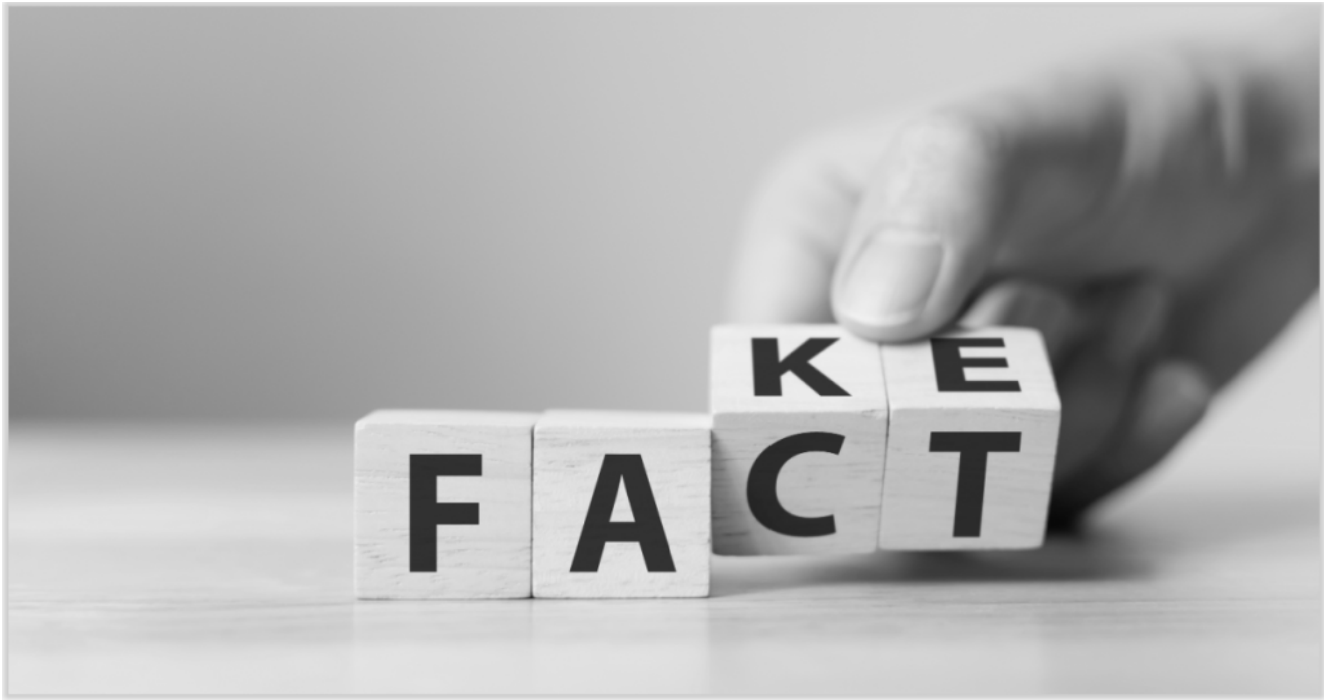


# CDC Caught Using Highly Misleading Data to Justify COVID Shots for Kids



The Centers for Disease Control and Prevention (CDC) used [highly misleading](#) data on the risks of COVID-19 to children to justify expanding emergency use authorization (EUA) of Pfizer and Moderna's COVID-19 vaccines for kids 6 months to 5 years old.

The CDC during a meeting of its Advisory Committee on Immunization Practices (ACIP) on June 17 to discuss pediatric COVID-19 vaccines in children under 5, [presented a table](#) falsely claiming COVID-19 was a leading cause of death in U.S. children.

This statement was used to justify giving Moderna and Pfizer's experimental COVID-19 vaccines associated with million of adverse events to the nation's youngest children, and to support the false assertion the benefits of COVID-19 vaccines outweigh the risks.

## COVID-19 is a leading cause of death among children ages 0–19 years

March 1, 2020–April 30, 2022

Age group	Rank of COVID-19 among causes of death
<1 year	4
1–4 years	5
5–9 years	5
10–14 years	4
15–19 years	4

Based on death certificate data from the National Center for Health Statistics. COVID-19 based on cumulative total incidence of COVID-19 deaths from March 1, 2020–April 30, 2022.

Source: Flaxman S, Whittaker C, Semenova E et al. Covid-19 is a leading cause of death in children and young people ages 0-19 years in the United States. medRxiv 2022.05.23.22275458; doi: <https://doi.org/10.1101/2022.05.23.22275458>

That table was [disseminated widely](#) by physicians on [Twitter](#) who claimed the data “made the case” for vaccinating children under 5.

*These CDC ACIP slides make the case for vaccinating children <5. [#covid19](#) may be milder in kids than adults, but it's still a top reason for child fatality.*

*We give routine childhood vaccinations for other diseases that cause less deaths—because the point is to prevent them. [pic.twitter.com/oGG00uneWS](https://pic.twitter.com/oGG00uneWS)*

– Leana Wen, M.D. (@DrLeanaWen) [June 18, 2022](#)

The CDC presented the [same slide](#) during the U.S. Food and Drug Administration’s (FDA) vaccine advisory committee earlier that week, along with other slides citing [false claims](#) COVID-19 is a “top 5 cause of death” in children.

*This is why today's news from [@US\\_FDA](#) is so important. If you don't want to protect YOUR kids from one of the top 5 causes of death, that's on you. But don't stand in the way/ try to*

*stop other parents from protecting their own damned kids...*

<https://t.co/VxM6vol70N>

– Jerome Adams (@JeromeAdamsMD) [June 17, 2022](#)

The table was part of a [slide deck](#) on the epidemiology of COVID-19 in children and adolescents by Dr. Katherine Fleming-Dutra, a pediatrician and pediatric emergency medicine physician with the CDC, and was sourced from a [pre-print](#) study written by a group of researchers in the UK.

The preprint claimed COVID-19 caused more than 1 million deaths in the U.S, including at least 1,433 deaths among children and young people aged 0 to 19 years old from March 1, 2020 – April 30, 2022.

The study's authors originally ranked COVID-19 ninth among all causes of death in children and adolescents ages 0 to 19, fifth in disease-related causes of death – excluding accidents, assault and suicide – and first in deaths caused by infectious/respiratory diseases.

One issue is that the study [conflated deaths](#) caused directly by COVID-19 by including deaths where COVID-19 was only a contributing factor. This allowed the CDC to claim COVID-19 was responsible for more deaths in children than it actually was.

Although the authors of the preprint stated they “only consider COVID-19 as an underlying – and not contributing – cause of death,” that claim was false.

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The [preprint](#) cited data from the National Center for Health Statistics (NCHS), which [tabulates COVID-19 deaths](#) by including any death certificate on which COVID-19 is mentioned, not just those cases where it was the primary cause of death.

### What is officially counted as a COVID-19 death?

- Deaths are attributed to COVID-19 when Coronavirus Disease 2019, COVID-19, or other similar term(s) are reported as a *cause* or *contributing cause* of death on the death certificate.
  - When COVID-19 is reported by the certifier as a cause of death, it is coded to the *International Classification of Diseases, 10<sup>th</sup> Revision* (ICD-10) code for mortality for COVID-19, which is **U07.1**.
  - NCHS counts of deaths due to COVID-19 include only deaths that have U07.1 as a cause or contributing cause of death.

Using NCHS data, there were 1,433 pediatric COVID-19 deaths through April 30, 2022, but using the [CDC's own mortality statistics](#), which count only deaths where the virus was the underlying cause, there were only 1,088 pediatric deaths – which is nearly 25% lower.

After the misleading data was brought to the attention of the authors, the [preprint was revised](#) to reduce the number of COVID-19 deaths among children and adolescents from 1,433 deaths to 1,088 deaths – making COVID-19 the 8th leading cause

of death in the 0 to 19 age group.

“It’s really disturbing that data this poor made its way into the meetings to discuss childhood COVID, and that it took me less than a few minutes to find a major flaw (and then I found many more as I looked deeper),” according to “Kelley,” a researcher behind the “COVID-19 in Georgia” [website](#).

Kelley questioned why UK researchers didn’t use data from their own country to support their findings:

“Could it be because the U.S. counts COVID deaths very generously, so our data made it easier to present COVID as a leading cause of death in children?” Kelley asked. “In addition, why did they inflate the counts by including 18 and 19-year-olds in the data, when the pediatric population is generally accepted to be 0-17?”

## **Cumulative COVID-19 deaths ranked with annual rates for other causes of death**

According to Kelley, who has been analyzing COVID-19 data since May 2020 on her website [COVID-Georgia.com](#) and was the first to point out flaws in the study, one misleading aspect of the preprint the CDC presented to its advisors was that it [ranked cumulative COVID-19 deaths](#) alongside annual rates for other causes of death.

[Cumulative death rate](#) refers to the proportion of a group that dies over a specified time interval. [Annualized deaths](#) are those that occur over the course of a year.

In ranking COVID-19 deaths by age group, the authors of the preprint included both cumulative (over 26 months) and annualized deaths, which inexplicably ranked COVID-19 twice for each age group.

For instance, in the [1 to 4 age group](#), the paper claimed cumulative COVID-19 deaths were the 5th leading cause of death – ahead of heart disease and influenza – yet further down the list, it ranked annual COVID-19 deaths in this age group as 8th.

For each age group, the cumulative COVID-19 death rate was more than double the annualized death rate.

Kelley recreated the results of the preprint using [CDC WONDER](#), which utilizes “a rich ad-hoc query system for the analysis of public health data” to obtain deaths where COVID-19 is listed as the underlying cause of death during the time period listed, and annualized the results.

Kelley also shows the [annualized number of deaths](#) when using only deaths with COVID-19 listed as the underlying cause of death.

Age Group	CDC Ranking	Corrected Ranking
<1 year	4	9
1-4 years	5	8 (in a 4-way tie)
5-9 years	5	8 (in a 4-way tie)
10-14 years	4	8 (in a 2-way tie)
15-19 years	4	6

Age Group	Annualized NCHS Deaths (Underlying or Contributing COD)	Annualized WONDER Deaths (Underlying COD Only)
<1 year	124	79
1-4 years	62	48
5-9 years	62	49
10-14 years	90	66
15-19 years	324	260

When the data is annualized and [only includes deaths](#) where the virus was the underlying cause, COVID-19 does not rank as a

leading cause of death for young children.

For kids under age 1, COVID-19 ranks ninth, behind influenza and pneumonia, heart disease and homicide. Accidents are almost 25 times as likely to kill an infant than COVID-19, according to the CDC WONDER data.

Among kids aged 1 to 4 and 5 to 9, COVID-19 ranked in a four-way tie for the eighth leading cause of death. For ages 10 to 14, it ranked in a two-way tie for eighth. For teenagers between 15 and 19 years old, it dropped in the cause of death ranking from fourth to sixth.

Using corrected rankings, there are still issues with the entire concept of showing the impact of COVID deaths in children using rankings, [according to Kelley](#).

Kelley wrote:

*“Rankings overstate the impact of COVID, because the top few causes of death far outweigh the causes further down the list. For example, in ages 1 to 4, accidents account for almost 25 times as many deaths as COVID-19 on an annualized basis.*

*“Furthermore, for each of the 4 age groups covered by the CDC slide, the very broad “accidents” is the leading cause of death. If we break that down further, causes of death like drownings, vehicle crashes, drug overdoses, would be individual causes of death greater than COVID in various age groups.”*

Another issue with the preprint is that it used data from 2019 instead of 2020 or 2021 to compare other causes of death with COVID-19. According to the CDC website on “excess deaths associated with COVID-19,” the nation’s response to the pandemic may have [altered mortality patterns](#).

The CDC states:



*“[...] The estimates of excess deaths reported here may not be due to COVID-19, either directly or indirectly the pandemic may have changed mortality patterns for other causes of death. Upward trends in other causes of death (e.g., suicide, drug overdose, heart disease) may contribute to excess deaths in some jurisdictions. Future analyses of cause-specific excess mortality may provide additional information about these patterns.”*

Kelley wrote:

*“On the CDC side, how did Dr. Katherine E. Fleming-Dutra, M.D. at the CDC – a pediatrician and doctor of emergency medicine – not realize this data was seriously flawed and out of line with all other data about the impact of Covid on pediatric mortality? How did a pre-print get used in an ACIP and FDA presentation with such little oversight without the quality of the data being fully vetted? How did I uncover these issues, instead of them being identified by someone whose job it is to evaluate this kind of data?”*

“We are forced to believe that the CDC researchers who put this data together are either incompetent or liars and when all the mistakes go in the same direction, it certainly seems like the CDC uses whatever data they can find to push their agenda without any consideration to its veracity,” Kelley said.

## **Researchers revise pre-print but misrepresent data to exaggerate COVID deaths**

A [revised pre-print](#) released on June 28 admitted to the error of improperly calculating COVID-19 deaths and adjusted the rankings for each age group using CDC WONDER data, yet the



authors [utilized several tactics](#) to exaggerate COVID deaths in children.

First, the authors reduced the study period in the revised pre-print from March 1, 2020 – April 30, 2022, to April 1, 2021 – March 31, 2022 – selecting the worst 12-month period of the pandemic.

The [authors claimed](#) that changing the date range “simplified” comparison time periods.

“We have fixed an error: our comparisons now use COVID-19 underlying cause of death data obtained from CDC Wonder. We have also simplified the comparison time periods,” the [revised pre-print](#) states in a footnote.

The revised pre-print used publicly available data from CDC WONDER, but compared it to mortality in 2019 during the immediate “pre-pandemic period.”

Researchers then “found” that “COVID-19 mortality is a leading cause of death in CYP [children and young people] aged 0-19 years in the U.S.”

The authors of the study [admitted in the revision](#) that “deaths among U.S. CYP are rare in general” so they argued the mortality burden of COVID-19 in the younger age groups is “best understood in the context of all other causes of CYP death.”

The authors also altered the study, adding a “percentage of top 10 deaths” to the table for children ages 1 to 4, instead of noting where COVID-19 fits as a percentage of all-cause deaths.

The COVID-19 deaths were then compared to deaths from a different time period.

<b>Table 1(b)</b> <b>Age: 1-4 year olds</b>				
<b>Leading Causes of Death</b>	<b>Crude Rate (per 100,000)</b>	<b>Deaths</b>	<b>Rank</b>	<b>% of top 10</b>
#Accidents (unintentional injuries) (V01-X59,Y85-Y86)	7.3	1149	1	43
#Congenital malformations, deformations and chromosomal abnormalities (Q00-Q99)	2.6	416	2	15.6
#Malignant neoplasms (C00-C97)	1.8	285	3	10.7
#Assault (homicide) (*U01-*U02,X85-Y09,Y87.1)	1.8	284	3	10.6
#Diseases of heart (I00-I09,I11,I13,I20-I51)	0.8	133	5	5
#Influenza and pneumonia (J09-J18)	0.8	122	5	4.6
#COVID-19 (U07.1)	0.5	73	7	2.7
#Certain conditions originating in the perinatal period (P00-P96)	0.4	57	8	2.1
#Septicemia (A40-A41)	0.3	53	9	2
#Cerebrovascular diseases (I60-I69)	0.3	52	9	1.9
#In situ neoplasms, benign neoplasms and neoplasms of uncertain or unknown behavior (D00-D48)	0.3	49	9	1.8

“Keep in mind that even by manipulating the dates to choose the worst months of Covid they couldn’t get COVID to stay in the top 5 for age groups under 15,” [Kelley tweeted](#). Is [@CDCgov](#) disappointed their big talking point has been officially busted? Will [@CDCDirector](#) ever admit it?”

[Dr. Susan Brewley](#), an obstetrician and BMJ award winner did a [side-by-side comparison](#) of the two pre-prints and concluded there should be a “major retraction” or “corrected post-publication” as the pre-print was significantly altered.

## CDC and FDA fail to acknowledge misleading data

[The Daily Caller](#) reached out to the CDC about its misleading data and asked how the study made it through the agency’s “rigorous review process.” The CDC failed to respond to

multiple requests.

The Daily Caller also [made multiple attempts](#) to contact the FDA.

The FDA said:

“FDA speakers in the June 14-15th meeting of the Vaccines and Related Biological Products Advisory Committee (VRBPAC) did not cite the study in question in their presentations. FDA’s press release announcing the authorizations explains the basis for our determinations.”

But as [slides from the meeting](#) show, that’s not entirely true.

Although the FDA itself did not present the paper [during the meeting](#), the paper [was presented](#) by Fleming-Dutra who claimed COVID-19 was a leading cause of death among children and adolescents 1 to 19 years of age and cited the erroneous pre-print and NCHS statistics as the source of the data.

That slide and others claiming COVID-19 was a leading cause of death among children [formed the basis](#) of the panel’s decision to recommend expanding the Emergency Use Authorization of Pfizer and Moderna’s COVID vaccines to infants and toddlers.

[The Daily Caller](#) reached out to all 11 authors listed as contributors to the research. Only Deepti Gurdasani, an epidemiologist and senior lecturer at Queen’s University of London responded.

Gurdasani wouldn’t comment on the effect of publishing flawed research affecting the healthcare of millions of children other than to chastise Fox host and Daily Caller co-founder, Tucker Carlson.

“I also see you’re founded by Tucker Carlson... frankly, I am surprised by your stated commitment to accuracy here, given that!!! But well....” she wrote in response to questions.

Another author of the study, Seth Flaxman, senior lecturer in statistics at Imperial College London [tweeted](#) after the flaws in the paper were exposed that his team was working on a revised version of the study.

*Our preprint on Covid mortality in children and young people (<https://t.co/UypTJMgAn2>) in the US was cited at the FDA VRBPAC and CDC ACIP meetings this past week. It shows: Covid-19 is a leading cause of death in children in the US.*  
1/3

– Seth Flaxman (@flaxter) [June 19, 2022](#)

To date, neither the CDC nor FDA have publically issued a comment or correction on the flawed study cited by the CDC during vaccine advisory meetings to determine whether COVID-19 vaccines should be authorized for infants and small children. The study has also not been retracted.