

# Universal Health Organisation (UHO)

## Weekly Newsletter – 29 Dec 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.*

**Announcement: Membership & endorsements to the UHO invited:** <https://uho.org.in/member.php>

### **Pfizer is always in the headlines & for the wrong reasons!**

Some drug companies seem to be always in the headlines, for nefarious reasons. Leading the pack in this roll of dishonor is Pfizer. The State of Texas in the USA has filed a [suit against Pfizer](#) charging it of dishonestly overestimating the efficacy of their vaccine against Covid-19. Pfizer misled by saying that the vaccine has 95% efficacy. This was dishonest reporting as it was based only on two months of follow up in the clinical trial and the using “relative risk” as a measure of efficacy while the “attributable risk reduction” was only 0.85% which is nearer to the real world effectiveness of the vaccine.

This is not all. The more serious allegation is that it “censored people who tried to report the truth.” The lawsuit has claimed \$ 10,000 in fines.

### **The Telegraph reports that those who were at least risk from Covid, suffered the most from the Astrazeneca Vaccine**

The Telegraph, the leading newspaper in the UK ad [indicted](#) the Astrazeneca vaccine against Covid-19, “In the end, the Astrazeneca vaccine just wasn’t as good as its rivals – those at the lowest risk from Covid were the ones who suffered most from this vaccine,” it reported.

Data from UK showed that the Astrazeneca vaccine raises the risk of deaths from [heart attacks](#) in young women, more than three and a half times in the first three months following the first dose. After this alarming trend, the UK stopped the Astrazeneca vaccine for young people.

Following this, the Astrazeneca vaccine was [shelved](#) in many countries as well. In spite of such warnings strangely the same vaccine was marketed as Covishield in India and administered in large numbers to young people who were at the lowest risk from Covid-19. UHO condemns such heights of irresponsibility and callousness on part of our policy makers to have cleared the vaccine for young people in our country who were at zero risk not only because of their age but also due to the fact that, before rollout, [over 80%](#) of them had recovered from natural infection. It is poignant to hear about [deaths of young people](#) from the vaccine in our country even if they be the rarest of rare events. UHO recommends fixing of accountability for all such avoidable deaths howsoever rare they may be since data from other countries had indicated that the vaccine had life-threatening side effects particularly in the young.

UHO expresses deep concern that in spite of such reports from other parts of the incriminating vaccine was rolled out in unholy haste in our country without having a proper monitoring system for adverse events following immunization (AEFI). Post hoc pathetic [studies](#) by ICMR (with serious conflicts of interest), attempting to give the vaccine a clean chit, do not convince.

### **How even big media houses were gagged for reporting vaccine concerns!**

The skeletons are tumbling out of the closet. The Covid-19 period will be remembered as the darkest

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Regn. No: F-0082902(GBR) (Mumbai Public Trust Act, 1950)

Managing Committee: Dr Amitav Banerjee (Chairperson), Dr. Arvind Singh Kushwaha, Dr. Gayatri Panditrao, Mr. Ashutosh Pathak, Mr. Prakash Pohare, Dr Veena Raghava (Treasurer), Prof Bhaskaran Raman (Secretary), Dr. Praveen K Saxena, Dr. Maya Valecha

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period in human history. Most of the pillars of democracy toppled and those who failed to play ball, were gagged with threats. The nexus of vested interests was so strong that even big media houses were not spared.

In March 2021, The Telegraph, one of the leading newspapers in the UK, reported concerns about the link between the Astrazeneca jabs and blood clots after scientists from Norway suggested a possible causal mechanism. Immediately, The Telegraph received a threatening phone call, “On the day we published the story, we received a threatening phone call from a senior official at the MHRA warning that The Telegraph will be banned from further briefings and press notices if we do not soften the news,” [The Telegraph confessed](#) .

MHRA stands for Medicine and Health Products Regulatory Agency, UK.

### **A scathing Op-Ed in the British Medical Journal (BMJ) on the conflicts of interest of Drug Regulators across the world**

A [scathing commentary](#) in the BMJ titled, “From FDA to MHRA: are Drug Regulators for hire?” sums up the sorry state of affairs endangering human lives. The people expect safe medicines in the market and it is the duty of the regulatory bodies to ensure this. The commentary brings out the lack of independence of these bodies as they are heavily funded by the drug industry. The paper says that funding of regulatory agencies by the drug industry has become the international norm. All the top global drug regulatory bodies are heavily funded by big pharmaceutical industries.

Among them, the Australian drug regulatory agency Therapeutic Goods Administration (TGA), with 96% of their funding from pharma led the pack. Even the American FDA, the best funded drug regulator in the world gets 65% of its financial support from the drug industry. Besides funding, there are conflicts of interests of top officials working in drug regulatory bodies due to the “revolving door” phenomenon, i.e. many drug regulatory officials take up jobs with the same industry they were earlier regulating.

The Drug Controller General of India is in a different but equally compromised predicament. It suffers from severe [resource crunch](#) both in terms of human resource and funding! This seriously compromises quality checks, due to lack of trained drug inspectors and laboratory facilities. Inspections are carried out in an ad hoc manner and many samples cannot be tested adequately. Recent unfortunate headlines regarding deadly cough syrups from India claiming children’s lives in [Gambia](#) and [Uzbekistan](#) testify to the malaise in India’s drug regulation.

There is need for urgent reforms to ensure that drug regulatory agencies work independently free from the influence of the pharmaceutical industry and with adequate funds from the public exchequer.

In addition, UHO recommends that there should be full transparency by having data related to trials and adverse events which have been submitted to the regulatory bodies made accessible in the public domain or at the least available on request to independent researchers or data scientists. In case of queries or doubts on the original data, there should be forum for open debate among independent scientists, government experts and drug industry representatives. No waiver or exemption from liability be granted to the drug manufacturer without such checks and counterbalances.

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