that regulatory approval of the RNA based vaccines for SARS-CoV-2 was premature and that the vaccine may cause much more harm than benefit.

Source: <https://scivisionpub.com/pdfs/covid19-rna-based-vaccines-and-the-risk-of-prion-disease-1503.pdf>

- News reports show that Lisa Shaw the famous BBC presenter died from the covid19 vaccine. The cause of death has been established as “health complications caused by the Astrazeneca covid19 vaccine”. This involves the usual blood clots and haemorrhages and bleeds caused by covid19 vaccines which have killed thousands of healthy people around the world. News reports link and

her picture provided below.

<https://www.google.com/search?&q=lisa+shaw+vaccine>



- COVID-19 Vaccinations 98 Times More Deadly Than Flu Vaccines (According to VAERS Reports)

TrialSite News August 28 2021

<https://trialsitenews.com/covid-19-vaccinations-98-times-more-deadly-than-flu-vaccines-according-to-vaers-reports/>

- Scientific and medical news reports stating that covid19 vaccines for children are unnecessary and may be dangerous to them - <https://thehighwire.com/videos/episode-229-covid-kids-in-the-spotlight/>

- The Covid vaccine is not a panacea, contrary to media reports, says internist and cardiologist Dr. Peter McCullough. In the UK, for example, more than 65% of recent deaths from Corona were fully vaccinated. Dr McCullough pointed out that 50% of deaths occur within 48 hours of vaccination and 80% within a week. So there seems to be a direct link between the vaccines and the deaths, he said in conversation with One America News.

“There is great concern about the safety of vaccines at this time,” the professor stressed. The US Food and Drug Administration (FDA) has already included several warnings in the package insert of the Corona vaccines, including a warning about blood clots, myocarditis, paralysis and neurological disorders.

There is no reason to force a vaccination card on human beings, Dr McCullough said. “This is a form of coercion and goes against the principles of medical ethics.”

Source: OAN news in USA. August 26 2021.

<https://www.oann.com/doctor-warns-vaccines-have-troubling-side-effects-early-treatment-proving-far-more-effective/>

- One shocking example of the injuries and disabilities and deaths caused by the covid19 vaccines

Horrific Injuries caused by covid19 vaccines



Toxic epidermal necrolysis: 49-year-old New York woman develops life-threatening skin-rotting disorder one week after Pfizer mRNA injection

Medical and Scientific Report and Published paper on <https://www.cureus.com/articles/68051-toxic-epidermal-necrolysis-post-covid-19-vaccination---first-reported-case>

See www.data-analytica.org/page2.htm

Side Effects clots, haemorrhages, bleeds, strokes, heart attacks, death, miscarriages, heart inflammation, prion like diseases, thrombocytopenia, organ failure, antibody dependent enhancement, Anaphylaxis, Bells Palsy, Shaking, Encephalitis, Permanent Disability, Shingles, etc. etc..
AND Mislabelling them as new "covid19 variants"

Published Scientific paper about this at <https://www.cureus.com/articles/68051-toxic-epidermal-necrolysis-post-covid-19-vaccination---first-reported-case>

- **Britain**

'Funeral Director, I'm looking after the terrible mistake, most deaths are vaccinated.'

<https://www.bitchute.com/video/HnhUDOb6b7IB/>

- **Freedom of Information Requests**

Freedom of Information Requests are being made to the HSE and Irish hospitals to establish (a) total numbers of covid19 vaccinated people in hospitals suffering from new illnesses and disabilities from April to September 2021 and if these new illnesses and disabilities were caused by the covid19 vaccines and (b) the PCR cycle counts being used to establish new covid19 cases and variant cases and (c) the numbers of vaccinated people who have died and autopsy reports to establish if the covid19 vaccines including spike proteins or graphene or contaminants or ADE or vaccine induced immune dysfunctions killed these people.

We would encourage the gardai and other authorities to do the same.

- **Covid19 Vaccine Deaths and Injuries in Ireland**

August 31 2021

A total of 86 deaths and 14,700 injuries and disabilities have been reported to the Health Products Regulatory Authority (HPRA) up to August 31, according to its latest report here although it is to be noted these figures at best only capture a small fraction of the vaccine deaths and injuries.

OVERVIEW OF SUSPECTED SIDE EFFECT REPORTS

Up to **03 August**, the HPRA received 13,529 reports describing suspected side effects^{2,3} in association with COVID-19 vaccines, as follows:

mRNA vaccines (Comirnaty® and Spikevax® [previously Moderna])	7589
Adenoviral vector vaccines (Vaxzevria® and COVID-19 Vaccine Janssen®)	5850
Brand unknown/not specified	100

Up to **31 August**, the HPRA received 14,844 reports describing suspected side effects^{2,3} in association with COVID-19 vaccines, as follows:

mRNA vaccines (Comirnaty® and Spikevax® [previously Moderna])	8686
Adenoviral vector vaccines (Vaxzevria® and COVID-19 Vaccine Janssen®)	6059
Brand unknown/not specified	99

New reports of Adverse Events (Ireland) in 28 day period	1305
Adverse Event reports for mRNA vaccines in 28 day period (Ireland)	1097

A Harvard Medical School Study in 2010 shows that the real figures may be 10 times higher.

' Adverse events from drugs and vaccines are common, but underreported. Although 25% of ambulatory patients experience an adverse drug event, less than 0.3% of all adverse drug events and 1 - 13% of serious events are reported to the Food and Drug Administration (FDA). Likewise, fewer than 1% of vaccine adverse events are reported. Low reporting rates preclude or slow the identification of "problem" drugs and vaccines that endanger public health. New surveillance methods for drug and vaccine adverse effects are needed.'

Harvard Medical School study 2010

Source: Electronic Support for Public Health–Vaccine Adverse Event Reporting System (ESP:VAERS) and <https://digital.ahrq.gov/ahrq-funded-projects/electronic-support-public-health-vaccine-adverse-event-reporting-system/final-report>

- Peter Doshi an editor of the British Medical Journal has strongly criticised and condemned the FDA's approval of the Pfizer covid19 vaccine. There is not enough evidence of its effectiveness against covid19 and it's variants and its safety. His paper is below.

Does the FDA think these data justify the first full approval of a covid-19 vaccine?

August 23, 2021

<https://blogs.bmj.com/bmj/2021/08/23/does-the-fda-think-these-data-justify-the-first-full-approval-of-a-covid-19-vaccine/>

- **Risk factors for dying and developing illnesses and disabilities from covid19 vaccines**

Report of scientific findings here at <https://www.ukcolumn.org/article/the-rationale-for-the-continued-vaccine-roll-out-is-not-evident>

- Japan halted Moderna covid19 vaccines after finding contaminants in them in August 2021

<https://www.thetimes.co.uk/article/7d44cf44-08e8-11ec-922b-9339a9da8961>

The Times August 30 2021

- VACCINE INGREDIENTS REVEALED by scientists. These show many undeclared ingredients and contaminants which are toxic and can cause illnesses.

<https://www.notonthebeeb.co.uk/post/what-is-really-in-the-c19-vaccines>

and

Phase Contrast Microscopy, Transmission and Scanning Electron Microscopy and Energy-Dispersive X-ray Spectroscopy Reveal the Ingredients in the CoV-19 Vaccines

by Dr. Robert O Young. August 20 2021

<https://www.drrobertyoung.com/post/transmission-electron-microscopy-reveals-graphene-oxide-in-cov-19-vaccines>

shows toxic substances which may be dangerous to humans in the covid19 vaccines

- Dr. Luke O'Neill appeared on RTE and many other press and media stations in 2020 and 2021 promoting covid19 vaccines. He stated in a video interview in 2021 the following about the experimental covid19 vaccines - "WELL WE HAVE TO GET IT INTO PEOPLE FIRST AND SEE WHAT HAPPENS".

This is an outrageous statement which has placed many lives at risk of injuries and illnesses and disabilities and death in Ireland. He got millions of euros of investment monies and grants from big vaccine companies and may have serious conflicts of interest. All dissenting views and medical opinion and debate was vigorously censored by RTE and other media stations in Ireland.

- Flu vaccine ~ 900M doses and 1,951 deaths. Covid19 vaccine ~ 200M doses and 14,506 deaths and rising by September 2021. That makes the covid19 vaccine ~ 30x more lethal than the flu vaccine, with the IFRs being fairly comparable?

See attached chart showing deaths for individual vaccines for last 30 years. Also viewable a <https://www.data-analytica.org/poster3.jpg>

And see new VAERS figures for September 2021 in USA and EU figures for September 2021 on <https://www.data-analytica.org/page2.htm>

Covid19 Vaccines are breeding highly infectious new variants of covid19

Dr. Geert Van Den Bossche a highly qualified and experienced scientist from Belgium who worked many years in vaccine development and in Big Pharma companies and at GAVI and the Gates Foundation has warned that the covid19 vaccines are creating highly infectious variants of covid19. He is being proven accurate and correct in 2021. His web site contains scientific evidence and facts at <https://www.geertvandenbossche.org/>

The creation of new variants by the covid vaccines and injuries and deaths from the covid19 vaccines are being tracked on the web site www.data-analytica.org/page2.htm

- **Covid19 vaccines causing Antibody Dependent Enhancement**

Many top scientists and medical doctors worldwide believe that the covid19 variants may be an example of Antibody Dependent Enhancement caused by the covid19 vaccines. This is serious and has led to a high percentage of deaths in animal trials in the past. Antibody Dependent Enhancement is well documented in the scientific literature and is well known to the medical community and the scientific community. See published papers at

Infection-enhancing anti-SARS-CoV-2 antibodies recognize both the original Wuhan/D614G strain and Delta variants. A potential risk for mass vaccination?

Yahi et al. August 2021 [https://www.journalofinfection.com/article/S0163-4453\(21\)00392-3/fulltext?fbclid=IwAR1DXcqV4279Jb3tEGxpdP0sQrQEfKKNPFQ3oWskJHUIds8JvM-ZjAWU8ZQ](https://www.journalofinfection.com/article/S0163-4453(21)00392-3/fulltext?fbclid=IwAR1DXcqV4279Jb3tEGxpdP0sQrQEfKKNPFQ3oWskJHUIds8JvM-ZjAWU8ZQ)

https://scholar.google.com/scholar?hl=en&as_sdt=0%2C5&as_vis=1&q=antibody+dependent+enhancement+covid&btnG

https://scholar.google.com/scholar?hl=en&as_sdt=0%2C5&as_vis=1&q=antibody+dependent+enhancement+sars&btnG

<https://www.nature.com/articles/s41564-020-00789-5>

<https://pubmed.ncbi.nlm.nih.gov/22536382/>

NPHE and the HSE and the medical council in Ireland knew about these dangers in relation to the covid19 vaccines in 2021. Providing these vaccines to people without informing them of these risks involved including serious injuries and death breaches the law and can be criminally prosecuted in courts. Deaths in this context may constitute the crimes of manslaughter or murder. It is similar to administering poison to people for profit. And massive profits have been made and are being made. Antibody Dependent Enhancement and Injuries and Deaths from the covid19 vaccines are being tracked on the web site www.data-analytica.org/page2.htm

- **New Booster shots**

The drive for new Booster shots for covid19 is a clear indication that the covid19 vaccines are not working and that the covid19 vaccines are breeding highly infectious new variants of covid19 and also causing Antibody Dependent Enhancement. The vaccines are also causing new illnesses and disabilities and the defective PCR tests which continue to use high cycle counts are still mislabelling these other illnesses as covid19 or its new variants. More and more useless and futile booster shots will be required to deal with this ridiculous situation. In September 2021 the WHO publicly announced that it will not support the booster shots.

- **Long List of people killed by covid19 vaccines worldwide including in Ireland and this list is growing. The killing is being allowed to continue.**

The web site www.data-analytica.org/page2.htm is tracking and tracing these killings and deaths worldwide.

- **False statements by politicians and some governments including the Irish government that the vaccines are safe and effective**

The scientific and medical evidence worldwide is clearly showing that the covid19 vaccines are not safe and have caused at least 3.8 million injuries and disabilities and over 100,000 deaths worldwide and this is rising rapidly. Some of this is reported on www.data-analytica.org/page2.htm . And the evidence from several highly vaccinated countries now show that the covid19 vaccines are not effective.

If these covid19 vaccines are so safe then why are the vaccine companies which make these vaccines protected from being sued in courts in Ireland and worldwide ? why are taxpayers being forced to pay compensation for these vaccine injuries and disabilities and deaths ?

BREACH OF EMA REGULATIONS AND EU REGULATIONS AND IRISH LAWS REGARDING LISTING OF ALL SIDE EFFECTS OF COVID19 VACCINES AND EXPLAINING THESE TO ALL PERSONS BEFORE THEY RECEIVE VACCINES. INFORMED CONSENT NOT GIVEN IN IRELAND.

Many of these side effects which include injuries and illnesses and disabilities and deaths are listed on www.data-analytica.org/page2.htm . If a person carries out medical or surgical procedures without consent, they can be charged with the crime of assault.

Breaches of:

EU PARLIAMENTARY ASSEMBLY RESOLUTION 2361

EU PARLIAMENTARY ASSEMBLY RESOLUTION 2071

[EU Directive 2001/82/EC](#), The amendments are incorporated into the [consolidated text of Directive 2001/82/EC](#);

[EU Directive 2001/83/EC](#) on the Community code relating to [medicinal products](#) for human use, as amended. The amendments are incorporated into the [consolidated text of Directive 2001/83/EC](#);

[EU Regulation \(EC\) No 726/2004](#), laying down Community procedures for the authorisation and supervision of [medicinal products](#) for human and veterinary use and establishing a European Medicines Agency, as amended. The amendments are incorporated into the [consolidated text of Regulation \(EC\) No 726/2004](#).

CONSUMER PROTECTION ACTS 2007 AND 2014

LAWS REGARDING SERIOUS ASSAULT AND GREVIOUS BODILY HARM

RECKLESS ENDANGERMENT OF CHILDREN FROM COVID19 VACCINES

Children have a zero or almost zero chance of dying from covid19. The most up to date official CDC data and epidemiological findings around the world show this ; see charts below

COVID19 SURVIVAL RATES	
00-14 YEARS	99.9998%
15-44 YEARS	99.9931%
45-64 YEARS	99.9294%
65-85 YEARS	99.6297%
> 85 YEARS	98.2499%

Jan, 2021

Sources: CDC in USA, January 27 2021.

https://www.cdc.gov/nchs/nvss/vsrr/covid_weekly/index.htm#SexAndAge

And <https://childrenshealthdefense.org/covid-vaccine-secrets/resources>

Safe and Effective Medicines - Ivermectin, Hydroxychloroquine, AZT, and Zinc, Budenoside, Dexamethasone, Plasma Antibody Treatment, and Vitamin D are 90% - 100% effective against covid19

Infection fatality rate of COVID-19 in community-dwelling populations with emphasis on the elderly: An overview.

Ioannidis and Axfors. July 2021

<https://www.medrxiv.org/content/10.1101/2021.07.08.21260210v1.full-text>

Median Infection Fatality Rate (IFR)

Age	Infection Fatality Rate
0-19	0.0027%
20-29	0.014%
30-39	0.031%
40-49	0.082%
50-59	0.27%
60-69	0.59%
70-100	2.4%

September 2020 statistics from CDC below

CDC COVID-19 Survival Rates

- Age 0-19 — 99.997%
- Age 20-49 — 99.98%
- Age 50-69 — 99.5%
- Age 70+ — 94.6%

Dangers to children and teenagers and young adults from **covid19 vaccines**. The following chart from a CDC meeting in August 2021 outlines some of the dangers. This is serious damage to the heart and an onset of heart diseases. This represents reckless endangerment of children and minors.

Expected vs. Observed reports after mRNA vaccination dose 2, 7-day risk period (N=765)*

Age group, years	Females		Males	
	Cases of myopericarditis, expected	Cases of myopericarditis, observed	Cases of myopericarditis, expected	Cases of myopericarditis, observed
12–15*	0–3	12	1–5	117
16–17*	0–2	15	0–3	121
18–24*	1–8	24	1–11	213
25–29*	1–6	16	1–9	56
30–39	2–21	10	2–19	72
40–49	2–22	22	2–19	45
50–64	4–40	15	4–35	13
65+	4–44	6	4–36	8



* As of Aug 18, 2021; assumes a 7-day observation window, with 765 of 897 reports after mRNA vaccines occurring during Days 0–6 after vaccination; counts among 12–29 years from reports meeting case definition for myopericarditis; expected estimates for females 12–29 years adjusted to reflect reduced incidence in this age group

7

- Schools Aren't COVID Infection Hubs, Says Public Health Boss
BBC September 2021 <https://www.bbc.com/news/uk-58418767>
- The following web sites contain details of thousands of cases of injuries and illnesses and disabilities and deaths caused to children by covid19 vaccines.
www.data-analytica.org/page2.htm#child
and
<https://www.openvaers.com/covid-data>
- The Defender web site is focused on child protection and provides regular scientific and medical updates about the dangers posed to children from covid19 vaccines. There is vast and growing evidence of these dangers and risks.
<https://childrenshealthdefense.org/covid-news-watch/>
https://childrenshealthdefense.org/defender_category/covid
- **Covid19 Vaccines for Children condemned in Britain**
In September 2021 the JCVI in Britain which provides expert scientific advice to the government about vaccines ruled against giving covid19 vaccines to children as the risks far outweigh any benefit. But the government has ignored this scientific advice and in pushing through with covid19 vaccines for children. The political desire to sell and profit from covid19 vaccines outweighs the dangers to the

health and the lives of children. Another example of science being ignored for political and profit reasons.

See news report - <https://www.telegraph.co.uk/politics/2021/09/03/child-covid-vaccines-rollout-pushed-ministers/>

and Member of the JCVI Professor Adam Finn giving an interview to Sky news -

<https://twitter.com/SkyNews/status/1434133658865180676?s=20>

Scientists explain why the covid19 vaccines are not working and why there is a constant need for ineffective boosters

Israel the most covid19 vaccinated country in the world has found that the first 2 vaccine dosages and the booster were ineffective against covid19 and it's variants. The vaccine passport for the previous 2 vaccine dosages were declared out of date and invalid in September 2021. In September 2021 Israel announced a second booster shot was necessary which means that a total of 4 vaccines per person are required in Israel. This will continue with another booster and another booster and so on and on. People will be required to get 5, 6, 7 and 8 or more ineffective vaccines for covid19 , greatly increasing the profits of those people pushing these ineffective vaccines.

Dr. Richard Fleming a Cardiologist and Scientist and Lawyer and Medical Patents holder based in the USA explains very clearly the science behind the failure of the covid19 vaccines and the boosters and the concept of "Vaccine Chasing". He examines the evidence which the covid19 vaccine manufacturers submitted to the FDA in the USA and the EMA in the EU. The vaccine manufacturers themselves have admitted that the vaccines are ineffective against covid19 and it's variants and the Absolute Risk Reduction (ARR) is approximately 1%. This is very small and insignificant and offers no significant protection. He also provides evidence proving that the covid19 vaccines are creating the new variants through Selection Pressures and ADE which have been known to science for over 40 years. The Marek Chickens study being a landmark scientific case. As covid19 vaccines create more covid19 variants there will be an endless need for more and more boosters. The information provided by Dr. Richard Fleming has great relevance to Ireland and to many other countries. He has prepared his data and scientific facts in a Report for some court cases in the USA and the international courts. You can read this Report at <https://www.flemingmethod.com/vaccine-chasing> and <https://www.flemingmethod.com/select-videos>

Ireland is mentioned and analysed in part of this report. This vaccine chasing and the enforcement of lockdowns are counter-productive and unnecessary and unjustified in scientific terms and legal terms. The evidence and facts show that that government advisors and some state employees and gullible and naive politicians are refusing to follow the science and are engaging in vaccine chasing for massive profit. These are criminal acts which have led to significant losses in financial and economic terms and in

human lives in many countries including Ireland. Dr. Richard Fleming has provided several interviews to news and media stations where he states these facts and the evidence ; see link below

<https://freeworldnews.tv/watch?id=613a81482026d11782e4d343>

and <https://yandex.com/search/?text=dr.+richard+fleming&lr=10426&within=2>

His new book 'Is Covid19 a Bioweapon ?' is of great strategic importance to Ireland and the Irish police and military authorities and those in other countries. It's available at

<https://www.simonandschuster.com/books/Is-COVID-19-a-Bioweapon/Richard-M-Fleming/Children-s-Health-Defense/9781510770195>

Dr. Richard Fleming will be subpoenaed into Irish courts to testify.

Re-infection with covid19 and The Importance Natural Immunity and Its Superiority over covid19 vaccines. No need for mandatory vaccines and vaccine passports.

- **Important new scientific study**

Covid Vaccinated people had a 13 fold increased risk of getting the delta variant according to this scientific paper :

Comparing SARS-CoV-2 natural immunity to vaccine-induced immunity: reinfections versus breakthrough infections. Gazit et al. August 2021

<https://www.medrxiv.org/content/10.1101/2021.08.24.21262415v1.full.pdf>

and news report at <https://www.bloomberg.com/news/articles/2021-08-27/previous-covid-prevents-delta-infection-better-than-pfizer-shot>

- Longitudinal analysis shows durable and broad immune memory after SARS-CoV-2 infection with persisting antibody responses and memory B and T cells

July 2021

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8253687/>

- A massive scientific study Finds COVID-19 Reinfection Rate Less Than 1% for Those with Severe Illness

<https://www.muhealth.org/for-media/news/study-finds-covid-19-reinfection-rate-less-1-those-severe-illness>

and <https://medicine.missouri.edu/news/study-finds-covid-19-reinfection-rate-less-1-those-severe-illness>

- UltraPotent antibodies against diverse and highly transmissible SARS-CoV-2 variants

<https://pubmed.ncbi.nlm.nih.gov/34210892/> and

<https://science.sciencemag.org/content/373/6556/eabh1766>

- Lasting immunity found after recovery from COVID-19

<https://www.nih.gov/news-events/nih-research-matters/lasting-immunity-found-after-recovery-covid-19>

Public Statement by Medical Doctors and Scientists Group regarding covid19 vaccines - Vital Evidence for the courts

Public statement issued to the general public in all countries including Ireland by [Doctors for Covid Ethics](#).

Web site at <https://doctors4covidethics.org/>

COVID Vaccines: Necessity, Efficacy and Safety

By [Doctors for Covid Ethics](#)

Abstract: COVID-19 vaccine manufacturers have been exempted from legal liability for vaccine-induced harm. It is therefore in the interests of all those authorising, enforcing and administering COVID-19 vaccinations to understand the evidence regarding the risks and benefits of these vaccines, since liability for harm will fall on them.

In short, the available evidence and science indicate that COVID-19 vaccines are unnecessary, ineffective and unsafe.

- **Necessity:** immunocompetent individuals are protected against SARS-CoV-2 by cellular immunity. Vaccinating low-risk groups is therefore unnecessary. For immunocompromised individuals who do fall ill with COVID-19 there is a range of medical treatments that have been proven safe and effective. Vaccinating the vulnerable is therefore equally unnecessary. Both immunocompetent and vulnerable groups are better protected against variants of SARS-CoV-2 by naturally acquired immunity and by medication than by vaccination.^{[1](#)}
- **Efficacy:** Covid-19 vaccines lack a viable mechanism of action against SARS-CoV-2 infection of the airways. Induction of antibodies cannot prevent infection by an agent such as SARS-CoV-2 that invades through the respiratory tract. Moreover, none of the vaccine trials have provided any evidence that vaccination prevents transmission of the infection by vaccinated individuals; urging vaccination to “protect others” therefore has no basis in fact.
- **Safety:** The vaccines are dangerous to both healthy individuals and those with pre-existing chronic disease, for reasons such as the following: risk of lethal and non-lethal disruptions of blood clotting including bleeding disorders, thrombosis in the brain, stroke and heart attack; autoimmune and allergic reactions; antibody-dependent enhancement of disease; and vaccine impurities due to rushed manufacturing and unregulated production standards.

The *risk-benefit calculus* is therefore clear: the experimental vaccines are needless, ineffective and dangerous. Actors authorising, coercing or administering experimental COVID-19 vaccination are exposing populations and patients to serious, unnecessary, and unjustified medical risks.

1. The vaccines are unnecessary

1. Multiple lines of research indicate that immunocompetent people display “**robust**” and **lasting** cellular (T cell) immunity to SARS-CoV viruses [1], including SARS-CoV-2 and its variants [2]. T cell protection stems not only from exposure to SARS-CoV-2 itself, but from cross-reactive immunity following previous exposure to common cold coronaviruses [1,3–10]. Such immunity was detectable after infections up to 17 years prior [1,3]. Therefore, *immunocompetent people do not need vaccination against SARS-Cov-2.*
2. **Natural T-Cell immunity provides stronger and more comprehensive protection** against all SARS-CoV-2 strains than vaccines, because naturally primed immunity recognises multiple virus epitopes and costimulatory signals, not merely a single (spike) protein. Thus, *immunocompetent people are better protected against SARS-CoV-2 and any variants that may arise by their own immunity than by the current crop of vaccines.*
3. The vaccines have been touted as a means to prevent asymptomatic infection [11], and by extension “asymptomatic transmission.” However, “**asymptomatic transmission**” is an **artefact** of invalid and unreliable PCR test procedures and interpretations, leading to high false-positive rates [12–15]. Evidence indicates that PCR-positive, asymptomatic people are healthy false-positives, not carriers. A comprehensive study of **9,899,828** people in China found that asymptomatic individuals testing positive for COVID-19 never infected others [16]. In contrast, the papers cited by the Centre for Disease Control [17,18] to justify claims of asymptomatic transmission are based on hypothetical models, not empirical studies; they present assumptions and estimates rather than evidence. *Preventing asymptomatic infection is not a viable rationale for promoting vaccination of the general population.*
4. In most countries, **most people will now have immunity to SARS-CoV-2** [19]. Depending on their degree of previously acquired cross-immunity, they will have had no symptoms, mild and uncharacteristic symptoms, or more severe symptoms, possibly including anosmia (loss of sense of smell) or other somewhat characteristic signs of the COVID-19 disease. Regardless of disease severity, they will now have sufficient immunity to be protected from severe disease in the event of renewed exposure. *This majority of the population will not benefit at all from being vaccinated.*
5. **Population survival of COVID-19 exceeds 99.8%** globally [20–22]. In countries that have been intensely infected over several months, less than 0.2% of the population have died and had their deaths classified as ‘with covid19’. It is typically a mild to moderately severe illness. Therefore, *the overwhelming majority of people are not at risk from COVID-19 and do not require vaccination for their own protection.*

6. In those susceptible to severe infection, **Covid-19 is a treatable illness**. A convergence of evidence indicates that early treatment with existing drugs reduces hospitalisation and mortality by ~85% and 75%, respectively [23–27]. These drugs include many tried and true antiinflammatory, antiviral, and anticoagulant medications, as well as monoclonal antibodies, zinc, and vitamins C and D. Industry and government decisions to sideline such proven treatments through selective research support [24], regulatory bias, and even outright sanctions against doctors daring to use such treatments on their own initiative have been out of step with existing laws, standard medical practice, and research; the legal requirement to consider real world evidence has fallen by the wayside [28]. The systematic denial and denigration of these effective therapies has underpinned the spurious justification for the emergency use authorisation of the vaccines, which requires that “no standard acceptable treatment is available” [29]. Plainly stated, *vaccines are not necessary to prevent severe disease*.

2. The vaccines lack efficacy

1. At a mechanistic level, the concept of immunity to COVID-19 via antibody induction, as per **COVID-19 vaccination, is medical nonsense**. Airborne viruses such as SARS-CoV-2 enter the body via the airways and lungs, where antibody concentrations are too low to prevent infection. Vaccine-induced antibodies primarily circulate in the bloodstream, while concentrations on the mucous membranes of lungs and airways is low. Given that COVID-19 primarily spreads and causes disease by infecting these mucous membranes, vaccines miss the immunological mark. The documents submitted by the vaccine manufacturers to the various regulatory bodies contain no evidence that vaccination prevents airway infection, which would be crucial for breaking the chain of transmission. Thus, *vaccines are immunologically inappropriate for COVID-19*.
2. **Medium to long-term vaccine efficacy is unknown**. Phase 3, medium term, 24-month trials will not be complete until 2023: *There is no medium-term or long term longitudinal data regarding vaccine efficacy*.
3. **Short term data has not established prevention of severe disease**. The European Medicines Agency has noted of the Comirnaty (Pfizer mRNA) vaccine that severe COVID-19 cases “were rare in the study, and statistically certain conclusion cannot be drawn” from it [30]. Similarly, the Pfizer document submitted to the FDA [31] concludes that efficacy against mortality could not be demonstrated. Thus, *the vaccines have not been shown to prevent death or severe disease even in the short term*.
4. The **correlates of protection against COVID-19 are unknown**. Researchers have not yet established how to measure protection against Covid-19. As a result, efficacy studies are stabbing around in the dark. After completion of Phase 1 and 2 studies, for instance, a paper in the journal *Vaccine* noted that “without understanding the correlates of protection, it is impossible to currently address questions regarding vaccine-associated protection, risk of COVID-19 reinfection,

herd immunity, and the possibility of elimination of SARS-CoV-2 from the human population” [32]. Thus, *Vaccine efficacy cannot be evaluated because we have not yet established how to measure it.*

3. The vaccines are dangerous

1. Just as smoking could be and was predicted to cause lung cancer based on first principles, **all gene-based vaccines can be expected to cause blood clotting and bleeding disorders** [33], based on their molecular mechanisms of action. Consistent with this, diseases of this kind have been observed across age groups, leading to temporary vaccine suspensions around the world: *The vaccines are not safe.*
2. Contrary to claims that blood disorders post-vaccination are “rare”, many **common vaccine side effects** (headaches, nausea, vomiting and haematoma-like “rashes” over the body) **may indicate thrombosis and other severe abnormalities.** Moreover, vaccine-induced diffuse micro-thromboses in the lungs can mimic pneumonia and may be misdiagnosed as COVID-19. Clotting events currently receiving media attention are likely just the “tip of a huge iceberg” [34]: *The vaccines are not safe.*
3. Due to immunological priming, **risks of clotting, bleeding and other adverse events can be expected to increase with each re-vaccination** and each intervening coronavirus exposure. Over time, whether months or years [35], this renders both vaccination and coronaviruses dangerous to young and healthy age groups, for whom without vaccination COVID-19 poses no substantive risk.

Since vaccine roll-out, COVID-19 incidence has risen in numerous areas with high vaccination rates [36–38]. Furthermore, multiple series of COVID-19 fatalities have occurred shortly after the onset vaccinations in senior homes [39,40]. These cases may have been due not only to antibody-dependent enhancement but also to a general immunosuppressive effect of the vaccines, which is suggested by the increased occurrence of Herpes zoster in certain patients [41]. Immunosuppression may have caused a previously asymptomatic infection to become clinically manifest. Regardless of the exact mechanism responsible for these reported deaths, we must expect that the *vaccines will increase rather than decrease lethality of COVID-19—the vaccines are not safe.*

4. **The vaccines are experimental by definition.** They will remain in Phase 3 trials until 2023. Recipients are human subjects entitled to free informed consent under Nuremberg and other protections, including the Parliamentary Assembly of the Council of Europe’s resolution 2361 [42] and the FDA’s terms of emergency use authorisation [29]. With respect to safety data from Phase 1 and 2 trials, in spite of initially large sample sizes, the journal *Vaccine* reports that “the vaccination strategy chosen for further development may have only been given to as few as 12 participants” [32]. With such extremely small sample sizes, the journal notes that “larger Phase 3

studies conducted over longer periods of time will be necessary” to establish safety. The risks that remain to be evaluated in Phase 3 trials into 2023, with entire populations as subjects, include not only thrombosis and bleeding abnormalities, but other autoimmune responses, allergic reactions, unknown tropisms (tissue destinations) of lipid nanoparticles [35], antibody-dependent enhancement [43–46] and the impact of rushed, questionably executed, poorly regulated [47] and reportedly inconsistent manufacturing methods, conferring risks of potentially harmful impurities such as uncontrolled DNA residues [48]. *The vaccines are not safe, either for recipients or for those who use them or authorise their use.*

5. Initial experience might suggest that the adenovirus-derived vaccines (AstraZeneca/Johnson & Johnson) cause graver adverse effects than the mRNA (Pfizer/Moderna) vaccines. However, upon repeated injection, the former will soon induce antibodies against the proteins of the adenovirus vector. These antibodies will then neutralize most of the vaccine virus particles and cause their disposal before they can infect any cells, thereby limiting the intensity of tissue damage.

In contrast, in the mRNA vaccines, there is no protein antigen for the antibodies to recognize. Thus, regardless of the existing degree of immunity, the vaccine mRNA is going to reach its target—the body cells. These will then express the spike protein and subsequently suffer the full onslaught of the immune system. **With the mRNA vaccines, the risk of severe adverse events is virtually guaranteed to increase with every successive injection.** In the long term, they are therefore even more dangerous than the vector vaccines. Their apparent preferment over the latter is concerning in the highest degree; *these vaccines are not safe.*

4. Ethics and legal points to consider

1. Conflicts of interest abound in the scientific literature and within organisations that recommend and promote vaccines, while demonising alternate strategies (reliance on natural immunity and early treatment). Authorities, doctors and medical personnel need to protect themselves by evaluating the sources of their information for conflicts of interest extremely closely.
2. Authorities, doctors and medical personnel need to be similarly careful not to ignore the credible and independent literature on vaccine necessity, safety and efficacy, given the foreseeable mass deaths and harms that must be expected unless the vaccination campaign is stopped.
3. Vaccine manufacturers have exempted themselves from legal liability for adverse events for a reason. When vaccine deaths and harms occur, liability will fall to those responsible for the vaccines’ authorisation, administration and/or coercion via vaccine passports, none of which can be justified on a sober, evidence-based risk-benefit analysis.
4. All political, regulatory and medical actors involved in COVID-19 vaccination should familiarise themselves with the Nuremberg code and other legal provisions in order to protect themselves.

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These medical doctors and scientists can be subpoenaed to testify in Irish courts.

The Science of covid19 and covid19 vaccines

- *Paul Elias Alexander, PhD, has expertise in the teaching of epidemiology (clinical epidemiology), evidence-based medicine, and research methodology. He is a former professor at McMaster University in evidence-based medicine; former COVID pandemic advisor to WHO-PAHO in Washington, D.C. (2020); and a former senior advisor on COVID pandemic policy at the U.S. government's Department of Health and Human Services (HHS) in Washington, D.C. He did graduate studies at the University of Oxford in England, the University of Toronto in Canada, McMaster University in Canada, and York University in Canada. He is currently an independent academic scientist and consultant.*

Excerpt from Lifesite News

The COVID-19 injection is not a vaccine. Here's why

These following criteria must be met for something to be called a vaccine. The coronavirus shots don't meet any of them.

by *Paul Elias Alexander, PhD*

– For something to be a vaccine, several criteria must be met:

- the injection must provide the recipient antibody immunity to a pathogen (virus or bacterium)
- the antibodies produced post-injection must be shown to confer protection from that virus or bacterium
- the injection must demonstrate it reduces hospitalizations or deaths from the pathogen
- the injection must demonstrate it reduces severe symptoms of the pathogen
- the injection must demonstrate it stops the recipient from carrying the pathogen
- the injection must show it stops transmission of the pathogen from the injection recipient to others

Let us examine these criteria further to discuss if they have been met in the case of the coronavirus “vaccine”:

- We have found now that the injection does not confer antibody immunity to the COVID-19 virus (SARS-CoV-2); it promotes antibodies to the “synthetic spike protein” that your cells have built. That spike protein is not specific to the SARS-CoV-2 virus.
- The antibodies produced have to give you protection from the pathogen (SARS-CoV-2 virus); this has not been shown in any study to do this. The vaccine developers have stated openly that they do not know if the injection will give protection.
- The injection was not studied to show that it reduces hospitalizations or deaths; the studies conducted did not assess this.
- The injection was not studied to show that it reduces severe symptoms.
- The injection was not studied to show that it stops recipients from carrying the pathogen.
- The injection was not studied to show that it stops transmission from one person to others.

The conclusion, therefore, is *no*. This injection for COVID-19 is *not* a vaccine; it is best described as a gene delivery platform.

The studies conducted by the injection developers were not set up to show any of the above six mentioned criterion; these injections for [COVID-19](#) do not prevent transmission and were not designed to do this. We were told that the injection developers are measuring to see if the injection “[attenuates](#)” symptoms.

We even have clear evidence from [the U.S. Centers for Disease Control and Prevention \(CDC\)](#), which reported on an outbreak of SARS-CoV-2 infections, including COVID-19 vaccine breakthrough infections, associated with large public gatherings in Barnstable County, Massachusetts, in July 2021: “469 COVID-19 cases were identified among Massachusetts residents who had traveled to the town during July 3–17; **346 (74%) occurred in fully vaccinated persons**. Testing identified the Delta variant in 90% of specimens from 133 patients. Cycle threshold values were similar among specimens from patients who were fully vaccinated and those who were not” (emphasis added).

[Gazit’s Israeli study](#) (reported on August 25, 2021) may be the nail in the coffin for it shows that “natural immunity confers longer lasting and stronger protection against infection, symptomatic disease and hospitalization caused by the Delta variant of SARS-CoV-2, compared to the BNT162b2 two-dose vaccine-induced immunity.” The findings suggest that natural infection contributes to far greater immunity than the injection.

Adding to this, an August 10, 2021 [LANCET journal publication by Chau et al.](#) looking at transmission of SARS-CoV-2 Delta variant among vaccinated healthcare workers in Vietnam, further ransacks the COVID-

19 injection landscape and throws it into turmoil in terms of disastrous findings. Sixty-nine healthcare workers who tested positive for SARS-CoV-2. 62 participated in the clinical study. Researchers reported “23 complete-genome sequences were obtained. They all belonged to the Delta variant, and were phylogenetically distinct from the contemporary Delta variant sequences obtained from community transmission cases, suggestive of ongoing transmission between the workers. Viral loads of breakthrough Delta variant infection cases were 251 times higher than those of cases infected with old strains detected between March-April 2020.”

The British Public Health System, Public Health England (PHE), in its latest iteration of the spread and analysis of the “Delta variant” ([report 21](#)), throws this injection into more disarray by showing that approximately 60% of the deaths post-Delta variant infection occurred in double-vaccinated persons. We even have reports now that those who received the [third booster shot in Israel](#) have become infected. The injections are not working and some even argue haven’t worked since their inception. And Gibraltar and Iceland have had 90% of their populations injected, yet have experienced explosive rises in [COVID-19 infections](#).

These findings raise very urgent and serious questions for the injection developers and clearly show that the injections have failed. The authorities involved in the COVID-19 injection development even stated that it “may reduce symptoms”; there is no mention that it will stop you from dying from the infection or stop severe symptoms. It was never meant to protect you. When the media and lead public health officials make these statements, they are being duplicitous and deceitful. The studies post-injection roll-out, that appear to suggest that the shot reduces (stops) transmission are sub-optimal and potentially misleading.

I argue that the RT-PCR test was likely manipulated and adjusted to reduce the cycle count thresholds (Ct) to provide a negative test as needed to show that the injection is working; the Ct can be adjusted during an emergency to an elevated threshold to drive infection counts (most likely false-positive, 90-100%) to “show” that the pandemic is worsening, and then it can be reduced and look like infections are down.

Source: https://www.lifesitenews.com/opinion/the-covid-19-injection-is-not-a-vaccine-heres-why/?utm_source=telegram

- Dr. Ryan Cole discussion of covid19 and Ivermectin and covid19 vaccines
<https://www.bitchute.com/video/Ouvc0kcnXQ18/>
- Rountable Discussion of covid19 and vaccines by top scientists and medical doctors
<https://articles.mercola.com/sites/articles/archive/2021/08/15/awareness-foundation-covid-19->

Vaccine Passports and the Law

Should experimental and unsafe covid19 vaccines which are

(i) not effective and not stopping covid19 and it's variants and

(ii) not safe and leading to injuries and disabilities and deaths

be forced upon people through vaccine passports and denial of services and products and denial of jobs

and enforcement of other mandatory measures ? Vaccine passports and apartheid are illegal and

unlawful under the Irish Constitution and Human Rights laws and Irish equal rights laws and the

Nuremberg Code and constitutes malfeasance and criminality by Irish politicians and their "advisors".

This crime must and will be prosecuted in courts in Ireland and other countries.

Also new scientific research findings are showing that natural immunity including recovery from covid19

infection is far superior to covid19 vaccines. And we already have safe and effective medicines for covid19

such as Ivermectin and the Hydroxychloroquine combined with AZT and zinc, Budenoside,

Dexamethasone, Plasma antibody treatment, oxygen treatment, vitamin D, etc.

The scientific and medical and legal evidence and facts show that vaccine passports are unnecessary and unjustified and unlawful.

A recent Spanish court ruling illustrates this point.

- Spanish Supreme Court rules vaccine passports illegal for bars/restaurants

<https://gript.ie/spanish-supreme-court-rules-vaccine-passports-illegal-for-bars-restaurants/>

Ireland has signed the Siracusa Principles and is legally bound by it. Criminal Breaches of the Siracusa Principles and Nuremberg Code 1947

Inalienable rights, as set out in Article 58 of the Siracusa Principles on Limitations and Exceptions to the International Covenant on Civil and Political Rights (1958), apply in all circumstances, including threats to 'national security':

"No State Party shall, also in times of emergency threatening the life of the nation, derogate from the guarantees of the Covenant enshrining the right to life, freedom from torture, cruel, inhuman or degrading treatment or punishment and from medical or scientific experimentation without free consent, ... and freedom of thought, conscience and religion. No derogation from these rights shall be made under any circumstances, even for the ostensible purpose of protecting the life of the nation."

The use of vaccine passports to pressurize Irish people to get the experimental covid19 vaccines including denying them (the unvaccinated) access to services and goods and make them suffer discrimination and apartheid is a breach of the Siracusa Principles and the Nuremberg Code of 1947 which are legally binding in Ireland. This is a criminal offence in Ireland.

Covid19 vaccine passports being illegally used for blackmail and extortion against people

In August 2021 Beaumont hospital in Dublin enforced a new policy actively discriminating against all persons on the transplant list who were not covid19 vaccinated. They are threatening unvaccinated people to get the covid19 vaccines or they will be deprived of a transplant and this can cause death or serious injury and career and financial losses to these people. This is criminal and an outrageous abuse of power and of taxpayer's money. Furthermore the new evidence emerging of the injuries, illnesses and deaths caused by covid19 vaccines presents actual dangers to transplant patients and those receiving blood which are being ignored by Beaumont hospital. See letter from Beaumont hospital below.



OSPIDÉAL BEAUMONT
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BEAUMONT HOSPITAL
P.O Box 1297 Beaumont Road Dublin 9
Guthán: Telephone 8093000 / 8377755

Consultant Nephrologists

August 3rd 2021

Patients on Transplant Waiting List

Dear Colleague

As COVID vaccination is now widely available, and I am sure the majority of your patients have availed of same, I would request that you furnish me as soon as possible with a list of patients who are on the transplant waiting list who are currently not vaccinated.

We would strongly urge patients that are potential transplant recipients be immediately vaccinated for COVID. In view of the risk of transmission, particularly of new COVID variants, we feel that it will not be possible to continue to offer transplantation to unvaccinated recipients. Therefore, if your patient cannot be vaccinated, for whatever reason, we would recommend that they be suspended from the waiting list with immediate effect until the COVID crisis has passed and there is no risk of transmission of COVID for the individual patient or to members of staff or other patients who are immunosuppressed on the transplant unit.

Can you please contact the transplant co-ordinators at Beaumont Hospital: transplantcoordinators@beaumont.ie or 01 8093119.

I would appreciate your response at your earliest convenience.

Yours sincerely

Miss Dilly Little
Surgical Director of National Kidney Transplant Service

Dr Colm Magee
Clinical Director TUN Directorate

Threats, Blackmail and Extortion and Witness Intimidation against HSE workers

From: Interviewer <interviewer@nurseoncall.ie>

Sent: Friday, August 6, 2021 2:06:27 PM

Subject: The HSE /Hospitals Groups are insisting All Agency Health care staff must be vaccinated!

Dear All Health Care staff,

This is a follow up from my previous emails regarding the HSE Public Health findings. They found that agency staff could pose a risk of spreading COVID-19 if they are unvaccinated due to the fact that they go to various locations and could be members of numerous agencies and are therefore uncontrolled.

The HSE and all the Hospitals groups are now insisting that the COVID 19 vaccine must be added immediately to the list of required vaccines for Agency staff. The reason is the same for all vaccines..... to protect the agency Health Care staff themselves, their patients and their colleagues. It is unfortunate that this includes people with medical conditions that can't be vaccinated. We will do our best to find work that doesn't involve patients like help lines etc but these jobs are rare enough as the HSE have already given them to their own directly hired staff who can't get vaccinated.

Nurse on Call are adhering to the HSE and Hospital Groups request and will not place staff who are unvaccinated going forward. We also require a copy of either your vaccination card or your EU Digital COVID passport.

We do not have a copy of these documents for quite a few staff who are directly booked so could those of you who are outstanding these documents please send them to bookings@nurseoncall.ie straight away or corkoffice@nurseoncall.ie if in the south.


From Monday 16/08/2021, I have instructed the accounts department that we will no longer be paying anyone who is unvaccinated or those whom we do not hold proof of vaccination for, as we no longer have the authority to do so. Any Health care staff who are being booked directly and are not vaccinated, will not be covered by the HSE and the Hospitals groups and those that book you no longer have the authority to do so. Please do not send us time sheets for any dates worked after that date as they will not be paid if you are not vaccinated.


We will accept a copy of the first vaccination as long as it's clearly indicated when the second shot is due and you agree to all the usual HSE guidelines, that you remain masked at all times, stay in one location only and take breaks on your own, (in order to remove your mask).

Please don't shoot the messenger either as accounts will only be doing their job.






Kind regards,

Catherine Kennedy Arnold, RGN.
Managing Director.

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Nurse on Call Jobs for all our Permanent/Contract positions

Denmark is ending all covid19 restrictions and vaccine passports by mid September 2021

In August 2021 the Danish Parliament stated that it will end all covid19 restrictions and lockdowns and vaccine passports by mid September 2021. See news reports below:

<https://www.forbes.com/sites/davidnikel/2021/08/27/denmark-lifts-all-coronavirus-restrictions-except-entry-rules/>

<https://www.theguardian.com/world/2021/aug/27/denmark-to-lift-all-remaining-covid-restrictions-on-10-september>

<https://www.dailymail.co.uk/news/article-9932767/Denmark-scrap-Covid-restrictions-two-weeks-virus-no-longer-critical-threat-society.html>

Covid19 Prevalence in Nations

The covid19 virus like many other coronaviruses and cold and flu viruses infects high percentages of populations. A new study published in the journal *Nature* estimates that 103 million Americans, or 31 percent of the U.S. population, had been infected with SARS-CoV-2 by the end of 2020. See news reports links below:

<https://www.sciencedaily.com/releases/2021/08/210826111744.htm>

https://www.upi.com/Health_News/2021/08/26/coronavirus-spread-us-study/9321629985347/

https://www.nature.com/articles/s41586-021-03914-4_reference.pdf?proof=t

This would mean that one third of the Irish population may have been infected with covid19 and most did not realise it. This amounts to 1.25 million people. And 5112 people have been alleged to have died from covid19 and co-existing illnesses such as Cancers and heart diseases. And the false positive tests for covid19 for Ireland is 97% due to high cycle counts. 5112 divided by 1.25 million gives a percentage of 0.4%. The False Positives for covid19 reduces this by a factor of ten or more down to 0.04%. This 0.04% gives an estimate of the Infection Fatality Rate for Ireland. It is equivalent to a mild flu season.

Conflicts of Interest by government advisors and Ministers and Politicians are driving the lockdowns and the creation of fear and panic and covid19 vaccines and vaccine passports and apartheid system and all the other abuses and crimes

News report providing evidence of conflicts of interest involving Big Pharma and GAVI and CEPI and government advisors and Ministers and Politicians -

<https://www.ukcolumn.org/index.php/article/covid%E2%80%93big-pharma-players-behind-uk-government-lockdown>

In Ireland these type of conflicts of interest need to be investigated thoroughly.

HPRA Incompetence regarding Clinical Trials

The HPRA is supposed to oversee and monitor clinical trials of drugs and vaccines in Ireland. A recent Freedom of Information Request by Suzie Buckley to the HPRA on August 30 2021 led to a reply stating there were no trials of covid19 vaccines in Ireland in 2021. This is false and misleading. The vaccine companies themselves and the scientific community and medical journals have all stated there are clinical trials of covid19 in 2021 and they have not been fully authorised and approved yet. See the following:

[https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(21\)00263-2/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(21)00263-2/fulltext)

<https://www.foxnews.com/health/pfizer-request-full-approval-coronavirus-vaccine-first-half-2021-fda>

<https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/moderna-covid-19-vaccine>

<https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/pfizer-biontech-covid-19-vaccine>

See here, the estimated study completion date: <https://clinicaltrials.gov/ct2/show/NCT04368728>

The HPRA in Ireland is not aware of this and is showing itself to be incompetent or a liar to the Irish public and not fit for purpose. And this is the same agency tasked with monitoring clinical trials and monitoring vaccine injuries and disabilities and deaths from vaccines and drugs. The statistics and numbers released by this state body cannot be trusted. False statistics mentioned in our first statement to the gardai on May 7th 2021 is just one of many issues here. This is very serious as it involves serious injuries and deaths to Irish people and reports about this. The people working in this body are getting taxpayers money and need to be investigated thoroughly. See attachments at the end of this report.

Crimes and Frauds by so called “Experts” who advised governments and promoted the covid19 panic worldwide. Biowarfare / Bioterrorism being used against nations including the Irish nation.

- Rand Paul sends official criminal referral on Anthony Fauci to Department of Justice.

The Hill July 2021

<https://thehill.com/changing-america/well-being/prevention-cures/564803-rand-paul-sends-official-criminal-referral-on>

- Further Testimony is provided by Dr. David E. Martin regarding the origins of covid19 or sars-cov2 and illegal gain of function research and biowarfare or bioterrorism involving the virus and the vaccines. This has a direct impact on Ireland and the Irish and other nations.

This has been presented in expert testimony to Reiner Fuellmich in Germany for use in the German criminal courts and in the international courts.

Interview - <https://www.brighteon.com/b25785b3-f218-4c55-98c5-9cad55d7e43b>

and also on DVD attached to evidence.

We subpoena Dr. David E. Martin into the Irish criminal courts and the High Court to testify.

Covid19 Lockdowns are killing off Irish people through the promoting suicides among the youth in Ireland and worldwide

- Youth depression and anxiety doubled during the pandemic, new analysis finds.
CNN August 10 2021
<https://edition.cnn.com/2021/08/10/health/covid-child-teen-depression-anxiety-wellness/index.html>
- Emergency Department Visits for Suspected Suicide Attempts Among Persons Aged 12–25 Years Before and During the COVID-19 Pandemic — United States, January 2019–May 2021.
CDC June 2021
<https://www.cdc.gov/mmwr/volumes/70/wr/mm7024e1.htm>
- Warning of a 'shadow pandemic' of youth suicide after huge spike in teenage girls taking their own lives as helplines are flooded with calls and depression, eating disorders and self-harm reach record levels in lockdown
Daily Mail 16 August 2021
<https://www.dailymail.co.uk/news/article-9896667/Coronavirus-Australia-Alarming-rise-teenage-girls-taking-lives-shadow-pandemic.html>

The Swedish Experiment of no Lockdowns and no Vaccine Passports and No Coercion in workplaces to take the covid19 vaccines

- The scientific evidence and the facts and statistics now show that Sweden took the correct course of action.
The Sweden experiment: how no lockdowns led to better mental health, a healthier economy and happier schoolchildren. The Telegraph 22 August 2021.
<https://www.telegraph.co.uk/world-news/2021/08/22/sweden-experiment-no-lockdowns-led-better-mental-health-healthier/>

Scientific studies about Lack of Effectiveness of Masks - USA and worldwide

- 1) <https://www.medrxiv.org/content/10.1101/2021.02.18.21251986v1.full.pdf> - Reported Covid-19 Incidence in Wisconsin High School Athletes During Fall 2020
- 2) <https://www.acpjournals.org/doi/10.7326/L20-1292> - Update Alert 3: Masks for Prevention of Respiratory Virus Infections, Including SARS-CoV-2, in Health Care and Community Settings
- 3) <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7323223/> - Do facemasks protect against COVID-19?
- 4) [https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(20\)30985-3/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(20)30985-3/fulltext) - Transmission of COVID-19 in 282 clusters in Catalonia, Spain: a cohort study
- 5) <https://www.acpjournals.org/doi/10.7326/M20-6817> - Effectiveness of Adding a Mask Recommendation to Other Public Health Measures to Prevent SARS-CoV-2 Infection in Danish Mask Wearers - a randomized controlled trial
- 6) <https://cebm.net/covid-19/masking-lack-of-evidence-with-politics/> - Masking lack of evidence with politics
- 7) <https://www.cidrap.umn.edu/news-perspective/2020/04/commentary-masks-all-covid-19-not-based-sound-data> - COMMENTARY: Masks-for-all for COVID-19 not based on sound data
- 8) <https://bmjopen.bmj.com/content/5/4/e006577> - A cluster randomised trial of cloth masks compared with medical masks in healthcare workers (Of Note For Australians - Raina MacIntyre sponsored this trial.)
- 9) <https://www.nejm.org/doi/full/10.1056/nejmp2006372> - Universal Masking in Hospitals in the Covid-19 Era
- 10) <https://www.medrxiv.org/content/10.1101/2021.05.19.21257467v1.full> - COVID-19 Mitigation Practices and COVID-19 Rates in Schools: Report on Data from Florida, New York and Massachusetts
- 11) <https://www.nejm.org/doi/full/10.1056/NEJMc2026670> - Open Schools, Covid-19, and Child and Teacher Morbidity in Sweden
- 12) https://statsiq.co1.qualtrics.com/public-dashboard/v0/dashboard/5f78e5d4de521a001036f78e#/dashboard/5f78e5d4de521a001036f78e?pageid=Page_ffb4dc52-5543-46b2-8126-2b7229fd1b17&pageId=Page_f6071bf7-7db4-4a61-942f-ade4cce464de - COVID-19 School Response Dashboard
- 13) https://statsiq.co1.qualtrics.com/public-dashboard/v0/dashboard/5f78e5d4de521a001036f78e#/dashboard/5f78e5d4de521a001036f78e?pageid=Page_4c1464ba-3550-4999-afee-9455713b9486 - Raw State Data

Scientific studies about Mortality, Asymptomatic Spread & Overall Risk In Children & School - USA and worldwide

- 14) <https://journals.plos.org/ploscompbiol/article?id=10.1371/journal.pcbi.1008559>

- 15) <https://osf.io/ezdf2/>
- 16) <https://science.sciencemag.org/content/370/6522/1339>
- 17) https://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2020.26.1.2002011#abstract_content
- 18) <https://pediatrics.aappublications.org/content/147/1/e2020031971.long>
- 19) https://cream-migration.org/publ_uploads/CDP_22_20.pdf
- 20) <https://www.nber.org/papers/w28619>
- 21) [https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(20\)30882-3/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(20)30882-3/fulltext)
- 22) <https://pediatrics.aappublications.org/content/147/4/e2020048090.long>
- 23) <https://jamanetwork.com/journals/jamapediatrics/fullarticle/2766037>
- 24) <https://www.medrxiv.org/content/10.1101/2020.11.01.20222315v1>
- 25) [https://www.journalofinfection.com/article/S0163-4453\(21\)00209-7/fulltext](https://www.journalofinfection.com/article/S0163-4453(21)00209-7/fulltext)
- 26) <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2774102>
- 27) <https://journals.asm.org/doi/full/10.1128/JCM.02593-20>
- 28) <https://www.medrxiv.org/content/10.1101/2021.04.16.21255616v1>

Scientific studies about Potential Harms - USA and worldwide

- 29) <https://www.ed.ac.uk/news/all-news/nanofibres-220812>
- 30) <https://rationalground.com/dangerous-pathogens-found-on-childrens-face-masks/>
- 31) <https://www.ecotextile.com/2021040127603/dyes-chemicals-news/exclusive-chemical-cocktail-found-in-face-masks.html>
- 32) <http://s3.amazonaws.com/media2.fairhealth.org/whitepaper/asset/The%20Impact%20of%20COVID-19%20on%20Pediatric%20Mental%20Health%20-%20A%20Study%20of%20Private%20Healthcare%20Claims%20-%20A%20FAIR%20Health%20White%20Paper.pdf>
- 33) <https://www.bmj.com/content/370/bmj.m3021/rr-6>
- 34) <https://www.mdpi.com/1660-4601/18/8/4344>
- 35) <https://www.researchsquare.com/article/rs-124394/v2>

New Scientific Studies into the dangers and ineffectiveness of covid19 vaccines

- US COVID-19 Vaccines Proven to Cause More Harm than Good Based on Pivotal Clinical Trial Data Analyzed Using the Proper Scientific Endpoint, “All Cause Severe Morbidity”
J. Bart Classen, MD. 25 August 2021.
<https://www.scivisionpub.com/pdfs/us-covid19-vaccines-proven-to-cause-more-harm-than-good-based-on-pivotal-clinical-trial-data-analyzed-using-the-proper-scientific--1811.pdf>

Covid19 Vaccines causing ADE and New Variants of covid19 according to Nobel Laureate in Science

Dr. Luc Montagnier, a French virologist and winner of the 2008 Nobel Prize in Medicine for his discovery of the human immunodeficiency virus (HIV), recently highlighted the dangers of COVID-19 vaccines. Montagnier discussed the issue in an interview with Pierre Barnérias of ‘Hold-Up Media’ earlier this month, translated from French into English exclusively for ‘RAIR Foundation USA’.

The vaccines do not stop the virus, argues the prominent virologist, but do the opposite – they ‘feed the virus’ and facilitate its evolution into stronger and more transmissible variants. These new viral variants are more resistant to vaccination and can have greater health effects than their ‘original’ versions.

In the interview, Professor Montagnier called the coronavirus vaccination programme an ‘unacceptable mistake’. Mass vaccination is a ‘scientific and medical error’, he said. “The history books will show that, because it is vaccination that creates the variants.” Montagnier explained that ‘there are antibodies created by the vaccine’ that force the virus to ‘find another solution’ or die. This is how the variants are created. It is the variants that are ‘a production and a result of the vaccination’.

Montagnier explains that the mutation and strengthening of the virus occurs through the phenomenon known as Antibody Dependent Enhancement (ADE) [NB.]. ADE is a mechanism that increases the ability of a virus to enter cells and cause an exacerbation of disease. ADE occurs when antibodies produced during an immune response recognise and bind to a pathogen, but are unable to prevent infection. Instead, these antibodies act like a ‘Trojan horse’, allowing the pathogen to invade cells and exacerbate the immune response.

In America, the routinely recommended vaccines do not cause ADEs. If they did, they would be withdrawn from circulation. Phase III clinical trials of new vaccines are designed to detect common or severe side effects before the vaccine is approved for use. It usually takes 2 to 4 years to determine if a vaccine is safe, but in the case of the COVID-19 vaccines, manufacturers needed about six months or less

for testing.

According to the University of Cambridge, ADE occurs in infections with the SARS-CoV-1, MERS, HIV, Zika and dengue viruses, as well as in vaccinations.

Data from around the world confirm that ADE occurs with SARS-CoV-2, which causes COVID-19, Montagnier says. “You see it in every country, it is the same: The curve of vaccinations is followed by the curve of deaths. I watch it very closely and I do experiments at the Institute with patients who have corona after vaccination.”

In the medical documentary ‘Hold Up: Return of the Chaos’, released in France on 11 November 2020, Montagnier rejected the then-pending COVID vaccine and said he would not be vaccinated. “My conscience tells me not to do it,” he said. Montagnier also addressed his French colleagues, urging them to ‘defend their [medical] titles as doctors and not as sheep’.

The film discusses the origins of the virus, criticises harmful and irrational masking requirements as well as lockdowns, quarantines and the abuse of government overreach, and examines effective COVID treatments such as hydroxychloroquine.

Montagnier has been a vocal critic of the mass vaccination campaign. In a letter to the president and justices of the Supreme Court of the State of Israel, which has launched the world’s fastest and most massive vaccination campaign, Montagnier called for its suspension:

“I would like to summarise the potential dangers of these vaccines in the context of a mass vaccination policy.”

1. Short-term side effects: These are not the normal local reactions that occur with any vaccination, but serious reactions that affect the life of the recipient, such as anaphylactic shock associated with a component of the vaccine mixture, or severe allergies or autoimmune reaction, up to and including cellular aplasia.

2. Lack of vaccine protection:

2.1 Induction of facilitating antibodies – the induced antibodies do not neutralise a viral infection, but on the contrary facilitate it, depending on the recipient. The latter may have already been exposed to the virus asymptotically. A small amount of naturally produced antibodies may compete with vaccine-induced antibodies.

2.2 The production of vaccine-induced antibodies in a highly exposed population results in the selection of variants that are resistant to these antibodies. These variants may be more virulent or transmissible. This is what we are experiencing now. An endless race between virus and vaccine that will always end in favour of the virus.

3. Long-term effects: Contrary to the claims of messenger RNA vaccine manufacturers, there is a risk that the viral RNA will be integrated into the human genome. Indeed, each of our cells has endogenous retroviruses that are capable of converting RNA into DNA (reverse transcriptase). Even though this is a rare event, its passage through the DNA of germ cells and its transmission to future generations cannot be ruled out.

Dr. Luc Montagnier will be subpoenaed into Irish courts to testify

Deception and Fraud in PCR tests for covid19 uncovered

In May 2021, the CDC in USA lowered the CT value from 40 to 28 or less – but only for PCR testing in persons who received the COVID vaccine. Unvaccinated people continued to be tested with a CT value of 40. The result is clear: ‘vaccinated’ persons became much less likely to test positive for SARS-CoV-2 infection, while unvaccinated persons continued to test false positive at a high rate. As noted by Off-Guardian:

This is a policy designed to continually increase one number and systematically minimise the other. This is an obvious and deliberate act of fraud and deception. This confirms earlier evidence provide to the gardai in relation to PCR tests in Ireland and other countries. [This affects all covid19 statistics and cases and deaths in Ireland and many other countries.](#)

Serious Allegations of Criminality and Genocide in relation to covid19 being made by a medical doctor in USA. Implications for many countries including Ireland.

Dr. Zev Zelenko a highly respected Jewish medical doctor in the USA who has successfully treated hundreds of covid19 patients there has made serious allegations of murder and genocide at a meeting of Jewish Rabbinical Council in Israel. According to him this is occurring in many countries including Ireland and the unsafe covid19 vaccines are playing a key role in this. He has evidence to support his allegations. Links to video interview below.

<https://rumble.com/vm0fqp-dr.-zev-zelenko-covid-genocide-very-nefarious-sinister-purpose.html>

and <https://www.bitchute.com/video/BFa8y9UeYh09/>

and <https://www.youtube.com/watch?v=3Uz1XxqxZts>

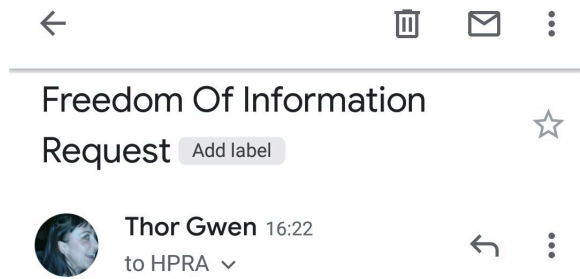
and news interview at <https://rumble.com/vm0fqp-dr.-zev-zelenko-covid-genocide-very-nefarious-sinister-purpose.html>

Dr. Zev Zelenko will be subpoenaed into Irish courts to testify

Attachments

Suzie Buckley <https://mobile.twitter.com/Thorgwen>

Emails sent to HPRA



To Whom It May Concern

I would like to request the following information under the 2014 Freedom of information act;

1. Full licence approval for the ongoing Mrna Covid vaccine. Proof of approval.

The Fda extended the EUA for this product last week. Until It receives licence post 2023 it is an ongoing large scale clinical trial. Please **give clear proof this is not a clinical trial** by forwarding;

- **Full licence from European medicines agency (This is not the Emergency use authorisation)**
- **Clarity regarding how a product which clearly states on government platforms that it is in clinical trial phase worldwide is not a clinical trial in ireland;**

<https://clinicaltrials.gov/ct2/show/NCT04368728>



2. Who in Ireland is responsible for collecting data regarding reactions and fatalities after the administration of Mrna vaccine.

3. Please clearly show who is responsible for each of these groups regarding safety monitoring of the Novel Mrna Covid vaccine;

- **Legal authority to bypass clinical trial stages for Mrna covid vaccine use.**
- **Legal authority or agency responsible for monitoring covid vaccine in pregnant women**
- **Legal authority or agency responsible for monitoring covid vaccine in children**
- **Legal authority or agency responsible for monitoring covid vaccine in the vulnerable and elderly.**
- **Who at the HPRA is responsible for ensuring codes of ethics regarding Mrna vaccine and The Helsinki and Nuremberg code of medical ethics.**

Regards, Suzie

Dear Ms. Buckley

Thank you for your requests for records that may be held by the HPRA. We are able to respond this request outside of the FOI Act as per the below.

Please be advised that there are no Covid vaccine trials underway in Ireland. Therefore, we do not have any information on the trial you mention in your email.

Clinical trials being conducted in Ireland must comply with our national legislation SI 190 of 2004. Generally, the sponsor of the trial is responsible for initiation and management of the trial. HPRA is responsible for the scientific assessment of trials and for monitoring the lifecycle of clinical trials in Ireland and ensuring that Good Clinical Practice (GCP) is adhered to. The national office for research ethics committees (NREC) are responsible for the ethical assessment of clinical trials submitted in Ireland. The sponsor requires approval from both the HPRA and NREC before a trial can be started in Ireland.

Clinical trial investigators are required to report any serious adverse event to the sponsor. The sponsor is required to report any suspected unexpected serious adverse reactions to the HPRA, ethics committee and other competent authorities in other countries in the EEA in which the trial is being conducted in an expedited fashion.

We hope this addresses your questions, however we have included some links below which may be of use.

Clinical trial legislation

<http://www.irishstatutebook.ie/eli/2004/si/190/made/en/print>

HPRA website

<http://www.hpra.ie/homepage/medicines/regulatory-information/clinical-trials>

Details of ongoing trials may be available from the EMA, and/or the following websites detailing active clinical trials:

<https://www.clinicaltrialsregister.eu/ctr-search/search>

<https://clinicaltrials.gov/>

Kind regards

Aisling

Aisling Magann

Corporate Affairs Executive

Health Products Regulatory Authority | An tÚdarás Rialála Táirgí Sláinte

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