How could defective COVID-19 'leaky vaccines' be ethically approved?

Elizabeth Hart <elizmhart@gmail.com> Thu, Nov 11, 2021 at 1:14 PM
To: Elizabeth Hart <elizmhart@gmail.com>

It was known from the beginning that COVID-19 wasn't a serious threat to most people...so why is the entire global population being set up to have COVID 'leaky vaccines', potentially for life?!
This is what must be tracked back now...how did this happen?
How could COVID-19 vaccine trials be ethically approved with participants who weren't at serious risk of COVID-19, e.g. healthy people aged 18-55 years and children?
So far it's proven impossible to get accountability for the global COVID-19 'vaccine' rollout. I'm now approaching members of the scientific and medical establishment who have been outspoken about the COVID-19 injections - **will they follow through and pursue the important questions that have to be asked about this unprecedented global rollout of defective COVID-19 'leaky vaccines'?**
See below my email to Robert Malone, Geert Vanden Bossche and Peter McCullough.
Elizabeth Hart
Independent person investigating the gross over-use of vaccine products and conflicts of interest in vaccination policy

---------- Forwarded message ---------
From: **Elizabeth Hart** <elizmhart@gmail.com>
Date: Tue, Nov 9, 2021 at 1:34 PM
Subject: How could defective COVID-19 'leaky vaccines' be ethically approved?
To: Robert Malone, Geert Vanden Bossche, Peter A. McCullough
Cc: Andrew Pollard, Gus Dalgleish, John Ioannidis, Jodie McVernon, Neil Ferguson, Patrick Vallance, Chris Whitty, Fiona Godlee, Sharon Davies, Peter Doshi, Kamran Abbasi, Theodora Bloom, Allyson Pollock, Simon Wain-Hobson, Richard Ebright, Marc Lipsitch, Michael Osterholm, Tom Inglesby, Carl Heneghan, Michael Levitt, Martin Kulldorff, Jayanta Bhattacharya, Karol Sikora, Anders Tegnell, Johan Giesecke, Ian Frazer, Peter Doherty, Peter Collignon, Roy Anderson, Peter Openshaw, Adrian Smith, David Cannandine, Venki Ramakrishnan, Andrew Goddard , Chris Conlon, Dan Sumners, Robert Clancy, Sunetra Gupta, Heidi Larson, Graham Medley, Melinda Mills, John Bell, David Kennedy, Nick Hudson, James McCaw, Tom Kompas, Zoe Hyde, Quentin Grafton, Emma McArthur, Anthony Harnden, Adam Finn, Adrian Hill, Sarah Gilbert, John Shine, Nick Scott, Jonathan Engler, Andrew Read

For the attention of:
Robert Malone
Geert Vanden Bossche
Peter McCullough

Dear Robert Malone, Geert Vanden Bossche and Peter McCullough, **I write to you as members of the scientific and medical establishment who are questioning the global rollout of COVID-19 vaccines.**

Why are billions of people around the world being pressed to have defective COVID-19 'leaky vaccines' against a virus it was known from the beginning wasn't a serious threat to most people?

How could these fast-tracked experimental medical interventions across mass populations be ethically approved?

As of today, **Our World in Data** reports 51% of the world population has received at least one dose of a COVID-19 vaccine, with 7.28 billion doses administered globally, and 26.56 million doses being administered each day. **It's the wealthier countries which are currently being fleeced to pay for this highly questionable medical intervention, with only 4.2% of people in low-income countries having received at least one dose.**

Australia has reportedly reached "a full inoculation rate of 80% of those aged 16 and older, which Prime Minister Scott Morrison called a "magnificent milestone" on the path to becoming one of the world's most vaccinated countries against COVID-19".

Yesterday, Australia began administering third shot 'booster' shots of Pfizer's COVID-19 vaccine, with **Reuters reporting** "millions of people in its largest city, Sydney, woke up to more freedom amid an accelerating immunisation drive".

'More freedom' is only for the 'vaccinated', with the 'unvaccinated' still under restrictions... As for the **'accelerating immunisation drive'**...what is this exactly? **How misleading to describe as 'immunisation' whatever supposed**

short-term protection these jabs are providing. Now people 18 and over who took their second shot more than six months ago will be given 'boosters'...**and what happens from here?**

It's astonishing there's been no discussion on what lies ahead for the people injected with the COVID-19 shots - will there be injections every six months? And what will it mean to have these repeated shots throughout life, particularly for young people with their lives ahead of them? **Children as young as five are now in the firing line for these experimental injections, yet it's well-known they are at little risk from COVID-19. What will be the consequences for their natural immunity, and the impact upon their ability to fight future respiratory infections?**

In **her letter to Jodie McVernon** challenging the Doherty modelling which is setting vaccination targets, and which put Australia into lockdown and restrictions last year, Emma McArthur notes **"natural immunity to SARS-CoV-2 is robust, durable and likely superior to the immune response from vaccination"**. Emma McArthur warns the Doherty modelling **"argues for interference with the natural immune response of most of the population"**, and she asks if the Doherty modelling could be **"setting in place the conditions for a catastrophe, by destroying natural immunity to SARS-CoV-2 with this unprecedented mass-vaccination rollout?"**

How on earth did the grossly disproportionate and ill-targeted global response to COVID-19 happen? Why are people not at risk of COVID-19 being pressed to have COVID-19 injections? This is the question I asked of Andrew Pollard, Chair of the UK Joint Committee on Vaccination and Immunisation, Member of WHO SAGE, Chief Investigator on the Oxford-AstraZeneca vaccine trials, and Head of the Oxford Vaccine Group, in **my email dated 17 August 2021**.

Previously, on 30 June 2021, I asked Andrew Pollard - **Who initiated the plan to vaccinate the entire global population against SARS-CoV-2 when it was already known it wasn't a serious threat to most people?**

My email to Andrew Pollard raises serious questions about the ethics process which approved COVID-19 vaccine trials involving healthy people not at risk of COVID-19, please see the email thread below, which includes reference to the Berkshire Research Ethics Committee's deliberations on the Oxford/AstraZeneca vaccine trials. Earlier in June I asked Andrew Pollard **Why were children included in the COVID-19 Oxford/AstraZeneca vaccine trials?**

This must be tracked back now - how did this happen? Why were people not at risk of COVID-19 included in COVID-19 vaccine trials, including children, and why are billions of people not at serious risk of this disease being repeatedly injected with these shots now?

Please see my email to Andrew Pollard below.

Kind regards
Elizabeth Hart
Independent person investigating the gross over-use of vaccine products and conflicts of interest in vaccination policy

---------- Forwarded message ---------
From: **Elizabeth Hart** <elizmhart@gmail.com>
Date: Wed, Jun 30, 2021 at 9:46 PM
Subject: Who initiated the plan to vaccinate the entire global population against SARS-CoV-2?
To: Andrew Pollard
Cc: Fiona Godlee, Sharon Davies, Peter Doshi, Kamran Abbasi, Theodora Bloom, Allyson Pollock, John Ioannidis, Simon Wain-Hobson, Richard Ebright, Marc Lipsitch, Michael Osterholm, Tom Inglesby, Carl Heneghan, Michael Levitt, Martin Kulldorff, Jayanta Bhattacharya, Sucharit Bhakdi, Gus Dalgleish, Karol Sikora, Anders Tegnell, Johan Giesecke, Ian Frazer, Peter Doherty, Peter Collignon, Roy Anderson, Peter Openshaw, Adrian Smith, David Cannadine, Venki Ramakrishnan, Andrew Goddard, Chris Conlon, Dan Sumners, John Shine, Robert Clancy, Sunetra Gupta, Heidi Larson, Graham Medley, Melinda Mills, John Bell, Davd Kennedy, Andrew Read, Neil Ferguson, Patrick Vallance, Chris Whitty, Peter A. McCullough, Nick Hudson, Emma McArthur

For the attention of:
Professor Andrew Pollard
Chief Investigator on the Oxford/AstraZeneca covid-19 vaccine trials
Head of the Oxford Vaccine Group
Chair of the UK Joint Committee on Vaccination and Immunisation (JCVI)

Professor Pollard, **who initiated the plan to vaccinate the entire global population against SARS-CoV-2 when it was already known it wasn't a serious threat to most people?**

What is being set in place now is a global plan to inject people of all ages and health status with covid injections throughout life. More covid injections are coming, e.g. courtesy of your group with the Oxford Covid-19 variant

vaccine, i.e. the Beta variant, on top of the two doses of original covid-19 injections. Already 44.5 million people in the UK have had a first dose, with 32.7 million having a second dose. **But how many of these millions of people were actually at serious risk from covid-19? How many were already immune?**

This is a disaster. Billions of people around the world are being coerced into having covid-19 injections that may not be of benefit to them, and which may cause harm, including damaging natural immunity. We have no idea of the long-term consequences of covid-19 injections, this is a massive global experiment underway, without 'informed consent', which is in breach of medical ethics and international human rights conventions such as the Helsinki Declaration.

Additionally, billions of pounds have been diverted into this global covid-19 vaccine response, including widespread PCR testing, valuable resources which have been taken away from crucial areas of the health system.

Professor Pollard, it was acknowledged from the beginning that SARS-CoV-2 wasn't a serious risk for most people, e.g. the WHO stated **"Illness due to COVID-19 is generally mild, especially for children and young adults". (**WHO Q&A on coronaviruses (COVID-19) - Should I worry about COVID-19. 9 March 2020.)

So how could an ethics committee approve the participation of people not at risk of covid-19 in covid-19 vaccine trials?

Due to ethics committees approving covid-19 vaccine trials including people not seriously at risk of the virus, billions of people around the world not at serious risk of covid-19 are being set up to have covid injections for life, with their own effective natural immune response being disrupted by these covid injections.

This is seriously unethical Professor Pollard! How on earth could an ethics committee approve vaccine trials that could lead to this outcome, did they not think this through?

Professor Pollard, I suggest the Oxford/AstraZeneca vaccine trials including people not at serious risk of covid-19, i.e. healthy people aged 18-55 years and children aged 6-17 years, **contravenes the Helsinki Declaration, e.g.**

> **"Medical research involving human subjects may only be conducted if the importance of the objective outweighs the risks and burdens to the research subjects**...All medical research involving human subjects must be preceded by careful assessment of predictable risks and burdens to the individuals and groups involved in the research in comparison with foreseeable benefits to them and to other individuals or groups affected by the condition under investigation." (My emphasis.)

I'm staggered that an ethics committee could approve vaccine trials with participants who aren't at serious risk of the virus, i.e. not at serious risk of covid-19, particularly with the potential that these people could end up being caught into having covid injections for life.

Professor Pollard, **I requested transparency for the ethics evaluation carried out by the Berkshire Research Ethics Committee regarding the inclusion of children and others in the covid-19 vaccine trials**, commencing my email enquiries on 9 February 2021. (See email thread attached.) In my initial enquiry, I noted my questions had also been asked in my *BMJ* rapid response published on 5 February 2021, i.e. **Is it ethical to include children in the Oxford-AstraZeneca vaccine trials?**

After some delay, I finally received a response from the Health Research Authority (28 April 2021) saying:

- Your request has been refused, in part, under FOIA exemption *section 43* – ***trade secrets & prejudice to commercial interests*.**

- Please note Section 43 is a qualified exemption and as such the public interest must be considered. Whilst the HRA promotes research transparency and recommends the results of all trials be made public, we also note that this study is in its very early stages. **Disclosing information at this stage could harm the commercial interests of the Sponsor and Third Parties and breach confidentiality agreements that prohibit the disclosure of such information.**

- Some of the documents you have requested contain information relating to a recently developed product and we are of the view that disclosure of the information, **which details inside information representing the unique knowledge and know-how of the Chief Investigator, sponsor and the third parties, would prejudice their commercial interests (including intellectual property), giving actual and potential competitors an unfair advantage.**

- When handling your request we have considered both the public interest and the interests of the sponsor and other third parties

  (My emphasis.)

Professor Pollard, **it appears there is no transparency for the Berkshire Research Ethics Committee's deliberations on the Oxford/AstraZeneca vaccine trials, it remains unclear how it could be deemed ethical to include people not at serious risk of covid-19 in this medical experiment.**

The ethics process is more concerned about protecting the commercial interests of the Sponsor and Third Parties, and you as the Chief Investigator, rather than properly considering the best interests of people being recruited for the covid-19 vaccine trials, and whether it was appropriate to recruit healthy people aged 18-55 years and children aged 6-17 years.

It's really an astonishing situation Professor Pollard, and I don't think many people are awake to the significance yet...

This gets back to my previous questions to you Professor Pollard:

- **Who initiated the plan to vaccinate the entire global population against a virus which it was already known wasn't a serious threat to most people?**
- **How was this plan evaluated and by whom?**
- **Where is the public record?**

I request your urgent response on this matter. Also note my previous emails to you below, which remain unacknowledged and unanswered by you.

Sincerely
Elizabeth Hart
Independent person investigating the over-use of vaccine products and conflicts of interest in vaccination policy

On Wed, Jun 16, 2021 at 3:22 PM Elizabeth Hart <elizmhart@gmail.com> wrote:

> **For the attention of:**
> Professor Andrew Pollard
> Chief Investigator on the Oxford/AstraZeneca vaccine trials
> Chair of the UK Joint Committee on Vaccination and Immunisation
>
> Dear Professor Pollard
>
> **Why were children included in the Oxford/AstraZeneca covid-19 vaccine trials?**
>
> It was reported in May 2020 that **"most paediatric cases with laboratory-confirmed SARS-CoV-2 infection are mild; severe COVID-19 disease in children is rare"**. *
>
> **It was known from the beginning that children weren't at serious risk with the SARS-CoV-2 virus, why were they included in covid-19 vaccine trials?**
>
> **To vaccinate people at an early age with what potentially could be annual coronavirus vaccination throughout life, with unknown long-term cumulative consequences, raises important ethical questions, particularly when they are not at serious risk of disease.**
>
> Professor Pollard, I first asked you about this last year, in an email dated 20 June 2020, see email below. **But you did not respond.**
>
> I also asked this question in my *BMJ* rapid response: **Is it ethical to include children in the Oxford-AstraZeneca vaccine trials?** 5 February 2021.
>
> Professor Pollard, the Helsinki Declaration states: **"Medical research involving human subjects may only be conducted if the importance of the objective outweighs the risks and burdens to the research subjects."**
>
> As children do not appear to be at serious risk with SARS-CoV-2, in my opinion the risks and burdens for them participating in covid-19 vaccine trials outweigh the importance of the objective of the medical research, particularly as the plan is for children in general society to be vaccinated, when this appears to not be appropriate.
>
> **Why were any age groups not at serious risk of the SARS-CoV-2 virus included in the covid-19 vaccine trials?**
>
> And, ***most importantly*...who initiated the plan to vaccinate the entire global population against a virus which it was already known wasn't a serious threat to most people?**
>
> **How was this plan evaluated and by whom?**

Where is the public record?

I request your urgent response Professor Pollard, these are important matters of public interest. See my previous email to you below.

Sincerely
Elizabeth Hart
Independent person investigating the over-use of vaccine products and conflicts of interest in vaccination policy

* The immune system of children: the key to understanding SARS-CoV-2 susceptibility? Rita Carsetti et al. The Lancet Child & Adolescent. Comment. Volume 4, Issue 6, P414-416, June 01, 2020: https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642(20)30135-8/fulltext

---------- Forwarded message ---------
From: **Elizabeth Hart** <elizmhart@gmail.com>
Date: Sat, Jun 20, 2020 at 4:22 PM
Subject: Questioning the ethics of children's involvement in Oxford's COVID-19 vaccine trials
To: <andrew.pollard@paediatrics.ox.ac.uk>

For the attention of:
Professor Andrew Pollard
Head of the Oxford Vaccine Group
Chair of the UK Joint Committee on Vaccination and Immunisation

Dear Professor Pollard, **is it ethical to include children in SARS-CoV-2/COVID 19 vaccine trials?**

The phase II part of the Oxford COVID-19 vaccine trial in human volunteers is planned to include children aged between 5-12 years: http://www.ox.ac.uk/news/2020-05-22-oxford-covid-19-vaccine-begin-phase-iiiii-human-trials

It's been reported that ***"most paediatric cases with laboratory-confirmed SARS-CoV-2 infection are mild; severe COVID-19 disease in children is rare"***. (See comment published in *The Lancet Child & Adolescent Health*: **The immune system of children: the key to understanding SARS-CoV-2 susceptibility?** https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642(20)30135-8/fulltext)

How can it be ethical to include children in SARS-CoV-2/COVID 19 vaccine trials if most SARS-CoV-2 infections in children are mild, and severe COVID-19 disease in children is rare?

Professor Pollard, can you please advise what type of ethical committee process was undertaken in regards to Oxford's COVID-19 vaccine trial involving children aged between 5-12 years?

I would appreciate your response on this matter.

Sincerely
Elizabeth Hart
Independent citizen investigating conflicts of interest in vaccination policy and the over-use of vaccine products

HRA response to FOI 2021_FOI_062.pdf
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