

Verbal Testimony

Article 25 of the Declaration of Human Rights notes that everyone has the right to security in the event of disability

My testimony is in the form of a song.

Well I got my vaccination, and then suddenly behold!
My face it felt a-fire and I went home and I told myself to not freak out.
Do some work.
Got some work done, yeah, I'm strong, but then the fever came, oh no.
Woah.

Well, I tried some meditation, opened up my sleeping app,
But my temperature was rising, and every day since then I've really felt like crap
Laying low, seeking out the bedroom quarters
But neuropathy prevails.
My brother says I'm crazy, tells my friends I'm off the rails

Well I tell my friends what happened to me, they don't seem to care
They just say: "misinformation..." "not causation," or "what happened to you is quite rare."
"Anti-vax! You're an antivax conspiracist, and definitely wrong"
(They think they're so much smarter and that's why I wrote this song.)
Lie, lie, lie, lie, lie lie

I tell them of the whistleblowers, people harmed in trials
Unreported, unsupported, and I cite the facts, and impacts. They won't read the files
Their eyes are closed. They just can not see the suffering. They will not lend an ear.
"It's safe and it's effective. Boost, or you're not welcome here."

The workers compensation law is just right for this case
Compassionate support will bring us to a better place
The injured in America have zero right to sue
Compensation for the injured? Well: It depends on you!
Lie, lie, lie, lie, lie lie lie lie lie lie lie lie... that's no lie.

Written Testimony

A Serious Subject

The song in my verbal testimony takes a light-hearted approach to a very serious subject. Those of us who find ourselves unlucky and injured start out alone. In my case, I suffer from post-vaccine neurological pain, tinnitus and other symptoms.

Over time, many of the injured find one other, and we naturally form support groups. While we find emotional support, we also find ourselves surrounded by profound human suffering. The situation honestly reminds me of the “Hell” panel of a painting by Bosch. While individual symptoms vary (cardiac, or gastric, or neurological, or menstrual or autoimmune, or some unfortunate blend) the experiences most have in common are disability, lost income and financial pressure. Many without support have been careening towards—or beyond—homelessness.

Last week I persuaded an injured friend—whose suffering is extreme—not to go to Switzerland to end her life. She had already paid her down payment, and was raising funds for the rest. There have been too many vaccine injury suicides; The intersection of physical suffering, targeted gaslighting, and poverty convene into unlivable lives.

I never lost my mobility. Despite profound impact, I have *never* had the degree of injury that would cause me to have suicidal ideation. But every single injured person experiencing such ideation credits the physical torture of their symptoms. They have a strong preference for their pain to stop vs. the alternative choice they are considering. But **I’ve noticed that many people are reaching this stage when the money runs out.**

Vaccine-injured people in the United States do not have the legal right to sue for compensation

There are several very important things to know about the COVID mRNA vaccines.

First, we were promised many things about the vaccines that proved not to be true. “Safe and effective” messaging is the start. For many of us in the injury community, the “safe” messaging is just a way of saying that we are collateral damage, and we are swept under the rug.

Most people do not know that what was studied and what was delivered were manufactured by two different processes.¹

Further: the Nobel-prize-winning technology that enabled the vaccine (substituting pseudouridine for each uridine to increase mRNA stability) has been proven faulty. “Ribosomal frameshifting” doesn’t “slip off the tongue” (and there has been little mainstream coverage) but it is a real phenomenon that was published in the respected journal *Nature*². The result is that the vaccine mRNA yields both off-target proteins (i.e. not spike protein) and an off-target immune response. The impact is grossly-under-studied.

We have not properly studied many important issues. Standard testing protocols were given a pass with the Emergency Use Authorization. One of the issues missed by regulators in an epic way is that each vial contains billions to hundreds of billions

¹ Guetzkow JA. Letters to the editor: Effect of mRNA Vaccine Manufacturing Processes on Efficacy and Safety Still an Open Question. *BMJ* 2023;378:o1731

² Mulrone, T.E., Pöyry, T., Yam-Puc, J.C. et al. N1-methylpseudouridylation of mRNA causes +1 ribosomal frameshifting. *Nature* 625, 189–194 (2024). <https://doi.org/10.1038/s41586-023-06800-3>

of molecules of DNA!³ This is not what we were initially told. The vaccines were purportedly safe precisely because there was no DNA.

The DNA finding is not pseudoscience, It has been confirmed by multiple molecular biology labs around the world in 2023 (long after regulators should've found it). We should be testing for incorporation of DNA into the human genome. I know how much that sounds like “conspiracy theory.” News organizations are calling related claims “Misleading.” But we must not let truth be shrouded by what we wish to be true. I can walk anyone on the committee who is interested through many levels of detail on this issue.

I was a science major who won the award for the highest GPA in my major (The Betty Flanders Thomson Prize for Excellence in Botany). I routinely read science. And now I read it for my advocacy work on behalf of the injured. Most people can not (on their own) get through the *Nature* article on *ribosomal slippage* or the molecular biology published about the *plasmid DNA in the vaccines*). I make it a point to read until I understand. And my new phrase is: the deeper the dive, the greater the concern. I realize that is often called a “rabbit hole.” But I hold a deep, abiding concern for the role of valid science. **We should NOT be ignoring these findings.**

Other key findings of concern include the *persistence of mRNA*⁴ (that we were promised would not happen) and the *biodistribution of the mRNA* (that we were also assured would not happen). The modified mRNA has been found in many tissues, including breast milk⁵, and the

mRNA remains in the body for a much longer period than originally promised).

Unexpected proteins yielding an immune response, plasmid DNA, mRNA persistence, mRNA biodistribution, genetic predisposition, may *all* be mechanisms for injury. The COVID vaccines are substantially different from prior vaccines.

In a database containing 1,833,754 reports recorded since 1990 in the Vaccine Adverse Event Reporting System (VAERS), a whopping 56% of the reports are from the COVID vaccines. (See chart below.)

³ <https://osf.io/preprints/osf/mjc97>

⁴ Brogna C, Cristoni S, Marino G, Montano L, Viduto V, Fabrowski M, Lettieri G, Piscopo M. Detection of recombinant Spike protein in the blood of individuals vaccinated against SARS-CoV-2: Possible molecular mechanisms. *Proteomics Clin Appl.* 2023 Nov;17(6):e2300048. doi: 10.1002/prca.202300048. Epub 2023 Aug 31. PMID: 37650258.

⁵ Hanna N, Heffes-Doon A, Lin X, et al.. Detection of messenger RNA COVID-19 vaccines in human breast milk. *JAMA Pediatr.* Published online September 26, 2022. doi: 10.1001/jamapediatrics.2022.3581

Safety Signals

I believe I have discovered why the federal government insists that there are so few “safety signals” (that signal cause for further research into causation) in the VAERS database. I’d like to work with epidemiologists and statisticians and pharmacovigilance experts to explore precisely if the Proportional Reporting Ratio *cancels out* safety signals.

Consider Guillain-Barre Syndrome (GBS), for instance (one of more than 14,700 reported adverse events). GBS is a very serious disease that often paralyzes people, and in some cases kills them. Ten percent of all the GBS reports in the VAERS database are from the Pfizer COVID-19 vaccine. In essence, if Pfizer were the only COVID vaccine: I believe there would be a glaring safety signal (triggering further research and potential for federal compensation). But when compared against ALL the rest of the vaccines (including the J&J and Moderna vaccines, which are also associated with GBS), **the Proportional Reporting Ratio places Pfizer adverse event (AE) incidence in the numerator while the other high-risk COVID vaccines AEs are in the denominator.** They cancel each other out. *Voila, no safety signal!* If there were only one COVID vaccine, that cancellation wouldn’t be possible, and more neuro-injuries might land on the list of potentially compensable through the federal Countermeasures Injury Compensation Program (CICP). If anyone

on the committee can put me in touch with experts to explore this, I’d be happy to work with them. I am a data analyst with a skillset in data visualization. I have a strong sense that what I’m saying is true, and deeply concerning. We should be looking at this, because it impacts the potential for profoundly injured people to get compensation.

Helping People with Compensation

Article 25 of the Universal Declaration of Human Rights notes that everyone has the right to security in the event of disability.

Unfortunately, none (zero) of my profoundly-injured friends who applied to the Countermeasures Injury Compensation Program (CICP) have received compensation. CICP is currently the only option for compensation for COVID vaccine-injured, but it is a broken program. People’s most basic needs are not being met.

One thing I appreciate about Senate Bill 431 is that it applies retroactively.

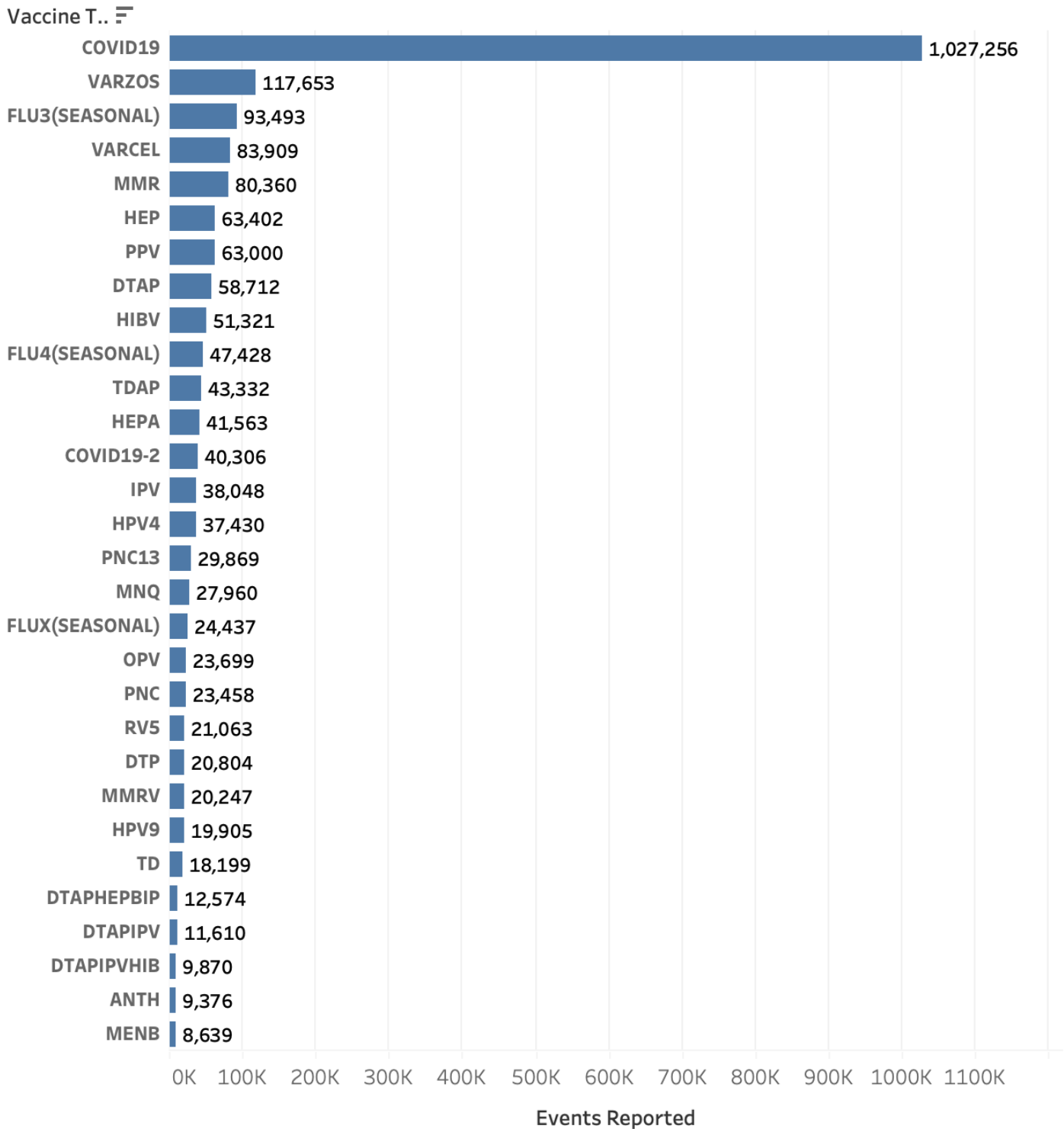
But the piece that is missing is that vaccine-mandated injured people were also injured on the job, and they are neglected in the bill. Please amend Senate Bill 431 to make vaccine-injury compensable, especially if the vaccine was mandated.

Appendix

Number of VAERS Reports by Vaccine Type

(Top 30. Unknown types are excluded.)

1990 - February 2024



React19 Survey 2: Persistent Symptoms

(React19 is a non-profit advocating for the injured.)

