Latest VAERS Data Show 1.5 Million Adverse Events, 33,591 Deaths Reported Following COVID-19 vaccines



The latest data from the Vaccine Adverse Event Reporting System (VAERS) released today reinforces the continuous climb of adverse events and deaths attributed to COVID-19 vaccines.

Between Dec. 14, 2020, and Jan. 6, 2023, 1,499,447 adverse events were reported to VAERS attributed to COVID-19 vaccines. This includes 33,591 reports of deaths and 274,823 serious injuries. Of the 33,591 reported deaths, 21,147 cases are attributed to Pfizer, 9,359 to Moderna, 2,904 to Johnson & Johnson, and 0 to Novavax. Of the reported deaths, 9% occurred within 24 hours of vaccination, and 13% occurred within 48 hours of vaccination.

VAERS is a voluntary reporting system co-managed by the U.S. Food and Drug Administration and Centers for Disease Control and Prevention (CDC) designed to detect vaccine safety

signals. The data released is usually one week behind, so data released today, on Jan. 13, reflects reports up to Jan. 6, 2023.

Excluding "<u>foreign reports</u>" to VAERS, <u>922,020 adverse events</u>, including <u>16,315 deaths</u> and <u>97,533 serious injuries</u>, were reported in the U.S. between Dec. 14, 2020, and Jan. 6, 2023.

Foreign reports are reports from foreign subsidiaries sent to U.S. vaccine manufacturers. Under FDA regulations, if a manufacturer is notified of a foreign case report describing an event that is both serious and does not appear on the product's labeling, the manufacturer must submit the report to VAERS.

In the U.S., 664 million <u>COVID-19 vaccine doses</u> had been given as of Jan. 4, including 396 million doses of Pfizer, 249 million doses of Moderna, 19 million doses of Johnson & Johnson, and 70,000 doses of Novavax.

Bivalent Booster Data

As of Jan. 4, <u>48 million people</u> received an untested, updated bivalent booster dose targeting the no-longer-existing Wuhan strain and obsolete BA.4/BA.5 omicron subvariants.

Between the rollout of bivalent boosters in September 2022 and Jan. 6, there were 16,525 adverse events reported to VAERS, with 43% attributed to Moderna's booster and 57% attributed to Pfizer/BioNTech. The data included 133 deaths, 1,060 serious injuries, and 51 reports of myocarditis and pericarditis (heart inflammation).

Note the CDC uses a <u>narrowed case definition</u> of "myocarditis," which allows them to exclude cases of cardiac arrest, ischemic strokes, and deaths due to heart problems that occur before one has the chance to go to the hospital, obtain a diagnosis, or "dies suddenly."

To meet the case definition of myocarditis, people must have had "symptoms such as chest pain, shortness of breath and feelings of having a fast-beating, fluttering or pounding heart, and medical tests to support the diagnosis of myocarditis and rule out other causes."

The CDC website does not state what happens to these cases, but there is no indication they are tracked or included in the CDC's myocarditis numbers.

According to the CDC, VAERS data <u>available to the public</u> include the initial reports to VAERS. Any updates or corrections to reports during follow-up are used by the government for analysis but are not made available to the public. In other words, we may see an initial report for a heart problem that later leads to death, but we will not see an updated report if a person dies, nor will that death be included in the statistics.

Data for 6-month-olds to 5-year-olds

- <u>5,482 adverse events</u>, including <u>223 cases rated as serious</u> and <u>13 reported deaths</u>.
- <u>5 reports</u> of myocarditis and pericarditis.
- <u>33 reports</u> of blood clotting disorders.
- <u>56 reports</u> of seizures.

Data for 5- to 11-year-olds

- <u>16,567 adverse events</u>, including <u>747 rated as serious</u> and <u>33 reported deaths</u>.
- <u>48 reports</u> of myocarditis and pericarditis.
- 74 reports of blood clotting disorders.
- <u>192 reports</u> of seizures.

Data for 12- to 17-year-olds

- <u>40,982 adverse events</u>, including <u>4,481 rated as serious</u> and <u>135 reported deaths</u>.
- 273 reports of anaphylaxis among 12- to 17-year-olds where the reaction was life-threatening, required treatment, or resulted in death.
- 1,341 reports of myocarditis and pericarditis, with 1,174 cases attributed to Pfizer's vaccine.
- <u>306 reports</u> of blood clotting disorders, with <u>280</u> cases attributed to Pfizer.
- 29 cases of postural orthostatic tachycardia syndrome (POTS), with all cases attributed to Pfizer's vaccine.

Data for all age groups to VAERS

- 16% of deaths were related to cardiac disorders.
- 53% of those who <u>died were male</u>, and 41% <u>were female</u>. The remaining death reports do not list the gender of the deceased.
- The <u>average age</u> of death was 72.
- As of Jan. 6, <u>8,886 pregnant women</u> reported adverse events related to COVID-19 vaccines, including <u>5,148</u> reports of miscarriage or premature birth.
- Of the <u>16,922 cases of Bell's palsy</u> reported, 73% were attributed to Pfizer vaccinations, <u>22% to Moderna</u>, and <u>5% to J&J</u>.
- 3,168 reports of Guillain-Barré syndrome.
- 10,297 reports of anaphylaxis where the reaction was life-threatening, required treatment, or resulted in death.
- 8,248 reports of myocardial infarction and cardiac arrest.
- 45,093 reports of blood-clotting disorders. Of those, 30,916 reports were attributed to Pfizer, 10,200

<u>reports</u> to Moderna, and <u>3,901 reports</u> to Johnson & Johnson.

- <u>25,056 cases</u> of myocarditis and pericarditis, with <u>18,988 cases</u> attributed to Pfizer, <u>5,575 cases</u> to Moderna, and <u>435</u> to Johnson & Johnson.
- <u>78 cases</u> of Creutzfeldt-Jakob disease, with <u>64</u> cases attributed to Pfizer, <u>12</u> to Moderna, and <u>2</u> to J&J.
- <u>635 cases</u> of POTS, with <u>462 cases</u> attributed to Pfizer, <u>147 cases</u> to Moderna, and <u>25 cases</u> to Johnson & Johnson.

VAERS is <u>estimated</u> to represent only 1% of actual adverse events. Reports submitted require further investigation before a causal relationship can be confirmed; however, U.S. regulatory agencies neither properly investigate nor acknowledge causal relationships between adverse events and COVID-19 vaccines.

Although healthcare providers are required by law to report vaccine adverse events to VAERS, research shows very few do. It is essential that anyone who experiences an adverse event <u>report their own injury</u>.