

**NEWS**

UPDATED. 'If you get the Pfizer vax, you're more likely to get COVID': Industry analyst flags FDA study

'So, when they weren't injected, their infection rate was 1.3% and when they got injected, it was 4.34%. It went up by over 300%,' Pfizer ex-employee Karen Kingston stated. 'They had less infection when they had no protection. So, that's a problem.'



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Updated October 4: The update affirms that Pfizer's own study is consistent with outcomes around the globe showing a correlation between their COVID vaccine injections and increased incidents of infection, hospitalizations, and death.

(LifeSiteNews) — A former Pfizer employee, now working as an industry analyst, has provided documentation indicating the pharmaceutical giant—whose gene-based COVID-19 vaccine has now been reportedly injected almost 225 million times into the arms of Americans—knows these shots cause recipients to become *more* susceptible to contracting COVID-19.

On Saturday Karen Kingston, the former Pfizer employee, a pharmaceutical marketing expert and biotech analyst, appeared beside medical freedom rights attorney Thomas Renz in a public meeting. The Ohio-based lawyer has been involved in several major cases brought against federal agencies relating to fraud and violations of medical freedom rights over the last 19 months.

After introducing Kingston, Renz presented the documents she had provided. (*See from 17.40 in video.*)

Of note is a "Briefing Document" used in a Food and Drug Administration (FDA) advisory committee meeting on September 17, 2021. Titled "Application for licensure of a booster dose for COMIRNATY (COVID-19 Vaccine, mRNA)," it includes a report on a study conducted by Pfizer testing the longevity of immunity provided by their product over time.

Involving over 36K participants, the main study revealed that the group injected with the regimen earlier were more likely to be infected with the virus than those injected later, indicating a possible "waning of immunity" for the shots. The group injected earlier had a 7% chance of infection in the time period, and those injected later, only a 5.16% rate, equating to the former group having a 36% greater chance of infection than the latter.

In addition, since both groups were measured for the same time period, the latter involving a significant placebo period prior to injection (5.1 months on average), the placebo group was unusually untouched. As Kingston stated in a telephone interview with LifeSiteNews, "There should have been more people infected in the placebo group because they were going on longer without any protection." She suggested this would therefore seem to indicate that those injected have an even higher chance of being infected with COVID-19 than the 36% difference indicated by this portion of the study.

Extending this conclusion a step further, the document reports, "An additional analysis appears to indicate that incidence of COVID-19 generally increased in each group of study participants with increasing time post-Dose 2."

In other words, Kingston said, “if you have two doses of Pfizer, your rate for getting infected [with COVID-19] *increases over time.*”

Leading to a discovery the biotech analyst called “super alarming,” the report looked exclusively at the placebo group, comparing their rate of infection in the first four months, when they had no protection, to the four months following their injections with the Pfizer product.

During that initial placebo period, the document reports that the infection rate of this group was “12.6 cases per 1,000 person-years,” which equates to a 1.3% infection rate. Following their injections, there were “43.4 cases per 1,000 person- years” or a 4.34% infection rate.

“So, when they weren’t injected, their infection rate was 1.3%, and when they got injected, it was 4.34%. It went up by over 300%,” Kingston observed. “That 300% increase is a correlation, it’s not an anomaly.”

Thus, she summarized, “They had less [COVID-19] infection when they had no protection [from the Pfizer shots]. So, that’s a problem.”

While correlation does not prove causation, looking at relevant global data, we find a worldwide trend of high rates of infections, hospitalizations, and deaths among the vaccinated.

It was reported in July that 40% of COVID-19 hospitalizations in the U.K. were from the “fully vaccinated,” and more recently, as emphasized by U.S. Senator Ron Johnson (WI-R), Public Health England revealed that 63% of Delta variant deaths in the UK are in the vaccinated.

In addition, Israel has made headlines in recent months for skyrocketing COVID case and hospitalization rates among the vaccinated. As of early August, Dr. Kobi Haviv, director of the Herzog Hospital in Jerusalem, noted on Israel’s Channel 13 that “most of the population” of Israel is vaccinated, and that he was seeing “85-90% of hospitalizations” were for those “fully vaccinated.”

This phenomenon of rising cases occurring in association with high vaccine uptake has become a universal trend while there has also been a correlation between COVID-19 vaccine campaigns and rising death rates from the disease as well.

Summarizing the findings of the Pfizer study in the FDA briefing document itself, Renz explained to his large live and streamed audience, “It says if you get the Pfizer vax, you’re more likely to get COVID. More likely! It says it right there.”

“Seriously? Seriously? It’s unbelievable,” he said.

Renz then raised questions about whether any Pfizer and FDA documents indicate the pharmaceutical company’s gene-based COVID vaccine causes a type of shedding which could produce sickness in the unvaccinated who spend sufficient time in proximity to the people who have received these injections.

He provided an excerpt from a Pfizer COVID-19 vaccine study document which required reporting to their Safety department should a female be “found to be pregnant while being exposed” to the study intervention, even if this is only “by inhalation or skin contact.”

Extending this caution one contact further, the Pfizer document stipulates that should a “male family member or healthcare provider who has been exposed to the study intervention by inhalation or skin contact” then “expose his female partner prior to or around the time of conception,” this too needs to be reported.

“Why is that a reportable safety event?” asked Renz. “It doesn’t make any sense. Well, it makes total sense if [shedding] is happening.”

In an August 26 article Dr. Peter McCullough reported on a preprint study which “found vaccinated individuals carry 251 times the load of COVID-19 viruses in their nostrils compared to the unvaccinated.”

“While moderating the symptoms of infection, the jab allows vaccinated individuals to carry unusually high viral loads without becoming ill at first, potentially transforming them into presymptomatic superspreaders,” wrote McCullough, the editor of two major medical journals.

He indicated this may be the reason so many places are experiencing such a “prominent outbreak,” even with a very high level of herd immunity and vaccinated individuals.

In addition to the resulting efficacy rate for the Pfizer vaccine now being measured as anywhere from 17% to 42%, “far below the 50% regulatory standard to even have a vaccine on the market,” the possibility of the vaccinated becoming superspreaders may have been predictable.

A 2003 paper analyzing the use of coronavirus vaccines in chickens, and proposing them for combatting the earlier SARS virus in in the human population, states: “Application of a SARS vaccine is perhaps best limited to a minimal number of targeted individuals who can be monitored, as some vaccinated persons might, if infected by SARS coronavirus, become asymptomatic excretors of virus, thereby posing a risk to non-vaccinated people.”

LifeSiteNews has produced an extensive COVID-19 vaccines resources page. [View it here.](#)

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