

COVID Shots Are the Deadliest 'Vaccines' in Medical History

Analysis by [Dr. Joseph Mercola](#)

November 12, 2023

STORY AT-A-GLANCE

- › Data suggest 1 in 317 boys aged 16 to 17 will get myocarditis from the COVID shots, and after a third booster, that number may be even higher
- › VAERS reporting is likely underreported by a factor of 41. Since there are over 8,000 domestic deaths reported to VAERS, and 98% of those deaths are “excess deaths,” this suggests that as many as 300,000 Americans may have died from the COVID shots thus far
- › Calculations based on government data from 35% of the world’s population suggest we’re killing approximately 411 people per million doses on average. Moderna and Pfizer are both two-dose regimens, which pushes this to 822 deaths per million fully vaccinated. And that’s just the short-term mortality. We still have no concept of how these shots might impact mortality and morbidity in the longer term
- › An Italian investigation found that if the COVID mortality definition were changed to only include those cases where there were no preexisting comorbidities, the mortality from COVID comes out to just 2.9% of the overall reported number. This suggests that if a COVID death was redefined to being a death actually “from” COVID rather than “with” COVID, the death count could be substantially smaller than 760,000 deaths and may be smaller than the number killed by the vaccines
- › The deadliest vaccine ever made is the smallpox vaccine, which killed 1 in 1 million vaccinated people. The COVID shots kills 822 per million fully vaccinated, making it more than 800 times deadlier than the deadliest vaccine in human history

 From Dr. Joseph Mercola

Since COVID-19 first entered the scene, exchange of ideas has basically been outlawed. By sharing my views and those from various experts throughout the pandemic on COVID treatments and the experimental COVID jabs, I became a main target of the White House, the political establishment and the global cabal.

Propaganda and pervasive censorship have been deployed to seize control over every part of your life, including your health, finances and food supply. The major media are key players and have been instrumental in creating and fueling fear.

I am republishing this article in its original form so that you can see how the progression unfolded.

Originally published: November 21, 2021

In this interview, Steve Kirsch, executive director of the COVID-19 Early Treatment Fund, reviews some of the COVID jab data he's presented to the U.S. Food and Drug Administration and the Centers for Disease Control and Prevention during various meetings.

For example, during the September 17, 2021, FDA VRBPAC (Vaccines and Related Biological Products Advisory Committee) meeting,¹ Kirsch cited data suggesting 1 in 317 boys aged 16 to 17 will get myocarditis from the shots, and after a third booster, that number may be even higher. He also cited data showing the Pfizer shot kills far more people than it saves. I'll provide more details about that below.

Kirsch didn't come into this due to some preconceived opinion about vaccines. He and his family have all received two doses of the COVID jab. It wasn't until after the fact that he started hearing about problems from others that he started taking deep dives into the data. He explains:

"After I got vaccinated, a woman asked me, 'Should I get vaccinated?' And I said, 'Of course, you should. This is the safest thing ever. Nobody's died and there are no side effects. You've got to get this modern technology.' I'm singing from the hymn book.

And then she said something that threw me off course because I said, 'Why are you asking such a stupid question?' And she said, 'Well, three of my relatives got the vaccine and they died within a week.' I said, 'No, no, that can't be true. There's no way that can happen.'

I'm trying to convince her that she's mistaken, that it must have been something else. I wrote her saying, 'Statistically, you can't have three people dying from the vaccine, which doesn't kill anyone.' And she wrote back and she said, 'Yeah, but they're dead.'

That was a game-changing moment for me ... but I was still in denial ... I was operating [from the position] that the FDA is still operating the same [conservative] way [they used to before], but they're not ... nor did I understand that the U.S. Centers for Disease Control and Prevention is now mission driven, and the mission is to get a needle in every arm. My trust was in the agencies.

The next incident involved my carpet cleaner, Tim Damroth. He showed up wearing a mask. And I'm saying, 'Hey, you should all get vaccinated. Once you get vaccinated you don't have to wear a mask.' And he said, 'Well, I did get vaccinated, but I had an extreme reaction. I had a heart attack two minutes after I got injected.' He also described that his wife had [developed] Parkinson's-like symptoms. Her left hand was shaking uncontrollably."

The Price Truth-Tellers Pay

The data are ultimately what convinced him that people must be told the truth about these shots because, without that, they cannot give informed consent. He's sacrificed a lot to do just that, including professional relationships and millions of dollars in lost income.

"I basically put my life on hold and started looking in the various databases and talking to people to understand what was going on," Kirsch says. "And every place I looked, [the truth] became more clear to me. And so, on May 25, 2021, I

wrote this 250-page article for TrialSiteNews. It may be the longest article for TrialSiteNews ever published.

When I wrote that article, within a week, every member of my [COVID-19 Early Treatment Fund's] scientific advisory board quit – there were 14 scientists from all over the United States and in different fields with different expertise. They said I was 'an evil person' and that they never wanted to talk to me again in their life.

I pleaded with them, saying, 'Look, if I've got the analysis wrong, then tell why can't you tell me where I got it wrong.' And they wouldn't say anything. They just said, the vaccines are safe and I should be ashamed of myself."

Kirsch also created and submitted a 177-page PDF slideshow to the October 26, 2021, VRBPAC hearing, titled, "[Questions About the COVID Vaccine](#)."² It's an absolute treasure trove of information and I would encourage you to review this great resource that he is updating in real time.

VAERS Data Likely Off by Factor of 41

In his video, "Vaccine Secrets: COVID Crisis,"³ the first episode of "The False Narrative Takedown Series," Kirsch explains how to estimate COVID jab mortality, which he and a team of statisticians have done based on a variety of sources, including but not limited to the U.S. Vaccine Adverse Events Reporting System (VAERS).

Kirsch estimates VAERS reporting is off by a factor of 41, and that anywhere from 150,000 to 300,000 Americans have died from the COVID shots.

"We looked at eight different ways and VAERS is just one of the ways. So, when people say, 'You can't use VAERS for this, you can't [calculate] causality [based on VAERS data], I'm saying, 'Fine. We got the same answer using seven other ways.

In the VAERS analysis, we determined that VAERS was under-reported by a factor of 41, which is quite reasonable ... Ten years ago we had a system where we could actually discover all the unreported things in VAERS, and they discovered VAERS was severely underreported by as much as 95 times. Vaccines that we thought were safe, they're not safe at all. So, what did they do? They killed the project.

So, the reason that we have such a bad system today is that it is intentional. If we had a good system, it would show all the flaws for all of these vaccines that we've been giving people."

The system is clearly intentionally designed from a technical standpoint to radically decrease the number of cases entered. It takes more than 30 minutes to complete a single report and you can't save it until completed, so if you walk away and get timed-out, you have to start all over.

Kirsch knows a neurologist in California who claims to have 2,000 COVID jab-injured patients (out of a client base of 20,000), but she's only filed two reports to VAERS. She doesn't have time for the rest. So, she's under-reporting by a factor of 1,000. Also, while doctors are required by law to file adverse event reports, there's no enforcement, and no punishment for not filing.

It is also important to note that no one is paid to enter this data. That could be a part time job for most clinicians, were they to responsibly report all the side effects and deaths.

COVID Shots Are Far Deadlier Than the Infection

Overall, his team's calculations suggest we're killing 411 people per million doses (and remember Moderna and Pfizer are both two-dose regimens), worldwide. And that's just the short-term mortality. We still have no concept of how these shots might impact mortality in the longer term.

To put things into further perspective, October 21, 2021, an Italian investigation found that by changing the COVID mortality definition to only include cases where COVID-19 was the primary cause of death and there were no comorbidities decreased the death toll by 97%, from 130,000 to fewer than 4,000.

Kirsch believes the real death tally from COVID-19 in the U.S. may be about 50% of the reported number. This means about 380,000 Americans died from COVID-19 (rather than with COVID), whereas the COVID “vaccine” has killed as many as 300,000. In other words, it’s possible that the cure may be worse than the disease.

COVID Shot Is the Deadliest ‘Vaccine’ Ever Created

It gets even worse though. In Pfizer’s children’s trial, one of the participants, 12-year-old Maddie De Garay, suffered a number of devastating events, including paralysis. This side effect was misreported, however, and put down as “abdominal pain.” Neither the FDA nor the CDC has investigated the case, despite promising to do so. Pfizer has refused to investigate it as well.

“ These COVID vaccines are over 800 times deadlier than the deadliest vaccine in human history. So, this isn't a close call. These vaccines are the deadliest vaccines ever created by man. And they're promoted as safe and effective. ~ Steve Kirsch ”

In the youth trial, 1 out of 1,131 children was paralyzed. Meanwhile, Pfizer’s adult trial shows that the shot saves one COVID death for every 22,000 fully-vaccinated people. But for children, it’s estimated we need to fully vaccinate over 630,000 kids to save one life. That means we may permanently disable as many as 557 kids per life saved. Meanwhile, there’s not a single report of a healthy child dying from SARS-CoV-2 infection anywhere in the world.

This means the number needed to vaccinate to save one otherwise healthy child from COVID death is actually infinite, as they're not dying from COVID to begin with. There simply is no doubt that in children, the COVID shot is no benefit and all risk. Kirsch notes:

"Dr. Paul Offit was interviewed 20 years ago on 'CBS 60 Minutes,' and he said the smallpox vaccine is so dangerous that we would never consider doing that in modern times. It's the most dangerous vaccine ever invented ... and the smallpox vaccines only kills one person per every million-people vaccinated, which is a lot.

You vaccinate 300 million people, you're going to kill 300 people. That is unacceptable according to Offit, but he just voted for a vaccine that kills 822 people per million fully vaccinated [assuming a two-dose regimen].

That means these COVID vaccines are over 800 times deadlier than the deadliest vaccine in human history. So, this isn't a close call. These vaccines are the deadliest vaccines ever created by man. And they're promoted as safe and effective."

COVID Shot Gets Deadlier the Younger You Are

Based on a request from Dr. Peter McCullough, Kirsch also analyzed COVID jab mortality based on age using the VAERS data. For 80-year-olds, he found we kill two people to save one. For 20-year-olds, we kill six to save one.

The younger you are, the greater the risk. The Kostoff analysis⁴ found this general pattern as well. Ronald N. Kostoff is a research affiliate in Gainesville, Virginia, who in 2016 wrote an expert review on under-reporting of adverse events in the biomedical literature.⁵

In a review published in October 2021, Kostoff found five elderly are killed by the shots for each elderly person saved, and the ratios get worse as you go down in age. That said,

“the vaccines don't make sense for any age group, which is exactly the same thing I found independently,” Kirsch says.

“Nobody should get these vaccines. There is no cost-benefit analysis that I have seen that shows it is beneficial ... I mean, you're not going to take an intervention that is just as likely to kill you as to save you.

You want to take an intervention which is at least 10 times more likely to save you than to kill you, because it's an optional intervention. What kind of business do you have taking an intervention which has a marginal benefit for a completely unknown short- and long-term risk profile?

The other thing I want to say is that, the societal benefit argument, people are saying, 'You're selfish because you didn't get vaccinated.' Well, that's irrational.

Have you ever seen a CDC analysis showing you the societal benefit of being vaccinated? It doesn't exist. And there's a reason it doesn't exist, because the societal benefit would be so tiny that it's ludicrous. Today, we know the vaccinated are as likely to spread the virus as the unvaccinated. So where is the societal benefit?

If there are no downsides [to the shot], then people would say, sure, maybe there's some societal benefit. I'll do that. But here your life is at stake and the data show that roughly 1 in 1,000 will get killed by these vaccines. So, if I say, hey, suppose sacrificing your life could save 100 person years (e.g., 10 people given another 10 years of life).

When I asked this live in a clubhouse room with a few hundred people, nobody raised their hand to volunteer to do that – to sacrifice their life to save 100 person years. And I said, 'OK, what about 1,000 person years? If you could sacrifice your life to save people 1,000 person years, would you do it? Nobody would do that. It's nonsensical.

We have a constitutional right to life ... And I don't think you're being selfish about it. You have a family, you have friends, you have loved ones, you have people you interact with ... Why would I ask you to sacrifice your life? To save people you don't know?

Everybody has their own special way that they contribute to society. Why would we ever ask somebody to [sacrifice their life for a potential social benefit]? Maybe we should ask Joe Biden, 'Joe, if you could give up your life to save 1,000 person-years, would you do that?' It would be very interesting to see what he says."

CDC Performs Statistical Magic, Again

Countering all of this data we have a CDC analysis,⁶ which concluded that people who get the COVID shot are two-thirds less likely to die of any cause.

"I sent Janet Woodcock my deck of 180 questions. I said, 'Janet, I bet you can't answer any of these 180 questions. Doesn't this concern you?' She sends back an email saying, 'Look at the CDC analysis, showing that after you get the jab, there's this two-thirds drop in mortality.'

My friends and I, when we saw in that paper, we were laughing our heads off over here. The stats on 18- to 44-year-olds [show] 35% die from accidents. The rest die from disease – cancer, heart disease, whatever.

The only way to get a two-thirds reduction [in all-cause mortality] is if nobody dies from anything anymore – any disease – and we also reduce the number of accidents that they have ... This is the immortality drug. All kidding aside, there's no mechanism of action that could possibly justify that people are going to be better off from a health perspective after getting these vaccinations. Zero.

Nothing is improved. You are not immortal. You are just the opposite; your immune system is compromised. You're also more likely to get COVID. In the U.K., the government numbers show that 40-year-olds, after the honeymoon

period is over, were more than twice as likely to get infected if they were vaccinated.

In the U.S., you have hospitals where you have a 50% community vaccination rate and the hospital admissions are 90% vaccinated people. You can't make these statistics up.

In fact, the CDC was confronted by these statistics by Aaron Siri, who wrote about it on his substack, and they just ignored them. So, they make up stuff [and] this paper shows the CDC can put out anything and as long as it has that little CDC logo on it, people are going to believe it no matter how ridiculous it is.

And nobody in the medical community criticized it. I wrote a very popular article about it on my substack entitled, 'FDA Discovers Fountain of Youth.'"

Biggest Fraud in History

All things considered, the COVID vaccination campaign is the biggest medical fraud in modern history. As Kirsch says, it's a house of cards, held together by belief in data that aren't there and avoidance of confronting the safety signals in the VAERS system and other studies that don't comport with the narrative.

They even avoided the determination of one of the world's top pathologists (Peter Schirmacher) that at least 30% to 40% of the deaths two weeks post-vaccine were caused by the vaccine. They still claim there are no deaths that have been attributed to the Pfizer or Moderna vaccines. That's ridiculous.

"I've never seen anything like this, and I've never heard of anything like this because the conspirators who are telling this false narrative are all the three-letter agencies under the Department of Health and Human Services – the FDA, CDC and NIH.

They're all in on it, Congress is all in on it, mainstream media's all in on it, and the medical community is all in on it. They can't afford to back down now

because they are in it too deep. It would be too embarrassing to them.

We have been saying for months, 'You guys have to look at the VAERS data,' and they have been ignoring and censoring us rather than engaging us with dialogue – and none of these people will engage us in dialogue.

We tell the so-called 'fact checkers' where to look and what questions to ask the CDC to verify our stories and they never follow up. The 'fact checkers' all refuse to get on a recorded phone or Zoom call since they don't want to be exposed as being biased.

One strategy for changing this is that we're going to run a series of ads. Each of the ads will feature a unique personality, like a Dr. Peter McCullough, a sports figure, doctors, victims and so on. They'll relate their personal anecdotes for what's happened to them. And they will say, 'Look, before you get vaccinated, check the facts. Listen to the other side of the story.'

It's a reasonable ask. And we'll direct them where to go to hear the side of the story that the mainstream media aren't allowing them to hear. And then we let them make up their own mind. People aren't hearing the other side of the story, and the White House is helping suppress it. When the White House has a hit list of censorship, it's very clear what is going on. When in history have we done that?

Do you ever see McCullough on CNN? No, because they want to give you only one side and they're deliberately giving you only one side of it, and they know it. If they want to give the impression they are balanced, they'll pick someone who isn't an expert and interview them. Robert Malone is never going to be on CNN. Malone invented the mRNA vaccine and yet he doesn't qualify to talk about it on CNN?

America used to be a country that embraced a diversity of views, and you had freedom of speech, you had freedom to express your opinion. You had the freedom to tell the truth. No more. That freedom has been taken away.

If you don't agree with the mainstream narrative, you're silenced. And so, what we're going to do is run the series of ads, and we'll only be able to run it on alternate media because the mainstream media won't run our ads because the ads encourage people to hear the other side of the issue."

More Information

Again, you can download Kirsch's [177-page PDF](#), jam-packed with questions and data on the COVID "vaccine." I also urge you to review his "False Narrative Takedown" (TFNT) series, which you can find on [his Rumble channel](#).

You can also peruse his website, [skirsch.io](#), or follow him on his social media accounts, which include [Twitter](#), [Gab](#), [Telegram](#) and [LinkedIn](#). To keep on top of his latest investigations, you can subscribe to his [Substack channel](#). If you can afford it, consider signing up for a paid subscription.

"Substack is really important because they don't censor people who tell the truth," Kirsch says. "So, I really encourage people to support platforms like Substack. I also get a portion of that, and any money I get, I will donate 100% to funding ads and to fighting this. If we can get 100,000 subscribers at \$5 a month, that's \$500,000 a month we can spend to combat false narrative. That's serious fire power.

People ask me, why am I doing this? I'm not making any money off of this. I have no conflicts of interest. I have no history as a conspiracy theorist or spreader of misinformation. We've lost all our friends. I was forced out of my job because I wanted to speak out against the vaccines.

I'm losing money on this because I'm funding a lot of the things out of my personal pocketbook. The donors that donated to the early treatment fund, none of them, not a single one, is supporting the effort to get the truth out about how dangerous these vaccines are and how wrong the mandates are.

My motivation is a 100% on saving lives. That's my reward in life. If I can save one life, my life was worth living. If I can save 100 lives, even better. If I can save 100,000 lives, that is more as worth living. If I can save 100 lives, even better. If I can save 100,000 lives, that is more meaningful than anything I've ever done or will do."

Sources and References

- ¹ [The Expose September 18, 2021](#)
- ² [Questions about the COVID vaccine \(PDF\)](#)
- ³ [SKirsch.io/vaccine-resources](#)
- ⁴ [Toxicology Reports September 2021; 8: 1665-1684](#)
- ⁵ [Journal of Data and Information Science Vol 1, No. 4. 2016](#)
- ⁶ [CDC MMWR October 29, 2021; 70\(43\): 1520-1524](#)