

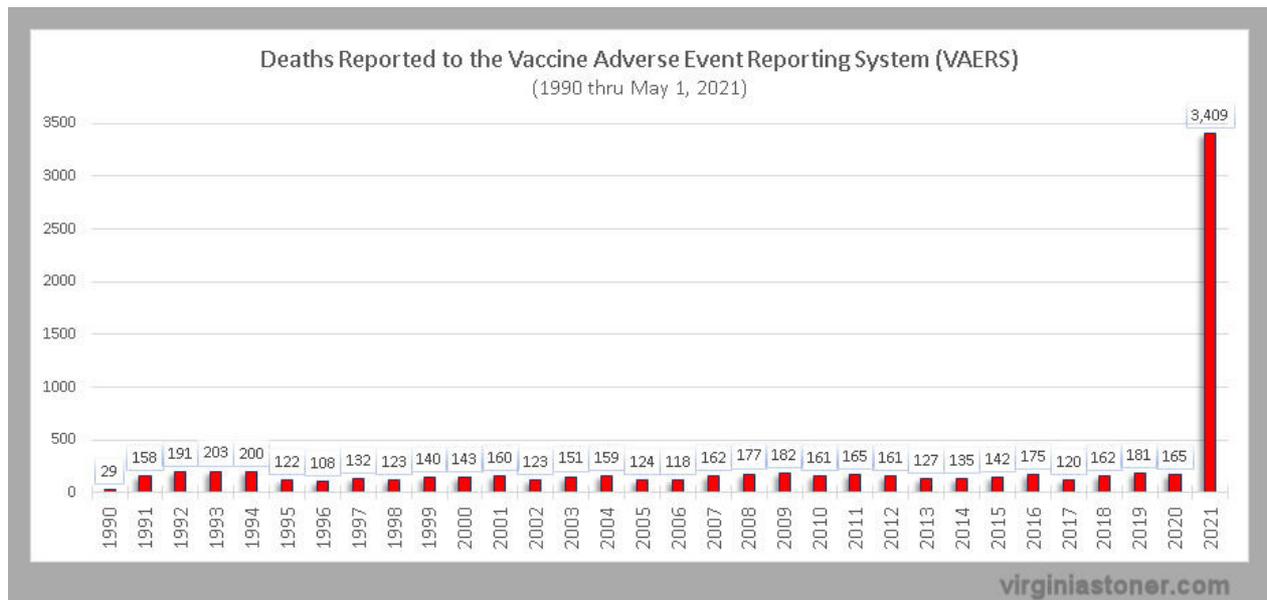
The Deadly COVID-19 Vaccine Coverup

virginiastoner.com/writing/2021/5/4/the-deadly-covid-19-vaccine-coverup

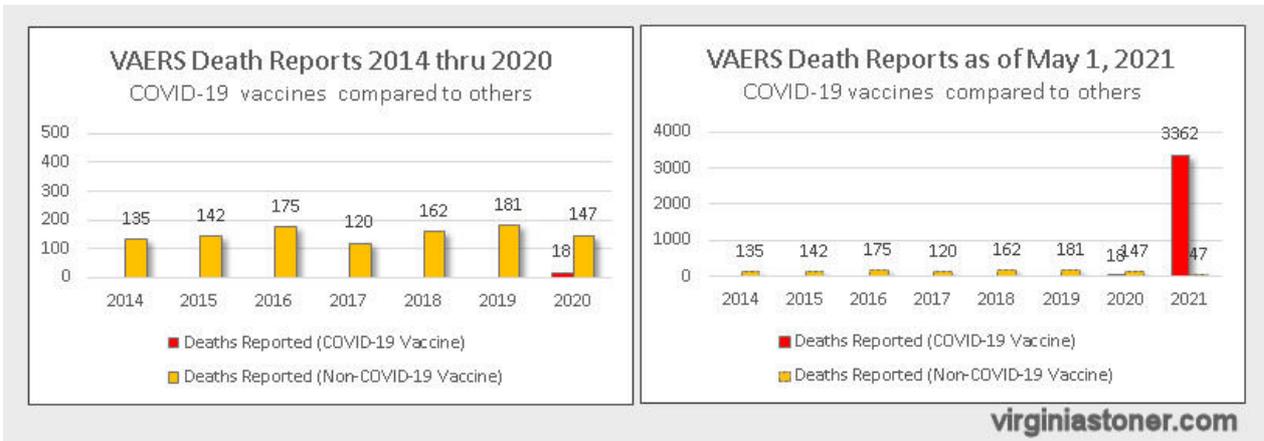
May 4, 2021

Vaccine dangers hiding in plain sight

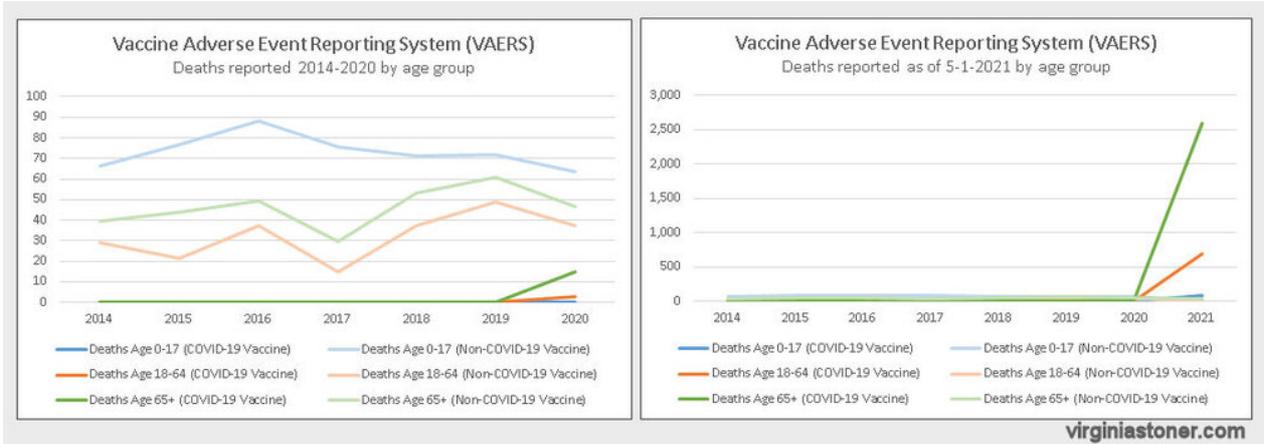
FACT: There has been a massive increase in deaths reported to the Vaccine Adverse Event Reporting System (VAERS) this year. That's not a 'conspiracy theory', that's an indisputable fact. *You can try to explain it or justify it, or even argue it doesn't matter, but you can't deny it.*



We're not talking about a modest increase in death reports, something we might chat about in concerned voices over Chai tea and bagels at a company mixer. We're talking about a **huge and unprecedented increase**—so massive that in the last 4 months alone, VAERS has received over 40% of all death reports it has ever received in its entire 30+-year history. So massive it's literally "off the chart." The first chart in the pair below shows VAERS death reports from 2014 thru 2020. If you tried to add the 2021 data to it, it would be *way, way* off the chart. The second chart shows how much detail was lost when the 2021 data was squeezed in.



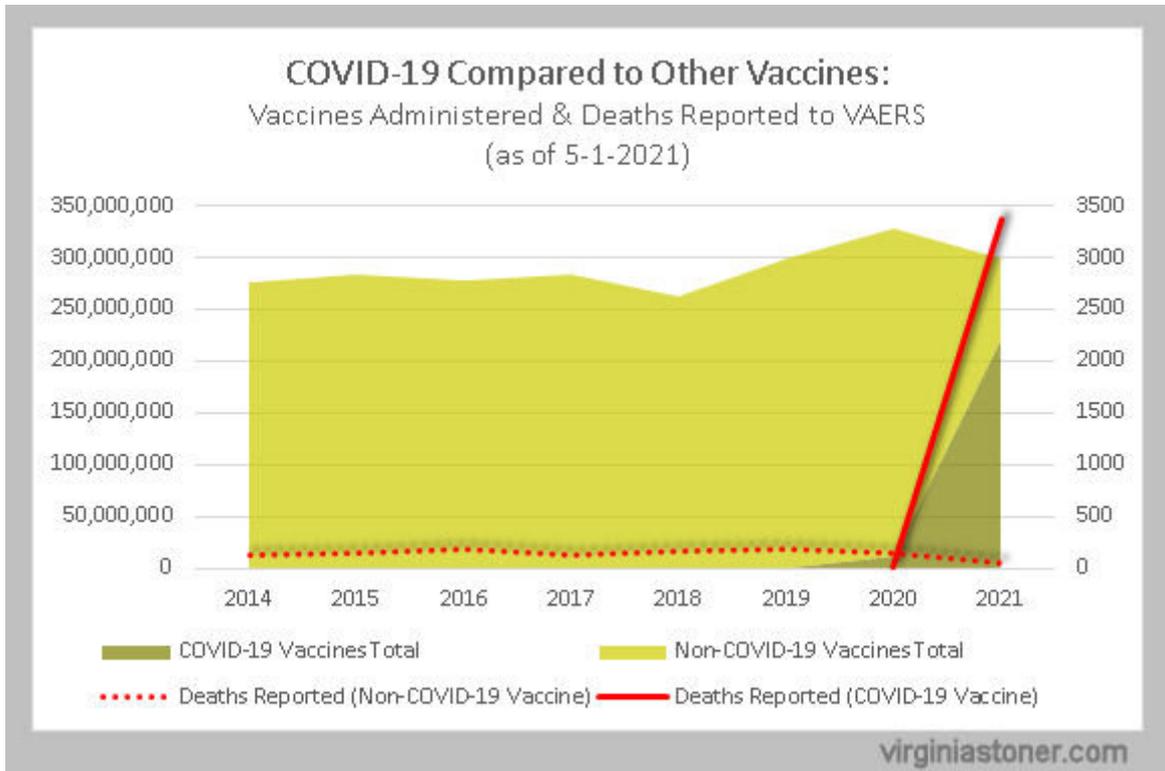
The pair of charts below are another illustration. Notice all age groups had an increase in death reports from the COVID-19 vaccines—with both the 18-64 and 65+ age groups experiencing a dramatic “off the chart” increase.



The increase in VAERS death reports is not due to more vaccination

Even with the COVID-19 shots, the estimated total vaccines administered so far this year is less than the yearly average--because we are only a quarter of the way through this year. No doubt the vaccine count will climb much higher by the end of this year, but it’s not the reason for the massive increase in VAERS death reports over the last 4 months.

The following chart compares estimates of vaccines administered with deaths reported to VAERS, separating COVID-19 vaccines from other vaccines. The rate of reported deaths for other vaccines looks fairly normal; the massive increase is mainly from the COVID-19 vaccines.

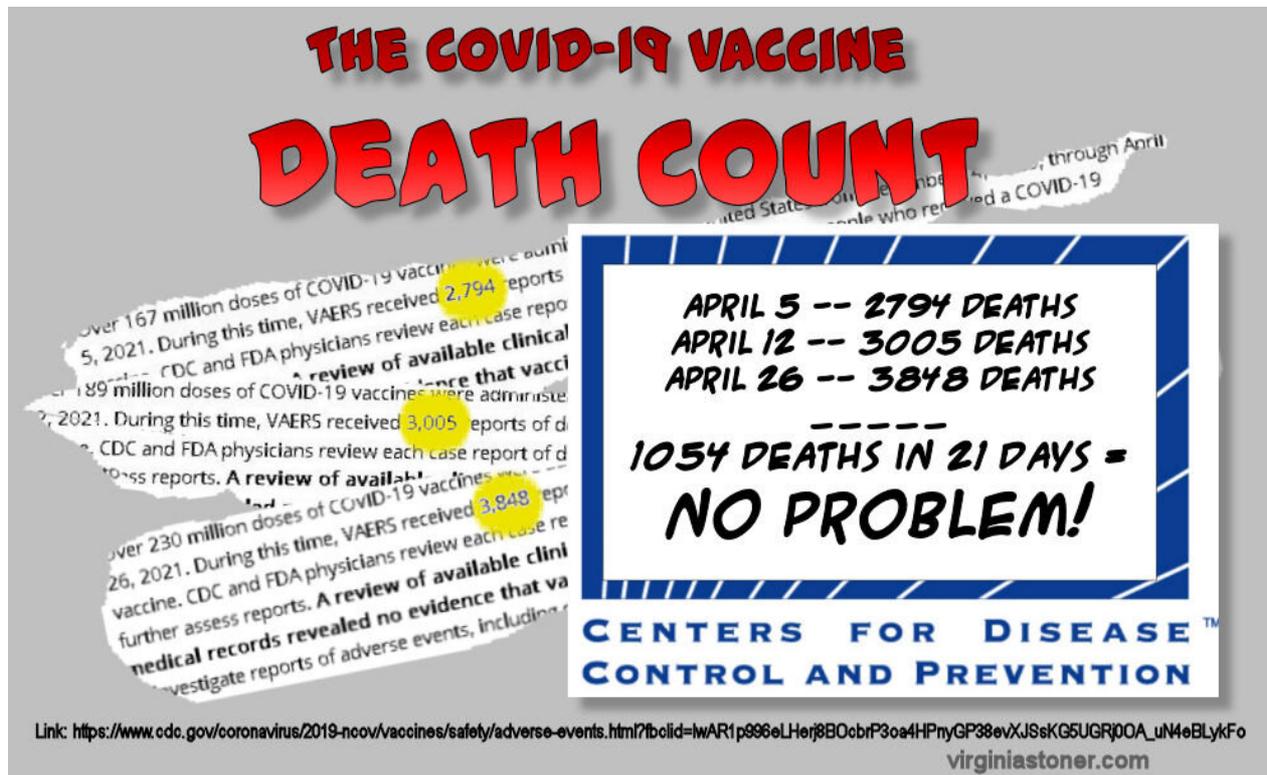


There are many notes at the end of this paper about how the vaccine data was estimated, and where the data for these charts was obtained, along with the data table.

What the official experts have to say (*crickets*)

With all the many experts at the Centers for Disease Control (CDC) and the Food and Drug Administration (FDA) ostensibly dedicated to COVID-19 and vaccine safety, not a single one has attempted to explain or analyze, or has even mentioned, the massive increase in deaths reported to VAERS from the COVID-19 shots. The silence is telling.

But it's not as if VAERS death reports are being hidden, exactly. VAERS data is freely available to the public...and if you don't want to look it up, you can follow the CDC's COVID-19 Vaccine Death Count online, which is updated regularly. Just scroll down to the section called "Reports of death after COVID-19 vaccination" for the latest numbers. Most recently, the death count went from **2794** on April 5, to **3005** on April 12, to **3848** on April 26. But a mere **1054 deaths in 21 days** is no problem for the CDC—it probably just means the vaccines are working.



I found only one paper (1) that mentioned VAERS death reports re COVID-19 vaccines. The lead author was Julianne Gee, from the CDC’s COVID-19 Response Team, and the paper concerned safety monitoring during the first month (December 14 to January 13). We are told, in the Summary:

“Monitoring ... indicates reassuring safety profiles for COVID-19 vaccines. ... No unusual or unexpected reporting patterns were detected.”

The authors said **113 deaths** were reported to VAERS that month from the COVID-19 vaccines. Incredibly, they never compared that number to historical VAERS averages or trends...just kidding. Of course they compared it, realized it was shockingly higher than the historical average of **12 deaths** per month, and decided not to mention it. Never let science interfere with good vaccine marketing.

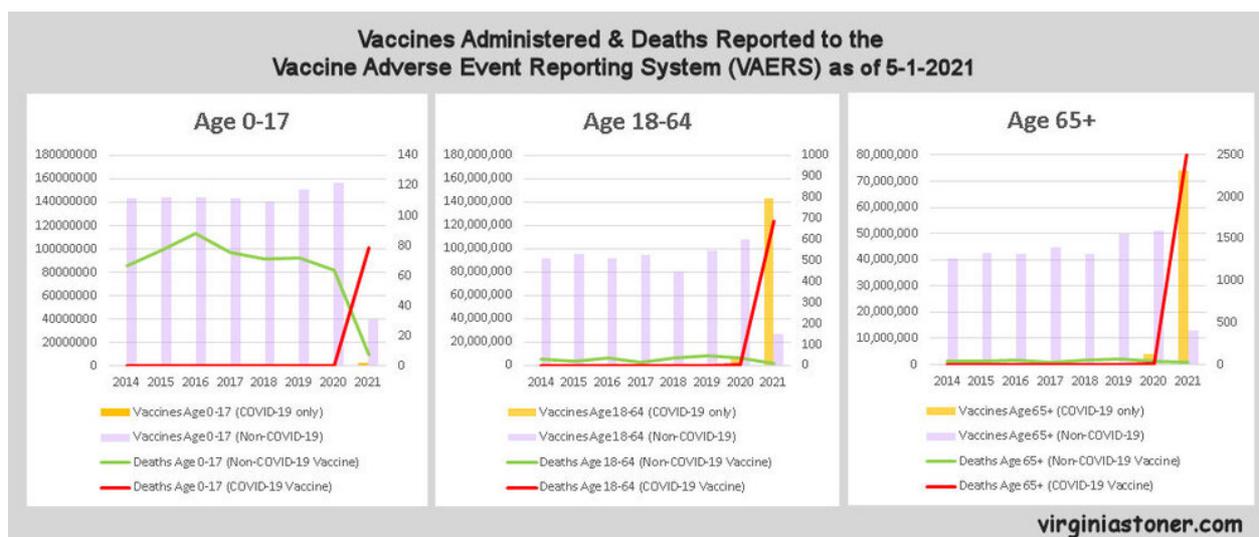
Bizarrely, the authors actually implied the number of VAERS death reports indicated a *safe* vaccine, because a lot fewer deaths were reported to VAERS than they would have expected to see coincidentally among people who got the vaccine. Do you think that makes sense? I hope you said “no,” because it does not make sense. You can’t conclude a vaccine is safe because fewer people filed VAERS death reports than were expected to die coincidentally. I can’t even explain it in a way that makes sense—because it’s NONSENSE.

They were going to die anyway...someday

One hypothesis I’ve heard, and which is hinted at by Gee, et.al. in the paper above, is that the elderly and infirm, many in long-term care facilities, were the first to be targeted by the COVID-19 vaccine campaign, and they are much more likely to die coincidentally.

These coincidental deaths then lead to an increase in suspected vaccine-induced deaths reported to VAERS. (*cough*)

VAERS data just does not support that hypothesis. First, because all age groups—not just seniors—had a dramatic increase in VAERS death reports from COVID-19 vaccines, as illustrated in the charts below. The red line represents reported COVID-19 vaccine deaths, and the green line represents other vaccines. Across the board, all age groups experienced a dramatic increase in deaths reported to VAERS from the COVID-19 shots—even the under 18 group, which has had very few COVID-19 shots (so far).



Second, the increase in death reports in the 65+ age group is just so massive that coincidental death, no matter how sickly the population, just doesn't seem like a sufficient and plausible explanation. After all, the elderly and infirm in long-term care facilities are frequent targets of flu shot campaigns.

What does VAERS, and the people who tend to it, do all day?

VAERS is a "hypothesis generating system" that "identifies potential vaccine safety concerns that can be studied in more robust data systems." VAERS uses data mining to "...identify disproportional adverse event reporting for vaccines, including COVID-19 vaccine." VAERS also "identifies... adverse event-vaccine pairs reported at least twice as frequently as expected for a COVID-19 vaccine..." (2) (Pages 12-15)

Given the massive increase in deaths reported to VAERS—not a modest increase, but an enormous, unprecedented increase—it's unfathomable that VAERS would not detect "disproportional" reporting, thus putting the wheels in motion to study the situation "in more robust data systems." But there is no indication anything like that has occurred.

According to the CDC:

"VAERS has not detected patterns in cause of death that would indicate a safety problem with COVID-19 vaccines."

Even as the death reports continue to roll in at an astonishing rate, by the dozens and sometimes hundreds per week, in true Orwellian fashion, the CDC simply updates the Death Count on its website and reiterates:

“VAERS has not detected patterns in cause of death that would indicate a safety problem with COVID-19 vaccines.”

And, of course, the old standby reassurance:

“COVID-19 vaccines are **safe and effective**.”

What you need to know

- COVID-19 vaccines are **safe and effective**.
- Millions of people in the United States have received COVID-19 vaccines, and these vaccines will undergo the most intensive safety monitoring in U.S. history.
- CDC recommends you get a COVID-19 vaccine as soon as you are eligible.
- Adverse events described on this page have been reported to the [Vaccine Adverse Event Reporting System \(VAERS\)](#) .
- **To date, VAERS has not detected patterns in cause of death that would indicate a safety problem with COVID-19 vaccines.**
- VAERS accepts reports of any adverse event following vaccination, even if it is not clear the vaccine caused the problem.
- CDC, FDA, and other federal partners will continue to monitor the safety of the COVID-19 vaccines.

The only way it seems possible that VAERS did *not* detect any safety concerns, is if VAERS was actually programmed to *expect* a very high rate of deaths from the COVID-19 vaccines—much higher than the rate of deaths expected for other vaccines. That would explain why VAERS did not detect any “adverse event-vaccine pairs reported at least twice as frequently as expected for a COVID-19 vaccine...”

On the other hand, maybe people are just lying, and VAERS is either doing nothing at all, or something other than what we’re being told; or, it is detecting possible safety concerns with the COVID-19 vaccines like crazy, and it’s being covered up.

But, hey—never let it be said I don’t have an open mind. Maybe one of the many highly paid and respected experts at the CDC will do an analysis—like my humble analysis here, but bigger and fancier with more bells and whistles, because they are experts—and prove the massive increase in VAERS death reports has nothing to do with dangerous COVID-19 vaccines. But I won’t be holding my breath. I think if that could be done, it would have been done already—in triplicate.

NOTES:

1. Gee J, Marquez P, Su J, et al. First Month of COVID-19 Vaccine Safety Monitoring – United States, December 14, 2020–January 13, 2021. MMWR Morb Mortal Wkly Rep 2021;70:283–288. DOI: <http://dx.doi.org/10.15585/mmwr.mm7008e3>.

2. COVID-19 vaccine safety update, Advisory Committee on Immunization Practices (ACIP) January 27, 2021, Tom Shimabukuro, MD, MPH, MBACDC COVID-19 Vaccine Task Force Vaccine Safety Team
3. Search VAERS data: <https://vaers.hhs.gov/data.html>
4. There were a lot of “unknown age” VAERS death reports—sometimes dozens or even hundreds per year. Therefore, 1/3 of the unknown age reports were added to each of the 3 age groups of 0-17, 18-64 and 65+.
5. US Census Bureau data was used for the years 2014-2020. For 2021, the 2020 population estimates were used.
6. 2014: <https://data.census.gov/cedsci/table?q=census%20age%202014-2020&tid=ACSST1Y2014.S0101>
7. 2015: <https://data.census.gov/cedsci/table?q=population%20by%20age%202015&tid=ACSST1Y2015.S0101>
8. 2016: <https://data.census.gov/cedsci/table?q=age%20%26%20sex%202016&tid=ACSST1Y2016.S0101>
9. 2017: <https://data.census.gov/cedsci/table?q=age%20%26%20sex%202017&tid=ACSST1Y2017.S0101>
10. 2018: <https://data.census.gov/cedsci/table?q=age%20%26%20sex%202018&tid=ACSST1Y2018.S0101>
11. 2019: <https://data.census.gov/cedsci/table?q=age%20%26%20sex%202020&tid=ACSST1Y2019.S0101>
12. 2020: <https://www.census.gov/data/tables/2020/demo/popest/2020-demographic-analysis-tables.html>
13. Age data was consolidated into 3 uniform groups of Age 0-17, Age 18-64 & Age 65+. The Census Bureau uses a 0-19 age range, and no adjustments were made for that.
14. The CDC's estimated rate of flu vaccination for 2010-2020 was used to estimate the rate of all vaccinations. <https://www.cdc.gov/flu/fluview/coverage-1920estimates.htm>
15. % vaccinated in each age group for flu was used to estimate the rate of vaccination per the CDC's vaccine schedule for non-COVID-19 vaccines.
16. Minimum recommended vaccines for each age group were divided among the years in the age group to estimate yearly vaccine consumption:
17. Age 0-17: 18 flu shots + 35 other shots = 53 / 18 = 2.94 per year.

18. Age 18-64: 45 yrs, 45 flu shots + 12 more recommended for everyone (18 more for some) = 45 + 12 = 57 / 45 = 1.24 per year.

19. Age 65+: 15 yrs: 15 flu shots + 5 more recommended for all (18 more recommended for some) = 15 + 5 = 20 / 15 = 1.33 per year.

20. CDC's child and adolescent vaccine schedule:

<https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html>

21. CDC's adult vaccine schedule:

<https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html>

22. For COVID-19 vaccines I used the total # administered in each age group and estimated 5% were given in 2020 and 95% were given in 2021.

<https://covid.cdc.gov/covid-data-tracker/#vaccination-demographic>

Year	Population					Vaccines						
Year	Population Age 0-17	Population Age 18-64	Population Age 65+	Total Population	Verify Total Population	% 0-17 vaccinated (flu)	% 18-64 vaccinated (flu)	% 65+ vaccinated (flu)	# 0-17 vaccinated (flu)	# 18-64 vaccinated (flu)	# 65+ vaccinated (flu)	# Vaccines on CDC schedule, Age 0-17
2014	82,265,120	190,038,805	46,234,273	318,857,056	318,538,199	58.9	38.8	65.0	48,454,156	73,735,056	30,052,278	2.95
2015	82,604,637	190,922,780	47,569,986	321,418,821	321,097,402	59.3	40.3	66.7	48,984,550	76,846,419	31,729,180	2.95
2016	82,397,516	191,614,616	49,115,382	323,127,515	323,127,515	59.3	38.2	63.4	48,861,727	73,100,976	31,139,152	2.95
2017	82,519,040	192,384,426	50,815,712	325,719,178	325,719,178	59.0	39.5	65.3	48,686,234	75,991,848	33,182,660	2.95
2018	82,290,630	192,453,695	52,423,114	327,167,439	327,167,439	57.9	33.3	59.6	47,646,275	64,087,080	31,244,176	2.95
2019	81,872,275	192,293,220	54,074,028	328,239,523	328,239,523	62.6	41.1	68.1	51,252,044	79,032,513	36,824,413	2.95
2020	83,343,000	194,953,000	54,303,000	332,599,000	332,599,000	63.8	44.5	69.8	53,172,834	86,754,085	37,903,494	2.95
2021	83,343,000	194,953,000	54,303,000	332,599,000	332,599,000	63.8	44.5	69.8	53,172,834	86,754,085	37,903,494	0.74

Year	# Vaccines on CDC schedule, Age 18-64	# Vaccines on CDC schedule, Age 65+	Vaccines Age 0-17 (Non-COVID-19)	Vaccines Age 18-64 (Non-COVID-19)	Vaccines Age 65+ (Non-COVID-19)	Non-COVID-19 Vaccines Total	Vaccines Age 0-17 (COVID-19 only)	Vaccines Age 18-64 (COVID-19 only)	Vaccines Age 65+ (COVID-19 only)	COVID-19 Vaccines Total	Vaccines Age 0-17 (All)	Vaccines Age 18-64 (All)
2014	1.25	1.35	142,939,760	92,168,821	40,570,575	275,679,155				0	142,939,760	92,168,821
2015	1.25	1.35	144,504,422	96,058,024	42,834,393	283,396,839				0	144,504,422	96,058,024
2016	1.25	1.35	144,142,095	91,376,220	42,037,856	277,556,171				0	144,142,095	91,376,220
2017	1.25	1.35	143,624,389	94,989,810	44,796,591	283,410,790				0	143,624,389	94,989,810
2018	1.25	1.35	140,556,511	80,108,851	42,179,638	262,844,999				0	140,556,511	80,108,851
2019	1.25	1.35	151,193,530	98,790,642	49,712,958	299,697,130				0	151,193,530	98,790,642
2020	1.25	1.35	156,859,860	108,442,606	51,169,717	316,472,183	123,480	7,516,040	3,886,149	11,525,669	156,983,340	115,958,646
2021	0.31	0.34	39,214,965	27,110,652	12,792,429	79,118,046	2,346,115	142,804,752	73,836,837	218,987,704	41,561,080	169,915,404

Year	Vaccines Age 65+ (All)	Vaccines TOTAL (All)	Deaths Age 0-17 (COVID-19 Vaccine)	Deaths Age 18-64 (COVID-19 Vaccine)	Deaths Age 65+ (COVID-19 Vaccine)	Deaths Age Unk (COVID-19 Vaccine)	Deaths Reported (COVID-19 Vaccine)	Deaths Age 0-17 (COVID-19 Vaccine)	Deaths Age 18-64 (COVID-19 Vaccine)	Deaths Age 65+ (COVID-19 Vaccine)	Deaths Age 0-17 (Non-COVID-19 Vaccine)	Deaths Age 18-64 (Non-COVID-19 Vaccine)	Deaths Age 65+ (Non-COVID-19 Vaccine)
2014	40,570,575	275,679,155	0	0	0	0	0	0	0	0	56	19	29
2015	42,834,393	283,396,839	0	0	0	0	0	0	0	0	66	11	33
2016	42,037,856	277,556,171	0	0	0	0	0	0	0	0	71	20	32
2017	44,796,591	283,410,790	0	0	0	0	0	0	0	0	64	3	18
2018	42,179,638	262,844,999	0	0	0	0	0	0	0	0	47	13	29
2019	49,712,958	299,697,130	0	0	0	0	0	0	0	0	43	20	32
2020	55,055,866	327,997,852	0	3	15	0	18	0	3	15	38	12	21
2021	86,629,266	298,105,750	9	620	2,524	209	3362	79	690	2,594	3	8	22

Year	Raw Deaths Age Unk (Non-COVID-19 Vaccine)	Deaths Reported (Non-COVID-19 Vaccine)	Deaths Age 0-17 (Non-COVID-19 Vaccine)	Deaths Age 18-64 (Non-COVID-19 Vaccine)	Deaths Age 65+ (Non-COVID-19 Vaccine)	Raw Deaths Reported Age 0-17	Raw Deaths Reported Age 18-64	Raw Deaths Reported Age 65+	Raw Deaths Reported Age Unk	Deaths Reported Total	Deaths Reported Age 0-17	Deaths Reported Age 18-64	Deaths Reported Age 65+
2014	31	135	66	29	39	56	19	29	31	135	66	29	39
2015	32	142	77	22	44	66	11	33	32	142	77	22	44
2016	52	175	88	37	49	71	20	32	52	175	88	37	49
2017	35	120	76	15	30	64	3	18	35	120	76	15	30
2018	73	162	71	37	53	47	13	29	73	162	71	37	53
2019	86	181	72	49	61	43	20	32	86	181	72	49	61
2020	76	147	63	37	46	38	15	36	76	147	63	40	61
2021	14	47	8	13	27	12	628	2,546	223	3409	86	702	2620