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## Pfizer COVID Vaccine for Kids 5 – 11 Fails FDA Standard for 50% Efficacy

*Based on a small study, the Centers for Disease Control and Prevention said Pfizer's COVID vaccine — after just under two months — was 31% effective at preventing "symptomatic and asymptomatic" COVID in 5- to 11-year-olds. But how effective was the vaccine at four or six months?*

By **Meryl Nass, M.D.**



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The [study](#) I am about to describe was published in the March 18 issue of the Centers for Disease Control and Prevention's (CDC) Morbidity and Mortality Weekly Review (MMWR).

Once upon a time, the MMWR appeared to be a high-quality publication. It included useful editorial comments and criticisms of the articles, but those have now disappeared.

However, the study referenced in the March 18 issue is based on data collected from a relatively small group of children — 1,052 children between the ages of 5 and 11 — from four states. Surprisingly, 76% of the children live in Arizona.

In this group, 65% of the children were fully vaccinated, 7% had had one dose and 29% of the children were unvaccinated.

The group is not representative of the entire U.S., in which just over 30% of children in this age group are vaccinated (and [by Feb. 14 only 22%](#) in Chicago).

The children are swabbed weekly for [COVID](#). There were a total of 381 COVID infections in this group: 137 in the fully vaccinated and 184 infections in the unvaccinated. Half the [Omicron](#) infections were asymptomatic.

It is unclear if CDC distinguished the variants by anything other than timing.

This leaves, per my calculation, 60 COVID cases in the group of children who received one dose of the vaccine — a group for which few data are presented.

There is no way to check CDC's calculations because each child had a unique number of days in which he or she was "enrolled" in the study, starting two weeks after their second dose.

But what CDC states is that the median duration of enrollment in the study for the vaccinated kids is 53 days, and for the unvaccinated kids, 41 days.

You would have thought the unvaccinated would have participated for a longer period, as they don't have to wait two weeks until after the second shot to join the ranks of the officially vaccinated.

I have no explanation for this.

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So how well did the vaccine work a little less than two months after the children were considered "fully vaccinated?"

The CDC said that after adjustments, the vaccine was 31% effective at preventing "symptomatic and asymptomatic" COVID in this age group — at under two months.

But how effective was the vaccine at four or six months? And how long until we are in negative efficacy territory?

What are the media going to look at as they try to get out a story quickly?

The final paragraph, of course. In fact, they probably are working off the [press release](#).

What does that final paragraph say?

"This study provides evidence that receipt of two doses of Pfizer-BioNTech vaccine is effective in preventing both asymptomatic and symptomatic SARS-CoV-2 infection with the Omicron variant among children and adolescents aged 5–15 years. All eligible children and adolescents should remain up to date with recommended COVID-19 vaccinations."

Now we understand why the U.S. Food and Drug Administration (FDA) had the vaccine makers vaccinate the placebo group at two months in all the COVID vaccine trials — the FDA had established a [50% efficacy standard](#) to issue an Emergency Use Authorization (EUA), and the longer the trials went on, the lower the efficacy would be.

But now the FDA and CDC can't even get the 5- to 11-year-old efficacy above 31% in Arizona. And [in New York, at seven weeks, efficacy was 12%](#) in this age group.

This does not meet the EUA standard.

I wonder how they can possibly spin the benefits of vaccination for infants and children 6 months to 5 years old.

But I expect our federal health authorities will find a way.

*Originally published on [Meryl Nass's Substack page](#).*

*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.*

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