

# Pfizer Is Calling the Shots to Jab Kids

Analysis by [Dr. Joseph Mercola](#) ✓ Fact Checked

## STORY AT-A-GLANCE

- › Public Citizen has reviewed and published the secret contracts between Pfizer and Albania, Brazil, Colombia, Chile, Dominican Republic, the European Commission, Peru, the U.S. and the U.K. The contracts reveal nations have handed over unprecedented power to Pfizer, and in virtually all scenarios, Pfizer's interests come first
- › Some countries, including Brazil, Chile, Colombia, the Dominican Republic and Peru, have put up sovereign assets as collateral for vaccine injury lawsuits, including bank reserves, military bases and embassy buildings
- › The contracts not only secure Pfizer's intellectual property rights, but should Pfizer be found guilty of stealing the intellectual property rights of others, some of the contracts shift the responsibility onto the government purchasers. Pfizer can steal the intellectual property of others without consequence in at least four countries
- › The contracts also give Pfizer the right to muzzle government. In Brazil, government officials are prohibited from making "any public announcement concerning the existence, subject matter or terms of [the] Agreement" without the written consent of the company. Similar nondisclosure provisions are included in the contracts with the European Commission and the U.S. government. The only difference is that the nondisclosure rules apply to both parties
- › October 26, 2021, the U.S. Food and Drug Administration voted to extend the emergency use of Pfizer's COVID jab for children aged 5 through 11. Experts warn this is reckless and unnecessary, and will do far more harm than good, as COVID-19 poses no risk to young children

In late February 2021, The Bureau of Investigative Journalism reported<sup>1</sup> that Pfizer was demanding countries put up sovereign assets as collateral for expected vaccine injury lawsuits resulting from its COVID-19 inoculation. While at least two countries, Argentina and Brazil, initially rejected the demands, calling them abusive, many others accepted Pfizer's terms from the start.

Public Citizen has now reviewed and published the secret contracts<sup>2,3</sup> between Pfizer and Albania, Brazil, Colombia, Chile, Dominican Republic, the European Commission, Peru, the U.S. and the U.K. These contracts reveal nations have handed over unprecedented power to Pfizer. In virtually all scenarios, Pfizer's interests come first.

## **Pfizer Is Calling the Shots**

Public Citizen points out six ways in which nations are allowing Pfizer to call the shots. For example, Albania, Brazil and Colombia have handed over unilateral authority to the company for the delivery schedule and other key decisions. As reported by Public Citizen:<sup>4</sup>

*"As a condition to entering into the agreement, the Colombian government is required to 'demonstrate, in a manner satisfactory to Suppliers, that Suppliers and their affiliates will have adequate protection, as determined in Suppliers' sole discretion' ... from liability claims.*

*Colombia is required to certify to Pfizer the value of the contingent obligations (i.e., potential future liability), and to start appropriating funds to cover the contingent obligations, according to a contribution program."*

Pfizer also maintains tight control over vaccine supplies, and dictates who can buy their vaccine, when, and who can give and receive vaccine donations. If there are shortages, Pfizer decides which countries get priority.

Bypassing Pfizer can be costly. For example, if Brazil were to accept vaccine donations from another country without Pfizer's approval, the company can terminate the contract and force Brazil to pay the full prize for all remaining contracted doses. Meanwhile,

Pfizer incurs no penalty if its delivery is late, even if it's so late that the shots are no longer needed.

Some countries, including Brazil, Chile, Colombia, the Dominican Republic and Peru, also ended up agreeing to Pfizer's demand to put up sovereign assets as collateral for vaccine injury lawsuits, including bank reserves, military bases and embassy buildings.

In short, these governments are guaranteeing Pfizer will be compensated for any expenses resulting from injury lawsuits against it, so the company won't lose a dime if its COVID shot injures people – even if those injuries are the result of negligent company practices, fraud or malice!

At the same time, government purchasers must acknowledge that the effectiveness and safety of the shots are completely unknown. This is the ultimate corporate maleficence, using their leverage to force the kill shot down these countries' throats and avoiding any personal responsibility for damages.

## **Secret Arbitration**

The contracts also dictate how contractual disputes will be settled. As reported by Public Citizen:<sup>5</sup>

*"What happens if the United Kingdom cannot resolve a contractual dispute with Pfizer? A secret panel of three private arbitrators – not a U.K court – is empowered under the contract to make the final decision. The arbitration is conducted under the Rules of Arbitration of the International Chamber of Commerce (ICC). Both parties are required to keep everything secret:*

*'The Parties agree to keep confidential the existence of the arbitration, the arbitral proceedings, the submissions made by the Parties and the decisions made by the arbitral tribunal, including its awards, except as required by Law and to the extent not already in the public domain.'*

*The Albania draft contract and Brazil, Chile, Colombia, Dominican Republic, and Peru agreements require the governments to go further, with contractual disputes subject to ICC arbitration applying New York law. While ICC arbitration involving states is not uncommon, disputes involving high-income countries and/or pharmaceuticals appear to be relatively rare ...*

*Private arbitration reflects an imbalance of power. It allows pharmaceutical corporations like Pfizer to bypass domestic legal processes. This consolidates corporate power and undermines the rule of law."*

## **Pfizer Secured Intellectual Property Rights**

Amazingly, the contracts not only secure Pfizer's intellectual property rights, but should Pfizer be found guilty of stealing the intellectual property rights of others, some of the contracts shift the responsibility away from Pfizer onto the government purchasers! What this means is that Pfizer can steal the intellectual property of others without consequence in at least four countries.

*"For example, if another vaccine maker sued Pfizer for patent infringement in Colombia, the contract requires the Colombian government to foot the bill," Public Citizen writes.<sup>6</sup> "Pfizer also explicitly says that it does not guarantee that its product does not violate third-party IP, or that it needs additional licenses.*

*Pfizer takes no responsibility in these contracts for its potential infringement of intellectual property. In a sense, Pfizer has secured an IP waiver for itself. But internationally, Pfizer is fighting similar efforts to waive IP barriers for all manufacturers."*

## **Pfizer Given Right to Silence Government**

Perhaps most egregious of all, some of the contracts give Pfizer the right to muzzle government. In Brazil, government officials are prohibited from making "any public

announcement concerning the existence, subject matter or terms of [the] Agreement" without the written consent of the company.

The gag order also includes commenting on the government's relationship with Pfizer in general. Similar nondisclosure provisions are included in the contracts with the European Commission and the U.S. government. The only difference, Public Citizen notes, is that the nondisclosure rules apply to both parties.

## **Pfizer Can Prevent Use of Other Remedies**

Equally shocking, though, is that countries are forced to follow through on their vaccine orders even if other drugs or treatments emerge that can prevent, treat or cure COVID-19.<sup>7</sup> Is it any wonder, then, that governments around the world have suppressed the use of drugs like hydroxychloroquine and ivermectin?

If these drugs were allowed to be used and could be proven to work, the COVID injections would be completely unnecessary, yet governments are on the hook for hundreds of millions of doses. While COVID-19 vaccines are "free" to receive in the U.S., they're being paid for by taxpayer dollars at a rate of \$19.50 per dose. In Albania, the cost of each dose is \$12, and in the EU, \$14.70.

In the case of the price disparity between the U.S. and the EU, Pfizer is said to have given a price break to the EU because it financially supported the development of their COVID-19 vaccine.

## **Pfizer – Master of Disaster Profiteering**

As noted Public Citizen, Pfizer is being allowed to profit from this self-inflicted global disaster in unprecedented ways. In many instances, a nation's laws will not apply to Pfizer.

These secret contracts grant Pfizer total control over its product and ensures full payment, regardless of whether the shots are needed or usable, while simultaneously

eliminating all liability. In short, Pfizer wins, no matter what the outcome of the vaccination campaign might be.

At the same time, Pfizer is also controlling media through its advertising dollars. As you've probably realized by now, media companies in most instances will not report on anything that might jeopardize the profits of its advertisers.

As illustrated in the short video above, it couldn't be more obvious that Pfizer is bankrolling the media, which in turn will refuse to bite the hand that feeds it. You can see the wide spectrum of media programming being sponsored by Pfizer, including "Nightline," "Making a Difference," "CNN Tonight," "Early Start," "Erin Burnett Out Front," "This Week with George Stephanopoulos," "CBS Sports," "Meet the Press," "CBS This Morning" and "60 Minutes."

## **Pfizer Study Shows Increased Mortality**

The terms of these contracts are all the more disturbing when you consider how dangerous the Pfizer shot is turning out to be. No wonder the company refused to accept any liability.

As shown in the video above, Episode 3 in "The False Narrative Takedown Series"<sup>8</sup> by Steve Kirsch, Pfizer's own Phase 3 six-month trial<sup>9</sup> showed the shots increased all-cause mortality. More people actually died in the treatment group than in the placebo group.

According to Pfizer's own data, one COVID death per 20,000 fully vaccinated individuals is prevented. That means 10,000 lives are saved if 200 million are fully vaccinated.

But how many lives are lost from the shots? This is the other side of the equation that simply demands to be analyzed before any governmental authority can make a decision as to whether the mass vaccination campaign is of benefit or not.

Here, we find that Pfizer's data<sup>10</sup> show the shots are actually killing more than they save. To look at this information yourself, click on "Supplementary Material" on the right-hand

side of the paper, then, beside Supplementary Appendix, click on supplements/261159 and scroll down to page 12, Table S4.

In the vaccine group, 15 died; in the placebo group 14 died. Two people died from COVID-19 in the placebo group, while only one died from COVID pneumonia in the vaccine group. That's how you get a net false positive impact – one life is spared from COVID. However, the all-cause mortality was actually higher in the vaccine group (15, compared to 14).

So, while the shots saved one person from dying from COVID, they also killed one extra person. So, the net effect is nil. There's no mortality benefit at all. Other investigations using different data strongly suggest the net effect is profoundly negative, and the shots are doing FAR more harm than good.

## **We Face Looming Vaccine-Induced Public Health Catastrophe**

For this, Kirsch cites a paper<sup>11</sup> by Dr. Bart Classen, published in the August 2021 issue of the journal Trends in Internal Medicine. Classen points out that Pfizer, Moderna and Janssen are all using a "dangerously misleading" clinical trial design. The problem is that they're all using a surrogate endpoint for health, namely "severe infections with COVID-19."

Disease specific primary endpoints are no longer used in many fields of medicine, for the fact that it can hide problems. If a person dies from the treatment or is severely injured by it, even if the treatment helped block the progression of the disease they're being treated for, the end result is still a negative one.

For this reason, the appropriate endpoint that should be used is all-cause mortality and morbidity. When Classen reexamined the clinical trial data from all three manufacturers using all-cause severe morbidity as the endpoint, a disturbing picture emerged.

**“ ... it is all but a certainty that mass COVID-19 immunization is hurting the health of the population**

**in general. Scientific principles dictate that the mass immunization with COVID-19 vaccines must be halted immediately because we face a looming vaccine induced public health catastrophe. ~ Dr. Bart Classen”**

As explained by Classen in his paper, "US COVID-19 Vaccines Proven to Cause More Harm than Good Based on Pivotal Clinical Trial Data Analyzed Using the Proper Scientific Endpoint, 'All Cause Severe Morbidity'":<sup>12</sup>

*"All-cause severe morbidity' in the treatment group and control group was calculated by adding all severe events reported in the clinical trials. Severe events included both severe infections with COVID-19 and all other severe adverse events in the treatment arm and control arm respectively.*

*This analysis gives reduction in severe COVID-19 infections the same weight as adverse events of equivalent severity. Results prove that none of the vaccines provide a health benefit and all pivotal trials show a statistically significant increase in 'all-cause severe morbidity' in the vaccinated group compared to the placebo group.*

*The Moderna immunized group suffered 3,042 more severe events than the control group. The Pfizer data was grossly incomplete but data provided showed the vaccination group suffered 90 more severe events than the control group, when only including 'unsolicited' adverse events.*

*The Janssen immunized group suffered 264 more severe events than the control group. These findings contrast the manufacturers' inappropriate surrogate endpoints:*

*Janssen claims that their vaccine prevents 6 cases of severe COVID-19 requiring medical attention out of 19,630 immunized; Pfizer claims their vaccine prevents 8 cases of severe COVID-19 out of 21,720 immunized;*



*Moderna claims its vaccine prevents 30 cases of severe COVID-19 out of 15,210 immunized.*

*Based on this data it is all but a certainty that mass COVID-19 immunization is hurting the health of the population in general. Scientific principles dictate that the mass immunization with COVID-19 vaccines must be halted immediately because we face a looming vaccine induced public health catastrophe."*

To make the above numbers more clear and obvious, here are the prevention stats in percentages:

- Pfizer 0.00036%
- Moderna 0.00125%
- Janssen 0.00030%

## **CDC Claims COVID Shots Lower All-Cause Mortality**

Despite all of that, the U.S. Centers for Disease Control and Prevention now claims Americans "vaccinated" against COVID-19 have lower all-cause mortality rates.<sup>13</sup> As reported by Forbes:<sup>14</sup>

*"Partially and fully vaccinated people died from non-coronavirus causes at a lower rate than their unvaccinated peers, according to the study,<sup>15</sup> which looked at millions of patients at seven U.S. health organizations from December to July.*

*All three vaccines approved by U.S. regulators were tied to lower non-COVID death rates, though the difference in mortality among people who took Johnson & Johnson's vaccine was slightly smaller than for recipients of Pfizer or Moderna's vaccines ...*

*This result suggests the vaccines don't increase a patient's risk of death, which 'reinforces the safety profile of currently approved COVID-19 vaccines,' the study said."*

## FDA Approves Jab for Young Children

October 26, 2021, the FDA unanimously voted to grant emergency use approval of the COVID shots for children between the ages of 5 and 11.<sup>16</sup> This despite acknowledging they have no idea what the long-term risk to children might be. As noted by one voting member, "We're never going to learn about how safe the vaccine is until we start giving it."<sup>17</sup>

All we have at present is two Pfizer trials, one in which 5- to 11-year-olds were followed for two months and another with just six weeks of follow-up. Both were too small to detect potential risks such as myocarditis. That won't be studied until AFTER the shot is authorized for children. As reported by The Defender:<sup>18</sup>

*"Experts raised concerns over the lack of safety and efficacy data presented by Pfizer for use of its COVID vaccine in younger children, and they pointed to increasing safety signals based on reports to the Vaccine Adverse Event Reporting System (VAERS). They also questioned the need to vaccinate children – whose risk of dying from COVID is "almost nil" – at all.*

*According to Dr. Meryl Nass, member of the [Children's Health Defense Scientific Advisory Panel](#), Pfizer once again did not use all of the children who participated in the trial in their safety study.*

*'Three thousand children received Pfizer's COVID vaccine, but only 750 children were selectively included in the company's safety analysis,' Nass said.*

*'Studies in the 5-11 age group are essentially the same as the 12-15 group – in other words, equally brief and unsatisfying, with inadequate safety data and efficacy data, with no strong support for why this type of immuno-bridging analysis is sufficient ... All serious adverse events were considered unrelated to the vaccine' ...*

*Dr. Jessica Rose, viral immunologist and biologist, told the panel EUA of biological agents requires the existence of an emergency and the nonexistence*

*of alternate treatment. 'There is no emergency and COVID-19 is exceedingly treatable,' Rose said.*

*In a peer-reviewed study<sup>19</sup> co-authored by Rose, myocarditis rates were significantly higher in people 13 to 23 years old within eight weeks of the COVID vaccine rollout. In 12- to 15-year-olds, Rose said, reported cases of myocarditis were 19 times higher than background rates ...*

*Rose said tens of thousands of reports have been submitted to VAERS for children ages 0 to 18. Rose explained: 'In this age group, 60 children have died – 23 of them were less than 2 years old. It is disturbing to note that 'product administered to patient of inappropriate age' was filed 5,510 times in this age group. Two children were inappropriately injected, presumably by a trained medical professional, and subsequently died.'"*

During the meeting, Dr. Cody Meissner noted we don't know whether the shot is safe for this age group, and the risk of COVID is extremely low. If the shot is authorized, mandates will likely follow, which would be "bad."

Brownstone Institute is also objecting to the authorization. In an October 20, 2021, article,<sup>20</sup> Paul Elias Alexander, Ph.D., a former assistant professor of evidence-based medicine and research methods, called the plan to vaccinate young children "absolutely reckless" and "dangerous based on lack of safety data and poor research methodology."

Meanwhile, data show not a single child has died from COVID-19 who did not have a serious underlying health condition. Alexander reviews a lot of that data in his article.

## **Staggering Conflicts of Interest**

When you look at the roster of the FDA's committee members<sup>21</sup> who reviewed and voted to authorize the Pfizer shot for children as young as 5, the unanimous "yes" vote becomes less of a mystery. As reported by National File,<sup>22</sup> they have staggering conflicts of interest. Members include:

Gregg Sylvester — A former vice president of Pfizer Vaccines

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Arnold S. Monto — A paid Pfizer consultant

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Archana Chatterjee — A recent Pfizer research grant recipient

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Myron Levine — Mentor to Raphael Simon, senior director of vaccine research and development at Pfizer

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James Hidreth — President of Meharry Medical College, which administers Pfizer vaccines

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Geeta Swamy — Chair of the Independent Data Monitoring Committee for the Pfizer Group B Streptococcus Vaccine Program

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Steven Pergam — Proudly photographed taking a Pfizer vaccine

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Several people who are already on the record supporting coronavirus vaccines for children, including Ofer Levy, Jay Portnoy and Melinda Wharton

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In addition to that, former FDA commissioner Scott Gottlieb is currently on Pfizer's board of directors.

## **FDA Buries Data on Seriously Injured Children**

With these shots now being pushed on young children, it's more imperative than ever to understand how data are being massaged and manipulated to support the ongoing lunacy. Of particular concern is evidence that the U.S. Food and Drug Administration is burying data on children who were seriously injured in the vaccine trials. As reported by Aaron Siri on Substack:<sup>23</sup>

*"Pfizer's clinical trial for children aged 12-15 included only 1,131 children who were vaccinated and at least one of those children suffered a devastating, life-altering injury which, despite incontrovertible proof and the cries of both the*

*victim and her parents, has not been appropriately acknowledged by Pfizer or the FDA.*

*Putting aside that one serious injury in a small trial should alone raise blaring alarm bells, one must ask: what other serious adverse events have been hidden and ignored by regulators?"*

Siri tells the story of 12-year-old Maddie de Garay, who along with her two brothers were enrolled by her parents in Pfizer's clinical trial. That decision has changed the lives of the entire family, possibly forever. Within 24 hours of her second dose, Maddie suffered crippling pain and systemic injuries.

Maddie is now wheelchair-bound and requires a feeding tube. Pfizer's principal investigator initially claimed Maddie's injuries were unrelated to the shot and treated her as a mental patient. Eventually, her injury was listed as "functional abdominal pain" in Pfizer's report to the FDA.

*"For a virus that rarely harms children, the need to assure safety of the Covid-19 vaccine is high. A study with only 1,131 children is underpowered. It will not pick up anything but the most common adverse events.*

*If what Maddie suffered will occur in 1/1,000 children, that would result in 75,000 children in this country suffering this serious injury. If it happens 1/10,000 children, that is 7,500 suffering this serious injury.*

*It could be that the cure is worse than the disease. But that will only be known if there is a properly powered (a.k.a., sized) clinical trial with children," Siri writes, adding that:*

*"International scientists have declared that 'inadequately powered studies should themselves be considered a breach of ethical standards.'<sup>24</sup> Without a clinical trial of sufficient size that reviews all potential adverse events, such as that experienced by Maddie, for a sufficient duration, this potentially catastrophic result will not be identified prior to authorization or licensure ...*

*The real lesson is not that pharmaceutical companies, or the FDA should act better or do a better job. That just won't always be the case. The real lesson is that civil and individual rights should never be contingent upon a medical procedure. Never.*

*Preserving those rights to choose whether to get a medical product, without any government coercion, is the final and ultimate safeguard.*

*Removing that right results in dangerous authoritarianism because just as the FDA will not admit to Maddie's serious injury after having promoted this vaccine, politicians that mandate the vaccine will not want to later admit a mistake by repealing the mandate."*

## **FDA Sued to Access COVID Jab Trial Data**

We're now in a position where it's near-impossible for many to refuse the COVID jab, and if injured, they cannot sue anyone for damages. Adding insult to injury, we don't even have access to all the data governments are supposedly relying on to mandate these hazardous products.

To address this last point, an organization called Public Health and Medical Professionals for Transparency (PHMPT) is now suing<sup>25</sup> the FDA after the agency refused to release the data on which it based its decision to approve Comirnaty.<sup>26</sup>

The FDA denied the PHMPT request for expedited processing of its Freedom of Information Act (FOIA) request on the basis that no "imminent threat to the life or physical safety of an individual" existed. Per the complaint:<sup>27</sup>

*"... in an effort to ensure that the FDA acts in furtherance of its commitment to transparency, PHMPT seeks to obtain the data and information relied upon by the FDA to license the Pfizer Vaccine.*

*The importance of releasing to the public this information is also recognized under federal law which provides that: 'After a license has been issued, the*

*following data and information in the biological product file are immediately available for public disclosure unless extraordinary circumstances are shown: (1) All safety and effectiveness data and information. (2) A protocol for a test or study ..."*

## **'Just Say No' to the COVID Shot**

While U.S. authorities are doing their best to hide incriminating data and manipulating the rest to show some sort of benefit, common sense, medical facts and available data all point in the opposite direction. It's crystal clear to me that children do not need the COVID shot, as their risk of serious COVID-19 infection and death is virtually nonexistent.

On the other hand, children are quite likely to be seriously injured by these injections. The reason you're not getting the truth from the media is explained by Dr. Peter McCullough in the video above. In short, it's a planned propaganda campaign – "the promotion of false information by the people in charge."

According to McCullough, anyone under the age of 50 has a less than 1% chance of a bad outcome if they come down with COVID-19. "Why would you take the vaccine?" he asks. "My advice," he says, "is just say no to this [shot], especially young people who are not at risk."

## **Sources and References**

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- <sup>2, 4, 5, 6</sup> [Public Citizen October 19, 2021](#)
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- <sup>7</sup> [COVID19up.org August 17, 2021](#)
- <sup>8</sup> [SKirsch.io/vaccine-resources](#)
- <sup>9, 10</sup> [MedRxiv July 28, 2021](#)
- <sup>11, 12</sup> [Trends in Internal Medicine 2021; 1\(1\): 1-6 \(PDF\)](#)
- <sup>13, 15</sup> [CDC Morbidity and Mortality Weekly Report October 22, 2021: 70](#)
- <sup>14</sup> [Forbes October 22, 2021](#)
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- <sup>20</sup> Brownstone Institute October 20, 2021
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- <sup>26</sup> Aaronsiri.substack.com October 11, 2021