

Universal Health Organisation (UHO)

Weekly Newsletter – 07 Jul 2023



The weekly newsletters bring the updates on the science, battered and bruised during the pandemic, legal updates and impact of activism for a just society, across the world. These are small steps to promote Transparency, Empowerment and Accountability – the ethos of the UHO.

Professional sportspersons are damned if they take the job and damned if they don't

Only one professional sportsperson, Novak Djokovic, demonstrated moral courage. During the unscientific and hysterical rollout of mass Covid-19 vaccination, he stood for [bodily autonomy](#) and science, as he had natural immunity against the virus. He faced ridicule and shaming. Defying unscientific vaccine mandates, and defying age, he went on to become the [Greatest Grand Slam Champion](#) at the age of 36, making him the oldest champion in the history of the French open.

Alas, all sportsperson are not as fortunate. Professional basketball player, Oscar Adames, [died](#) last week during a medical examination in the Dominican Republic. He was just 28. A year back he had collapsed while playing and blamed it to vaccine induced myocarditis. He had posted on social media that he had to take the vaccine in spite of people warning him, as he had no choice. He was required to take the vaccine in order to continue playing professionally.

Batch-dependent safety of the BNT162b2 mRNA COVID-19 vaccine

An important peer-reviewed study was [published](#) on 30 Mar 2023 in the European Journal of Clinical Investigation. The authors examined and compared the rates of suspected adverse events (SAEs) in *different batches* of the BNT162b2 (Pfizer) “vaccine”, administered in Denmark between 27 Dec 2020 and 11 Jan 2022. Over 10.7 million doses of the “vaccine” were administered, using 52 different BNT162b2 “vaccine” batches. Over 66 thousand SAEs were reported of which nearly 62 thousand were batch-identifiable, and of which 14,509 were classified as severe SAEs (approximately 1-in-750 doses) and 579 SAE-related deaths (approximately 1-in-18600).

The rate of severe SAEs of about 1-in-750 is *not* considered “rare”, but is classified as “uncommon”, as per the [terminology](#) of adverse reactions to medicines.

More importantly, the significant finding of the work is that the rate of SAEs varied widely depending on the batch! At one extreme, thirteen of the 52 batches comprised about 32% of the administered doses but had only 0.38% of the SAEs. At the other extreme, nine of the 52 batches comprised only 4.22% of the doses, but were responsible for over 70% of all SAEs and 27% of the severe SAEs. For these nine batches, the rate of severe SAEs is about 1-in-114 doses. Since at least two doses per person were given, this translates to 1-in-57 persons facing a risk of severe SAE. This is not “rare” by any means, and the adjective “common” is suitable.

Whether the variability and high SAE rate for the bad batches are merely due to lack of appropriate regulatory oversight or something else, these do not speak well of the regulatory agencies, or of the experimental products which the world has hurriedly labeled as “vaccines.” Dr John Campbell (UK) uploaded a recent [video](#) explaining this study.

European Parliament session on European Citizen’s Initiative to pull out of the WHO

On 04 July, the European Union parliament held an important [session](#) to discuss the European Citizen’s Initiative to pull out of the WHO before the Pandemic Treaty comes into force. Dr Peter McCullough, the American cardiologist & epidemiologist, and Mr Andrew Bridgen, a British MP, addressed the European Union parliament, among others. While Dr McCullough expressed concerns about the clumsy manner in which the WHO handled the Covid-19 pandemic, and its potential to cause serious harm by repeating the same blunders in future pandemics, Mr Bridgen summed up succinctly by the quote, “When people are scared of the politicians, that is tyranny, when the politicians are scared of the people that is democracy.”

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High time our politicians took note of these developments in modern democracies and initiated debate and discussion in parliament on our ties with the much maligned WHO in general and the proposed Pandemic Treaty in particular.

US House Bill recommends to cut funding to WHO completely, withdraw from WEF and exit WHO

The US House of representatives committee for appropriations (CoA), a US Congressional body with influence on US budget proposals, has [recommended](#) cutting government funding for the WHO completely for the fiscal year 2024.

Cutting US funding to the WHO, will make a dent of US \$700 million per year in the WHO's budget. However, with Gates Foundation and other pharma giants funding more than 80% of the WHO's budget, this setback may not mean a lot, but if USA withdraws from WEF and the WHO it will have significant symbolic and political meaning. The USA is the bellwether for other nations. Awakened citizens of many nations, including India, are fed up with the WHO's clumsy manner of handling the pandemic causing immense collateral harm, while the pharma companies made huge profits. If USA takes this drastic but necessary step, other nations may follow suit, sensing the people's mood. The Pandemic Treaty if it comes in force would literally deprive people of 194 nations of their human rights and autonomy over trivial health issues which the WHO can declare as an emergency. A recent example of triviality is the false alarm raised by WHO over monkeypox.

WHO: entering the deep waters of Traditional, Complementary & Integrative Healthcare (TCIH)

Why is WHO showing keen interest in Traditional, Complementary and Integrative Medicine? A couple of months ago, the Director General of WHO, Dr Tedros attended the foundation stone laying ceremony of the [WHO Global Centre for Traditional Medicine](#) (GCTM) at Jamnagar, India.

Close on its heels, on 03 July 2023 an online dialogue session was hosted by WHO, organised by Traditional Complementary Integrative Healthcare ([TCIH](#)). This is part of the series of civil society organisation ([CSO](#)) engagements under the auspices of the WHO. The aim of these dialogues is to better understand civil society priorities and ensure their participation. International panellists participated in the deliberations.

Dr Raj Manchanda - Director AYUSH India, envisioned TCIH to be a valuable resource for Universal Health Coverage and proposed an integrated and holistic approach at primary healthcare care centres. Dr Tedros considers this dialogue session as beginning of new partnerships and gave affirmation of including CSO in designing upcoming strategies. He suggested setting up an advisory group.

We have some concerns on these developments. While recent trends indicate that the Western nations are poised to give a cold shoulder to the WHO due to its misadventures during the pandemic and its efforts to bring about the tyrannical Pandemic Treaty, the Asian countries, particularly India, seem to welcome it with warmth and open arms.

We agree that Traditional and Complementary Medicine after being suppressed since colonial times is in urgent need of robust research and development. For that we have a large pool of practitioners of AYUSH who with state funding can revive this ancient art of holistic medicine. Surrendering centre stage to the WHO in this venture will bring up undesirable influence of various conflicts of interests. Careerists from AYUSH systems of medicine will dance to the tune of WHO and pharma companies as we saw the mainstream doctors do in the recent pandemic. Well some doctors did take it literally and actually [danced](#) in Covid wards! Having killed the science of modern medicine, WHO will next kill the art of AYUSH systems of holistic health.

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