

Top Scientists at U.S. Health Agencies Are Quitting, Embarrassed by ‘Bad Science’



Doctors and Scientists at top levels of U.S health agencies are quitting in droves as poor decisions, described by inside officials as “bad science,” have led to low morale and continuous controversies.

They are frustrated, exasperated and alarmed by the direction of the agencies to which they have devoted their careers, according to authors of a July 14 post [published on Substack](#).

“It’s like a horror movie I’m being forced to watch and I can’t close my eyes,” said a senior official at the U.S. food and Drug Administration (FDA). “People are getting bad advice and we can’t say anything.”

The official was referring to two recent developments inside the agency, according to Dr. Marty Makary, a professor at Johns Hopkins University School of Medicine and epidemiologist Dr. Tracy Høeg.

First, the FDA with [no solid clinical data](#) authorized COVID-19 vaccines for [infants and toddlers](#), including those who already had acquired natural immunity to COVID-19.

Second, the FDA [bypassed their vaccine advisory committee](#) just months before to authorize booster shots for young kids.

“That doctor is hardly alone,” [Makary and Høeg said](#). They were contacted by numerous agency officials who spoke to them candidly about what was going on inside U.S. health agencies on the condition of anonymity for fear of professional repercussions.

According to [The Daily Mail](#), the Centers for Disease Control and Prevention (CDC) and National Institutes of Health (NIH) are both suffering staff shortages because they have been embroiled in controversy throughout the pandemic for inconsistent messaging and decision-making that didn't seem to line up with available science.

At the NIH, doctors and scientists [complained to us](#) about low morale and lower staffing, said Makary and Høeg.

“The NIH's Vaccine Research Center has had many of its senior scientists leave over the last year, including the director, deputy director and chief medical officer,” they wrote.

One senior scientist at the NIH, who wished to remain anonymous out of fear of professional repercussions, said the agency has “no leadership right now” and there's an enormous number of jobs opening up at the highest level positions.”

The CDC is experiencing a similar exodus.

“There's been a large amount of turnover. Morale is low,” an official said. “Things have become so political, so what are we there for?”

“I used to be proud to tell people I work at the CDC,” another CDC scientist admitted. “Now I'm embarrassed.”

Why are they embarrassed? Makary and Høeg asked. In short, they're embarrassed by bad science.

"The long answer [is that] the heads of their agencies are using weak or flawed data to make critically important public health decisions, that such decisions are being driven by what's politically palatable to people in Washington or to the Biden administration and that they have a myopic focus on one virus instead of overall health," they said.

Another CDC scientist told Makary and Høeg about the shame and frustration within the agency over what happened to U.S. children during the pandemic:

"CDC failed to balance the risks of COVID with other risks that come from closing schools. Learning loss, mental health exacerbations were obvious early on and those worsened as the guidance insisted on keeping schools virtual. CDC guidance worsened racial equity for generations to come. It failed this generation of children."

Makary and Høeg said:

"First, they [the CDC] demanded that young children be masked in schools. On this score, the agencies were wrong. Compelling [studies](#) later found schools that masked children had no different rates of transmission. And for social and linguistic development, children need to see the faces of others.

"Next came school closures. The agencies were wrong—and catastrophically so. Poor and minority children suffered learning loss with an [11-point drop](#) in math scores alone and a 20% [drop](#) in math pass rates. There are dozens of statistics of this kind."

The CDC also ignored [natural immunity](#). "The vast majority of

children have already had COVID, but this has made no difference in the blanket mandates for childhood vaccines,” said Makary and Høeg.

By mandating “vaccines and boosters for young healthy people, with no strong supporting data, these agencies are only further eroding public trust,” [they added](#).

“I can’t tell you how many people at the FDA have told me, ‘I don’t like any of this, but I just need to make it to my retirement,’” an agency official told Makary and Høeg.

People are getting bad advice, but officials ‘can’t say anything’

In a July 17 interview on [Fox & Friends](#), Makary said senior officials are leaving because they see problems with the data and are frustrated, including all three leaders of the vaccine research center at the NIH – who left the agency after long careers – and top experts at the FDA.

“The top two vaccine experts at the FDA quit in protest over political interference and many people at the CDC told me that people are getting bad advice and we can’t say anything,” he said. “They’re not allowed to go to the media, and at the center of it is the treatment of children.”

Makary was referring to Dr. Marion Gruber, former director of the FDA’s vaccines office, and her deputy, Dr. Philip Krause, who reportedly left late last year after the Biden administration pushed for the general population to have COVID-19 vaccine boosters – bypassing U.S. regulatory agencies and their advisory panels – without data to support the recommendation.

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[Fox & Friends](#) co-host Peter Hegseth [questioned Makary](#) about the terrible data used to justify authorizing COVID-19 vaccines for kids:

“In the subgroup of children aged six months to two years, the [Pfizer] trial found that the vaccine could result in a 99% lower chance of infection – but that they also could have a 370% increased chance of being infected.

“In other words, Pfizer [reported](#) a range of vaccine efficacy so wide that no conclusion could be inferred. No reputable medical journal would accept such sloppy and incomplete results with such a small sample size. More to the point, these results should have given pause to those who are in charge of public health.”

Yet, without that clinical data, they’re still “pushing vaccines for infants and toddlers, for people who already had COVID and boosters for young children,” [Hegseth said](#).

“That’s right and parents are not falling for it after nearly a month of the government heavily pushing vaccines in kids under 5,” Makary responded. “Only 3% of parents have chosen to get their kids under 5 vaccinated. More parents believe in UFOs I think.”

CDC director Rochelle Walensky said “people are [eager to get their kids vaccinated](#)” but this is not the case, Makary told Hegseth, because the “vaccine trial in kids under 5 failed” – the “study was done and it showed no benefit.”

Makary said:

“Now why are we even doing clinical trials if when you get a negative result showing it has no benefit, they’re approving it anyway? You’re making a mockery of the process. This is what people within the agencies are very frustrated about. This is why they’re leaving.

“Moderna’s vaccine had a 4% efficacy and Pfizer the results were so bad with no statistical significance that one of the internal people within the CDC said that you can inject a child with the vaccine or squirt it in their face and you’ll get the same benefit.”

The public has ‘no idea’ how bad the data is

In their [article](#), Makary and Høeg said there’s an issue of how long a COVID-19 vaccine gives protection, as data in adults show that protection wanes in “a matter of months” and there’s “no such data for young children.”

“It seems criminal that we put out the recommendation to give mRNA Covid vaccines to babies without good data,” a CDC physician told Makary. “We really don’t know what the risks are yet. So why push it so hard?”

“The public has no idea how bad this data really is,” a high-level FDA official said. “It would not pass muster for any other authorization.”

And yet, the FDA and the CDC pushed it through,” Makary and Høeg wrote. That “slap in the face of science may explain why only 40% of parents in rural areas say their pediatricians [did not recommend](#) the Covid vaccine for their child.”

The White House is calling the shots

In a July 15 [interview with Tucker Carlson](#), Makary said doctors everywhere in the world, even in the government, should “always be free to speak up about their public health concerns.” Yet, right now in the government, “doctors are muzzled.”

“I talked to many doctors for [this piece](#) at NIH and CDC who are extremely frustrated,” Makary told Carlson. “They’re smart people. They know vaccine efficacy of 4% doesn’t warrant authorization. They also know there’s no health emergency right now among kids six months of age.”

Makary said he learned a lot from interviewing anonymous top officials and they’re being silenced:

“They know the underlying data. They know it’s inappropriate. They’re not allowed to speak to anyone. If a reporter calls the communications office has to approve the conversation and if they want to ask the scientist whether or not they want to do this. Tell us what you’re going to tell the reporter and then we’ll decide whether or not to approve it.”

“At the CDC, a bunch of scientists actually said ‘look we recognize the insanity of mass testing – trying to take down every case of the virus in the United States,’” Makary told Carlson. “So they came up with a plan to use sampling data like we do with influenza every year to get better numbers from the hospital of those truly in there for COVID, not just everybody with incidental COVID tests.”

Makary said he was told by top officials the plan was “rejected by the White House.”

“I heard from smart people who were just extremely frustrated that not only are they bypassing the normal scientific process, you really can’t say anything because if they do, they know their jobs are at risk and they’ll be treated very differently,” Makary [told](#) Carlson.

“One person said there’s no transparency as to how Dr. Fauci makes his decisions, he doesn’t even consult with the real experts.”

Makary and Høeg said it’s [statistically impossible](#) for

everyone who works inside U.S. health agencies to have 100% agreement but the fact there is no public dissent or debate can only be explained by the fact that they are – or at least feel that they are – being muzzled.

Makary and Høeg believe the official public response to COVID has undermined the public's belief in public health, and will ultimately lead to "potentially disastrous consequences.

"The leaders of the CDC, the FDA and the NIH should welcome internal discussion – even dissension – based on the evidence," they wrote. "Silencing physicians is not "following the science."

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