The Daily Beagle **Assessing 898 COVID-19 Shot Studies: Studies** #1 to #11 It's an uphill slog The Underdog There have been recent articles and references to there being over 1000 studies involving COVID-19 shot harms. The Daily Beagle did a preliminary assessment on the links, looking to remove obvious duplicate links and do good data practices. We whittled the studies down to 898 links, of which we had: • Corrected 7 typographical errors (spaces, missing hypens, incomplete URLs; there's likely to be more) • Removed 115 links, the reasons being: o 2 Google documents, both censored, no backups o 1 irrelevant typographical error article relating to radionuclides (no mention of COVID-19 or shots) o 84 removed duplicate links via automated tool • 28 duplicate links removed manually (obscured via metadata tags or similarly) There are likely to be more duplicates in this list (either subtly different URLs or the same study republished multiple times in different publications), so as we go through the 898 studies, we'll attempt to spot the duplicates. Processing 898 links to possible studies is overwhelming for any person, so The Daily Beagle will be doing it as a multi-part series where we explore the list in sections over time. 1. Epidemiology of Acute Myocarditis/Pericarditis in Hong **Kong Adolescents Following Comirnaty Vaccination** Comirnaty is the Pfizer mRNA shot. Conclusion: There is a significant increase in the risk of acute myocarditis/pericarditis following Comirnaty vaccination among Chinese male adolescents, especially after the second dose. 2. Insights From a Murine Model of Coronavirus Disease 2019 (COVID-19) mRNA Vaccination-Induced **Myopericarditis: Could Accidental Intravenous Vaccine Injection Induce Myopericarditis?** This study asks the question if an accidental intravenous ('into the veins') injection - as opposed to an intramuscular ('into the muscles') could cause 'myopericarditis', which is the combination of both myocarditis and pericarditis appearing the same individual. The study doesn't actually answer it's own question, and is pretty bad quality as studies go. They claim because injected mice - with heart damage - didn't immediately die, the shots must somehow be safe: In addition, even with intravenous injection and the identification of inflammatory heart disease, there was no report of increased death in the mice during the study. Literally anything not death is 'safer' than death. This is a terrible comparison. Somehow this is 'better' compared to uninjected mice with no injection with no heart inflammation? 3. Myocarditis Following Coronavirus Disease 2019 mRNA Vaccine: A Case Series and Incidence Rate Determination Conclusion of the study declares: Myocarditis is a rare adverse event associated with COVID-19 mRNA vaccines. It occurs in adult males with significantly higher incidence than in the background population. The study data is more precise, declaring: All cases occurred within 2 weeks of a dose of the COVID-19 mRNA vaccine, with the majority occurring within 3 days (range, 1–13) following the second dose (6 of 7 patients, 86%). The study tries to declare that the myocarditis is "mild" without evidence: [...] cases were mild, and all patients survived. As one Wired article quoting cardiologist Anish Koka says: There is no such thing as mild symptomatic myocarditis that puts a young person in the hospital As Dr. Steven Pelech, Division of Neurology in the Department of Medicine at UBC also remarks: For example, myocarditis. Inflammation in the heart. Contrary to what a number of people have said, there is no such thing as 'mild myocarditis,' 4. Intravenous Injection of Coronavirus Disease 2019 (COVID-19) mRNA Vaccine Can Induce Acute **Myopericarditis in Mouse Model** This asks a similar question to Study #2, but actually answers it with hard data and observations. Extracting the data: Cardiac tissue mRNA expression of interleukin (IL)-1 β , interferon (IFN)- β , IL-6, and tumor necrosis factor (TNF)- α increased significantly from 1 dpi to 2 dpi in the IV group but not the IM group, compatible with presence of myopericarditis in the IV group. IV is short for 'intravenous' (into the veins), IM is short for 'intramuscular' (into the muscles). Essentially, the data here shows that there is a massive rise in immune system response (interferon is used to kill viral cells) in the "IV [intravenous] group", but not in the "IM [intramuscular] group". They conclude that: This study provided in vivo evidence that inadvertent intravenous injection of COVID-19 mRNA vaccines may induce myopericarditis. Brief withdrawal of syringe plunger to exclude blood aspiration may be one possible way to reduce such risk. 5. Myocarditis following COVID-19 vaccination: magnetic resonance imaging study This study repeats the "it's mild" mantra, without evidence (how many 'mild' cases require hospital admittance and an CMR [cardiac magnetic resonance] scan?): Among patients who were diagnosed with post-vaccination clinical myocarditis, CMR imaging findings are mild and consistent with 'classical myocarditis'. The short-term clinical course and outcomes were favourable. Uh huh, damaged heart for the rest of your life not exactly a "favourable" outcome (what's so favourable about it isn't defined, maybe they'll mention they didn't die?). What's most interesting (context correction applied) is the below quotes from the study. They call it "hypersensitivity myocarditis": Despite the fact that myocardial biopsy was performed in only one patient, the notable consistent clinical presentation and the pattern of clinical course suggests hypersensitivity myocarditis as reported in vaccine-associated myocarditis. They mention it is related to the immune system (duh) but omit the fact the mRNA shot is responsible for causing it: In addition, the close temporal relation between a clinical presentation and vaccination, usually after a second dose, is a typical feature of reported cases of vaccine-associated myocarditis and suggests an immune-mediated mechanism. They also interestingly note myocarditis is also related to smallpox vaccination (see our Monkeypox Madness article): Myocarditis following receipt of other vaccines is rare and is recognized as causally linked only with smallpox immunization. They go on to note smallpox vaccination had a 'higher rate' but they don't mention compared to what: Notably, in contrast to passive case-finding, Engler et al. reported a significantly higher myocarditis and pericarditis after smallpox vaccination in active prospective follow-up of participant receiving vaccination. 6. Case report: acute myocarditis following the second dose of mRNA-1273 SARS-CoV-2 vaccine mRNA-1273 is the Moderna mRNA shot. Case summary notes that: [...] Cardiac magnetic resonance imaging confirmed acute myocarditis. Diagnosis of vaccine-associated myocarditis was made given the temporal relationship and supportive treatment initiated. [...] Not much else to add. 7. Myocarditis and pericarditis in adolescents after first and second doses of mRNA COVID-19 vaccines Study concludes that: This investigation including only adolescent data suggests for the first time that the second dose of mRNA COVID-19 vaccines increases the risk of reporting myocarditis/pericarditis compared with the first dose particularly in boys without significant difference between tozinameran and elasomeran. Tozinameran and elasomeran are anti-viral drugs. The study is basically saying that they don't impact/aren't responsible for the myocarditis/pericarditis increased risk in mRNA shots. From the data it is worth highlighting the study doesn't try to gaslight, and correctly marks a hospital visit as severe: [...] Most of the reports were serious (229, 95%), including 191 (79%) leading to hospitalization. [...] Not much else to add, other than it highlights a fatality. 8. Perimyocarditis in Adolescents After Pfizer-BioNTech **COVID-19 Vaccine** This details 8 patient case studies, with a discussion on the matter. No conclusion is provided. The discussion section notes that (emphasis added): [...] Herein described is the first case series from a single institution of 8 adolescent males with a diagnosis of perimyocarditis in the setting of recent BNT162b2 vaccination with no other identifiable cause. [...] Perimyocarditis is both pericarditis and myocarditis with the same cause. The discussion also notes that: [...] All patients were discharged home with strict physical activity restrictions and cardiology follow-up. [...] Meaning contrary to all the cries it is "mild", it carries consequences with "strict physical activity restrictions". As in, no exercise. 9. Perimyocarditis in Adolescents After Pfizer-BioNTech COVID-19 Vaccine [DUPLICATE] 10. COVID-19 vaccines induce severe hemolysis in paroxysmal_nocturnal_hemoglobinuria Hemolysis - rupturing of the blood cells. • Paroxysmal nocturnal hemoglobinuria - destruction of red blood cells by the complement system, part of the immune system The study opens with the usual propaganda trying to sell the shots rather than offering an impartial analysis: [...] Two messenger RNA (mRNA)-based vaccines that lead to transient expression of the SARS-CoV-2 spike protein are highly efficacious in preventing severe infection [...] Except given that numerous people keep falling ill, it is evident it doesn't prevent any infection at all. Nice use of the "severe" qualifier to obscure mild and moderate infection. Even then it's forced to admit destruction of red blood cells was immediate: [...] Reactions occurred from the day of administration to 5 days later and lasted 1 to 6 days [...] It goes on to note the "highly efficacious" shots gave 3 patients severe hemolysis: Patients 2, 3, and 4 experienced severe hemolysis with 2 to 4 g/dL hemoglobin decrease. 5 of the 6 patients required treatment, receiving ravulizumab, which is a treatment of paroxysmal nocturnal hemoglobinuria that is an immunosuppressant. Danicopan is another immunosuppressant used to treat paroxysmal nocturnal hemoglobinuria. Patient Male Male Female Female Sex Female 25 45 32 63 59 Age, y 24 24 23 31 Age at diagnosis, y Disease history Hemoglobinuria Aplastic anemia, Aplastic Transfusion Hemoglobinuria, Hemoglobinuria, anemia, transfusion dependence, fatigue fatigue, dependence transfusion hemoglobinuria, extravascular dependence smooth muscle hemolysis with microvascular small bowel dystonia transfusion thrombosis, renal dependence on C5 inhibition failure, smooth muscle dystonia Ravulizumab Ravulizumab Complement inhibitor Ravulizumab Ravulizumab Ravulizumab treatment Danicopan Table from the study, note the ravulizumab usage at the bottom 11. Autoimmune- and complement-mediated hematologic condition recrudescence following SARS-CoV-2 vaccination • Autoimmune - the body's immune system attacks the body (auto, meaning self; self-immune) • Complement-mediated - activated via the "complement" system in an immune system Hematologic - relating to the blood and study of diseases in the blood • Recrudescence - effectively means 'reoccurrance' (in French, literally means 'upsurge'), a condition that once was stabilised has now returned (E.G. some illness they treated has come back) pre-existing autoantibodies Acquired von Willebrand diseas Complement activation Paroxysmal nocturnal Study notes that: Severe exacerbation of underlying hematologic conditions can occur within 1 to 4 days after dose 2 of a 2-dose SARS-CoV-2 vaccine series. This is a similar timeframe to Study 10, above. The second part... A mild exacerbation after dose 1 and/or a history of vaccine-related adverse events may portend a more serious event after dose 2. Also reinforces the multi shot issue highlighted by The Daily Beagle. That's all for today's digging. Come back tomorrow where there's likely to be more. If you like my work, be sure to support it by sharing the article link with other people, subscribing or even becoming a supporter. Thank you! derekcbishop@hushmail.com Subscribe 1 like ← Previous Next \rightarrow **7 Comments** Write a comment... Sarah Vegan Sep 22 Liked by The Underdog Two things to note: 1) Some of these studies are lab-based ('animal models') and others are case studies. Note to self: would be worth dividing into type of study. 2) I'm guessing these were all US based. Note to self: classify according to country, and note that these articles are ONLY the English-language ones - how many additional similar studies are in other languages and thus not accessible to English monoglots? ○ 1 Reply Gift a subscription Collapse ••• 6 replies by The Underdog and others 6 more comments... 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