



Written by [Gary Benoit](#) on September 26, 2022

Breaking: Doctor Who Promoted Covid Vaccines Calls for Suspension of Covid Vaccinations; Will Hold Press Conference Tuesday

Dr. Aseem Malhotra is a British cardiologist who is an internationally renowned expert in the prevention, diagnosis, and management of heart disease. He is a fellow of the Royal College of Physicians, president of the Scientific Advisory Committee of the Public Health Collaboration, and an honorary council member to the Metabolic Psychiatry Clinic at Stanford University School of Medicine in California.

A peer-reviewed paper he wrote about Covid vaccines, entitled "[Curing the pandemic of misinformation on COVID-19 mRNA vaccines through real evidence-based medicine - Part 1](#)," was published September 26 in the *Journal of Insulin Resistance*.



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In the abstract to his paper, Dr. Malhotra says that there is "a greater risk of serious adverse events from the vaccines than being hospitalised from COVID-19." He also stated, "A pause and reappraisal of global vaccination policies for COVID-19 is long overdue." (See abstract below.)

Dr. Malhotra will be giving a press conference Tuesday at 10:30 a.m. British time sponsored by the [World Council for Health](#). In cooperation with the World Council for Health, *The New American* will be live streaming this event at 5:30 a.m. Eastern time. Please use this link:

<https://thenewamerican.com/live-wcfh-covid-2022/>

Also, we will be publishing a followup report after this conference.

Abstract

Background: In response to severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), several new pharmaceutical agents have been administered to billions of people worldwide, including the young and healthy at little risk from the virus. Considerable leeway has been afforded in terms of the pre-clinical and clinical testing of these agents, despite an entirely novel mechanism of action and concerning biodistribution characteristics.

Aim: To gain a better understanding of the true benefits and potential harms of the messenger ribonucleic acid (mRNA) coronavirus disease (COVID) vaccines.

Methods: A narrative review of the evidence from randomised trials and real world data of the COVID mRNA products with special emphasis on BioNTech/Pfizer vaccine.



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Results: In the non-elderly population the “number needed to treat” to prevent a single death runs into the thousands. Re-analysis of randomised controlled trials using the messenger ribonucleic acid (mRNA) technology suggests a greater risk of serious adverse events from the vaccines than being hospitalised from COVID-19. Pharmacovigilance systems and real-world safety data, coupled with plausible mechanisms of harm, are deeply concerning, especially in relation to cardiovascular safety. Mirroring a potential signal from the Pfizer Phase 3 trial, a significant rise in cardiac arrest calls to ambulances in England was seen in 2021, with similar data emerging from Israel in the 16-39-year-old age group.

Conclusion: It cannot be said that the consent to receive these agents was fully informed, as is required ethically and legally. A pause and reappraisal of global vaccination policies for COVID-19 is long overdue.

Contribution: This article highlights the importance of addressing metabolic health to reduce chronic disease and that insulin resistance is also a major risk factor for poor outcomes from COVID-19.



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