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Covid "Vaccines": A Faltering Framework

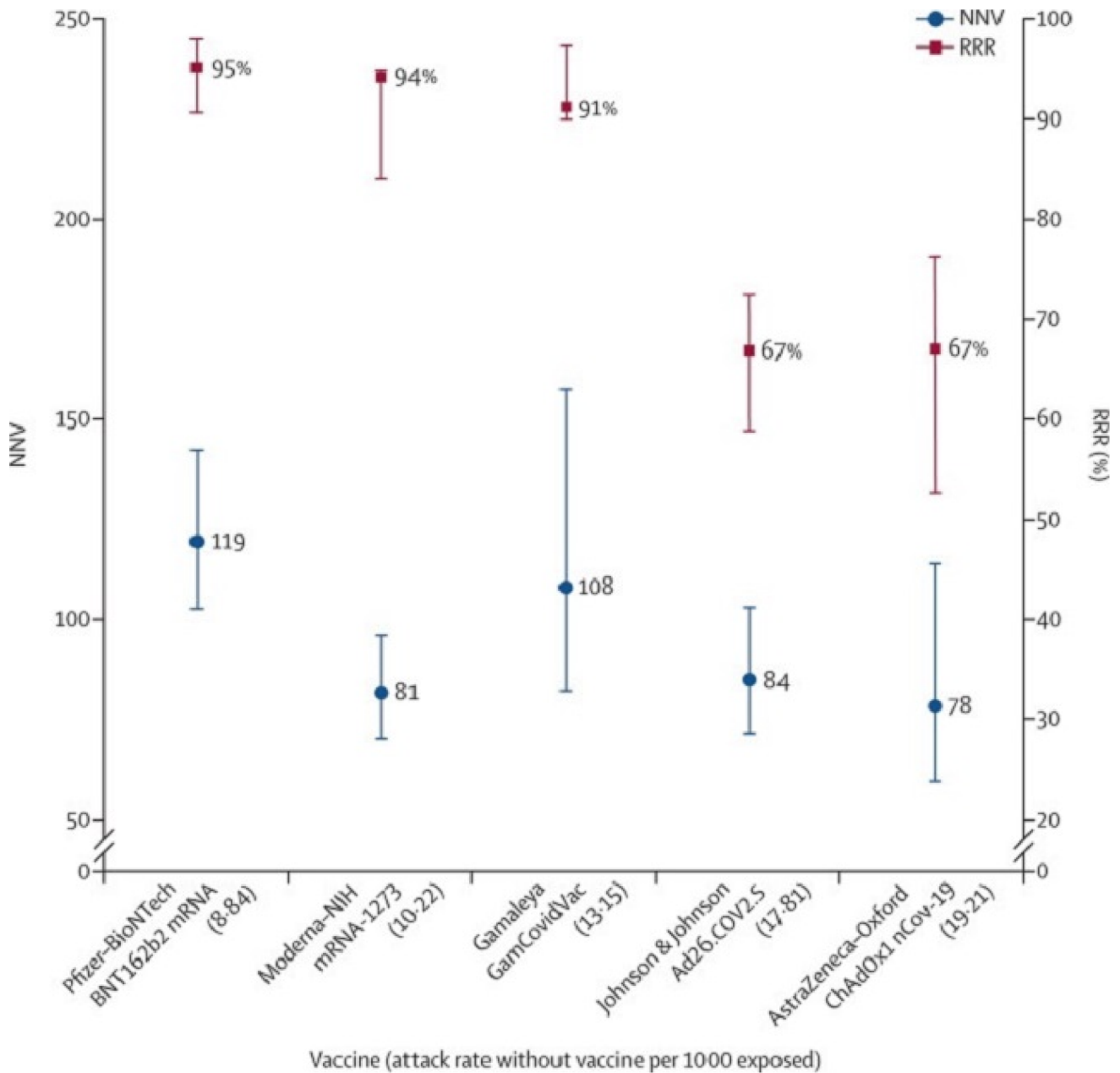
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Photo by Ali Raza from PxHere.

On April 20, The Lancet published an analysis on the efficacy of the Covid **injections**. This analysis supports conclusions made in my earlier **analysis**. That being: the Covid injections are NOT “95% efficacious”.

Beyond the analysts' tepid language couched in scientific jargon, the graphic that appears is quite startling. As is often true, the devil lies in the details, in this case, the difference between *relative* risk reduction and *absolute* risk reduction. (For elaboration on these metrics, please see my article linked above).



Relative risk reduction (RRR) and Number Needed to Vaccinate (NNV) for leading Covid "vaccines" (Source: The Lancet)

From the "absolute risk reduction" you can calculate the **Number Needed to Vaccinate** which signifies approximately how many people

must be injected to hypothetically benefit just one person. It is a metric every person needs to understand before taking the Covid injection.

Below are the Numbers Needed to Vaccinate (NNV) metrics for Covid “vaccines”:

	Relative Risk Reduction	Absolute Risk Reduction	NNV (Numbers Needed to Vaccinate)
Pfizer/BioNtech	95%	0.84%	119
Moderna	94%	1.2%	81
J&J	67%	1.2%	84
AstraZeneca-Oxford	67%	1.3%	78

Number Needed to Vaccinate (NNV) = 1/Absolute Risk Reduction

For Pfizer, this number is estimated at 119. This means 119 people must be injected for it to reduce a “Covid” case in one person. Therefore, 118 of those people incurred (potential) risk with no benefit whatsoever.

Some estimates are even higher, according to The Lancet, data from the Pfizer rollout in Israel suggests an NNV of 217!

These NNV figures are likely underestimates, as there is significant obfuscation with trial data. The actual efficacy is likely *even less* than 1% as some of the injected groups who became ill with “Covid like symptoms” were fallaciously labelled as side effects, rather than potential breakthrough infections.

Also unaccounted for, in the lucky 0.84% of people who hypothetically benefitted from the “vaccine”, are the side effects. Efficacy metrics *do not include adverse events from the injections*. In other words, safety and efficacy are entirely different considerations. For example, even an efficacious intervention may not be safe if the risk of harm is high.

This “vaccine” experiment is only a few months old, yet the passive VAERS reporting system in the USA has accounted for deaths following Covid injections as already being greater than the previous 21 years of deaths *from all other vaccines combined*, as well as over 227,000 other non-fatal **adverse events**. What’s more, it is reported that the VAERS system records only approximately *1% of actual adverse events*.

Many alarmed researchers and doctors around the world have called to halt this experiment, citing a growing **body of unusual side effects** and **associated deaths**. For Covid injections, it must be clear that the complete safety profile is unknown.

Furthermore, the “reduction” is not a decrease in deaths and hospitalizations, rather a reduction of symptoms. The majority of these supposedly alleviated symptoms being of a generic cold and flu variety. To quote **the Lancet study**:

“ *These considerations on efficacy and effectiveness are based on studies measuring prevention of mild to moderate COVID-19 infection; they were not designed to conclude on prevention of hospitalization, severe disease, or death, or on prevention of infection and transmission potential.*”

On top of that, these mild “cases” which are being “prevented” are determined by the **unvalidated PCR assays**.

As mentioned, the efficacy is based on reduction in symptoms, and even then possibly only for a limited period of time. Already it has been **announced that boosters are necessary**, perhaps annually or twice a year.

This **paltry efficacy** is not unusual for the vaccine regime that is justified on the basis of benefitting the overall population. However, in this case, the argument for benefitting the overall population cannot apply, as no definite evidence for a reduction in transmission has been provided.

In addition, these injections are still experimental. Phase 3 trials are ongoing and this synthetic gene “therapy” technology has never been dispensed before. Every day, new information is coming to the fore, such as this animal pharmacokinetic study which shows that the injected vectors ended up in different organs, **especially ovaries and spleen**. Canadian researcher, Dr. Bridle, **shared his concerns on recent findings** of biodistribution of lipid nano-particles and the spike proteins in injected people.

Tragically, panic-stricken masses are deluded with the propaganda that these injections are 95% efficacious. This is a useless metric based on relative risk reduction. The absolute risk reduction is around 1%. Millions are unwittingly participating in an unprecedented experiment. The Nuremberg Code and principles of Informed Consent are violated daily.

It is advisable to print out the above table and request one’s vaccinator to explain this metric. To properly exercise ethical and legal informed consent, every trial participant must understand the potential

benefits and risks from the injections, the potential risks from Covid (based on age and health status) as well as the efficacious treatment alternatives for those who may need them.

Would you feel comfortable suited up with a parachute that worked about 1% of the time? Would you then say that it is 95% effective because that particular parachute worked 95% better than the competition?

A product with very questionable, miniscule efficacy and many concerns regarding potential severe short and long-term side effects (including deaths), might be more accurately classified as a poison.

“ *A poison can be described as ‘any substance which when introduced into or absorbed by a living organism, destroys life or injures health’. The adverse effects may take many forms from immediate death to subtle changes not realized until months or years later.*”

—Definition of “poison”, according the **Royal Society of Chemistry**

One can hope that as this nefarious experiment unfolds, data and rationality will trump fear, hysteria, and the etiolated minds of the masses. May Justice prevail and these crimes against humanity be brought to **account**.

Sadaf Gilani MD is a Canadian entrepreneur and activist.





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