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The CDC Is Sacrificing Kids for Big Pharma

Analysis by Dr. Joseph Mercola ✔ Fact Checked | July 26, 2022

STORY AT-A-GLANCE

- In late June 2022, the United States became the first country in the world to grant emergency use authorization (EUA) for Pfizer's and Moderna's COVID jabs for toddlers as young as 6 months. The Food and Drug Administration issued the EUA June 17, and the very next day, the Centers for Disease Control and Prevention recommended all toddlers get the shot as soon as possible
- The pediatric EUA was based on extremely weak evidence — and that's after the FDA lowered its efficacy requirements for the pediatric population, even though they have the lowest risk of COVID and therefore have the least need for the shots
- With this recommendation, the FDA and CDC have evaporated any last vestiges of trust they may have held onto. The reason they authorized COVID jabs for toddlers is because the drug industry needs this age group to be included under the EUA for legal indemnity purposes
- Once the emergency is over, the next phase of liability shielding requires that the shots receive approval by the CDC's Advisory Committee on Immunization Practices (ACIP). Once the COVID jab is on the childhood vaccination schedule, the vaccine makers are permanently shielded from liability for injuries and deaths that occur in any age group, including adults
- The FDA and CDC have sold out America's children. Once enough people realize what they've done, they and the entire childhood vaccine program will be finished, as no one will trust any of the vaccines on the schedule. Already, only 44% of Americans believe what the CDC says

"Why the Rush for Toddler Vaccines?" asks Wall Street Journal editorial board member Allysia Finley in a July 4, 2022, op-ed.[1] Indeed, many are asking that same question, and I'm glad the legacy media's WSJ had the courage to print it.

In the last days of June 2022, the United States became the first country in the world to grant emergency use authorization (EUA) for Pfizer's and Moderna's COVID jabs for toddlers as young as 6 months.

The Food and Drug Administration issued the EUA June 17,[2] and the very next day, the Centers for Disease Control and Prevention recommended all toddlers get the shot as soon as possible.[3] President Biden called it "a very historic milestone, a monumental step forward."[4] But is it?

> *"COVID was clearly a health emergency for adults in 2020. By contrast, the urgency now feels political,"* Finley writes.[5] *"In fact, we don't know if the vaccines are safe and effective. The rushed FDA action was based on extremely weak evidence.*
>
> *It's one thing to show regulatory flexibility during an emergency. But for children, COVID isn't an emergency. The FDA bent its standards to an unusual degree and brushed aside troubling evidence that warrants more investigation."*

Another person who thinks the EUA of the COVID shot for infants is part of political theater is Toby Rogers, Ph.D. In the video above, he discusses the authorization process — which he watched live — with "Against the Wind" host Paul Thomas. Rogers reveals how the FDA and CDC "trampled scientific norms, ran roughshod over proper methods and abandoned science." He tells Thomas:

> *"What you want from a process like this is good science — having hard conversations and sifting through evidence of signals and noises in order to make good decisions on behalf of the country. What you get instead is politics — getting products across the line no matter what."*

COVID Is Inconsequential for Young Children

Finley points out that only 209 children between the ages of 6 months and 4 years have died from COVID, per CDC data.[6] She uses the word "from," but the evidence suggests most children die "with" COVID and from other serious health conditions such as cancer.[7,8,9]

That said, Finley does note that the two children in Pfizer's pediatric trial who developed the most serious infections "also tested positive for other viruses," so "it's possible that many hospitalizations attributed to COVID this winter were actually instigated or exacerbated by other viruses."

Another telling statistic is that the number of toddlers hospitalized with COVID between October 2020 and September 2021 was about half the total number of toddlers hospitalized with influenza the previous winter.[10] That data, again, comes from the CDC, so clearly, they're fully aware of how the COVID risk compares to other common infections.

Shots Don't Work Well in Young Children

Finley then goes on to discuss effectiveness, noting that while the shots initially seemed to offer robust protection for adults, the same cannot be said for children. The Moderna shot was only 51% effective against symptomatic Omicron infection in 6-month-olds to 2-year-olds, and a mere 37% effective in 2- to 5-year-olds.

This is lower than what we normally accept for vaccines, which makes the authorization even more irrational. Why use such an experimental injection with such poor effectiveness in children who aren't at grave risk of death from the infection in the first place? Pfizer, meanwhile, claimed its shot was 80% effective, "but this is misleading," Finley says, and goes on to explain:

> *"For one, Pfizer contravened numerous clinical-trial conventions. Its initial protocol involved only two doses, but this failed to generate the antibody levels required for FDA approval. So Pfizer added a third dose, which the FDA*

generously allowed. Usually the agency won't let drugmakers make a course correction when a trial ends in failure.

Pfizer then planned to track at least 21 cases to establish a bare-bones measure of efficacy. By comparison, Moderna tracked more than 250 cases. Yet Pfizer truncated its data collection on April 29 ... even though a mere 10 cases had been recorded after the third dose.

It's hard not to conclude that Pfizer cut corners to avoid getting beaten by Moderna. But as a result too few cases were documented to measure with any degree of confidence Pfizer's vaccine efficacy ...

More troubling, vaccinated toddlers in Pfizer's trial were more likely to get severely ill with COVID than those who received a placebo. Pfizer claimed most severe cases weren't 'clinically significant,' whatever that means, but this was all the more reason that the FDA should have required a longer follow-up before authorizing the vaccine.

Also worrisome: Most kids who developed multiple infections during the trial were vaccinated. This warranted more investigation, since experimental vaccines for other diseases sometimes increase susceptibility to infection.

Scientists are also discovering that triple-vaccinated adults who were previously infected with the Wuhan variant have a weaker immune response to Omicron, leaving them more susceptible to reinfection. This phenomenon, called 'immunological imprinting,' could explain why children who received three Pfizer shots were more likely to get reinfected."

CDC and FDA Are Recklessly Throwing Caution to the Wind

Basically, the CDC and FDA are betting that giving the COVID jab won't blunt toddlers' immune responses to other infections, be it a SARS-CoV-2 variant or something else. This is reckless in the extreme, seeing how the immune system of young children is still immature and faces countless potential foes on a daily basis.

This ongoing "training" that the immune system undergoes during the first few years of a child's life is what allows them to develop a well-functioning immune system over time. Immunological imprinting could throw a huge wrench in the works, making children less able to combat infections.

Young children are exceptionally "hardy" and can bounce back from most infections. However, that's provided something hasn't been done that prevents their immune system from functioning normally. Of course, we also know the shots are associated with even more serious effects, including heart inflammation, neurological disorders and cancer.

"The FDA standard for approving vaccines in otherwise healthy people, especially children, is supposed to be higher than for drugs that treat the sick. But the FDA conspicuously lowered its standards to approve COVID vaccines for toddlers. Why?" Finley asks.[11] Why indeed? What are they thinking?

Sadly, they're likely not thinking about children's health at all, but rather Big Pharma's profits. The EUA authorization of the COVID jab for toddlers eliminates all questions about whether the FDA and CDC are captured by pharma or not. They are.

That's now beyond clear, and the consequences of this blatant capture are likely to be far-reaching. It could even destroy the childhood vaccination program as a whole, as parents are now catching on to the fact that these agencies are corrupt to the core and basically work as covert promotional agencies for Big Pharma.

CDC Is Breaking Trust in Childhood Vaccination

Leslie Bienen and Tracy Beth Hoeg addressed the CDC's self-imposed self-destruction in a July 5, 2022, Tablet magazine article,[12] in which they noted that "With its unscientific push to vaccinate all infants and toddlers against COVID, the agency will harm vaccine uptake for more significant diseases."

The duo cites polling data[13] showing a majority of parents are skeptical of the CDC's recommendation to jab their young children. Only 18% of respondents said they were

eager to get their babies and toddlers inoculated, while 38% said they would wait and see if there are side effects; 27% said they would "definitely not" get their child jabbed.

> **“According to a January 2022 Hart poll, only 44% of Americans believe what the CDC says.”**

For comparison, COVID "vaccine" uptake among American 5- to 11-year-olds as of June 22, 2022, was 29% for two doses and 36% for one dose.[14] In my view, even 18% of parents of infants — nearly 1 in 5 — is too high, and a sign that many still aren't accessing information that might save them from a world of heartache.

Other interesting polls cited by Bienen and Hoeg include a January 2022 Hart poll,[15] which found only 44% of Americans believe what the CDC says. That does not bode well for the CDC, and not just as it pertains to COVID, but other vaccinations as well.

Indeed, one of the few silver linings of COVID is that people are starting to wake up in droves, realizing the entire childhood vaccination program has been misrepresented, just like the COVID shots are being misrepresented. For example, I recently interviewed Dr. Robert Malone, who stated:

> *"I'm now completely in the same camp as Bobby Kennedy, in that I believe the entire vaccine enterprise needs to be revisited, and it's unequivocal. We do not have the data to support the safety and efficacy of the current pediatric vaccine schedule, and all of the components of the pediatric vaccine schedule need to be reassessed for risk benefit ratio. Both as individual products and as combined products."*

That interview hasn't been published yet, but will be coming out shortly. He too has noticed that many are now starting to question ALL vaccines, thanks to the FDA's and CDC's irrational and unscientific approach to the COVID jabs. As noted by Bienen and Hoeg:[16]

> *"Speaking in absolutes about vaccine safety and efficacy regardless of trial standards can backfire ... Furthermore, if the identification of safety signals is not quickly acknowledged, it becomes even harder to recover trust."*

By now, some 18 months into the COVID jab rollout, it's clear the FDA and CDC are paying no attention to safety signals whatsoever, and if they ever change course and acknowledge that 2.2 million-plus adverse event reports,[17] including more than 29,000 deaths, are a problem, it'll be far too late for them to recover. They're essentially done for. There's no coming back from a betrayal like this.

Why Did Two-Thirds of Toddlers Drop Out of Pfizer's Trial?

When you consider how shoddy the pediatric trials were, I don't see how any parent would risk giving the COVID jab to their child. As explained by Bienen and Hoeg:[18]

> *"Approval for the COVID vaccines in infants and toddlers is based on two trials that used changes in antibody levels as an estimate of efficacy, but did not assess protection from severe disease, hospitalization or multisystem inflammatory syndrome in children (MIS-C), important outcomes that parents worry about.*
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> *In a Food and Drug Administration (FDA) meeting on June 28, Pfizer Vice President for Viral Vaccines, Kena Swanson even acknowledged[19] that 'there is no established correlate' between antibody levels and protection from disease.*
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> *In the Pfizer trial, the confidence interval — which shows the possible range of protection level — was alarmingly wide, with the lower bound suggesting the possibility of a 380%* increase *in the chance of infection after the third dose.*
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> *Additionally, neither trial met the 50% efficacy requirement established by the FDA for approval of adult COVID vaccines. Peter Marks, the FDA's top vaccine official, told[20] Congress in May that the efficacy requirement would be* lowered *for the pediatric vaccine simply because vaccine efficacy against the omicron variant was lower in general."*

In "How Vaccine Trials Routinely Rig the Results," I also discussed other red flags, such as the fact that 3,000 of the 4,526 children (aged 6 months through 4 years) enrolled in Pfizer's pediatric COVID trial were excluded, without explanation.[21]

Oftentimes, trial participants drop out or are excluded due to severe side effects. Here, we don't know why two-thirds of the participants were eliminated, and according to Dr. Clare Craig, a diagnostic pathologist, a 66% dropout rate should have been sufficient to deem the trial null and void (see video below).

With so few participants, it not only becomes impossible to determine efficacy against real endpoints such as severe infection and hospitalization, but you also cannot determine if there are rare side effects.

It's All About Securing Indemnification

The stark truth we now face is that the FDA and CDC are no longer in the business of protecting public health. They are securing profits for the drug industry, and getting EUA for infants and young children is a crucial step toward securing permanent legal indemnity for the drug makers.

As explained by Robert F. Kennedy Jr., in the short video clip above, they need this last remaining age group to be included under the EUA, because once the emergency is finally declared "over," the next phase of liability shielding requires that the shots receive approval by the CDC's Advisory Committee on Immunization Practices (ACIP).

This is the group that decides which vaccines are to be added to the childhood vaccination schedule. Once the vaccine is on the childhood vaccination schedule, the vaccine makers are permanently shielded from liability for injuries and deaths that occur in any age group, including adults.

You can learn more about this indemnification process in "The Real Reason They Want to Give COVID Jabs to Kids," which features my interview with Alix Mayer, board president of the Children's Health Defense's California chapter.

So, the reason the FDA and CDC are acting so irrationally and ignoring safety signals is because they are not working to protect you. They're working for the drug industry, and they've just sold out our children.

The end goal is to give drug companies permanent immunity against liability for injury and death from the COVID shots in all age groups, and to get there, they first need the EUA to cover all children.

After that, the ACIP approval becomes more or less a matter of rubber stamping. This is what they've become, and I see no future in which these two agencies survive. All we need is enough people to understand what they've done, and that day is coming.

Sources and References

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