Critical Dissidence

Richard Rosenthal Nov 24

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Below is a letter published yesterday at NoCollegeMandates (https://nocollegemandates.substack.com/p/letter-from-10-professors-to-the) signed by 10 University of California professors decrying the UC's mandating booster shots for all students, faculty, and staff.

The letter was originally sent to University administrators— who never responded. It was also sent to nine UC student newspapers for publication as an Op-Ed. The editors at UCLA's Daily Bruin and the Daily Cal (UC-Berkeley) were initially enthusiastic, but subsequently went silent, and have not published, presumably because coerced, intimidated, or otherwise threatened with reprisals from higher ups who did not want the letter published; not surprising when you learn that UC President Michael V. Drake MD recently joined the Board of Directors at Amgen, one of the world's largest multinational biopharmaceutical companies.

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For several years, mainstream news and social media have consistently and

willfully ignored, suppressed, censored, and otherwise withheld from public view

highly credible expert data contrary to the vaccine cartel narrative, because they

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are, about 75% of the time, "brought to you by Pfizer" et. al, and have substantial financial and other interests in keeping such information hidden. Sadly, it appears UC student newspapers are likewise compromised. Their lack of courage and integrity further illustrate the all-encompassing and pernicious tyranny enabled and perpetuated by indifference and/or lack of awareness from those who could and should be searching out the truth— what used to be, but is no

longer, the raison d'etre of "journalism"— and the cornerstone of a free society.

The professors' letter (my emphasis added) deserves the widest circulation possible. Please help share its urgent message of sanity. No College Mandates

We write to register deep dismay over UC's September 22, 2022

memorandum mandating a fall 2022 COVID-19 booster for all students, staff, and

18 hr ago

faculty. Our concerns are driven by the scientific information on the virus and on the vaccines that we have now accumulated nearly three years into the outbreak. Our concerns in brief: First, University of California Office of the President justified the original mandate on the assumption that vaccination would protect against COVID-19 infection and

around the world, and now, by Pfizer itself. Moreover, more than 150 peer-reviewed

studies demonstrate that natural immunity acquired by recovering from a COVID-19

prevent transmission. We now know it does neither, a fact acknowledged by the CDC, the FDA, the HHS, the WHO, health ministries and medical researchers

infection is equal to if not superior to vaccination, and that paradoxically, over time, COVID-19 shots increase rather than decrease the risk of contracting and spreading the virus. One May 2022 article in the high-impact British Medical Journal has warned that "mandatory vaccine policies are scientifically questionable and are likely to cause more societal harm than good." The CDC has "recommended" and not mandated the new booster. The University's decision to mandate boosters at this time is therefore not in accordance with CDC guidelines. Moreover, the CDC recently greatly relaxed its COVID-19 guidelines and no longer recommends making distinctions based on a person's vaccination status. Second, mounting evidence demonstrates serious risks associated with vaccination, especially for healthy males 18-39, where risks may outweigh benefits. A Florida Department of Health analysis of mortality following mRNA COVID-19 vaccination, to cite one study, reported an 84 percent increase in death for men 18-39 within 28 days of vaccination. Also, well documented is the elevated risk of myocarditis, pericarditis, and emergency cardiovascular events among those under

40, a demographic that includes the vast majority of our student body and large portions

of staff and faculty. The Florida study also showed that males over 60 had a 10 percent

mRNA vaccines did not have those increased risks in any population. Multiple data

sources show that young healthy people who contract COVID-19 have a recovery

increased risk of cardiac-related death in the same 28-day period, and that non-

rate of 99.995 percent. In March 2022, a court order compelled Pfizer to release 55,000 pages of internal reports on vaccine effectiveness and side effects. Among the 1,246 different adverse effects in Pfizer's own documents were cardiac arrest, deep vein thrombosis, immune-mediated hepatitis, myocarditis, brain stem embolism and thrombosis, interstitial lung disease, juvenile myoclonic epilepsy, liver injury, and multisystem inflammatory syndrome. Another <u>study</u> by medical researchers, including one of our colleagues at UCSF, found that 22,000-30,000 previously uninfected adults aged 18-29 must be boosted with an mRNA vaccine to prevent just one COVID-19 hospitalization, and that "booster mandates may cause a net expected harm: per COVID-19 hospitalization prevented in previously uninfected young adults, we anticipate 18 to 98 serious adverse events, including 1.7 to 3.0 booster-associated myocarditis cases in males, and 1,373 to 3,234 cases of grade ≥3 reactogenicity."

(VAERS) released on July 15, 2022, show 1,350,950 reports of adverse events for all

age groups following COVID-19 vaccines, including 29,635 deaths and 246,676

serious injuries. It is well documented that fewer than one percent of all vaccine-

associated adverse events are ever reported to the CDC's VAERS. This means

that actual morbidity or mortality is many times greater, as pointed out, among

other sources, by a recent HHS-funded Harvard Medical School vaccine injury

Data from CDC's official Vaccine Adverse Events Reporting System

study. Another study published by UCLA Professors Sander Greenland and Patrick Whelan and others in the high-impact journal *Vaccine* in September, 2022 lamented the lack of "full transparency of the COVID-19 vaccine clinical trial data" and called for a harm-benefit analysis of the vaccines. Third, while we are not against vaccination for those who choose it, we are deeply concerned about the coercive nature of this medical procedure. Any medical treatment must be an individual choice and should be made in consultation with one's physician. Never before in medical history has an entire population been required to receive a vaccine approved only for emergency use, for which there are no long-term data, and without informed consent, that, as a matter of law and ethics, requires that no one be coerced into a medical treatment. The shift in UC policy

from fully vaccinated to up-to-date signals anticipation of an open-ended process of

continuous vaccinations and boosters that goes far beyond addressing a temporary

The LAUSD (among others) suspended its vaccine mandate for students and staff in

September 2022, after a Superior Court judge ruled that the school district did not

emergency.

certain to result?

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have the authority to mandate vaccination. The State of California has not mandated boosters for anyone except health workers. Nationwide, the trend is toward eliminating all mandates. The rate of hospitalizations is radically down and COVID-19 related deaths now appear to be about on par with annual deaths from the flu. In contrast, "excess," sudden, unexpected unexplained deaths have skyrocketed since the rollout of the experimental vaccines. Even Bill Gates, who helped finance and promote the COVID-19 vaccination campaign, has now acknowledged: "We didn't understand that it's a fairly low fatality rate and that it's a disease mainly in the elderly, kind of like flu." If UC leadership continues to insist on this ill-advised action, are they ready to

accept full personal responsibility and legal liability for the multitude of harms

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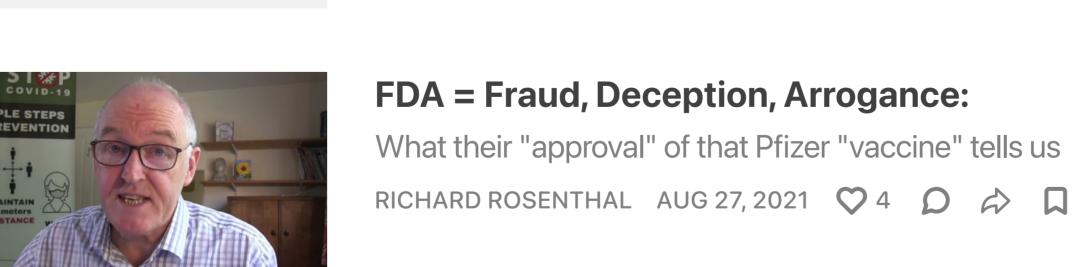
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