

# 329 Deaths and 9,516 “Other Injuries” in U.S. Reported Following COVID Vaccine

Latest CDC Data

By [Children's Health Defense](#)

Global Research, January 31, 2021

[Children's Health Defense](#) 29 January 2021

Region: [USA](#)

Theme: [Intelligence](#), [Science and Medicine](#)

All Global Research articles **can be read in 27 languages by activating the “Translate Website”** drop down menu on the top banner of our home page (Desktop version).

\*\*\*




*The numbers reflect the latest data available as of Jan. 22 from the CDC's Vaccine Adverse Event Reporting System website. Of the 329 reported deaths, 285 were from the U.S., and 44 were from other countries. The average age of those who died was 76.5.*

As of Jan. 22, [329 deaths](#) — a subset of [9,845 total adverse events](#) — had been reported to the Centers for Disease Control and Prevention's (CDC) [Vaccine Adverse Event Reporting System](#) (VAERS) following [COVID-19](#) vaccinations. VAERS is the primary mechanism for reporting adverse vaccine reactions in the U.S. Reports submitted to VAERS require further investigation before confirmation can be made that an adverse event was linked to a vaccine.

[From the 1/22/2021 release of VAERS data:](#)

## Found 9,845 cases where Vaccine is COVID19

Table

 Event Outcome	 Count	 Percent
Death	329	3.34%
Permanent Disability	104	1.06%
Office Visit	1,218	12.36%
Emergency Room	18	0.18%
Emergency Doctor/Room	2,054	20.86%
Hospitalized	722	7.33%
Recovered	3,878	39.31%
Birth Defect	11	0.11%
Life Threatening	273	2.77%
Not Serious	3,717	37.76%
<b>TOTAL</b>	<b>† 12,318</b>	<b>† 125.10%</b>
† Because some cases have multiple vaccinations and symptoms, a single case can account for multiple entries in this table. This is the reason why the Total Count is greater than <del>9845</del> (the number of cases found), and the Total Percentage is greater than 100.		

The reports, filed on the VAERS website between Dec. 14, 2020 and Jan. 22, describe outcomes ranging from “foaming at the mouth” to “massive heart attacks” to “did not recover.”

According to the Washington Post, as of Jan. 29, [22 million people](#) in the U.S. had received one or both doses of a COVID vaccine. So far, only the [Pfizer](#) and [Moderna](#) vaccines have been granted Emergency Use Authorization in the U.S. by the U.S. Food and Drug Administration (FDA). By the [FDA's own definition](#), the vaccines are still considered experimental until fully licensed.

Even with the updated injury numbers released today, the CDC said Thursday that safety data shows “everything is going well.” According to [USA TODAY](#):

“Early safety data from the first month of COVID-19 vaccination finds the shots are as safe as the studies suggested they’d be.

“Everyone who experienced an allergic response has been treated successfully, and no other serious problems have turned up among the first 22 million people vaccinated, according to the Centers for Disease Control and Prevention.”

According to the VAERS data, of the 329 reported deaths, 285 were from the U.S., and 44 were from other countries. The average age of those who died was 76.5.

States reporting the most deaths were: California (22), Florida (16), Ohio (18), New York (15) and KY (13). Most of the reports were from, or filed on behalf of people who had received only the first dose. About half of the people reporting had the Pfizer vaccine, the other half Moderna.

The Moderna vaccine lot numbers associated with the highest number of deaths were: 025L20A (13 deaths), 037K20A (11 deaths) and 011J2A (10 deaths). For Pfizer, the lot numbers were: EK5730 (10 deaths), EJ1685 (11 deaths), EL0140 (15 deaths), EK 9231 (12 deaths) and EL1284 (11 deaths).

Several deaths and multiple [severe allergic reactions](#) are under investigation in the U.S. and Europe.

Last week, California health officials [temporarily paused](#) a large batch of Moderna vaccines due to a high number of allergic reactions, but [reversed](#) that decision a few days later.

Anyone suffering from a serious injury will have little legal recourse because they will be directed to the [Countermeasures Injury Compensation Program](#) which has [rejected 90% of vaccine-injury claims](#) over the past decade.

On Jan. 3, Miami obstetrician [Dr. Gregory Michael](#) died after he suffered a [hemorrhagic stroke](#). Michael died about two weeks after receiving [Pfizer-BioNtech's](#) COVID vaccine. Although he became ill just three days after he got the shot, [Pfizer](#) said it didn't think there was any direct connection to the vaccine. The [New York Times quoted](#) Dr. Jerry Spivak, a blood disorder expert at Johns Hopkins University, saying “I think it's a medical certainty that the vaccine was related.”

Officials in Orange County, California, [are investigating](#) the death of a 60-year-old healthcare worker who died Jan. 9, four days after receiving his second injection of the [Pfizer-BioNTech COVID vaccine](#). Tim Zook, an x-ray technologist at South Coast Global Medical Center in Santa Ana, was hospitalized on Jan. 5, several hours after being

vaccinated. Zook's wife, Rochelle Zook, [told the Orange County Register](#) that her husband's health rapidly deteriorated over the next few days. She said she didn't blame any pharmaceutical company and that people should still "take the vaccine — but the officials need to do more research. We need to know the cause."

Data about deaths following receipt of the experimental Pfizer-BioNTech vaccine are also emerging from [Israel](#), [Norway](#), [Portugal](#), [Sweden](#) and [Switzerland](#). Norway launched an investigation into the vaccines after the Norwegian Medicines Agency received reports of 33 suspected adverse drug reactions with fatal outcomes following administration of the [Pfizer-BioNTech](#) vaccine. [Pharma](#) and federal agencies attributed the majority of these cases to "coincidence."

"[Coincidence](#) is turning out to be quite lethal to [COVID vaccine](#) recipients," said [Children's Health Defense](#) (CHD) Chairman Robert F. Kennedy, Jr. "If the clinical trials are good predictors, the rate of coincidence is likely to increase dramatically after the second shot."

The [clinical trials](#) suggested that almost all the benefits of COVID vaccination and the vast [majority of injuries](#) were associated with the [second dose](#).

While the VAERS database numbers are sobering, according to a U.S. Department of Health and Human Services [study](#), the actual number of [adverse events](#) is likely significantly higher. VAERS is a [passive surveillance system](#) that relies on the willingness of individuals and [professionals](#) to submit reports voluntarily.

In December, CHD and Kennedy [wrote](#) to former FDA director, Dr. David Kessler, co-chair of the COVID-19 Advisory Board and President Biden's [version](#) of Operation Warp Speed. Kennedy told Kessler that [VAERS](#) has been an abject [failure](#), with [fewer than 1%](#) of adverse events ever reported.

A critic familiar with VAERS' shortcomings bluntly condemned VAERS in [The BMJ](#) as "nothing more than window dressing, and a part of U.S. authorities' systematic effort to reassure/deceive us about vaccine safety."

CHD is calling for complete transparency. The children's health organization is asking Kessler and the federal government to release all of the data from the clinical trials and suspend COVID-19 vaccine use in any group not adequately represented in the clinical trials, including the elderly, frail and anyone with comorbidities.

CHD is also asking for full transparency in post-marketing data that reports all health outcomes, including new diagnoses of autoimmune disorders, adverse events and deaths from COVID vaccines.

\*

Note to readers: please click the share buttons above or below. Forward this article to your email lists. Crosspost on your blog site, internet forums. etc.

*Featured image is from CDC*

The original source of this article is [Children's Health Defense](#)  
Copyright © [Children's Health Defense](#), [Children's Health Defense](#), 2021

---

[Comment on Global Research Articles on our Facebook page](#)

[Become a Member of Global Research](#)

Articles by: [Children's Health Defense](#)

**Disclaimer:** The contents of this article are of sole responsibility of the author(s). The Centre for Research on Globalization will not be responsible for any inaccurate or incorrect statement in this article. The Centre of Research on Globalization grants permission to cross-post Global Research articles on community internet sites as long the source and copyright are acknowledged together with a hyperlink to the original Global Research article. For publication of Global Research articles in print or other forms including commercial internet sites, contact: [publications@globalresearch.ca](mailto:publications@globalresearch.ca)  
[www.globalresearch.ca](http://www.globalresearch.ca) contains copyrighted material the use of which has not always been specifically authorized by the copyright owner. We are making such material available to our readers under the provisions of "fair use" in an effort to advance a better understanding of political, economic and social issues. The material on this site is distributed without profit to those who have expressed a prior interest in receiving it for research and educational purposes. If you wish to use copyrighted material for purposes other than "fair use" you must request permission from the copyright owner.  
For media inquiries: [publications@globalresearch.ca](mailto:publications@globalresearch.ca)