

# Researchers Find COVID Vaccines Causally Linked to Increased Mortality, Estimate 17 Million Deaths

Data suggest COVID-19 vaccines haven't saved lives, but instead, have resulted in 17 million deaths and increased all-cause mortality in 17 countries.



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9/28/2023

Updated:

10/2/2023

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A new scientific report challenges the idea that COVID-19 vaccines have prevented deaths after researchers assessed all-cause mortality in 17 countries and found COVID-19 vaccines did not have any beneficial effect on reducing mortality. Instead, researchers found that unprecedented peaks in high all-cause mortality in each country—especially among the elderly population

when COVID-19 vaccines were deployed—coincided with the rollout of third and fourth booster doses.

The report, published Sept. 17 by Correlation Research in the Public Interest (pdf) (not yet peer-reviewed), quantified the vaccine-dose fatality rate (vDFR) for all ages—which is the ratio of inferred vaccine-induced deaths to vaccine doses delivered in a given population. After analyzing mortality data, the researchers calculated a mean all-ages fatal toxicity by injection of vDFR of one death per 800 injections across all ages and countries. This equates to 17 million COVID-19 vaccine-related deaths worldwide from 13.25 billion injections as of Sept. 2, 2023.

"This would correspond to a mass iatrogenic event that killed  $(0.213 \pm 0.006)$  % of the world population (1 death per 470 living persons, in less than 3 years), and did not measurably prevent any deaths," the authors said. The overall risk of death induced by COVID-19 vaccines is 1,000 times greater than previously reported in data from clinical trials, adverse event monitoring, and cause-of-death statistics obtained from death certificates.

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All-cause mortality is the death rate from all causes of death for a population in a specific time period. This is the most reliable data for detecting and

epidemiologically characterizing events driving death and for measuring the population-level impact of any surge or collapse in deaths from any cause.

"All-cause mortality is a good feature to use in statistical medical analyses since there is no ambiguity in whether someone has died or not," Stephanie Seneff, a senior research scientist at Massachusetts Institute of Technology (MIT), told The Epoch Times in an email. "It is highly disturbing that these authors have found a consistent trend among seventeen countries showing a significant increase in all-cause mortality coinciding with extensive COVID vaccine rollout. Their estimate of one death for every 800 injections globally is alarming."

Ms. Seneff said her investigations into potential mechanisms of vaccine injury have led her to believe that it is plausible that these injections are "extremely toxic" and should not have been approved by regulatory agencies.

## Key Findings

The researchers conducted an analysis of all-cause mortality using data from the World Mortality Dataset for 17 equatorial and Southern Hemisphere countries, including Argentina, Australia, Bolivia, Brazil, Chile, Colombia, Ecuador, Malaysia, New Zealand, Paraguay, Peru, Philippines, Singapore, South Africa, Suriname, Thailand, and Uruguay. Equatorial countries have no summer and winter seasons, so there are no seasonal variations in their all-cause mortality patterns.

These countries comprise 9.1 percent of the global population and 10.3 percent of worldwide COVID-19 injections—with a vaccination rate of 1.91 injections per person of all ages—and include nearly every COVID-19 vaccine product and manufacturer across four continents.

Key findings from the 180-page report include:

- In all countries included in the analysis, all-cause mortality increased when COVID-19 vaccines were deployed.

- Nine of 17 countries had no detectable excess deaths following the World Health Organization's March 11, 2020, declaration of the pandemic until the beginning of the COVID-19 vaccination campaign.
- Unprecedented peaks in all-cause mortality were observed in January and February 2022, during the summer season of Southern Hemisphere countries coinciding with or following the rollout of boosters in 15 of 17 countries studied.
- Excess all-cause mortality during the vaccination period beginning January 2021 was 1.74 million deaths, or one death per 800 injections, in the 17 countries studied.
- The vDFR increased exponentially with age, reaching almost 5 percent among those 90 years and older who received a fourth vaccine dose.

"There is no evidence in the hard data of all-cause mortality of a beneficial effect from the COVID-19 vaccine rollouts. No lives were saved," Denis Rancourt, co-director of Correlation Research in the Public Interest with a doctorate in physics, told The Epoch Times in an email. "On the contrary, the evidence can be understood in terms of being subjected to a toxic substance. The risk of death per injection increases exponentially with age. The policy of prioritizing the elderly for injection must be ended immediately."

## Peaks in All-Cause Mortality Coincide with Booster Doses

Using mortality and vaccination data from Chile and Peru by age and dose number, researchers observed clear peaks in all-cause mortality in July through August 2021, January through February 2022, and July through August 2022 among elderly age groups. The increase in all-cause mortality observed in January and February 2022 in both countries coincided with the rapid rollout of Chile's fourth COVID-19 vaccine dose and Peru's third dose. It is unlikely that the rise in all-cause mortality coinciding with the rollout and sustained administration of COVID-19 vaccines in all 17 countries could be due to any cause other than the vaccines, researchers said.

In Chile and Peru, the vDFR increased exponentially with age and was most significant for the most recent booster doses, resulting in one death per 20 injections of vaccine dose for in those over age 90. This pattern was similar to data the same researchers collected in Australia.

“Synchronicity between the many peaks in ACM (in 17 countries, on 4 continents, in all elderly age groups, at different times) and associated rapid booster rollouts allows this firm conclusion regarding causality and accurate quantification of COVID-19-vaccine toxicity,” the researchers wrote.

Results in other countries mirrored what was observed in Chile and Peru in every case where age-stratified mortality and age-stratified dose-specific vaccination data were available. In 15 countries with sufficient mortality data, an unprecedented surge in all-age all-cause mortality during or near January and February 2022 coincided with or was immediately preceded by a rapid rollout of booster doses three or four depending on the country and the continued administration of non-booster doses.

## Researchers Found No Evidence COVID-19 Vaccines Improved Mortality

The researchers said their findings are conclusive, and the associations observed are numerous and systematic. They could not find a single counter-example showing COVID-19 vaccines improved all-cause mortality. “If vaccines prevented transmission, infection or serious illness, then there should be decreases in mortality following vaccine rollouts, not increases, as in every observed elderly age group subjected to rapid booster rollouts. And, mortality would not increase solely when vaccines are rolled out, where no excess mortality occurs before vaccine rollouts, as we have documented here, in nine countries across three continents,” researchers concluded.

According to the report, data from numerous countries such as India, Australia, Canada, Israel, and the United States show a similar

phenomenon—abnormal peaks in all-cause mortality coinciding with booster rollouts. In the United States, deaths were prominent in the 25 to 64 age group in 21 states, coinciding with a “rapid surge” in vaccines given during the “vaccine equity” campaigns launched by regulatory agencies. Researchers estimated the United States experienced roughly 160,000 excess deaths during a period where more than 60 million COVID-19 vaccine doses were administered.

## Potential Limitations

It's important to note the scientific report has not yet been peer-reviewed. Articles that are ultimately accepted by peer review are often revised prior to publication, indicating potential for improvement. Peer review is a process of evaluating submissions to an academic journal where an expert panel applies rigorous criteria to validate results prior to acceptance for publication.