COVID Vaccines: Public Deserves More Than ‘Just Trust Us’

By David Mark | The Defender
Reports over the last few months about the proposed multi-billion-dollar settlements to end huge opioid-related lawsuits clearly reflect the attitude of drug manufacturers and distributors.

Even as they agree to pay record amounts, industry leaders and their public relations representatives maintain there is no connection between Big Pharma and narcotic addiction in the U.S.

Purdue Pharmaceuticals, which marketed the opiate derivative OxyContin as non-addictive, is demanding broad legal immunity
in exchange for its $4.5 billion settlement.

With the announcement of the $26 billion offer, Michael Ullmann, executive vice president and general counsel of Johnson & Johnson, gave a carefully worded statement:

“We recognize the opioid crisis is a tremendously complex public health issue, and we have deep sympathy for everyone affected. This settlement will directly support state and local efforts to make meaningful progress in addressing the opioid crisis in the United States.”

With a consistent strategy, and in the wake of Big Pharma’s benevolent status for rapid development of COVID-19 vaccines, the defendants are not taking any responsibility for contributing to the opioid epidemic.

Rather, for their billions, they are demanding all states and municipalities involved in all lawsuits agree to never again associate their products with drug addiction.

Corporations have offered to buy silence about their complicity in the death of half a million people over the last 20 years. This attempted bribe mirrors the morality of a continuing supply of addictive drugs to the uncounted millions who today suffer from prescribed opioid abuse.

Addicts who avoid or survive an overdose must navigate through a society that allows access to narcotics while designating the addicted as outcasts and criminals. Whether the source of their drugs is imported opiates or prescribed painkillers, their suffering is substantially enhanced by a hostile culture and negligent government oversight.

We have turned a blind eye to what is effectively a licensed drug cartel that exploits the vulnerable.

The attorney general of Pennsylvania, Josh Shapiro, directly involved in both the Purdue and Johnson & Johnson lawsuits,
gave a succinct analysis of his perspective:

“These deaths did not have to happen. This epidemic was manufactured by an army of pharmaceutical executives and drug distributors.”

**Short-sighted oversight**

Government regulators could have prevented this ongoing tragedy.

The U.S. Food and Drug Administration (FDA), empowered to protect the public, has not been able to resist the commanding influence of the pharmaceutical industry.

The FDA continues to fail in minimizing the pain and suffering of addicts and their families, ravaged by a preventable epidemic of drug dependence.

Dr. Raeford Brown, a former head of the FDA advisory committee for approval of new opioid painkillers, in 2019 said:

“The modus operandi of the agency is that they talk a good game and then nothing happens. Working directly with the agency for the last five years, as I sit and listen to them in meetings, all I can think about is the clock ticking and how many people are dying every moment that they’re not doing anything. The lack of insight that continues to be exhibited by the agency is in many ways willful blindness that borders on the criminal.”

The U.S. government’s war on drugs was misdirected: It should have been waged against the pharmaceutical industry.

But clearly, there hasn’t been an inclination to change anything, primarily because the FDA and Big Pharma have always had a mutually beneficial relationship.

Could it be because the opioid oversight division of the FDA relies on pharmaceutical giants for 75% of its budget? Or
perhaps it is due to the revolving door between regulators at the FDA and Centers for Disease Control and Prevention and drug industry professionals.

Both of these ongoing structural allowances are overt symptoms of the lack of will to end the flow of huge earnings.

Prescription drugs like Fentanyl and OxyContin, and similar opioids, have been abused because of profit-driven policies that result in ineffective efforts to regulate and restrict their use.

Even as acceptance of a settlement offer is considered, opioid addiction and its ensuing tragic consequences are on the increase.

Beyond huge civil suits, it seems there is no effort to reveal the details of the insidious relationship between profiteers and regulators – and not because the public isn’t aware of the destructive alliance.

**New trust in a loathed industry**

A Gallup poll in 2019 found the pharmaceutical sector is the most loathed industry in the United States.

By extension, expectation of honest government oversight has been minimal, although the underlying amoral relationship between the FDA and Big Pharma is a topic rarely analyzed in detail.

As the drug giants offer billions in settlement funds to state government programs for what are social and criminal abuses, regulation and oversight by the FDA for protecting public health is minimal.

There is no secret as to who holds the authority in their alliance with the pharmaceutical giants.

And now, as the world faces the challenges of an ongoing
pandemic, there is unwarranted blind faith in this same consortium.

The development of vaccines was fast and furious in the name of an explosive health crisis. Yet when scrutiny of every detail is most needed, the pharmaceutical industry has been given extensive room for error and foul play.

Government regulators and Big Pharma maintain their status quo relationship. Should their motivation and honesty regarding an experimental vaccine be accepted at face value?

And why are those who question their veracity condemned and ostracized?

The FDA continues to dance to the tune of the pharmaceutical industry as the vaccine makes staggering profits — this should cause immense concern.

The prescription drug business has earned its reputation for being ruthless in seeking maximum proceeds from medications that are often abused or have numerous associated risks. Nothing has changed.

With a history of malfeasance, there is no room for good faith in a trade whose central interest is protecting profits — yet the public is asked to believe that compassionate concerns are driving the relentless push for vaccination policy.

With a tremendous financial incentive to grow the market, there is very little discussion about how profits might be influencing the promotion of the COVID-19 vaccine.

And now the messaging includes that everyone might need to be dosed repeatedly for new variants, perhaps for years.

An international sales campaign

While ostensibly, all forces have been gathering in the name of ending a worldwide pandemic, there are undoubtedly other
motives in vaccine distribution.

From when it was first declared, it was clear that a country could not reach herd immunity independently. Effectiveness and pronouncements aside, six months after the first doses were given, 80% of the COVID-19 vaccines produced have gone to the world’s wealthiest countries.

More doses of the Johnson & Johnson vaccine produced in South Africa were sent out of the country than given to residents. When this was made public, the company was embarrassed into returning the vaccines to Africa.

Perhaps the universal vaccination campaign is not as equitable as portrayed. Once again, it appears that dependence on a costly drug for countries that can pay is a key component of pharmaceutical marketing. Recipients are told it is free, although nothing is without cost – whether through taxes or side effects.

For Big Pharma, the pandemic holds more potential earnings than from opiates.

Somehow blind trust continues, giving one of the most powerful and wealthiest industries on the planet free rein to push a questionable product. Their huge PR and lobbying forces are hard at work enforcing a subjective view. The new vaccines continue to be presented as a brilliant, humanitarian cure for the pandemic.

As justification for vaccine mandates grows, the drug industry, through its advocates at the FDA and Centers for Disease Control and Prevention (CDC), is at the center of minimizing dissent.

The industry has created the impression that the COVID-19 vaccine development and rollout could not possibly be flawed or duplicitous.
This manufactured consensus relies on seemingly reasonable logic: It would be impossible for all the well-meaning laboratories, researchers, and doctors across many countries to naively minimize risks or collude in any false narrative about the pandemic or vaccines.

This simplistic myth of their public relations campaign accounts for the general atmosphere—journalists and the public can’t imagine they are not fully informed.

However, it is important to understand this contrived rationale from the broadest perspective. The universal vaccine rollout is unfolding on a planet burning at its edges, with poles melting and oceans rising.

The same governments and corporate forces that have failed in slowing a planetary catastrophe are now asking for absolute confidence regarding our future health.

The impression that corporate, government, and scientific forces are collaborating in our best interests is based on a pretense worth examining. Blind acceptance of any industry’s solutions for a global crisis has no foundation.

Trusting Big Pharma with our well-being is equivalent to expecting that the oil, military, and chemical industries will save the Earth from environmental disaster.

The root problem is no secret: Profit-making eclipses sane decision-making.

The pharmaceutical industry has continuously duped the public. It has collaborated with the medical establishment in the distribution of addictive narcotics. This same commercial enterprise has promoted other questionable vaccines and drugs that are more dangerous than the diseases they prevent or symptoms they treat.

The huge number of people harmed or killed by adverse
reactions to vaccines or prescribed drugs has somehow become a reality we accept. Over decades, an atmosphere has been created where poisonous side-effects are tolerated.

Meanwhile, the industry hires experts in generating group-think. Those who don’t agree to participate in their ruse are marginalized.

Challenging the official line of Big Pharma holds great risks. Countering policies that might diminish profits is often guaranteed to end research funding, and very likely, a lucrative career.

As crisis builds, there is even less tolerance for dissenters.

A pandemic of deceit

The greatest symptom of the pandemic is a loss of common sense.

The emotional pleadings and attempts to ostracize anyone who questions whether they should have a COVID-19 vaccination have the telltale signs of a deceitful public relations campaign.

It has been very successful.

Big Pharma also received a PR gift from politicians and pundits who repeat any conjecture, from the unlikely to the outrageous, about the pandemic.

Most legitimate questions about the vaccine program from doctors and scientists are now lumped together with challenges mounted by politically motivated, conspiratorial sensationalists.

There is always misinformation spread by a range of uninformed sources on any topic. Currently, because of a void of understanding and critical, detailed analysis, speculation about the pandemic is rampant.
If more information and detail were available, there would be less conjecture. Instead, anyone who doubts the prescribed reality must be part of a hoax.

The benefits of the vaccine continue to be soberly presented as unquestionable. Doubters must be fools, or at a minimum, ignorant of their value and importance.

There is a cult-like, unconscionable attitude toward those who dispute any aspect of the vaccination plan. As some of the first serious questions about effectiveness appear, with uncertainty about vaccine suppression on future variants of the disease, a softening of the dogmatic atmosphere might be expected.

Instead, angry blame is mounting, with an implication that the unvaccinated are causing the pandemic to continue.

The outrage would be more practically applied if focused on known risk factors such as unhealthy diet and poor nutrition, obesity and diabetes. These and other conditions impacted mortality rates before the pandemic — and they continue to represent the leading underlying causes for hospitalization with life-threatening cases of the virus.

Reporting about those at higher risk for serious illness has decreased since the start of the pandemic. Instead, there is a parade of dramatic stories about perfectly healthy, unvaccinated individuals who suddenly succumb to the virus.

For example, the British press widely reported the death of a so-called, fit and healthy 42-year-old man who regretted not being vaccinated, but failed to mention that he was an asthmatic and was likely using steroids to control his condition. A few articles mention his underlying condition, late in the text, seemingly without realizing the revelation countered the principal assertion of the piece.

This account is one of many that demonstrates how the
emotional campaign for everyone to get vaccinated even overshadows efforts to inform those with underlying conditions. Perhaps their health is not the priority in the campaign.

Why isn’t COVID-19 news coverage replete with guidance for those at risk, with convincing articles concerning lifestyle and dietary choices?

It is because nothing but messages that support vaccination production and sales are acceptable. Deviation from this doctrine is taboo.

**The fortress must be held**

The CDC has admitted that the *effectiveness of the vaccine is dropping* by double-digit percentages. Concurrently, the need for *vaccine boosters* is being implemented.

Despite contradiction in terms, inconsistencies ignored and conflicts with previous optimistic data, the PR campaign continues. Indeed, as flaws in the vaccines and deceptive logic become apparent, the greater the intensity to support a distorted reality.

The pharmaceutical industry, the government, and the devoted news media continue to repeat the holy mantra no matter what unfolds: The vaccine is safe, effective, and free.

The self-labeled, fact-checking websites, rather than daring to critique the PR talking points, limit themselves to beating the drum of the CDC, FDA, and Big Pharma. Press research is dominated by those who *look for sources of false data* from those who question the science behind testing or vaccination.

Most of the news media staunchly hold its position. Critics remain 100% focused on debunking those who question vaccination statistics. Ignoring their greater responsibility for challenging the industry, they repeatedly arrive at an
amazingly consistent conclusion about any statistics that imply doubts about the vaccine: All data, when properly analyzed, shows the importance of vaccination, with minimal risks, and in every case, the disparagers are falsifying or exaggerating.

Deviation from this prescriptive interpretation is deemed sacrosanct.

Doctors and analysts who break the prohibition against raising the possibility of other forms of prevention or treatment are marginalized or excommunicated. Knowledgeable physicians with patients who have had serious reactions to the vaccine, and virologists who have dissenting opinions, are shunned as dangerous deviants.

Data on adverse vaccine response is unreported in the mainstream press.

The remedy is truth

The Big Pharma consortium is invested in doing whatever is needed to make sure conventional wisdom has no challengers. Law and government support the industry.

As of May 1, the CDC stopped gathering data on breakthrough cases that were no hospitalizations or deaths. This quiet decision came concurrently with the revelation that newer highly contagious variants could infect the vaccinated. With minimal or no symptoms, these people could continue to infect others unknowingly. It is also possible this could drive new variants.

Somehow a policy that turned away from important details was revealed only more than two months after the change. The CDC announced this decision was made because the agency had more important things to do.

Objections by some scientists and organizations were reported
in the press, yet there is no apparent investigation into why this data was intentionally deemed irrelevant.

Ignoring critical information about breakthrough cases directly illustrates how countering vaccine efficacy is off-limits.

This approach to maintaining the status quo for a product is not new.

An atmosphere where marginalizing dissent and minimizing non-supportive data has been the precursor to every abuse and scandal where Big Pharma dominated the conversation.

The industry denies facts and debases critics until evidence overwhelms their manufactured version of reality. Then without accepting fault, they move on – This is a sales trade that has been forced into paying billions of dollars in what is usually referred to as “damages.”

Perhaps there are some people who still believe Big Pharma’s prime directive in facing the pandemic is altruistic benevolence. But if indeed their mission has turned to ending suffering and healing the masses, there should be no problem in agreeing that there is nothing to hide.

For those who understand the foundational morality of the drug industry has not changed, it is a time for more scrutiny than ever before.

We must be vigilant in looking at facts. Blind trust in news media or any single source is dangerous.

The CDC’s Vaccine Adverse Event Reporting System is long overdue for vast improvement. Data on the dangers and complications of the vaccines should be scrupulously gathered and made public.

There is a desperate need for openness and transparency so that every detail can be evaluated with objectivity – the
pandemic must be faced with eyes wide open. Our medical decisions must be based on extensively supported, verifiable information.

The public deserves more than “just trust us.”

The views and opinions expressed in this article are those of the authors and do not necessarily reflect the views of Children’s Health Defense.

David Marks