

Sins of the Pfizer

BY SIMON ELMER | *THE DAILY SCEPTIC* | FEBRUARY 25, 2023

In an interview with CNBC News in September 2020, Dr. Albert Bourla, the veterinarian Chief Executive Officer of Pfizer — the second largest pharmaceutical company in the world by revenue — said that anyone refusing to take the BioNTech vaccine will become “*the weak link that will allow the virus to replicate*”, and assured the public that “*we will develop our product, develop our vaccine using the highest ethical standards*”.

It was a dangerous claim to make, even for a CEO and investor making billions out of the [experimental mRNA gene therapy product](#). Pfizer has a long history of paying out vast sums in out-of-court settlements to avoid not only claims in civil cases but also prosecution on criminal charges resulting from the fraudulent promotion, unapproved prescription and injury, including death, from use of its products. It has also offered millions in payments to doctors and scientists to prescribe, test, approve and recommend them to the public. So let's have a look at what Dr. Albert Bourla means by Pfizer's 'ethical standards'.

In 1992, Pfizer agreed to pay between [\\$165 million and \\$215 million](#) to settle lawsuits arising from the fracturing of the Bjork-Shiley Convexo-Concave heart valve, which by 2012 has resulted in [663 deaths](#).

In 1996, Pfizer conducted an unapproved clinical trial on 200 Nigerian children with its experimental anti-meningitis drug, Trovafloxacin, without the consent of their parents and which led to the [death of 11 children](#) from kidney failure and left dozens more disabled. In 2011, Pfizer paid just [\\$700,000 to four families](#) who had lost a child and set up a \$35 million fund for the disabled. This cover-up was the basis of the John Le Carré book and film *The Constant Gardener*.

In 2004, Pfizer's subsidiary Warner-Lambert was [fined \\$430 million](#) to resolve criminal charges and civil liabilities for the fraudulent promotion of its epilepsy drug, Neurontin, paying doctors to prescribe it for uses not approved by the Food and Drug Administration.

In 2009, Pfizer spent [\\$25.8 million](#) lobbying Congressional lawmakers and federal agencies like the Department of Health and Human Services. Its expenditure on federal lobbying between 2006 and 2014 came to [\\$89.89 million](#). In 2019 it spent [\\$11 million](#) lobbying the federal Government.

In 2009, Pfizer set a record for the largest health care fraud settlement and the largest criminal fine of any kind, paying [\\$2.3 billion](#) to avoid criminal and civil liability for fraudulently marketing its anti-inflammatory drug, Bextra, which had been refused approval by the FDA due to safety concerns.

In 2009, Pfizer paid [\\$750 million](#) to settle 35,000 claims that its diabetes drug, Rezulin, was responsible for 63 deaths and dozens of liver failures. In 1999, a senior epidemiologist at the Food and Drug Administration warned that Rezulin was “*one of the most dangerous drugs on the market*”.

In 2010, Pfizer was ordered to pay [\\$142.1 million](#) in damages for violating a federal anti-racketeering law by its fraudulent sale and marketing of Neurontin for uses not approved by the FDA, including for migraines and bi-polar disorder.

In 2010, Pfizer admitted that, in the last six months of 2009 alone, it had paid [\\$20 million](#) to 4,500 doctors in the U.S. for consulting and speaking on its behalf, and \$15.3 million to 250 academic medical centres for clinical trials.

In 2012, Pfizer paid [\\$45 million](#) to settle charges of bribing doctors and other health-care professionals employed by foreign Governments in order to win business. The Chief of the Securities and Exchange Commission Enforcement Division’s Foreign Corrupt Practices Act Unit said: “*Pfizer subsidiaries in several countries had bribery so entwined in their sales culture that they offered points and bonus programs to improperly reward foreign officials who proved to be their best customers.*”

By 2012, Pfizer had paid [\\$1.226 billion](#) to settle claims by nearly 10,000 women that its hormone replacement therapy drug, Prempro, caused breast cancer.

In 2013, Pfizer agreed to pay [\\$55 million](#) to settle criminal charges of failing to warn patients and doctors about the risks of kidney disease, kidney injury, kidney failure and acute interstitial nephritis caused by its proton pump inhibitor, Protonix.

In 2013, Pfizer set aside [\\$288 million](#) to settle claims by 2,700 people that its smoking cessation drug, Chantix, caused suicidal thoughts and severe psychological disorders. The Food and Drug Administration subsequently determined that Chantix is probably associated with a higher risk of heart attack.

In 2013, Pfizer absolved itself of claims that its antidepressant, Effexor, caused [congenital heart defects](#) in the children of pregnant woman by arguing that the prescribing obstetrician was responsible for advising the patient about the medication’s use.

In 2014, Pfizer paid a further [\\$325 million](#) to settle a lawsuit brought by health-care benefit providers who claimed the company marketed its epilepsy drug, Neurontin, for purposes unapproved by the FDA.

In 2014, Pfizer paid [\\$35 million](#) to settle a law suit accusing its subsidiary of promoting the kidney transplant drug, Rapamune, for unapproved uses, including bribing doctors to prescribe it to patients.

In 2016, Pfizer was fined a record [£84.2 million](#) for overcharging the NHS for its rebranded and deregulated anti-epilepsy drug Phenytoin by 2,600% (from £2.83 to £67.50 a capsule), increasing the cost to U.K. taxpayers from £2 million in 2012 to about £50 million in 2013.

In May 2018, Pfizer still had [6,000 lawsuits](#) pending against claims that its testosterone replacement therapy products cause strokes, heart attacks, pulmonary embolism and deep vein thrombosis, and were fraudulently marketed at healthy men for uses not approved by the FDA.

In June-August 2020, the U.S. Securities and Exchange Commission and the Department of Justice said they were looking at Pfizer's activities in China and Russia under the [Foreign Corrupt Practices Act](#), which forbids U.S. firms from bribing foreign officials.

In November 2021, the [British Medical Journal](#) revealed that the Ventavia Research Group had falsified data, unblinded patients, employed inadequately trained vaccinators, and was slow to follow up on adverse events reported in the phase 3 trial for Pfizer's 'vaccine'.

Since 2000, Pfizer has incurred [\\$10.268 billion in penalties](#), including \$5.637 billion for safety-related offences; \$3.373 billion for unapproved promotion of medical products; \$1.148 billion for government contract-related offences; \$60 million under the Foreign Corrupt Practices Act; and \$34.7 million for 'kickbacks and bribery'.

Given this record of ongoing corruption and malpractice from, which only its enormous profits have saved it from criminal prosecution by means of out-of-court settlements, it seems extraordinary that Pfizer Inc. is still permitted to manufacture and sell *any* health-care products. Yet this is the pharmaceutical company we were asked by the U.K. Government, the Scientific Advisory Group for Emergencies, the Joint Committee on Vaccination and Immunization, the U.K. Health Security Agency and the National Health Service to trust with the mass vaccination of 68 million people with a product that was [rushed through clinical trials in seven months](#), employing experimental mRNA biotechnology whose [clinical trials are not due to be completed until March 2023](#), for a disease with the [infection fatality rate not much above seasonal influenza](#), which statistically is no threat to those [under 50 years old](#), and for which there is no evidence that it prevents infection by the virus.

That was three years ago, during which the British people have paid with their freedoms, their health and their lives for believing the lies of their Government, their National Health Service and international pharmaceutical companies. Subsequent retractions by Pfizer, however, are an opportunity to revisit its claims in more detail.

On December 10th 2020, the U.S. Vaccines and Related Biological Products Advisory Committee met to evaluate the trial data on the efficacy and safety of Pfizer/BioNTech's mRNA COVID-19 vaccine contained in the briefing document produced by Pfizer itself

titled '[Pfizer-BioNTech COVID-19 Vaccine \(BNT162, PF-07302048\) Vaccines and Related Biological Products Advisory Committee Briefing Document](#)'. It was on the basis of this evaluation that, on December 11th, the Food and Drug Administration (FDA) granted [Emergency Use Authorisation](#) to its mRNA gene therapy product. And given the subsequent debate about what Pfizer claimed its 'vaccine' would do, it might be useful to review the contents of this document.

The FDA's Emergency Use Authorization, which requires less data than standard approvals and is based on a lower standard of proof, was issued for a vaccine "intended to prevent Coronavirus Disease 2019 (COVID-19) caused by SARS-CoV-2". It was issued for prevention, therefore, not for reduction of the severity of symptoms, as was claimed when it became clear the gene therapy product did not prevent infection. Pfizer's claim was that its product had a 'vaccine efficacy' of 95% protection against COVID-19 occurring after second days from injection with the second dose. In its clinical trials, a 'case' of COVID-19 was defined as a positive RT-PCR test for SARS-CoV-2 and the presence of at least one of the following symptoms: fever, cough, shortness of breath, chills, muscle pain, loss of taste or smell, sore throat, diarrhea or vomiting. Nothing was said about asymptomatic 'cases' of COVID-19, or claimed about the ability of the gene therapy product to stop 'asymptomatic transmission' of the virus.

Pfizer's benefit assessment was that its mRNA vaccine may be able to induce "*herd immunity*", induces strong "*immune responses*", and "*confers strong protection against COVID-19*". This clearly indicates protection against both infection with the virus and the disease. Since transmission of a virus from person to person requires prior infection, Pfizer's claim that its vaccine protects against infection, and the suggestion that sufficient injections will induce 'herd immunity', is also, by extension, a claim that it stops transmission from the injected.

The subsequent claim by [Janine Small](#), Pfizer's President of International Developed Markets, during her testimony before the European Union Parliament in October 2022, that Pfizer never tested whether its 'vaccine' stopped transmission appears, therefore, to rest on the myth of 'asymptomatic transmission'. The implication of her statement was that Pfizer's product only stops infection with SARS-CoV-2 and symptoms of COVID-19. However, the FDA's Emergency Use Authorisation for Pfizer's vaccine was based on prevention of both infection and disease. Pfizer's claim is not evidence, as many afterwards claimed, for the lack of justification for making injection a condition of lifting lockdown or imposing vaccine passports, but rather an attempt to deny responsibility for the failure of its product (from which it has made \$69 billion) to meet either of its claims.

An indication of just how unscientific was the FDA's Emergency Use Authorisation of Pfizer's vaccine is that it was granted on the basis of protection from infection and disease, while conceding there is no evidence that the vaccine "[prevents transmission from person to person](#)". This is the way the 'Science' we mustn't question or deny but blindly follow is conducted in what I call the global biosecurity state. Indeed, three years after it announced the pandemic in March 2020, the [World Health Organization](#) can

still only offer the following justifications for the four vaccines authorized for use in the U.K.

Pfizer/BioNTech: *“There is modest vaccine impact on transmission.”*

AstraZeneca/Oxford: *“No substantive data are available related to impact of the vaccine on transmission or viral shedding.”*

Moderna: *“There is only modest impact on preventing mild infections and transmission.”*

Novavax: *“There is not currently sufficient evidence to date to evaluate the impact of the vaccine on transmission.”* (See World Health Organization, ‘COVID-19 advice for the public: Getting vaccinated’.)

Failure to offer protection against infection or transmission, however, are the least of the failings of Pfizer’s ‘vaccine’. As the evidence of the harms and deaths caused by this experimental gene therapy product injected into the U.K. public becomes too overwhelming for all but the Covid-faithful, the British press, the U.K. Parliament and our Government to ignore, there have been no end of doctors, nurses and medical professionals protesting they thought Pfizer’s biotechnology was ‘safe and effective’. But aren’t they trained to spot when something is going medically very wrong?

As of January 25th 2023, the [Medicines and Healthcare Products Regulatory Agency](#), responsible for authorizing the injection of the Pfizer/BioNTech vaccine into U.K. citizens, has received 180,005 reports of 517,779 adverse reactions to the injections, over 70% of which reports (127,405) have been classified as ‘serious’, including 884 deaths following injection. Including AstraZeneca’s viral-vector gene therapy product and Moderna’s mRNA gene therapy, the MHRA has received a total of 477,553 reports of 1,555,433 adverse reactions to the COVID-19 gene therapies, 74 per cent of which (355,052 reports) are categorized as ‘serious’, including 2,436 deaths following injection.

By the [MHRA’s own estimation](#), only 10% of serious adverse reactions and 2-4% of non-serious reactions are reported, so the actual tally of injuries, autoimmune disease, reproductive and breast disorders, miscarriages and premature births, facial paralysis, blood clotting, amputations, myocarditis, pericarditis, heart attacks and deaths — all of which were recorded in [Pfizer’s own analysis of post-authorization adverse events](#) as early as February 2021 — is far higher, undoubtedly many times higher. Indeed, this — and not the risible excuses with which the U.K. public has been fobbed off by the U.K. media — is likely a major cause of the huge increase in mortality in the U.K. since the ‘vaccine’ programmer was implemented, contributing to the [more than 60,000 excess deaths in 2022](#).

Given which, it is my contention that any medical professional that authorized or administered the injection of U.K. citizens with the Pfizer/BioNTech gene therapy

product is **at risk** of being found guilty in a court of law for failure to give sufficient warning of adverse effects and obtain informed consent.

Simon Elmer is the author of two new volumes of articles on the U.K. biosecurity state, [Virtue and Terror](#) and [The New Normal](#), which are available in hardback, paperback and as an ebook. This article is an extract from an article in Volume 2, 'Bowling for Pfizer'. Please click on these links for the contents page and purchase options. On March 11th, to mark the third anniversary since the declaration of the pandemic by the World Health Organization, he will be holding a book launch at the Star & Garter, 62 Poland Street, W1F 7NX, upstairs in the William Blake room from 6-8pm. Entry is free, with book signings, a reading and open-mic discussion.

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