



For Immediate Release

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North Carolina Physicians' Group Calls for Halt to Atrium COVID Vaccine Trial for Children

Winston-Salem

The North Carolina Physicians for Freedom (NCPFF), a large network of physicians and other health care professionals, called for the cessation of a clinical trial announced by the Atrium hospital system. The experiment calls for the Pfizer vaccine for Covid-19 to be administered to babies and young children.

Healthy children, teens, and young adults are at minimal risk of severe complications or death due to the Covid-19 SARS-CoV-2 virus. The median IFR (infection fatality rate) was 0.0013%, at 0-19 years, using data from 12 countries - comparable to that of recent influenza viruses with above average severity.¹ More recent studies show an even lower IFR. Multi-country data published in *BMC Infectious Diseases* showed an IFR of 0.0005, or 1 per 2,000 infections among ages 0-9 years.² A California analysis of data up to May 12, 2022 found an IFR of 0.000086, or 0.86 per 10,000 infections among children under age 5.³

The vaccines are not without risk. They have been associated with a much larger number of deaths and adverse events in one year than all other childhood vaccines combined in the VAERS system over the

¹References

Infection fatality rate of COVID-19 in community-dwelling populations with emphasis on the elderly: An overview. Axfors C, Ioannides JPA. medRxiv preprint posted July 13, 2021. <https://doi.org/10.1101/2021.07.08.21260210>

² BMC Infectious Diseases. March 29, 2022.

<https://bmcinfectdis.biomedcentral.com/articles/10.1186/s12879-022-07262-0>

³ CoVID-19 Age, Race, and Ehnicity Data. California Department of Public Health. May 13, 2022.

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Age-Race-Ethnicity.aspx>

past 31 years.⁴ Even this high number of deaths probably under-reports by a factor of 20 to 41 according to two analyses.^{5,6}

Serious reactions include myocarditis—an inflammation of the heart that causes heart muscle to die, blood clots, and severe disability affecting the nervous system. A *European Journal of Clinical Investigation* analysis showed a relative risk of hospitalization for myo/pericarditis among boys age 12 to 15 after the second dose of BNT162b2 vaccine 2.8 times higher than their 120-day CoVID-19 hospitalization risk. International estimates of post-vaccine risk exceeded the highest CoVID-19 hospitalization risk by 6.5 times.⁷

Dr. Peter McCullough, one of the world’s leading cardiologists and experts in Covid-19 vaccine risks, offers the following statement for NCPFF: "Heart damage cannot be minimized as rare or mild. All forms of heart damage are serious and in children, the long-term consequences are not known and could be very serious if not fatal."

Beyond that, there has clearly been an extremely inadequate amount of time to determine long-term vaccine adverse events from novel mRNA and viral DNA vector vaccines, considering that these often only become apparent several years after introduction of the vaccines.

It’s also important to note, according to the CDC, 74.2% of kids age 0-11 already have natural immunity.⁸ It has been demonstrated with over 150 studies that natural immunity provides robust, long-lasting protection.⁹

NCPFF medical advisory board member Dr. Bose Ravenel is a retired pediatrician with 37 years of experience in private practice. He served in academic medicine for 11 years as Associate Clinical Professor of Pediatrics at the UNC Department of Pediatrics (1976-1987). Dr. Ravenel said, “There is no rational argument or empirical data to justify administering these ‘warp-speed’ developed vaccines to young children who are at near-zero statistical risk for death or serious disease from the virus. To proceed with an experimental COVID vaccine to children is reckless and poses an unacceptable risk-to-benefit profile.”

⁴ VAERS Summary for COVID-19 Vaccines through 01/07/2022 – period December, 2020 through 01/07/22 <https://vaersanalysis.info/2022/01/14/vaers-summary-for-covid-19-vaccines-through-01-07-2022>

⁵ Rose J, Crawford M. Estimating the number of COVID vaccine deaths in America [Internet]. Available from: https://downloads.regulations.gov/CDC-2021-0089-0024/attachment_1.pdf

⁶ COVID vaccination and age-stratified all-cause mortality risk. Pantazatos SP, Seligmann H. Preprint October 2021. DOI:[10.13140/RG.2.2.28257.43366](https://doi.org/10.13140/RG.2.2.28257.43366)

⁷ BNT162b2 Vaccine-Associated Myo/Pericarditis in Adolescents: A Stratified Risk-Benefit Analysis. *European Journal of Clinical Investigation*. Feb14, 2022. <https://onlinelibrary.wiley.com/doi/10.1111/eci.13759>

⁸ Seroprevalence of Infection-Induced SARS-CoV-02 Antibodies. Centers for Disease Control. MMWR Early Release <https://www.cdc.gov/mmwr/volumes/71/wr/mm7117e3.htm>

⁹ 150 Plus Research Studies Affirm Naturally Acquired Immunity to Covid-19. Paul Elias Alexander. Brownstone Institute. October 17, 2021.

<https://brownstone.org/articles/79-research-studies-affirm-naturally-acquired-immunity-to-covid-19-document-ed-linked-and-quoted>

Various hospital systems in North Carolina and the North Carolina Department of Health and Human Services have aggressively promoted vaccination against Covid-19 for minors and young adults, even though their risks associated with receiving the vaccine far exceed any potential benefit. These vaccinations often have taken place without a legitimate informed consent process and occasionally without parental consent. Patients are often told that the vaccines are “safe and effective” with no qualification.¹⁰

NCPFF physicians expressed concerns about the potential conflict situations investigators and organizations can find themselves in when conducting clinical trials that are funded by the pharmaceutical firms whose products are being tested.

¹⁰ About CoVID-19 Vaccines. Centers for Disease Control and Prevention. Jan 21, 2022.