

AND LIKE THAT, THE CLAIM VACCINES ARE THE WORLD'S BEST STUDIED PRODUCT DIES


The world's leading vaccinologist, Dr. Stanley Plotkin, and company have just capitulated...

By Aaron Siri

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Wow. After decades of Dr. Stanley Plotkin and his vaccinologist disciples insisting vaccines are the most well studied products on the planet, they just penned an [article](#) admitting precisely the opposite.

They just admitted vaccines are not properly studied—neither pre-licensure nor post-licensure. They admitted, for example, “prelicensure clinical trials have limited sample sizes [and] follow-up durations” and that “there are not resources earmarked for postauthorization safety studies.”



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Funding Postauthorization Vaccine-Safety Science

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That is an incredible reversal. But let me provide context so nobody is fooled at what they are clearly up to:

For decades, the medical community insisted vaccines are the most thoroughly studied product ever; for example, Dr. Paul Offit said, "I think we should be proud of vaccines as arguably the safest, best tested things we put in our body."

For decades, parents of vaccine injured children, vaccine injured adults, and other stakeholders contested these claims only to be shunned and attacked by the medical community and health agencies.

In 2018, I had the unprecedented opportunity to depose the architect of our vaccination program and the Godfather of Vaccinology, Dr. Plotkin, and lay bare the evidence that showed what these authors are now finally admitting about the utter lack of vaccine safety trials and studies. See <https://thehighwire.com/ark-videos/the-deposition-of-stanley-plotkin/>.

After this deposition is made public, Dr. Plotkin goes on a tirade, making demands that FDA add "missing information on safety and

efficacy” in vaccine package inserts and that CDC exclude harms from its Vaccine Information Sheets, “lobbying the Gates Foundation to support pro-vaccine organizations,” working to have WHO list vaccine hesitancy as a global threat, lobbying AAP, IDSA and PIDS to “support training of witnesses” to support vaccine safety, etc. See <https://icandecide.org/article/dr-stanley-plotkin-the-godfather-of-vaccines-reaction-to-being-questioned/>.

The problem is, it doesn't work. It doesn't work because, at bottom, there are no proper safety studies. So, there is no safety data to add to the FDA package inserts, and hiding harms by removing them from CDC inserts doesn't make them go away. Parents and other adults don't simply stop believing what they have seen with their own eyes because CDC, WHO, the Gates Foundations, etc., won't acknowledge them, or worse, they attack them.

That brings us to the present in which Plotkin and his disciples realize they can't cast voodoo on the public. They can't hide the truth. So, their only option is to try and co-op the truth they have lied about for decades by now admitting that the studies to show vaccines are safe do not exist. But in making that admission, they conveniently fail to admit that for decades they lied, gaslit, defrauded (and I don't use that word lightly) the public by claiming that vaccines are

probably the most thoroughly safety tested products on the planet and that people should rest assured, no stone on vaccine safety was left unturned.

Thus, in their article just published, they pretend they never lied about vaccine safety. They pretend they are now just pointing out vaccine safety has never really been conducted, as if that was not known to them before.

Don't be fooled. Their real agenda is plain, and it is not to study vaccine safety, but rather to confirm that which they already believe. This is crystal clear from the fact that, while their article admits the studies have not been done, they write in the same breath that serious vaccine harms are "rare." But if the studies have not been done, how do they know that? The answer is, they don't, and they don't care to know the truth. Their goal is to protect the products they have spent their careers defending and worshipping and that have brought them fame and riches.

They also ignore the mountain of studies and data which already exist that clearly show serious vaccine harms. Just take a moment to review the large body of science around one of the adjuvants used in vaccines which multiple studies show can cause serious harm.

See <https://pubmed.ncbi.nlm.nih.gov/38788092/>

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Finally, just look at their proposed solution. After making the a priori conclusion that harms are “rare,” ignoring all the existing studies showing harm, these folk have the audacity to want to raid the federal vaccine injury compensation fund to presumably pay themselves and their compatriots hundreds of millions of dollars to conduct the studies that would, no doubt, seek to confirm their prior conclusion that vaccine harms are “rare,” while ignoring the studies that already show serious harm.

So, with that in mind, and sorry for the long wind-up, here are the things they admit in this article for maybe the very first time:

“[T]he widespread vaccine hesitancy observed during the Covid-19 pandemic suggests that the public is no longer satisfied with the traditional safety goal of simply detecting and quantifying the associated risks after a vaccine has been authorized for use.”

Comment: The parents of vaccine injured children, vaccine injured adults, and others were never “satisfied” with seeking to assess “risks *after* a vaccine has been authorized.”

“Postauthorization studies are needed to fully characterize the safety profile of a new vaccine, since prelicensure clinical trials

have limited sample sizes, follow up durations, and population heterogeneity.”

Comment: Let me translate: the clinical trials relied upon to license childhood vaccines are useless with regard to safety since they virtually never have a placebo control, typically review safety for days or weeks after injection, and often have far too few participants to measure anything of value, just see www.icandecide.org/no-placebo; amazingly, I just had a dispute with a Plotkin disciple not long ago in which they were clearly still not ready to admit the above truth <https://x.com/AaronSiriSG/status/1673483027618623489>.

“It is critical to examine adverse events following immunization (AEFIs) that have not been detected in clinical trials, to ascertain whether they are causally or coincidentally related to vaccination.”

Comment: No shit and you have been claiming for decades this was being done!

“When they are caused by vaccines (vaccine adverse reactions), the risk attributable to vaccination and the biologic mechanism must be ascertained. That science becomes the basis for developing safer vaccines, if possible, and for determining contraindications to vaccination and the

compensation that should be offered for AEFIs.”

Comment: Again, no shit, and you have also been claiming for decades this was being done!

“Currently in the United States, when the Advisory Committee on Immunization Practices (ACIP) recommends a new routine vaccine, the only automatic statutory resource allocations that follow are for vaccine procurement by Vaccines for Children (VFC) and for the Vaccine Injury Compensation Program (VICP). Although the ACIP acknowledges the need, there are currently no resources earmarked for postauthorization safety studies beyond annual appropriations, which must be approved by Congress each year.”

Comment: Again, no shit! But nice of you to finally admit it after decades of gaslighting.

“Progress in vaccine-safety science has understandably been slow — often depending on epidemiologic evidence that is delayed or is inadequate to support causal conclusions and on an understanding of biologic mechanisms that is incomplete — which has adversely affected vaccine acceptance.”

Comment: More gaslighting because had a proper clinical trial been conducted pre-

licensure, we would know the safety before it is unleashed on babies and we wouldn't need to rely on confounded-biased-conflicted-post-authorization "epidemiological" studies you now want to conduct which you make clear you only suggest because you want to avoid "public concern and consequent decreases in immunization coverage," not because you actually care about safety.

"In 234 reviews of various vaccines and health outcomes conducted from 1991 to 2012, the IOM found inadequate evidence to prove or disprove causation in 179 (76%) of the relationships it explored, illustrating the need for more rigorous science."

Comment: Again, no shit, and I would appreciate if you would please properly cite to the ICAN white paper from 2017 from which you have plainly lifted this point

<https://icandecide.org/wp-content/uploads/2019/09/VaccineSafety-Version-1.0-October-2-2017-1.pdf>.

"Identifying the biologic mechanisms of adverse reactions — how and in whom they occur — is critical for developing safer vaccines, preventing adverse reactions by expanding contraindications, and equitably compensating vaccinees for true adverse reactions."

Comment: Shameless to pretend you have not for decades ignored or attacked those calling for these studies while pretending a mountain of such studies showing the foregoing don't already exist.

“[T]he budget for vaccine-safety monitoring at the CDC (which is responsible for the majority of U.S. federal efforts) has remained stagnant ... at about \$20 million per year” which they write is an “inadequate level of funding.”

Comment: Again, shameless to pretend parent groups have not been yelling about this issue for decades only to be ignored and attacked.

“The public [now] also wants public health authorities to mitigate and prevent rare but serious adverse events – which no longer seem rare when vaccines are given to millions or billions of people.”

Comment: They have always been given to millions or billions of people, and the studies showing the harms they cause are not rare and they already exist, but you don't really care about that reality as vaccine safety is not really the goal.

If they are really interested in the truth about what injuries vaccines cause and the rate at which these injuries occur, then they should welcome convening a bipartisan panel which

could first review all the very concerning studies and hard data that already exists on this topic (often by scientists not on pharma's dole) and we could design additional studies together and have them run in the open so everybody has to live with the result.

(Among other reasons to demand the study be conducted in the open is that I have witnessed firsthand what happens when a study comparing vaccinated and unvaccinated children in large multi-million person datasets, using historical insurance data, showed vaccinated children had multiple times the rate of numerous chronic diseases – the study gets buried hence the need to do it in the open.)

Plotkin and company should welcome studies which can show vaccines have not contributed to the rise in chronic childhood disease (many of which are immune mediated diseases) from 12% of children in the early 1980s (when CDC recommended 7 routine childhood injections) to over 50% of children now (when CDC recommends over 90 routine childhood injections).

And I think they do welcome such studies *if* they can assure that the outcome would show vaccines do not cause these harms. Alas, the reality is that (as they know) studies showing vaccines contribute to this rise already exist. But their goal, in any event, is not to really study

safety. Rather it is to prove their prior assumption that vaccines are safe and harms are “rare.” This approach is how they designed VAERS, V-SAFE, VSD, and every other “safety” system.

As is transparent from their article, the only reason they even pretend to care about vaccine safety is that they want to avoid reduction in vaccine uptake – not actually assure safety.

That all said, if they are really well-meaning, I would welcome collaborating. To be fair, I will email all four of them to request a meeting to review existing science and design studies mutually agreed upon. If they are really interested in vaccine safety, they should welcome that (I have no hard feelings despite their attacks on me and I hope they can rise above any hard feelings they have for the sake of protecting children). Most importantly, I'm willing to live with the results of those studies. Are they?