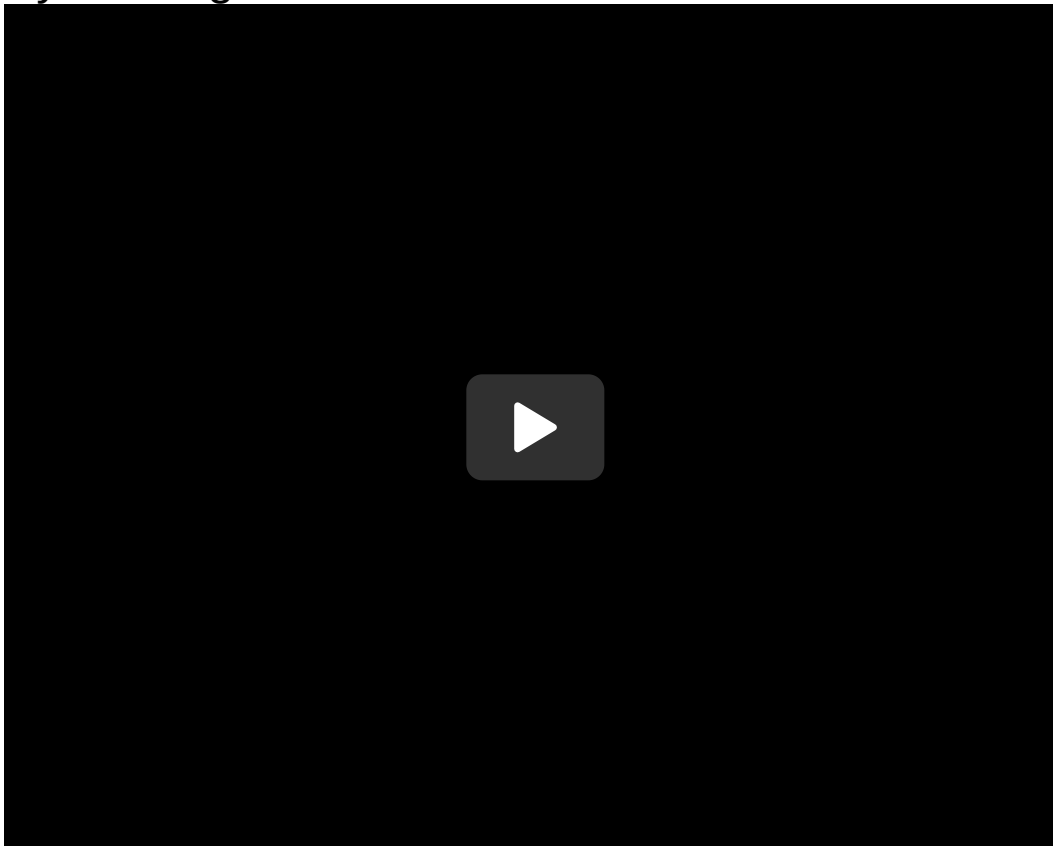


August 18, 2023 • Health

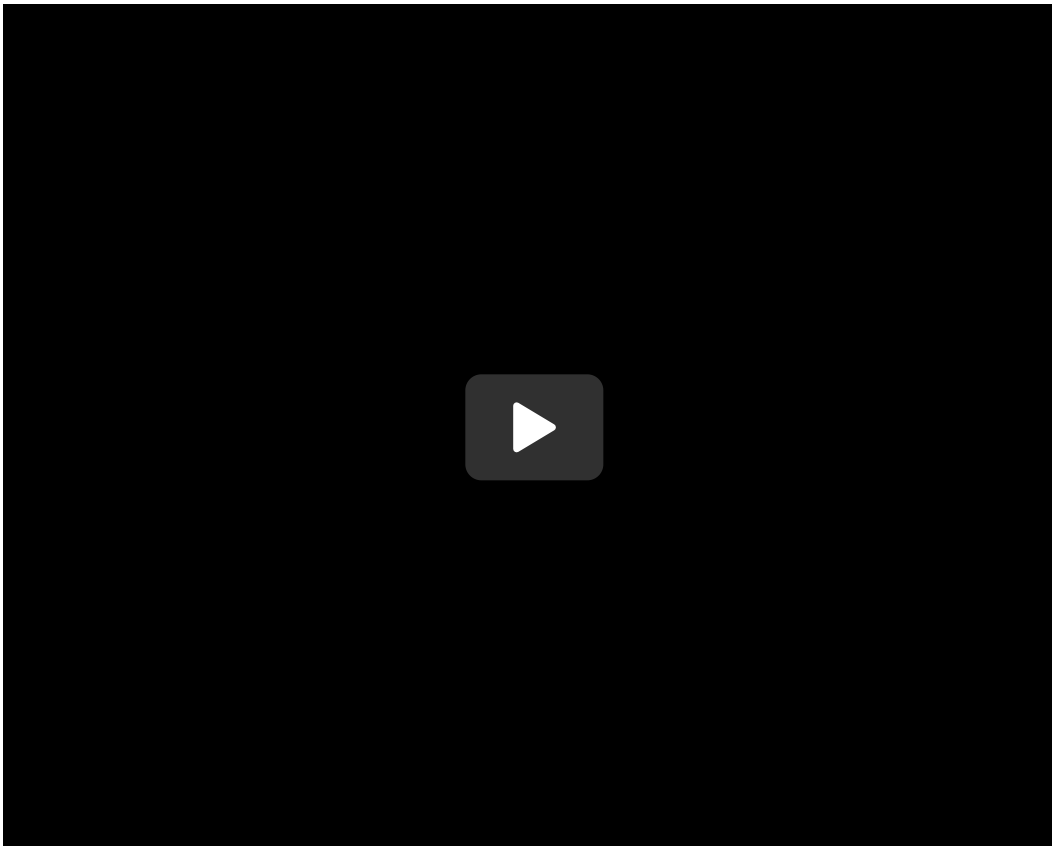
100% of 'Died Suddenly' Autopsy Cases Causally Connected to the COVID Vaccine, According to Review

"We have now proof-positive in autopsies in cases like this: 100% of the time, it is fatal, vaccine-induced myocarditis."

By The Vigilant Fox



The world has been carefully observing the aftermath of the COVID-19 vaccination drive, particularly in light of worrying concerns surrounding vaccine-induced myocarditis. The video below showcases headlines of young people collapsing and dying unexpectedly in the last eight months alone.



“The entire world is on edge,” lamented **Dr. Peter McCullough**, world-renowned cardiologist, “watching this [‘died suddenly’ phenomenon].” He joined **Del Bigtree** on The Highwire Thursday, detailing how the FDA **knew**, ahead of time, vaccine-induced myocarditis was going to be a problem.

Here is the timeline:



- In October 2020, during its VRBPAC meeting, the FDA stated that myocarditis could be a potential consequence of the COVID vaccines.

- By June 2021, the US FDA publicly acknowledged that the vaccines could cause heart inflammation or myocarditis.
- Historically, myocarditis was a known medical condition, occasionally resulting from viruses like parvovirus and coxsackievirus. Patients diagnosed with myocarditis were traditionally advised **against exercising**, given the risk of cardiac arrest due to an adrenaline surge, particularly in the early morning hours.

This brings us to the present-day concerns arising from COVID-19 vaccination.



As **Dr. McCullough** highlighted, there is now a substantial body of work – **800 peer-reviewed papers**, to be precise – dedicated to vaccine-induced myocarditis. Notably, two cohort studies by **Mansuguan** and **Beurgin & Mueller** have indicated a worrying statistic: after vaccination, particularly with the second and third doses, **2.5% of participants showed evidence of heart damage**. Given the sheer number of vaccine recipients worldwide, this translates to a significant number of individuals.

Sex-specific differences in myocardial injury incidence after COVID-19 mRNA-1273 Booster Vaccination

Brief Title: Myocardial Injury after COVID-19 mRNA-1273 Booster Vaccination

Natacha Buerger^{1*}, Pedro Lopez-Ayala^{1*}, Julia R. Hirsiger², Philip Mueller¹, Daniela Median¹, Noemi Glamer¹, Klara Rumora¹, Timon Hermann¹, Luca Koechlin¹, Philip Haaf⁴, Katharina Rentsch³, Manuel Battegay⁴, Florian Banderet^{5,6}, Christoph T. Berger^{2,7}, Christian Mueller¹

[Eur J Heart Fail. 2023 Jul 20. doi: 10.1002/ehf.2978.](#)

¹Department of Cardiology and Cardiovascular Research Institute Basel (CRIB), University Hospital Basel, University of Basel, Basel; ²Department of Biomedicine, Translational Immunology, University of Basel, Basel; ³Department of Laboratory Medicine, University Hospital Basel, University of Basel, Basel; ⁴Department of Infectious diseases & Hospital Epidemiology, University Hospital Basel, University of Basel, Basel; ⁵Department of Internal Medicine, Medical Outpatient Unit, University Hospital Basel, Basel; ⁶Employee health service, University Hospital Basel, Basel Switzerland; ⁷University Center for Immunology, University Hospital Basel, Basel

alternative cause was considered most likely (Supplemental Table 4). mRNA-1273 vaccine-associated myocardial injury was adjudicated in 22 patients (2.8% [95% confidence interval [CI], 1.8-4.3 %]), with 20 cases occurring in women (3.7% [95%CI, 2.3-5.7%]) and 2 in men (0.8% [95%CI, 0.1-3.0%]), with a median age of 46 years (IQR 33-54). This sex difference was statistically significant (p=0.03). On day 3, median hs-cTnT concentration of the 20 women and 2 men with mRNA-1273 vaccine-associated myocardial injury was 13.5 ng/l (IQR 9.0-18.8; Figure 2B). It decreased in all but one patient on the follow up visit to a median value of 6.0 ng/l (IQR 4.0-14.0), being again in the normal range in half of the participants.

No definitive case of myocarditis was found. However, the two participants (both women) with vaccine-associated myocardial injury and chest pain met the Brighton Collaboration case definition Level 2, indicating probable myocarditis in those patients (0.3% [95% confidence interval [CI], 0.1-0.9 %]).¹³

Image via [Dr. McCullough's Substack](#).

The nature of this damage is significant.

Healthy hearts rely on a harmonized electrical conduction system, ensuring uniform depolarization and repolarization. Any damage, even minor, to the heart tissue can disrupt this system. This damage or scarring can result in slow depolarization through the affected zone, a condition that sets the stage for reentry. This reentry can lead to a condition called ventricular tachycardia (VT), a rapid heart rhythm that can be observed in affected individuals for brief durations. Should this condition deteriorate further, it can result in ventricular fibrillation – a severe situation where the affected individual can collapse suddenly.



Dr. McCullough underscored the gravity of this scenario by referencing a paper from the preprint service system.



Doctors Peter McCullough, Roger Hodkinson, Aseem Malhotra, and William Makis co-authored a study titled *Autopsy Proven Fatal COVID-19 Vaccine-Induced Myocarditis* with Nicolas Hulscher from the University of Michigan. “We have now proof-positive in autopsies in cases like this: **100% of the time**, it is fatal, vaccine-induced myocarditis,” Dr. McCullough declared. Their research confirmed that in autopsy cases where vaccine-induced myocarditis was included as a possible cause of death, **100% of the time**, it was causally related to the vaccine.

Let’s take a deeper look at that study:

Autopsy Proven Fatal COVID-19 Vaccine-Induced Myocarditis

 Nicolas Hulscher ^{*}  Roger Hodkinson  William Makis  Aseem Malhotra  Peter McCullough 

Version 1 : Received: 17 July 2023 / Approved: 18 July 2023 / Online: 18 July 2023 (09:34:51 CEST)

How to cite: Hulscher, N.; Hodkinson, R.; Makis, W.; Malhotra, A.; McCullough, P. Autopsy Proven Fatal COVID-19 Vaccine-Induced Myocarditis. *Preprints* **2023**, 2023071198. <https://doi.org/10.20944/preprints202307.1198.v1> 

Abstract

Background: COVID-19 vaccines have been linked to myocarditis which in some circumstances can be fatal. This systematic review aims to investigate potential causal links between COVID-19 vaccines and death from myocarditis using post-mortem analysis. **Methods:** We performed a systematic review of all published autopsy reports involving COVID-19 vaccination-related myocarditis through July 3rd, 2023. All autopsy studies that include COVID-19 vaccine-induced myocarditis as a possible cause of death were included, without imposing any additional restrictions. Causality in each case was determined by three independent reviewers with cardiac pathology experience and expertise. **Results:** We initially identified 1,691 studies and, after screening for our inclusion criteria, included 14 papers that contained 28 autopsy cases. The cardiovascular system was the only organ system affected in 26 cases. In 2 cases, myocarditis was characterized as a consequence from multisystem inflammatory syndrome (MIS). The mean and median number of days from last COVID-19 vaccination until death was 6.2 and 3 days, respectively. Most of the deaths occurred within a week from the last injection. We established that all 28 deaths were causally linked to COVID-19 vaccination by independent adjudication. **Conclusions:** The temporal relationship, internal and

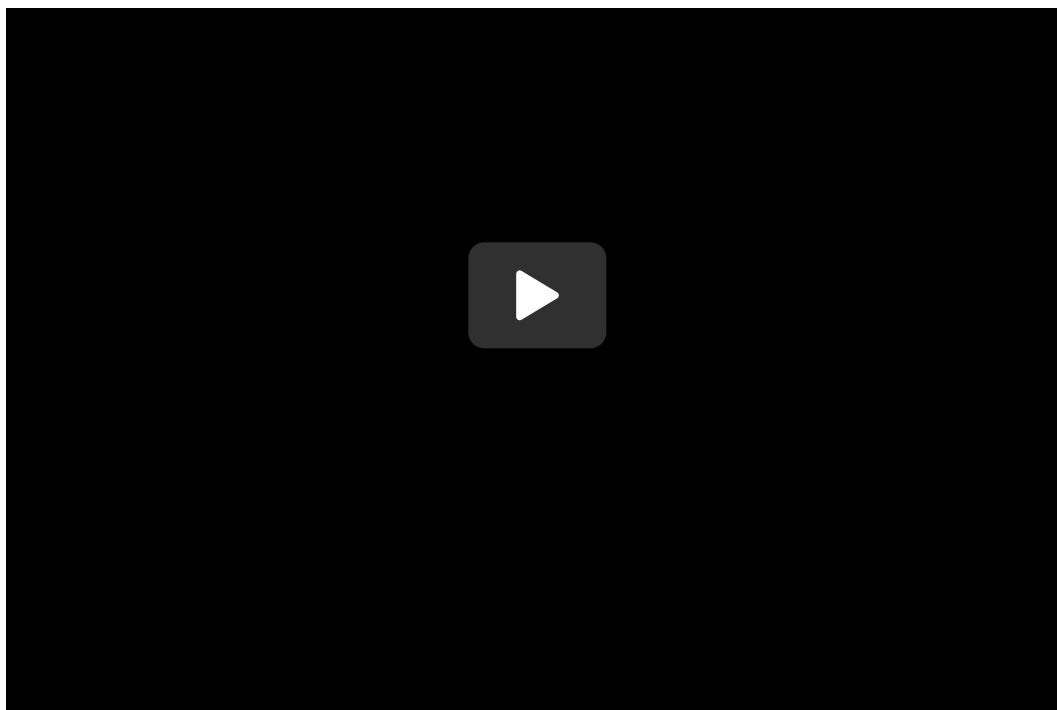
The aforementioned authors performed a comprehensive review of all published autopsy reports detailing myocarditis possibly related to COVID-19 vaccination up to July 3rd, 2023. Three expert reviewers with specialization in cardiac pathology assessed causality in each case.

Results: From an initial pool of 1,691 studies, 14 papers met the inclusion criteria, providing a total of 28 autopsy cases. In the majority of these cases (26 out of 28), only the cardiovascular system was impacted. Meanwhile, in 2 instances, myocarditis was identified as stemming from multisystem inflammatory syndrome (MIS). Notably, the average time from the final COVID-19 vaccine dose to death was 6.2 days, with a median of 3 days. The majority of these deaths transpired within one week post-vaccination. Remarkably, after independent review, **all 28 fatalities were causally connected to COVID-19 vaccination.**

If the claims and findings detailed in this study stand undisputed, the COVID-19 vaccine could be viewed as the greatest medical mistake in history. It urges a reconsideration of the balance between rapid global health responses and the potential for unintended, long-term consequences.

The [full episode of The Highwire](#) featuring [Dr. Peter McCullough](#) is available to watch in the [video below](#):





Want to see more content like this? Subscribe to [Vigilant News](#) below to receive updates on the latest and most newsworthy stories.