

## Why Many People Are Not Getting a COVID Vaccine: Part III

As mentioned in last week's newsletter, the rush to get a COVID vaccine seems to be slowing. About one third of Americans have received at least one shot, and the rest of us are saying "no," and some of us are saying, "hell no!" Some people appear to be baffled by those who adamantly refuse to get a COVID vaccine, or any vaccine for that matter. This series focuses on the many reasons why people refuse the shots.

Vaccine makers have no financial liability for harm caused by their products.

In 1982, four large drug companies, Merck, Wyeth, Lederle, and Connaught, threatened to stop marketing vaccines in the U.S. unless they were given immunity against damage claims due to injuries and deaths in vaccinated people. They had reason to be concerned - an article in the British Medical Journal reported that in analyzing 1000 cases referred to the National Childhood Encephalopathy Study, "A significant association was shown between serious neurological illness and pertussis vaccine..."[1]

An Institute of Medicine committee concluded that there was a causal relationship between the DPT vaccine and acute encephalopathy.[2]

In response, Congress passed the National Childhood Vaccine Injury Act of 1986, which virtually eliminated all liability of vaccine makers for injuries or deaths resulting from the use of their products. The National Vaccine Injury Compensation Program (NVICP) was created to pay for injuries and deaths, and a tax was instituted on every vaccine to finance damage awards. Claims for injury or death are filed with the United States Court of Federal Claims, and injured people and/or their families are charged a fee for filing.[3]

Most people do not know that the program exists, and the statute of limitations is shorter than for other court proceedings. Some cases drag on for years, and it is not unusual for claimants to be required to sign secrecy agreements in order to receive compensation. The payouts are generally miserably low, while the cost of caring for some injured people for life can be extraordinary.

In spite of these limitations, as of April 1 2021, the court has paid over \$4.5 billion in damages to victims and their families.[4] During the last 26 years, during which both I and my associates have had contact with hundreds of vaccine-injured people and/or their families, I've met only two people who were aware of the NVICP within the time period required to make a claim. This means that it is highly likely that the total paid for damages to date is a small percentage of the actual damages incurred in the American population.

It's hard to imagine that Americans would purchase other products if the U.S. government protected other manufacturers from liability the way that vaccine makers are protected. Take cars for example. How comfortable would you be purchasing a car marketed in the U.S. if there were no consequences for failing brakes, gas tanks that catch fire, and other mechanical failures that have occurred in the past? When discussing almost any product other than a vaccine, the prevailing point of view is that the ability to sue and the threat of financial liability is an incentive to make safe products and for the marketplace to reject those that are unsafe and/or unreliable. While the courts are not always fair, they provide some protection against unreasonable injury or death resulting from the use of a consumer

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product. The fact that all of the vaccine makers have been convicted of serious crimes (see previous newsletter articles on this topic) would seem to make this remedy for damages all the more important.

There is even less recourse for injuries as a result of the COVID vaccines.

The families of those who are injured or killed by the COVID vaccines are not eligible for compensation from NVICP if they receive the shots while the false emergency declaration is in place. According to an article in the New England Journal of Medicine the emergency declaration triggered the Public Readiness and Preparedness (PREP) Act, which in turn requires that all claims be filed under the Countermeasures Injury Compensation Program (CICP). The terms for filing with the CICP are even worse. The statute of limitation is one year after the date of vaccination, the financial rewards are even smaller, and the burden of proof is even higher. Lost income recovery is limited to \$50,000 per year, and there is no compensation for pain, suffering, and emotional distress.[5]

There are significant conflicts of interest at federal agencies governing vaccine approval.

The individuals and agencies that decide which vaccines are approved are highly conflicted. For example, in 2019, \$2.6 billion out of the FDA's \$5.7 billion-dollar budget was paid for by drug and device makers through user fees.[6] It is a well-known fact that the FDA repays the drug companies for this generosity with fast approvals for questionable drugs.[7]

FDA advisors and committee members are equally conflicted. According to an article in Science, 40 of 107 physician advisors on FDA committees had "received more than \$10,000 in post hoc earnings or research support from the makers of drugs that the panels voted to approve, or from competing firms." And out of those forty, 26 had received over \$100,000 and six of those had been given \$1 million or more in compensation. Additionally, most of the top earners had received other funding from the same drug companies in the year before they served as advisors.[8]

The Centers for Disease Control (CDC), which most people think is an independent agency, has significant financial ties to drug companies too. A 1980 law allows the CDC to actually be in the vaccine business. The agency holds dozens of vaccine and vaccine technology-related patents, some in partnership with vaccine makers and universities.[9] [10] [11] [12] [13] [14] [15] [16] [17] [18] [19] [20] [21] [22] [23] [24] [25]

The CDC's Advisory Committee on Immunization Practices (ACIP) is the entity that votes to add a vaccine to the schedule. Many members of (ACIP) are paid advisors or researchers for vaccine makers, or share ownership of vaccine patents with these companies.[26]

Vaccines added to the schedule by ACIP are then covered by the Vaccines for Children Program (VFC), which is administered by the CDC. The CDC purchases billions of dollars of vaccines from the drug companies using taxpayer money and distributes them to state health departments for distribution to eligible children.[27]

To be continued next week.  
Pamela A. Popper, President  
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