



Written by [Veronika Kyrylenko](#) on October 7, 2021

Report: Calif. Teen Died of Heart Condition Two Days After Receiving Pfizer COVID Shot

While the U.S. Centers for Disease Control and Prevention (CDC) continues recommending experimental gene therapeutics, aka COVID vaccines, manufactured by Pfizer, for the general public aged 12 and older, and California Governor Gavin Newsom makes them [mandatory](#) for school children, the jab has allegedly claimed another young life.

Red State [reported](#) on Tuesday that a healthy 15-year-old boy from Santa Rosa, California, died two days after receiving a Pfizer shot on June 7. His name was not made public out of respect to the grieving family.



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According to the Death Investigation Synopsis [Report](#) shared by [Reopen California Schools](#) group,

The decedent was found unresponsive in his bedroom after his mother was checking on his welfare long after he was supposed to wake in the morning. The decedent was pronounced dead at the scene due to obvious death. The decedent had been in good health with no medical history and had received his second Pfizer COVID-19 Vaccination approximately two days before his death.

Per the report, the postmortem examination revealed that the teenager died of a heart condition called “stress cardiomyopathy with perivascular coronary artery inflammation” of unknown etiology “in the setting of” the recent Pfizer-BioNTech vaccination. It is added that “there were no other significant conditions contributed to the death listed.”

Because the etiology of the condition was unknown but occurred “in the setting” of the vaccination, the manner of death was described as “undetermined.”

[Stress cardiomyopathy](#), also known as broken heart syndrome, is a condition caused by intense emotional or physical stress leading to rapid and severe reversible cardiac dysfunction, per the National Institute of Health. More than 90 percent of patients suffering from stress cardiomyopathy are females, the vast majority of whom are either middle-aged or post-menopausal. This means the Santa Rosa teen, being generally healthy, was an extremely unlikely victim of the condition.

Following the uproar on social media, Sonoma County was forced to issue a statement on the case, saying there was “no link” between the boy’s death and the vaccine that he received.

According to [The Press Democrat](#), county spokesman Paul Gullixson described the case as “sad and perplexing,” and voiced his concern that its “facts” may be “misrepresented by anti-vax community.” Gullixson added that “The only reason that the vaccination was mentioned in the synopsis, and the only



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correlation to the death, was the timing.”

Commenting on the possible side effects of the vaccines, county health officer Dr. Sundari Mase acknowledged there have been demonstrated cases of blood clots in a “small percentage of Johnson & Johnson vaccine recipients, and an even smaller set of myocarditis (inflammation of the heart muscle) reactions in young people,” per the outlet.

“But in this case,” Mase continued, “CDC found no relationship between the vaccine and the death.” The case, reportedly, was investigated by the CDC jointly with Sonoma County and the California Department of Public Health (CDPH), and was completed in September.

In their exclusive public statement provided to *The Press Democrat*, the parents of the deceased provided that despite their son’s death, they “strongly believed that everyone should have their children vaccinated.”

“We believe vaccines are safe and effective. Families should recognize that complicating factors can occur with any vaccine and, because of that, we encourage parents to closely monitor their children following vaccination regardless if they have symptoms or not,” the family wrote.

The outlet states that the boy’s case was entered into the Vaccine Adverse Event Reporting System (VAERS), a database co-run by the CDC and U.S. Food and Drug Administration (FDA). The entry lists no known allergies, disabilities, or medications. It mentions the date of the teen’s first shot, which was administered on May 15, but not his second.

Dr. Mase seemingly downplayed the credibility of the reports entered into VAERS, saying that this database “is just where you make a report that something happened.” In the case of the unnamed 15-years-old, that “something” meant death from a condition unlikely for both his age and gender. To this author, the words of the Sonoma County health officer are reminiscent of the infamous comments of Minnesota Representative Ilhan Omar, who said “Some people did something” when referring to the 9/11 terrorist attacks on America.

Further, Mase explained that “the CDC looks at the database and makes the determination from the reporting what is significant, and they want to follow up on, and what they don’t.”

The case of Santa Rosa boy is not the first one that got wide publicity. *The New American* [reported](#) earlier this year on the case of a 13-year-old boy from Saginaw County, Michigan, who died in his sleep three days after getting his second dose of the Pfizer COVID vaccine in mid-June. The initial autopsy results showed that his heart was enlarged and there was some fluid surrounding it.

In June, the CDC held an emergency meeting about cases of heart inflammation conditions developing in younger recipients. At the time, the federal agency reported 1,200 cases of myocarditis or pericarditis developing in young people after receiving the vaccine, most of these cases developing after the second dose. The CDC presentation [slides](#) revealed that chances of young male vaccine recipients (aged 12-29) developing heart inflammation is 21 times higher than in their unvaccinated peers. Girls are not spared the risk, either: They are 5.5 time more likely to get heart problems after receiving a shot.

While the CDC [acknowledged](#) that there is a “likely association” between the mRNA vaccines and heart inflammation, it continues to [urge](#) parents to get their children vaccinated.

Following the CDC meeting, the FDA [added](#) a warning to patient and provider fact sheets for the Pfizer and Moderna COVID-19 vaccines to indicate a “rare risk” of heart inflammation.



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