

Medical Researchers Willfully Blind to Future Risk of Cardiac Arrest After COVID-19 Vaccine Induce Myopericarditis

Serious Adolescent Cases with no Follow-Up Disclosed

By [Dr. Peter McCullough](#)

Theme: [Science and Medicine](#)

Global Research, March 06, 2023

[Courageous Discourse](#) 5 March 2023

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Before COVID-19 myocarditis was rare and always alerted cardiologists to future risks of two outcomes: 1) heart failure, 2) arrhythmias (ventricular tachycardia/fibrillation) leading to cardiopulmonary arrest.

Buchan and colleagues reported 77 Canadian teenagers age 12-17 who needlessly suffered myopericarditis after the Pfizer mRNA vaccine. Sixty six percent occurred after dose #2 and only 7% had prior COVID-19, so the vaccine was to blame in the vast majority of cases. Hospitalization occurred in 44% and there were no deaths. These cases occurred in 2020-2021 and there is no mention of follow-up or risk of future cardiac arrest.

JAMA Pediatrics | Original Investigation

Myocarditis or Pericarditis Events After BNT162b2 Vaccination in Individuals Aged 12 to 17 Years in Ontario, Canada

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Table 1. Characteristics of Adolescents Meeting Brighton Collaboration Levels 1 to 3 for Myocarditis or Pericarditis After Vaccination With BNT162b2

Characteristics	Year interval, No. (%)		Overall
	12-15	16-17	
No.	39	38	77
Sex			
Male	31 (79.5)	32 (84.2)	63 (81.8)
Female	8 (20.5)	6 (15.8)	14 (18.2)
Dose No.			
Dose 1	11 (28.2)	15 (39.5)	26 (33.8)
Time to onset, median (IQR), d	5 (2-20)	3 (2-14)	4 (2-14)
Events within 7 d after dose 1	7 (63.6)	9 (64.3)	16 (64.0) ^a
Dose 2	28 (71.8)	23 (60.5)	51 (66.2)
Time to onset, median (IQR), d	2 (2-3)	2 (1-2)	2 (2-3)
Events within 7 d after dose 2	26 (92.9)	23 (100.0)	49 (96.1)
Clinical diagnosis			
Myocarditis	25 (64.1)	14 (36.8)	39 (50.6)
Pericarditis	5 (12.8)	11 (28.9)	16 (20.8)
Myopericarditis/perimyocarditis	9 (23.1)	13 (34.2)	22 (28.6)

^a Excludes 1 event following dose 1 with a missing onset date.

Table 2. Clinical Information for Myocarditis or Pericarditis Events Among Adolescents Aged 12 to 17 Years

Variable	No. (%)			
	Myocarditis	Pericarditis	Myopericarditis/perimyocarditis	Total
No.	39	16	22	77
Health care utilization				
Emergency department	37 (94.9)	15 (93.8)	22 (100)	74 (96.1)
Inpatient hospital admission	21 (53.8)	2 (12.5)	11 (50.0)	34 (44.2)
Length of stay in hospital, median (IQR), d ^b	1 (1-2)	4.5 (3-6)	1.5 (1-2)	1 (1-2)
ICU admission ^c	1 (2.6)	1 (6.3)	0 (0)	2 (2.6)
Death	0 (0)	0 (0)	0 (0)	0 (0)
Diagnostic test results ^{d,e}				
Elevated troponin level	36/38 (94.7)	3/15 (20.0) ^f	21/22 (95.5)	50/75 (80.0)
Elevated inflammation biomarker (CRP, ESR, or D-dimer) ^g	17/31 (54.8)	7/14 (50.0)	15/17 (88.2)	39/62 (62.9)
Abnormal echocardiogram	4/34 (11.8)	2/9 (22.2)	6/19 (31.6)	12/62 (19.4)
Reduced LVEF <50%	0/34 (0.0)	0/9 (0.0)	2/19 (10.5)	2/62 (3.2)
Pericardial effusion	1/34 (2.9)	3/9 (33.3) ^h	4/19 (21.1)	8/62 (12.9) ^h
ECG abnormalities	19/37 (51.4)	14/16 (87.5)	16/22 (72.7)	49/75 (65.3)
Clinical history				
History of myocarditis or pericarditis ^h	0 (0)	0 (0)	0 (0)	0 (0)
Previous COVID-19 RT-PCR positive test result	1 (2.6)	3 (18.8)	1 (4.5)	5 (6.5) ⁱ

Buchan SA, Alley S, Seo CY, et al. Myocarditis or Pericarditis Events After BNT162b2 Vaccination in Individuals Aged 12 to 17 Years in Ontario, Canada. *JAMA Pediatr*. Published online February 27, 2023. doi:10.1001/jamapediatrics.2022.6166

The most common question I receive from concerned and regretful parents is “will my child be OK after getting through myopericarditis?” Buchan and colleagues have the answer in their data and Canadians deserve to know how those 77 kids are doing now two years later.

Ethical research should be responsive to public needs in the setting of a pandemic crisis.

The COVID-19 vaccines have caused record injuries, disabilities, and death. Let’s hope medical researchers holding data on vaccine injuries publish longer term outcomes soon so physicians can accurately prognosticate for this now common form of cardiac injury.

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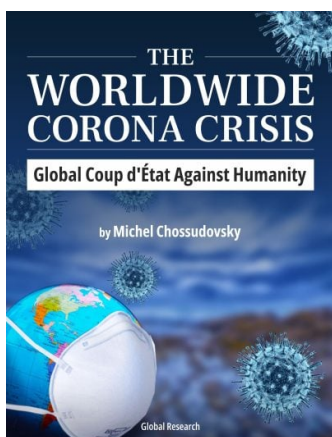
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by Michel Chossudovsky

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