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# Mandatory Vaccination for Children by Government in Brazil

# Giulio Tarro

President of the T.&L. de Beaumont Bonelli for Cancer Research, Naples, ITaly

# **ABSTRACT**

Taking the cue from the title reported, Brazilian parents of children are obliged from January 2024 to vaccinate their children from 6 months to 5 years with three doses of "Pfizer anti-Covid serum". Anyone who opposes risks losing parental authority: all this happens without the issuance of a law, but through a technical note from the Brazilian Ministry of Health, which has included the anti-Covid vaccine as mandatory for children as previously reported. In this age group, 142 children have died in 3 years of the pandemic, while the total number of Brazilian children is over 18 million, or 0.00025% of the population. Moreover, we do not know if the children who died had other pathologies: in Germany, not a single child died **COVID** during the pandemic (HTTPS://pubmed.ncbi.nlm.nih.gov/35962242/). According to President Lula, "we must criminalize those who do not vaccinate their children". Fines of thousands of euros, loss of state subsidies and even parental authority are foreseen.

# **INTRODUCTION**

After the Wuhan epidemic in China and the pandemic that followed globally, the spread of the CoV-SARS-2 coronavirus has finally come to an end. The end was already declared in the United Kingdom on July 19, 2021, which had primarily started vaccinations on December 8, 2020, aimed in particular at the "over" 80 and frail subjects, the whole world has aligned itself, in particular also taking into account oral therapies and monoclonal antibodies with a virus that while maintaining its contagiousness has reduced its virulence (1). The African continent has stood out for its endemicity linked to zoonoses of the beta coronavirus family (2). Finally, particular importance is given to natural infection by COVID-19 and the immune response with vaccination exemption due to the risk of thrombi due to genetic mutation and antibody overload (3,4).

There is no Covid emergency among children. There has been no increase in mortality from Covid among children (5). The risks of hospitalization for Covid in children are very low: 1 in over 46,000 diagnoses of COVID-19, and often concern children with other pathologies (6). AIFA has reported an update on the risk of myocarditis and pericarditis with mRNA vaccines (03-12-2021) which follows the same update by the EMA (29/11 2/12-2021). One myocarditis every 10,000 inoculations for young people means risking much more for the serum than with the virus (7).

#### **METHODS**

To complete and reward my reasoning, a messenger RNA vaccine can alter cellular DNA by transcribing the viral sequences integrated into the genome by means of a cell "reverse transcriptase" or a reverse transcriptase of an HIV and these DNA sequences can be integrated

into the cellular genome (8), with the problems I have highlighted and reported in scientific works and communicated publicly.

We found ourselves faced with an epidemic that is now both manageable and curable at a therapeutic level. So this excessive alarmism was sincerely out of place. I am for freedom of choice and therefore I do not believe any type of imposition is right. At the very moment in which they give us the possibility of choosing between several vaccines on the market, I believe that the will of those who decide not to get vaccinated should also be respected.

Art. 32 of the Italian Constitution establishes that every individual has the right to be treated and cared for according to his or her own will: therefore, according to our Constitution, no coercion can be imposed on the individual, even if this should be considered to be in favor of the community.

The reference is evidently to what happened in Italy during Covid-19 and, to ideally unite pandemic and war through constitutional arguments, in the spirit of the conference of 6 May 2022, I believe it is important to cite Art. 11 of our Constitution, according to which Italy "repudiates war", an expression of the foresight of our Founding Fathers, who had known and suffered the tragedy of war well.

I also like to remember how Sandro Pertini, the President of the Republic indisputably most loved by Italians, has constantly underlined the importance of this "repudiation of war", which must involve all Italians.

Article 11, on May 6, 2022, was also printed on a plaque affixed during a ceremony in the Aula Magna of the Scientific Institute of Rome East with one thousand two hundred students, in front of a representation of about eighty of them, and the writer, honored to be present.

Pandemic as war, therefore, and thinking back to the first, it makes one reflect on the fact that in 2020, compared to the situation five years earlier, in 2015, there was a halving of intensive care beds, while, on the contrary, at the same time as the news of the Chinese pandemic, our French neighbors they were doubling these same beds... We came from the experience of the influenza epidemic of the previous year, which had caused 10,000 deaths out of 6 million infected, but over the course of 6 months, not concentrated in a short period.

The congestion of facilities linked to the spread of the contagion and the parallel reduction in hospital beds has, in fact, caused the dramatic consequences that have occurred. A succession of errors and omissions, in the planning and implementation of health interventions, has also characterized the subsequent situation: to give another example, when vaccinations began in the United Kingdom on 8 December 2020, the objective was very specific and concerned exclusively the over-eighties, and the so-called "fragile subjects".

On 27-12-2020, we started in Rome, at Spallanzani, with great jubilation from the crowd, vaccinating a twenty-nine-year-old colleague... And it continued like this, with the result that, while the United Kingdom, on 19 July 2021, abolished the lockdown, without imposing vaccinations as they had managed to achieve the desired success, in Italy not only did infections and mortality not decrease but alarm and fear increased.

It took a change of government to finally target the elderly and the "fragile," in whom vaccination prevention could make sense, without involving young adults.

#### RESULTS

VAERS (Vaccine Adverse Event Reporting System) is the American institution in Atlanta (Georgia, USA) for vaccine safety that has existed since 1990, co-managed by the US Centers for Disease Control and Prevention and the FDA (Food and Drug Administration), was soon able to demonstrate that, in the first nine months of use of the new "vaccines", there had been, compared to all other historical vaccines put together (from yellow fever to measles), a lethality (mortality of infected people) of 51%, an absolutely alarming figure, to which was added, in January 2021, the editorial by Peter Doshy, university professor in Maryland, published in the British Medical Journal and also taken up by the New York Times, in which it was clearly indicated that the so-called "mRNA vaccines" showed a clinical success rate (19% - 29%), far from the 90% - 95% declared by the manufacturers, but also well below the 90% - 95% declared by the manufacturers, but also well below the 90% - 95% declared by the manufacturers, but also well below the 90% - 95% declared by the manufacturers, but also well below the 90% - 95% declared by the manufacturers, but also well below the 90% - 95% declared by the manufacturers, but also well below the 90% - 95% declared by the manufacturers, and ... of the 50% required in emergency conditions (9).

It is also worth remembering the failure of our Israeli colleagues who, after the fourth dose, were forced to interrupt the vaccination due to an excess of cardiovascular pathologies presumably related, in full agreement with an article by Cristina Basso (Associate Professor of Cardiovascular Pathology at the Institute of Pathological Anatomy of the University of Padua) who, among the first in the world, highlighted the possible risk of cardiac complications (myocarditis, pericarditis) of this type of vaccination (10).

This topic has been widely covered subsequently by many scientists (I will cite, very recently, the volume "Sudden cardiac deaths -SCD- epidemiology, Before/after Covid-19 published by Lambert, signed by Mauro Luisetto, Massimo Coppolino and myself). All this in the total silence of radio, television, electronic and paper information for the general public, in which the evidence of these unwanted side effects, clear to anyone who practices the medical profession in contact with patients, was and is regularly silenced, resorting to the "mantra" of "non-correlation", used systematically, as if there were real statistical evaluations on the matter.

Not only that, the various broadcasters, both public and private, progressively transformed the pandemic into an infodemic, alarming public opinion with war "bulletins", broadcast with incessant frequency and in an indecent manner, given that they reported lethality data that were not even confirmed by the Istituto Superiore di Sanità.

Furthermore, the ASL received the sum of 2,000 euros per day for these patients, leading to a situation that I would euphemistically define as "a bit particular", giving rise to more than one reason for reflection for those who still hold the Hippocratic Oath dear.

My contribution to the clarification was confirmed, on 25 August 2022, by sending my monograph on the epidemic to the British Medical Journal, with a wealth of data and statistics that also concerned the first SARS of 2002-2003, and the so-called "Middle Eastern" one, of 2012, with a frankly epidemic episode. in South Korea (1).

I also mentioned the possibility of effective intervention with monoclonal antibodies (but also with antibodies from recovered subjects), reported by the Pasteur Institute, a strategy that had already been indicated, first of all by our "putative Fathers of Science", from Louis Pasteur to Albert Sabin, who was my unforgettable Master.

In particular, I would like to add that the indication for serum therapy with plasma from recovered subjects, dating back to classic English works, was reiterated by the Bulletin of the Italian Society of Biologists on 30 January 2020 (11), and confirmed in the following month of March by Chinese scientists, where the pandemic was born, who published a work in the Proceedings of the National Academy of Sciences in which they treated and cured subjects affected by Covid-19, using serum therapy (12).

Finally, on December 25, 2022, I published another work in the British Medical Journal with an emblematic title: "Endpoint Nightmare", that is, "End of a nightmare", that of the pandemic (13). I would also like to mention the observations of my South African colleagues who, as is well known, for reasons related to the course of the seasons, anticipate by six months what will happen in our hemisphere: the official organ of the American Association for the Advancement of Science, the prestigious journal "Science", had published a study on three million subjects "vaccinated" with messenger RNA preparations (14).

## DISCUSSION

We know well that, before producing antibodies, all vaccinated subjects are, initially, somehow infected by the virus, well, the South African colleagues were able to officially communicate, through "Science", that 105,000 subjects had fallen ill, despite having already contracted the natural infection.

If they had been vaccinated with preparations that took into account the early characteristics of the virus, and not the subsequent variants, the same thing would presumably have happened, perhaps with an equally contagious but less virulent virus, even without the need for hospitalization.

It is almost superfluous to underline that, when the campaign for the fourth dose began in our country, even under the pressure of considerations that had very little to do with science (imminent expiration of the purchased packages), the certain fact is that the available "vaccines" had been prepared without taking into account the subsequent viral "variants", and the consideration, well known to immunologists, of a temporary decrease in immunity, against any other type of infection, consequent to the vaccination itself.

Not only that, the denial of the medical possibility of intervention in the early stages (15), as for any form of respiratory influenza (anti-inflammatories first and foremost), under the infamous motto "paracetamol and watchful waiting", led in fact to the "emergency" authorization of gene drugs, without the necessary definition of the efficacy and safety profile, transforming their widespread use into the largest phase IV trial in the history of humanity, with a detection of unwanted side effects that, unfortunately, we must still consider in progress, in relation to the medium-long term (16,17).

Recently, The Lancet reported that subjects who have recovered from natural SARS-Cov-2 infection should be considered exempt from specific mandatory vaccinations (3).

Lorenzin Law 119 of 2017, Article 2 specifies that: "Immunization following a natural disease, proven by the notification made by the attending physician, pursuant to Article 1 of the decree of the Minister of Health of 15 December 1990, published in the Official Journal no. 6 of 8 January 1991, or by the results of the serological analysis, exempts from the obligation of the relative vaccination" (18). This insert was not used for Covid, even though it is now known that natural immunity is 18 times higher and can identify variants.

We must be very careful about the development of the ADE (Antibody-dependent Enhancement) phenomenon. This is an inflammatory amplification of the response derived from antibodies.

This inflammation, due to antibodies, can increase exponentially when there is a booster of antibodies in a subject who already has them. In short, if someone has had COVID, even without realizing it, especially for asymptomatic people, an amplification of the antibody response occurs.

Numerous studies have shown that one of the risk factors for cardiovascular disease is high plasma homocysteine levels, caused by reduced activity of the enzyme methylenetetrahydrofolate reductase (MTHFR). The A1298C polymorphism causes a reduction in MTHFR enzyme activity. A reduction in enzyme activity is also associated with the C677T polymorphism of MTHFR.

For the two MTHFR mutations (whether homozygous mutated or both heterozygous), the risk is increased if the circulating homocysteine values are stably increased. High plasma homocysteine levels not only represent a risk factor for thrombotic manifestations affecting the arterial system, but in association with the Leiden variants of Factor V and/or 20210 of prothrombin, they also determine an increase in the risk of venous thromboembolism. The patient's hypersensitivity is part of the congenital defect and of the transport of amino acids, given the MTHFR mutation present because we are talking about the transformation and use of methionine and homocysteine and vice versa between amino acids. The MTHFR genetic mutation in heterozygous or homozygous state of the patient makes him "hypersensitive" to the vaccine content for a high-risk factor for thrombotic manifestations affecting the arterial system (19-22).

The Food and Drug Administration (FDA) reported on 20-10-2022 76,789 deaths and over 6 million serious adverse reactions. In fact, according to the American VAERS (Vaccine Adverse Event Reporting System) website, it is written that the extrapolation of the data shows that COVID-19 vaccine preparations represent 51% of all death reports in 30 years of existence of the database; values obtained after only nine months of their use in the population (23).

As also reported by Dr. Robert Malone, inventor of mRNA technology, the incidence of diseases and injuries from 2020 to 2021 has shown dramatic data: acute myocardial infarctions +343%, neuroendocrine tumors +276%, malignant neoplasms of the digestive organs +477%, breast cancer neoplasms 469%, Guillian-Barré syndrome +520%, acute transverse myelitis +494%,

rhabdomyolysis +672%, multiple sclerosis +614%, hypertension +2130%, blood diseases +204%, cerebral infarctions +294%" (24).

Facts that many, it seems, would like to ignore. The Pfizer anti-Covid vaccine, in fact, has never been tested to stop infections. Janine Small, a senior official of the pharmaceutical company, admitted this. The Pfizer anti-Covid vaccine "has not been tested to prevent infection" also because "no one asked us to" and in any case "there was no time". These are the exact words spoken by Janine Small during the hearing held on Monday 10 October 2022 at the European Parliament...

The omicron variant is associated with a marked ability to evade immunity from previous infections. There has been no epidemiological evidence of evading immunity with the beta and delta variants. There are important health implications in countries such as South Africa with high levels of immunity from previous infections. Further development of methodologies to follow reinfections with newly emerging strains takes into account vaccine-derived protection and can monitor the risk of multiple reinfections with a view to prophylaxis for future epidemics (25,26).

# **CONCLUSION**

We have forgotten the path taken by homo sapiens who evolved for millennia between viruses and bacteria, starting from central Africa towards the Mediterranean and then Eurasia. Smallpox and plague even influenced the presence and formation of blood groups. The importance of the relationship between humans and microorganisms such as viruses and bacteria should not be underestimated in the history of evolution. And it should therefore not be surprising that those who have had Covid 19 are protected at an immune level much more than those who have been vaccinated.

Last Fall/Winter season there was not only the ghost of COVID-19 circulating, but many other respiratory microbial agents were present with the return of influenza viruses and RSV, furthermore it is worth mentioning the adenovirus family and even haemolytic streptococcus (27).

The main reason for this work is to describe what happened with the final goal of being prepared for an early diagnosis and timely therapy that puts prevention first with specific vaccines when possible.

Even in light of the fact that in the American registration system VAERS (very recent reporting), the percentage of all deaths reported after vaccination for COVID-19 vaccines in the USA for the period from December 2020 to June 2023 alone is double the total of all deaths since 1990 for all other vaccines (23).

Although well-documented mechanisms of death include myocarditis, progression of atherosclerotic cardiovascular disease, primary ventricular arrhythmias, intracranial hemorrhage, pulmonary embolism, anaphylactic shock, and antisystemic inflammatory disorder, the medical literature is sparse with emerging reports, thus concealing the fact that vaccines are also causing death (28).

Between Science and Infodemic The World Health Organization and the Honesty of Medical and Political Leaders the Covid-19 vaccines have been the largest human experiment ever done in history. They have left about 15 percent of those who have taken them with some form of medical problem. Many of those vaccinated against Covid still have the spike protein circulating in their bodies. It is in their cells, in their tissues (6). The human body does not appear to have enzymes capable of breaking down this protein and eliminating it, simply because this protein is not natural: because it was designed in a Chinese biosafety laboratory using projects from US researchers, fully funded and supported by the National Institute of Health and the National Allergy Immunology branch managed by Dr. Anthony Fauci.

The tools used to mitigate the threat of a pandemic like Covid-19 may very well threaten the growth and development of children (5).

These tools – such as social restrictions, closures and school closures – contribute to stress in parents and children and can become risk factors that threaten children's growth and development and can compromise the achievement of sustainable development goals.

The studies reviewed suggest that epidemics can lead to high levels of stress in parents and children, starting with concerns that children may become infected.

These studies describe several potential mental and emotional consequences of epidemics such as Covid-19, H1N1, AIDS, and Ebola: severe anxiety or depression among parents and acute stress disorder, post-traumatic stress, anxiety disorders, and depression among children. These data may be related to adverse childhood experiences and a high risk of toxic stress.

The greater the number of adverse experiences, the greater the risk of developmental delays and health problems in adulthood, such as cognitive decline, substance abuse, depression, and non-communicable diseases (5).

Finally, quite recently there was a multinational research involving 99 million subjects and reported to ScienceDirect. Myocarditis, pericarditis, Guillain-Barré syndrome and cerebral venous sinus thrombosis were taken into consideration.

Sen. Borghi of the League communicated these data to the Senate of the Republic.

To complete the bibliography I think it is important to cite four other entries (29-32).

#### ACKNOWLEDGMENTS

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