

**NEWS**

# COVID expert Dr. Peter McCullough urges 'unbreakable resistance' to vaccines for kids

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Dr. Peter McCullough

screenshot Rumble/Association of American Physicians and Surgeons

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([LifeSiteNews](#)) — Eminent COVID-19 expert and highly published physician Dr. Peter McCullough provided a comprehensive well-documented presentation to colleagues regarding the “unbelievable atrocity” occurring in the West due to gene-transfer vaccine campaigns, the necessity for an “unbreakable resistance” against children receiving the jab, and the “astounding ... ineptitude and willful misconduct” of public health agencies.

McCullough, who has made the case that no one in the world has more authority on this topic than him, provided detailed analysis of multiple scientific studies and data reports demonstrating the “failure of the vaccine program,” the suppression of effective early treatments, and the “robust, complete and durable” qualities of natural immunity.

Dr. Robert Malone, the architect of the mRNA platform used by the Pfizer and Moderna vaccines, and organizing co-signer of a recent public declaration in defense of early treatments, promoted the presentation, tweeting, “I’ll say it again. Watch the speech from Dr. Peter McCullough. He is on fire. And he is spot on. He [sic] summary of the data are [sic] precise and detailed. Please take the time to watch that video. And get outraged.”

Among many topics addressed by McCullough at the October 2 annual meeting of the American Association of Physicians and Surgeons was an initial focus on the serious lack of transparency of safety data and proper monitoring of the program.

“I have chaired data safety monitoring boards for over two dozen therapeutic products,” McCullough told his audience. His participation in this capacity has included heading boards for the National Institutes of Health (NIH) and Big Pharma corporations.

Data Safety Monitoring Boards (DSMB) are defined as a “committee of clinical research experts ... who monitor the progress of a clinical trial and review safety and effectiveness data while the trial is ongoing. This committee is independent of the people, organizations, and institutions conducting the clinical trial ... [and] can recommend that a trial be stopped early because of concerns about participant safety ...”

“I have made some critical calls as a chairman of a data safety monitoring board to shut down a program when it wasn’t safe,” McCullough explained. “And, I can tell you, that threshold is a few cases where we can’t explain it, a *few cases*. We get to five unexplained cases [and] we start to get very, very uncomfortable.” When “we get to 50 unexplained deaths in a release of a product, it’s *gone*. It’s gone. We shut it down and we figure out what went wrong. For new biologic products demand safety, safety, safety.”

## **1976 Swine flu vaccination campaign stopped after 25 death reports**

He went on to discuss the 1976 swine flu vaccine campaign the government suspended after just 10 weeks due to 25 sudden deaths and 550 reports of Guillain-Barré syndrome following vaccination.

“The comfort level was gone. We had vaccinated 25% of our 220 million people in the United States [at the time]. And that was it! The concern for safety was too great. Deaths escalated after stopping the program up to 53. *This was the standard*, and still should be the standard today,” explained the editor of two medical journals.

In contrast, with our current COVID-19 gene-transfer vaccination campaign, “we are far beyond that,” McCullough said. In fact, the current death numbers are 652 times higher than they were in 1976 when the government shut down the swine flu vaccination program.

The most recent data from the Centers for Disease Control and Prevention’s (CDC) Vaccine Adverse Event Reporting System (VAERS) released October 8 reports 778,683 adverse events in the U.S. following COVID vaccination, including 16,310 reports of deaths and 75,605 reports of hospitalizations, between December 14, 2020, and October 1.

In addition, it remains a concern that these figures are just “the tip of the iceberg,” as a “2010 Harvard-executed study commissioned by the Department of Health and Human Services (HHS) revealed that reported vaccine injuries to VAERS represent an estimated 1% of actual injuries.

More recently, whistleblowers have documented at least 45,000 and 48,000 deaths respectively from just one government database at the Centers for Medicare & Medicaid Service (CMS).

## **No DSMBs in place, and ‘No safety review! That is *malfeasance*.’**

McCullough cited a paper from May involving 57 authors from 17 countries which, having noticed no evidence of DSMBs and External Advisory Committees (EAC) established to monitor the COVID-19 vaccine drive, wrote “vaccination should be halted immediately.”

“If we don’t have safety mechanisms in place for the vaccine programs, shut them down,” McCullough said, “because [the highest priority is] safety, safety, safety. Our concern was this was a dangerous mechanism of action, we had skipped all the critical testing to understand what this is going to do long term to the human body.”

To this day, “there’s been no external advisory committees, no human ethics committee, data safety monitoring board,” he described. “The FDA and the CDC are the sponsors of the program. They cannot be the adjudicators of death. They cannot. That violates every regulatory law that we know.”

As early as January 22, “we had a big problem. We had 182 deaths,” McCullough continued (displaying slide 11 of his [power point presentation](#)). “The expected number of deaths, [from] all vaccines combined, [is] 158 per year [from approximately] 287 million shots per year in the United States. 182 [deaths using the COVID vaccines] were over the line. And if we had a data safety monitoring board, this program would have been shut down in February for excess mortality and it would have been reviewed.

“We only had 27 million people vaccinated in the United States [at the time]. What happened? Nothing! No safety review! That is malfeasance. Malfeasance is wrongdoing by those in position of authority. And that’s what happened,” he said.

Further, McCullough accused the CDC, FDA, NIH, the White House, Senate and House of Representatives of being “all implicated in this. None of them demanded an effectuated safety report and a stop in February. They are all culpable.”

## **‘One is more likely to die after the vaccine’ than from COVID itself**

Citing another early peer-reviewed safety warning by Jessica Rose (slide 12), with bar charts showing an enormous jump in reports and deaths due to vaccines in 2021, 40 times higher than in 2020, he observed, “We had Americans dying after vaccination. It was *obvious*. This is an *obvious* data signal. All experts agree it’s obvious,” and yet the vaccination program was not shut down.

In addition to the statistics above, McCullough lamented, “Sadly, we have over 20,000 Americans that the CDC tells us are permanently disabled after the vaccine. That’s bigger than some major cancer groups. The disability that we are going to see, due to these vaccines, will go down in history as an unbelievable atrocity.”

In fact, the widely published physician pointed to a paper (slide 17) which demonstrated the shots to be more dangerous than COVID-19 itself. According to McCullough, the study by Ronald N. Kostoff and others showed “that because not everybody gets the respiratory infection, and because the respiratory infection is treatable and manageable, in fact, one is more likely to die after the vaccine than [if they] just take their choice with foregoing the vaccine and potentially getting COVID-19. Statistically, in every age group, that’s the case. The [best] gamble is to gamble away from the vaccine and away from potential harm.”

## **Data demands ‘relentless, and unbreakable resistance’ to vaccination of children**

This is true especially for children. McCullough discussed the significant risk of developing myocarditis that young people face from the injections.

The FDA and the CDC recognize that myocarditis is a significant risk, having evaluated 200 cases in June where 90% of the patients were hospitalized. “We now have raced up to 5,000 cases of myocarditis in the United States,” McCullough said, and “we heard yesterday that Gavin Newsom has just mandated mandatory vaccinations for all children in California, with absolutely no concern regarding this effect which will occur in many, many children as they’re forced into the vaccine.”

Citing another “very high-quality paper” by Tracy Hoeg, McCullough explained that “myocarditis is certainly very real. It’s due to the vaccine. The chances of myocarditis, and hospitalization with myocarditis, for one of these children who is going to be forced into vaccination ... is greater than being hospitalized for COVID-19. So, it’s much better for the children to not get vaccinated and take the risk of the respiratory infection.”

“This has to be [made] abundantly clear. The FDA says, ‘WARNING: This causes myocarditis. Don’t do it.’ The FDA has told us this. The CDC agrees with all the data. That doesn’t equal mandatory vaccination for children. It mandates just the opposite: an unbelievable, relentless, and unbreakable resistance to having the children vaccinated. It is simply not safe under any conditions. Period. Full stop,” he said.

“Without protection from pharmaceutical laws, the vaccines will do more harm. There’s no doubt about it. We are in a free fall of a lawless state. And a lawless state is developing. The Office of Human Research Protections and the U.S. FDA right now, [are not] enforcing research protections for subjects. Everybody who takes a vaccine in the United States is in research. The fact that there is absolutely no protections for research subjects, and we have no enforcement of pharmaceutical laws, [is] putting us into a complete free fall. The vaccines are not safe for human use.”

## **Failing vaccines, ‘ineptitude’ and ‘willful misconduct’ of the CDC**

“The CDC started telling us through May that the vaccines were failing.” McCullough cited a report (slide 34) indicating over 10,000 “breakthrough” infections where 10% were hospitalized, and 2% died.

“That didn’t look good. After this report, the CDC said, ‘We give up. We are not going to report vaccine failures. We want to see [PCR] cycle thresholds that are below 28. They put on their website that if you took a vaccine, don’t get any more testing. But if you’re unvaccinated that you should get more testing,’ he explained. “The CDC started doing asymmetric reporting to start to craft a narrative that this was going to be a ‘failure of the unvaccinated,’ a ‘crisis of the unvaccinated.’

“But the CDC data kept coming in showing us just the opposite. July 26, they had 6,587 [breakthrough] cases” (slide 35), McCullough said. Further, of those, 95% were hospitalized, “and sadly, we had 19% who died.”

“Now we go to August 23 (slide 36), and holy smokes, we have 11,050 full vaccine failure cases that the CDC is telling America about on their website. Sadly, 87% of the deaths are over age 65, [and] 70% of the hospitalizations are over age 65. This is failure of the vaccine program in the group we really wanted to protect. And nobody has been out front with the CDC, the FDA, NIH, the White House task force, telling American seniors that the vaccines are failing,” he said.

“[Instead], what are we hearing about? The narrative we [are] hearing is ‘vaccinate children!’ What about the seniors? Where is the public health prioritization of what’s going on in America? It is astounding, the ineptitude, [and] the willful misconduct of the people running our public health agencies. It’s astounding! Look at these data! Really? We’re going to focus on California children when we have this going on? I mean, this is unbelievable. I hope this is being recorded ... They’re going to come after me. Bring it on!” he challenged.

## **‘You crush your curve with early treatment,’ not vaccines**

Given these statistics and more, McCullough went on to explain that the medical field will never be able to “vaccinate our way out of” this disease, but early treatment, which “works” and builds up herd immunity is the appropriate path.

He reported how a group in Italy “has gotten to zero hospitalizations” with early treatment. “They use a hydroxychloroquine [HCQ]-based program. They got out of their fog, *and they are treating COVID-19. It works!* In Italy, their delta curve is less than a quarter of their pre-vaccination-era curve, because they are using [HCQ] ... Japan is front-lining ivermectin, and Mexico City crushed their curves with [an] ivermectin based program. So did Peru. It keeps going and going. India. Some of you are from India. India crushed their curve. They don’t crush their curve with the vaccine! You crush your curve with early treatment. It works.”

He cited two studies (slide 56) that came up with the “same results: about an 85% reduction in hospitalization and death with multi-drug programs. And these were legacy programs. We even have better drugs now, we can use in combination.”

The Texas internist and cardiologist went on to lament the lack of treatments in nursing homes as well citing a paper by Paul Alexander (slide 57), which showed any treatment “in the nursing home compared to nothing works. Even the most modest programs — to have our senior citizens in nursing homes get COVID-19 and not get a milligram of treatment is malpractice. That is malpractice.”

## **In vaccinating the COVID-recovered, ‘we harm them considerably’**

“Vaccinating people who have had COVID-19, that have natural immunity, is at this point in time, it’s out of bounds,” said McCullough. He cited a paper by Jennifer Block (slide 58) “who has shown 20 studies support natural immunity is robust, complete and durable. Far superior to vaccine immunity.”

“There are now three studies that I have summarized, six total, showing that if we vaccinate people who are COVID-recovered, we harm them considerably,” he said. “The bottom line is, [for those] naturally immune, leave them alone. And if we have a break in this vaccine cabal, it’s going to be the naturally immune, as the vaccinated continue to get sick with COVID-19. The only backstop is natural immunity, and so we need to embrace it.

“Your grandma, in the olden days, [took you to] these chickenpox parties. [They were] not a bad idea. I went to one. You know, I got chickenpox when I was a kid. Did I take the vaccine? No, because it’s one and done. Am I taking the COVID [vaccine]? No, because I had COVID. It’s one and done. We have to get back to basics, because freedom is at risk,” he explained.

“This idea that you can win your freedom back, and there’s been some brutal commentary on CNN just saying, ‘you’re not going to get your freedoms back unless you take the vaccine.’ Since when? Since when are we going to lever freedom based on an ineffective and unsafe vaccine?”

## **It’s about ‘some type of totalitarian takeover that’s occurred all over the world’**

McCullough warned that if the people of the West do not get activated now, the assaults on freedom under the pretense of COVID-19 mitigation in Australia are going to spread quickly.

“Australia has very little COVID. On most days they have more vaccine deaths than COVID deaths. There’s something wrong going on in Australia, big time. And South Africa is next in line. Europe is next in line. It’s a very disturbing place right now,” he said. “They are at a breaking point.

“It can’t be about COVID at this stage. What’s going on in Australia is not about COVID. It’s about some type of mental contagion, it about some type of mental psychosis, some type of neurosis. Some type of totalitarian takeover that’s occurred all over the world. Something very dark is going on,” McCullough said.

He promoted a new book by Peter Breggin and Ginger Breggin which thoroughly documents the preparations for what is happening in the world right now.

“What’s going on [in] the world actually is not really about COVID. COVID is a platform, an event, that’s been planned. It’s been organized. The vaccines were planned and organized in some way to effect some type of very, very large change occurring worldwide. But whatever is going on, the principles are lockstep. And what I mean by lockstep is that everybody is in lockstep. Meaning there’s some guy on his knees in the Philippines, if he doesn’t take the vaccine, he’s not going to get his government check, and some kid is going to be on their knees in L.A. because he can’t go to school if he doesn’t take the vaccine,” he said.

“This same type of coercion and reprisal is going on worldwide. I’ve done some things on clubhouse where people beam in from the rainforests of South America, and it’s in their minds. And I say, ‘Are you on Twitter?’ ‘No.’ ‘Do you know who Bill Gates is?’ ‘No.’ ‘Do you know what GAVI is?’ ‘No.’ It’s in the minds of people!

“This cannot be about money. It cannot. It cannot be about Pfizer. It’s not. It can’t be about Bill Gates. It’s not. It’s something very, very big going on in the world. In many ways, in kind of [a] perverse way, it’s a very exciting time to be alive. All of us are charged. I can feel the charge in the room.

“Something is going on. This book has a thousand references. This book gives you the material transfer agreement between Moderna and the Chinese for the spike protein before COVID-19 was a problem. Okay? This was planned. This book has the Johns Hopkins symposium that planned the pandemic in 2017. They planned how they were going to get the scoreboard [of deaths] up on CNN,” he said.

“We feel like we’re fighting a virus, and we are fighting a virus, and we are trying to help people, but we’re on a small plane. There is something going on, on a very big plane,” McCullough concluded.

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